

# Meeting of the Parliament (Hybrid)

**Tuesday 15 March 2022** 





# Tuesday 15 March 2022

# CONTENTS

Tura and Dari androv	Col.
TIME FOR REFLECTION	
TOPICAL QUESTION TIME	
Food Shortages and Rising Food Prices	
Ferguson MarineCOVID-19 UPDATE	
	11
Statement—[First Minister]. The First Minister (Nicola Sturgeon)	11
FISHERIES MANAGEMENT	
Statement—[Mairi Gougeon].	20
The Cabinet Secretary for Rural Affairs and Islands (Mairi Gougeon)	25
Conversion Practices	
Motion moved—[Joe FitzPatrick].	
Joe FitzPatrick (Dundee City West) (SNP)	38
The Minister for Equalities and Older People (Christina McKelvie)	
Alexander Stewart (Mid Scotland and Fife) (Con)	
Pam Duncan-Glancy (Glasgow) (Lab)	
Willie Rennie (North East Fife) (LD)	
Fulton MacGregor (Coatbridge and Chryston) (SNP)	
Meghan Gallacher (Central Scotland) (Con)	
Karen Adam (Banffshire and Buchan Coast) (SNP)	
Paul O'Kane (West Scotland) (Lab)	
John Mason (Glasgow Shettleston) (SNP)	
Gillian Mackay (Central Scotland) (Green)	
Emma Roddick (Highlands and Islands) (SNP)	
Craig Hoy (South Scotland) (Con)	
Pam Duncan-Glancy	
Pam Gosal (West Scotland) (Con)	
Christina McKelvie	
Maggie Chapman (North East Scotland) (Green)	
Covid-19: Scotland's Strategic Framework	
Motion moved—[John Swinney].	
Amendment moved—[Murdo Fraser].	
Amendment moved—[Jackie Baillie].	
The Deputy First Minister and Cabinet Secretary for Covid Recovery (John Swinney)	75
Murdo Fraser (Mid Scotland and Fife) (Con)	79
Jackie Baillie (Dumbarton) (Lab)	
Beatrice Wishart (Shetland Islands) (LD)	85
Paul McLennan (East Lothian) (SNP)	
Jeremy Balfour (Lothian) (Con)	
Christine Grahame (Midlothian South, Tweeddale and Lauderdale) (SNP)	
Martin Whitfield (South Scotland) (Lab)	
Jim Fairlie (Perthshire South and Kinross-shire) (SNP)	
Ross Greer (West Scotland) (Green)	
Siobhian Brown (Ayr) (SNP)	
Brian Whittle (South Scotland) (Con)	
Emma Harper (South Scotland) (SNP)	
Alex Rowley (Mid Scotland and Fife) (Lab)	101
Sandesh Gulhane (Glasgow) (Con)	103
John Swinney	
Business Motion.	
Motion moved—[George Adam]—and agreed to.	
DECISION TIME	110

Motion debated—[Gillian Martin].	
Gillian Martin (Aberdeenshire East) (SNP)	118
Stephen Kerr (Central Scotland) (Con)	121
Rona Mackay (Strathkelvin and Bearsden) (SNP)	
Jackie Baillie (Dumbarton) (Lab)	124
Paul McLennan (East Lothian) (SNP)	
Gillian Mackay (Central Scotland) (Green)	
Emma Harper (South Scotland) (SNP)	
The Minister for Public Health, Women's Health and Sport (Maree Todd)	

# **Scottish Parliament**

Tuesday 15 March 2022

[The Presiding Officer opened the meeting at 14:00]

## **Time for Reflection**

The Presiding Officer (Alison Johnstone): Good afternoon. I remind members of the Covid-related measures that are in place, and that face coverings should be worn when moving around the chamber and across the Holyrood campus.

The first item of business this afternoon is time for reflection. Our time for reflection leader today is the Rev John Murdoch, who is minister at St John's Kirk of Perth and St Leonard's in the Fields, Perth.

The Rev John Murdoch (St John's Kirk and St Leonard's in the Fields, Perth): Presiding Officer, members of the Scottish Parliament, a very good afternoon to you all. It is an honour to be with you. I bring from my congregations every good wish for what you do for our country.

We pray for peace. We live in very tense times—none more so than during the current abominable situation in Ukraine. Each day last week, St John's, here in Perth, was open for public and private prayer for Ukraine. We remember, in our prayers, you and all who lead us at Holyrood and Westminster, together with Her Majesty the Queen, every Sunday.

