

Scotland records highest drug fatality rate in the UK

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Drug-related deaths in Scotland soared by 27 percent to 1,187 in 2018, the highest figure since records began in 1996, according to National Records of Scotland (NRS). Most of the deaths were the result of “accidental poisoning,” the official term for an overdose.

This amounts to 218 drug deaths per million people, roughly three times the rate for the UK as a whole and higher even than in the US—considered the overdose capital of the world.

The deaths have fallen disproportionately on poor, urban areas of the former industrial working class. Dundee City Council area registered the highest rate with 0.31 deaths per 1,000 of population, followed by Glasgow (0.30) and Inverclyde (0.25). Scotland’s capital city, Edinburgh, registered 0.16 deaths per 1,000 of population—still far higher than the UK-wide fatality rate.

Elinor Dickie, a public health advisor at NHS (National Health Service) Health Scotland, emphasised that drug addiction is 17 times higher in Scotland’s poorest areas compared to the wealthiest. “We know from the evidence,” Dickie wrote in Aberdeen’s *The Press and Journal* newspaper, “that problem drug use is related to social circumstance: job loss, experiences of poverty, childhood adversity and trauma all being factors.”

Although the overwhelming majority of drug fatalities, 86 percent, are linked to the abuse of opioids, including heroin, morphine and methadone, the NRS report attributes the surge in drug deaths to the recent growth of “poly-drug” abuse.

The consumption of opioids in combination with “street” benzodiazepines or “street Valium,” which have flooded Scotland’s cities since 2012, has been particularly lethal. Normally prescribed on a temporary

basis for anxiety or stress, street versions of benzodiazepines, such as Etizolam pills, vary in quality and strength. They drastically heighten the risk of an opioid overdose due to their sedative effect on the respiratory system.

While street Valium was implicated in 675 or 57 percent of deaths, prescriptible benzodiazepines diverted from NHS prescriptions were involved in 238 or 20 percent of all deaths. Gabapentin/Pregabalin, another prescriptible non-opioid pain and anxiety medication, was involved in 367 deaths (31 percent). Common recreational drugs, cocaine, ecstasy and other amphetamines, were involved in 273 deaths (23 percent), 35 deaths (3 percent) and 46 deaths (4 percent), respectively. Alcohol featured in 156 drug-related deaths (13 percent).

The vast majority of drug fatalities, 72 percent, were male. But over the past decade, overdoses among women surged by 212 percent compared to 75 percent for men.

Among older generations of long-term victims of drug addiction, 35- to 44-year-olds accounted for 442 drug deaths (37 percent), followed by 345 fatalities (29 percent) among 45- to 54-year-olds. Many of these people became hooked in their youth during the heroin epidemic of the 1980s and 1990s, which blighted areas of high youth unemployment and poverty. Glasgow, Edinburgh, Manchester, Bradford and the Welsh Valley were among the worst hit.

This was a direct product of the Conservative Thatcher government’s (1979-1991) vicious, anti-working-class policies of cuts, deindustrialisation, widespread privatisation and financial deregulation. This agenda has been honoured by successive Labour and Conservative administrations, together with the devolved governments, and was deepened in the wake

of the 2008 financial crisis.

The epidemic of drug deaths has been building for the best part of a quarter century. According to NRS data, approximately 250 drug-related fatalities were recorded in Scotland in the mid-1990s. By 2008, this number had more than doubled to 574. Fatalities then remained at between 500 and 600 for several years, before surging again by 107 percent to nearly 1,200 in just the past five years (2013-2018).

While conditions in the rest of the UK have been overshadowed by the scale of the crisis in Scotland, the latest figures for England and Wales show that drug deaths are also at record levels: 66.1 deaths per million of population in 2017, compared to 42.9 per million in 1993.

Doctors, experts and drug charities have pointed to several immediate causes behind the acute drug fatalities in Scotland. These include poor access to treatment for addiction, poor prescribing practices for opioid substitution drugs, such as methadone, and the bankruptcy of the so-called war on drugs, which has been used by the capitalist state to criminalise and persecute the destitute across the UK and internationally.

According to the Scottish Drugs Forum, Scotland has a very low proportion of people in drug treatment—just 40 percent of the 60,000 individuals with a serious drug problem—compared to the rest of the UK. Waiting times for opioid substitution therapy are in excess of six months in some areas of Scotland. And systematic low dosing, sometimes on a punitive basis, has pushed patients to “top up” their medication with street drugs. As a result, methadone is now involved in more drug fatalities than heroin.

Dr. John Budd, an Edinburgh doctor who works with homeless people, told *BBC Scotland* that the criminal justice system has been routinely used as a “mopping-up service” for people with significant mental health difficulties who do not have access to adequate support. Prison sentences only compound the issue, he said, destabilising addicts through the loss of housing and support networks.

Far from being a statistical outlier, the drugs crisis corresponds with broader social conditions in Scotland, which have earned the country the title of “the sick man of Europe.”

Scotland regularly records the worst life expectancy

and health indices in the developed world. In the Greater Glasgow and Clyde region, which accounts for a third of all drug deaths in Scotland, premature mortality (dying before 65 years of age) is 30 percent higher relative to cities of comparable social deprivation, such as Manchester, Liverpool and Belfast. After rising gradually in recent decades, life expectancy is now in decline in several Scottish localities, with Dundee, Inverclyde, South Ayrshire and North Ayrshire all witnessing significant setbacks between 2015 and 2017.

These harrowing social conditions belie the cynical claims of the Scottish National Party (SNP) government in Edinburgh to offer a more humane and progressive version of capitalism than the central government in Westminster.

As David Liddell, CEO of Scottish Drugs Forum, has pointed out, “Scotland prides itself in having an equalities and rights-based approach to policy and service provision. But the latest drug deaths statistics again suggest that Scotland’s sense of itself as inclusive may be dangerous self-delusion.”

The nationalist proposal for the creation of a few safe-consumption or “fix rooms,” for the administration of medical-grade drugs to addicts by a physician, is a tacit admission that it will do nothing to address the manifold social crisis underlying the surge in drug deaths.

After slashing addiction and rehabilitation services in recent years, the SNP government is now proposing to make just £20 million available annually until 2021. This amounts to a miserly £333 of annual funding for each of Scotland’s known drug addicts.

Meanwhile, SNP-led Glasgow City Council is busy cutting the limited services that do exist. It recently announced plans to withdraw funding for the James Shields Service, a 37-bed unit situated in the Southside of the city, which provides housing and support services for homeless teenagers struggling with drug and alcohol abuse. Consequently, the jobs of 20 drug and youth workers are under threat.



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