At this time of international tension, the hearts and minds of many people incline to the wisdom of those who, in past days and in other scenarios, have spoken to the soul. I was in awe when I recently read the 272 words that were spoken by President Lincoln in his two-minute Gettysburg address on 19 November 1863. How much we need to hear him again. His address concluded with the words:

"Under God ... government of the people, by the people, for the people shall not perish from the earth."

Government exists to lead us in the best ways. When one of Lincoln's successors, Franklin Roosevelt, talked of four essential freedoms, he could have been speaking to every man and woman in any century about our collective wish to live in those best ways, in a world of the peace and freedom that is the fruit of best leadership, and is the best fruit of leadership.

In a different context, the same idea was expressed by Pope Benedict during his 2010 visit to the UK. He asked trainee teachers in Twickenham what sort of world they wanted to live in and what sort of person they wished to be.

Perhaps Benedict was echoing Roosevelt's four freedoms: freedom of speech and expression; freedom for every person to worship God in his or her own way; freedom from want; and freedom from fear.

My prayer and hope is that, under God, we too can strive for those freedoms, continuing especially to look beyond our shores to the needs of those who are far less fortunate than we are, and that in our own country we will look to the solid ground of faith, hope and love.

May you who lead us be encouraged to keep on keeping on. I thank you, in this Olympic year, for taking forward the torch of leadership. First and foremost, let us continue to hold the Ukrainian people in our hearts.

Thank you for inviting me to be with you. May God bless you all.

[Applause.]

**The Presiding Officer:** Thank you, Rev Murdoch.

# **Topical Question Time**

14:03

#### **Food Shortages and Rising Food Prices**

1. Maggie Chapman (North East Scotland) (Green): To ask the Scotlish Government what action it is taking in light of reports of potential international food shortages and rising food prices. (S6T-00575)

The Cabinet Secretary for Rural Affairs and Islands (Mairi Gougeon): The war in Ukraine is truly terrible. While our thoughts are rightly with all Ukrainians who are suffering the consequences of the invasion by Putin's forces, the war's impacts are beginning to extend beyond Ukraine's borders. Ukraine is a proud independent nation that exports many foodstuffs and agrifoods to many countries. Scotland is not exempt from the loss of that produce.

I therefore regularly meet officials, key stakeholders and industry representatives to gather information to monitor the situation, including the effects of rising energy prices on transport, and of other supplies such as fertiliser, and how that will affect farming, fishing, fish farming and food production and manufacture in Scotland and the United Kingdom.

As a result of Brexit, we already have acute labour shortages in key sectors—including food and vegetables production, horticulture generally, fish, seafood and meat processing—which are likely to be exacerbated by the current crisis, given that many people who come to Scotland for seasonal work do so from eastern Europe. I have met relevant ministers in the other three Administrations, and we have agreed to meet regularly.

The cost of living crisis, especially when it affects essentials such as food, clearly affects people on the lowest incomes most. Across Government, we are committed to using all the powers and resources that are available to support people in Scotland, but we are also calling on the UK Government to do more.

Maggie Chapman: NFU Scotland has called for a relaxation of greening rules so that land that has been set aside for nature recovery can be used for cereal production. As a country, we need to have a much more strategic approach to food security, including by ensuring that our productive land feeds as many people as possible, but that must not come at the cost of our long-term future and ecological wellbeing. Can the cabinet secretary confirm that greening schemes will not be discarded in that way?

Mairi Gougeon: First, I want to make clear the Scottish Government's commitment to supporting farmers and crofters to meet more of our food needs, and to do so more sustainably. However, it is really important that we maintain and enhance nature and that we do not scale back our efforts in that regard. Events in Ukraine, tragic as they are, do not lessen the adverse global impacts on the climate and on biodiversity that we are facing. Indeed, they only strengthen the case for doing more because, ultimately, that is how we can make our farms and food production systems more resilient.

There are a number of considerations in relation to changes to greening. However, there is flexibility within the greening rules for farmers to apply them according to their own circumstances. For example, they could choose options other than to fallow, such as green cover crops or catch crops. We will work with the industry to promote those other flexibilities, and we will, of course, continue to work with the industry to find practical solutions that bolster food production in these times of uncertainty, while continuing to contribute to wider climate change and biodiversity objectives.

Maggie Chapman: Our food supply was already being disrupted before the conflict, because of Brexit. We had tailbacks of lorries and food literally rotting in fields because of the lack of seasonal workers. Even if farmers plant on greening land, who will be there to harvest the crops? It is clear that sustainable domestic food production must be the priority, which includes a shift from growing crops to feed livestock to growing crops to feed people.

How will the Scottish Government ensure that food producers are supported—especially smaller and sustainable local producers—to maximise food growing for people and ensure that we have a robust food supply system?

Mairi Gougeon: We recently published our vision for the future of agriculture, in which food production is identified as a critical element of our plans for the future of agricultural support, along with tackling the climate emergency and the biodiversity crisis.

We absolutely recognise the tumultuous times that we have faced over the past couple of years through the pandemic, Brexit and, now, the realities of the impacts of the war between Russia and Ukraine. They show how important our food security is, so we will, of course, continue to focus on that. We are working alongside the industry and our wider food and drink supply chain to understand the impacts and to support them in developing our food security and ensuring that that is a key focus, going forward,

Emma Harper (South Scotland) (SNP): I heard the cabinet secretary's response to Maggie Chapman. The UK Government has just announced that it will impose a 35 per cent tariff on top of existing tariffs on a range of imported goods from the Russian Federation, including fertilizers, wood, beverages, spirits, vinegar and cereals. How does the Scottish Government envisage that increase in tariff affecting food security here, in Scotland?

**Mairi Gougeon:** We are giving urgent consideration to the announcements that were made this morning in relation to tariffs. We are looking at how they will impact on the availability, first of all, of white fish and white-fish produce in Scotland and the UK. There is no doubt that there are going to be issues in that regard.

I make it clear that we support the action that the UK Government is taking. It is the right approach, and the international community is absolutely united on the matter. We fully support the application of sanctions against the Russian Federation because of its illegal invasion of, and unprovoked aggression towards, Ukraine.

However, we are also alert to the potential significant and adverse impacts that that could have on Scotland's white-fish producers. That is why we are currently considering the matter. Previously, we made clear our commitment to providing support to Scottish exporters and businesses that are affected by the on-going situation. However, I have raised with ministers at the Department for Environment, Food and Rural Affairs the specific needs and interests of our fish processors and have made clear the need for it to provide support for businesses that might be affected by such tariffs. Potentially, that includes providing some sort of furlough for workers who are affected.

Rachael Hamilton (Ettrick, Roxburgh and Berwickshire) (Con): Will the cabinet secretary commit to developing a plan to increase the number of acres that are available for food production in Scotland, and consider a temporary moratorium on the support scheme rules? Furthermore, does she agree with Lorna Slater, from the green wing of her own party, who has suggested that sanctioning supermarkets on waste to landfill through the proposed circular economy bill will address the immediate and serious impacts of global food insecurity, in light of Putin's attacks on Ukraine?

Mairi Gougeon: I do not know whether Rachael Hamilton caught my response to Maggie Chapman on food production and the land that is made available for that. Again, we have made clear our commitment to supporting farmers and crofters to produce more of our own food and to do so more sustainably. However, it is vital that we

maintain and enhance nature and that we do not scale back our efforts on that, because only by doing that can we make farms and our food production systems more resilient.

## **Ferguson Marine**

2. **Graham Simpson (Central Scotland) (Con):** To ask the Scottish Government what action it is taking to ensure that Ferguson Marine is competitive, in light of the reported decision to award the contract to build two new CalMac ferries to the Turkish ship builder, Cemre Marin Endustri. (S6T-00577)

The Minister for Business, Trade, Tourism and Enterprise (Ivan McKee): We were disappointed that Ferguson Marine did not progress to the invitation-to-tender stage of the Islay vessel procurement last year. The Scottish Government remains fully committed to supporting the yard to secure a sustainable future, including a pipeline of future work. My officials are supporting the yard in its development of a business case for capital investment, which will help to support improved competitiveness.

Significant progress has already been made at the yard. We know that it is actively pursuing vessel opportunities and that Ferguson Marine is back to being a serious contender for future vessel contracts.

**Graham Simpson:** I hope that the minister is right about that. Caledonian Maritime Assets Ltd had no choice but to award the contract for the ferries elsewhere. The Turkish yard churns out one vessel every few months, so we can be pretty certain that we will see new ferries on time.

Last month, we learned that nearly 1,000 cables would have to be ripped out of the MV Glen Sannox—which was launched by the First Minister in 2017—because the cables are too short. They are too short because the control panels that they were meant to connect to were fitted further away than was originally planned, so they do not reach. Who is responsible for that, what is the extra cost involved, and by how long will both ferries be delayed as a result?

Ivan McKee: Graham Simpson's characterisation of the issue is not accurate. There were issues with the length of the cables, due to previous issues with subcontractors. That is being looked at contractually in order to understand the reasons for it, and progress has been made on refitting the cables and correcting the error—which, as I said, was a consequence of earlier activities.

When it comes to the impact on delivery, the site director will give a report and make information available on that very shortly.

**Graham Simpson:** I have asked a question in this chamber and I expect to get an answer. The minister has not attempted to answer the question, which was about by how long the ferries will be delayed. That is not acceptable.

We are at crisis point. Just yesterday, only 13 of CalMac's 29 routes were operating normally. Islanders are at their wits' end. There is no slack in the system, so when a ferry breaks down, the knock-on effects are horrendous. We need a steady pipeline of new ferry orders. The £580 million over five years that was announced by the Government is nowhere near enough. Graeme Dey asked for £1.5 billion over 10 years. That kind of commitment would give Scottish yards, including Ferguson's, the confidence to invest. If Graeme Dey knew what needed to be done, why does the minister not know?

Lastly, Jenny Gilruth promised to publish the long-awaited project Neptune—

**The Presiding Officer:** If we could have a question, please, Mr Simpson.

**Graham Simpson:** There was a question. My other question is this. What has happened to the project Neptune report that Jenny Gilruth promised to publish last month? We are still waiting for it.

Ivan McKee: As Graham Simpson knows well, the Scottish Government is committed to ensuring that Scotland's islands have the connectivity and ferries that they require, and we are making a substantial investment to ensure that that is, indeed, the case.

Graham Simpson is also aware—I said this in my answer to his previous question—that the details of the impact of the cable issue are being worked through at the moment. We will report back when robust information is available on timing and on the cost implications.

Jenni Minto (Argyll and Bute) (SNP): As the minister said, it is clearly disappointing that the yard did not progress to the invitation-to-tender stage of the Islay ferry procurement last year. Does he share my view that, given the noise that the Tories have previously made about the ferry fleet, and given the benefits that the new vessels will bring to islanders and the economy, their questions seem disingenuous?

**Ivan McKee:** I am very pleased to see that CMAL has named the preferred bidder for that vital project, which will lead to the building of two new ferries to serve the Islay routes.

We look forward to continuing to work with key stakeholders to develop programmes for major and smaller vessels. We are investing at least £580 million as part of our infrastructure investment plan. Our approach will accelerate the bringing of new ferries into the fleet, allowing a

second Islay ferry to be deployed 12 months sooner than was previously planned. The new vessels will provide additional car capacity of nearly 40 per cent and an increase in heavy goods vehicle capacity of more than 60 per cent compared with capacity on the existing vessels on the route.

The links to Islay are some of the busiest services for freight on the Clyde and Hebrides ferries network, and the new vessels will help to grow the island's economy, as well as bringing added resilience to the fleet.

Jamie Halcro Johnston (Highlands and Islands) (Con): The new vessels are being built overseas in a Turkish yard. That yard is increasingly exposed to changes in exchange rates, and to inflation, which hit 54 per cent in Turkey only two weeks ago. That is on top of increasing costs for raw materials and fuel resulting from recent events, most notably those in Ukraine. Will the minister confirm that it was agreed that the ferries would be built to a fixed price, or is there a mechanism or flexibility in the contract for the price to increase to recognise some of those variables?

Ivan McKee: CMAL has entered into the contract with the yard on a commercial basis and I am not in a position to give details of the commercial aspects of the contract at this point. The member should rest assured that CMAL will have taken those factors into account in the contract and in making arrangements and placing the orders with the yard that will provide the ferries.

Neil Bibby (West Scotland) (Lab): Our island communities desperately need a new ferry-building programme, and that programme should support Scottish industry. An Organisation for Economic Co-operation and Development peer review found that the Turkish ship-building industry was hit by Covid, in common with the industry worldwide. It also found important strengths in the industry in Turkey: it has enough highly skilled labour, flexibility in response to changing market conditions, and worldwide recognition. Does the minister agree that those things are also true of the industry on the lower Clyde?

The Turkish Government has a development plan to support its shipbuilding industry. Why is no equivalent plan in place here to ensure that Ferguson's and the lower Clyde win contracts and future opportunities?

**Ivan McKee:** The member should rest assured that there is continual engagement between the Scottish Government and the Ferguson yard to support the yard in its journey to become globally competitive.

As I indicated in my answers to Graham Simpson, the yard now finds itself able to bid for vessel contracts, and it is continuing to seek out opportunities in that regard. I have also said that the Scottish Government continues to work closely with the yard to ensure that it becomes globally competitive as soon as possible. We are supporting it in every respect to achieve that.

Willie Rennie (North East Fife) (LD): The minister was surprised that Ferguson's did not bid for the contract to build the ferries. He should not be, because his Government owns that company. Does he have a clue what is going on in his company?

The First Minister said that Ferguson's was on a journey, but she did not say that it was on a journey to Turkey. Given what has happened with Burntisland Fabrications, the Lochaber aluminium smelter and other companies, is it not the case that this Government's industrial intervention strategy is a complete and utter shambles?

Ivan McKee: No, that is not the case. The yard is still operating, employing hundreds of skilled workers, as a consequence of action taken by the Scottish Government. Lochaber is still producing aluminium as a consequence of action taken by the Scottish Government, and Dalzell is still producing steel as a consequence of action taken by the Scottish Government. Scotland is still the area of the United Kingdom outside London that attracts the most foreign direct investment, all as a consequence of actions taken by the Government to support industry in Scotland and create highpaid jobs.

That approach will continue as we progress towards delivery of the industry of the future, as we articulated in our strategy for economic transformation. Scotland has great strengths across a range of industries, the length and breadth of the country.

**Stuart McMillan (Greenock and Inverclyde)** (SNP): I say to Willie Rennie that I do not think that shipbuilding is the Lib Dems' strongest suit—[Interruption.] Nor is it that of the Tories, for that matter.

I am sure that all members agree that the new chief executive needs to be given the opportunity to make progress, finish the current vessels and make the yard competitive. Will the minister assure the Parliament that the chief executive will be given the support that he requires and that greater co-operation with CMAL will be established at the beginning of his tenure?

Will the minister also assure us that reporting mechanisms to the Scottish Government will be strengthened? Does he agree that working with and listening to shop stewards at the yard will be imperative in ensuring that the yard is the success that it can be?

Ivan McKee: I welcome the member's comments. We have set out two priorities for the yard's management: to finish building the two ferries that are currently under construction; and to get the yard into shape to compete for new work. Ministers will do all that we can to ensure a strong future for Ferguson Marine.

I agree that it is key that the yard is able to draw on CMAL's experience and expertise. We welcome the collaborative approach that the new chief executive is taking, in working closely with CMAL, including through the secondment of an experienced CMAL staff member to Ferguson's management team.

Ministers regularly meet yard management, the chair of the board and trade union representatives, all of whom share the ambition for the ferries' delivery and the yard's success. We encourage all partners to work together in the interests of the success of Ferguson Marine and a strong future for commercial shipbuilding on the Clyde.

# Covid-19 Update

The Presiding Officer (Alison Johnstone): The next item of business is a statement by Nicola Sturgeon on a Covid-19 update. The First Minister will take questions at the end of her statement. There should therefore be no interventions or interruptions.

14:22

The First Minister (Nicola Sturgeon): Thank you, Presiding Officer. Before I turn to Covid, and with your permission, I would like to give a brief update on our efforts to welcome refugees from Ukraine.

The response of the public across the United Kingdom in offering support has been truly outstanding, and I thank everyone who has volunteered. Under the UK scheme—with the exception of cases in which people already know someone who is seeking refuge—it may be some time before most of those who are offering help will be able to welcome someone from Ukraine. The Scottish Government's super-sponsor proposal is intended to short-circuit that and allow Ukrainians to get here and be safeguarded and supported more quickly.

I am pleased to advise that the UK Government has now indicated support for the proposal in principle and has committed to working with us towards its immediate launch, alongside the wider UK scheme. That is a positive development. I hope that—assuming that we can agree details—as a start, it will allow us to welcome 3,000 Ukrainians to Scotland very soon. I will update Parliament more fully on these matters tomorrow.

Let me turn to Covid. I will confirm Cabinet's decisions on lifting the limited measures that remain in law, and I will set out our intentions for the testing programme. First, though, I will give a brief overview of the state of the pandemic. Public Health Scotland has had server problems over the past 24 hours, so no daily figures were published yesterday—and, of course, figures are no longer published at weekends. The case number that is being reported today—38,770—is therefore the cumulative total for the past four days. For context, the total for the equivalent four-day period last week was 36,051.

The figures reflect the recent increase in cases. The Office for National Statistics survey suggests that, in the week to 6 March, one in 18 people in Scotland had Covid. Three weeks ago, an average of 6,900 new cases a day were being reported; the average now is just over 12,000 a day. There has also been a rise in the number of people who are in hospital with Covid. Three weeks ago, that stood at 1,060; today it is 1,996. The increase in

cases over the past three weeks has been driven by the BA.2 sub-lineage of the omicron variant, which is estimated to be significantly more transmissible, with a growth rate since mid-February that is perhaps 80 per cent greater than that of the original omicron.

BA.2 is now the dominant strain in Scotland, accounting for more than 80 per cent of all reported cases. It has become dominant in Scotland earlier than in England and Wales, hence the more rapid increase in cases here than south of the border in recent weeks, although the numbers of cases and hospital admissions are now rising sharply again in England, too. Encouragingly, there is no evidence that BA.2 causes more severe illness than BA.1 or that it is more effective at evading natural or vaccine immunity. Indeed, immune protection means that the recent rise in cases and hospital admissions has not translated into a commensurate increase in cases of severe illness requiring intensive care. In other words, even though the weight of numbers of infections is putting significant pressure on hospital capacity—which is a real concern—we continue to observe strong evidence that the link between infection and serious health harm has weakened considerably.

It is likely that that is due to immune protection—not least from vaccines—more than it is due to omicron being inherently milder. That is borne out by current experience in Hong Kong, where relatively low rates of vaccination, particularly in the older population, mean that omicron is causing very significant levels of severe illness and death. That underlines the continued vital importance of vaccination. If you have not yet had doses that you are eligible for, please get them now.

Extension of the programme is on-going, in line with Joint Committee on Vaccination and Immunisation advice. Letters inviting five to 11year-olds who are not in higher-risk groups to be vaccinated started arriving at the end of last week, and the first vaccinations are scheduled for Saturday. Additional booster jags for older adults in care homes started last week, and appointments will start next week for everyone aged 75 and over. Additional boosters for those who are immunosuppressed will start from mid-1 know that people immunosuppressed and, indeed, others on the highest-risk list are concerned about high case rates at a time when regulations are being eased. It is important to stress, therefore, that significant protection is provided by vaccination.

The higher transmissibility of omicron poses challenges, but protection from vaccines and the increasing availability of effective Covid treatments are important factors. Using the approach that is

set out in our revised strategic framework, and on the basis of clinical advice, our assessment is that the virus continues to present a medium threat. However, we remain optimistic that it will move from medium to low over the spring. As a result, we consider that the overall transition signalled in the strategic framework remains appropriate. We should—and will—continue the transition away from legal requirements to advice and guidance instead. Therefore, I can confirm, first, that from Friday, and in line with other UK nations, all remaining Covid-related travel restrictions will be lifted. Although we have some concerns about that, UK travel patterns mean that diverging from the rest of the UK would cause economic disadvantage without delivering any meaningful public health benefit. We do, of course, retain the ability to reintroduce travel measures if, for example, a new variant emerges.

Secondly, from next Monday, 21 March, the remaining domestic legal measures—with one temporary, precautionary exception—will be lifted and replaced with appropriate guidance. That means that, on Monday, the requirement for businesses and service providers to retain customer contact details will end. So, too, will the requirement for businesses, places of worship and service providers to have regard to Scottish Government guidance on Covid. They will, instead, be expected to take reasonably practicable measures set out in the guidance.

The exception relates to the requirement to wear face coverings on public transport and in certain indoor settings. Given the current spike in case numbers, we consider it prudent to retain that requirement in regulation for a further short period. I know that that will be disappointing for businesses and service providers such as daycare services, but ensuring the maximum continued use of face coverings will provide some additional protection—particularly for the most vulnerable—at a time when the risk of infection is very high, and it may help us to get over this spike more quickly. We will review the regulation again in two weeks, before the Easter recess, and our expectation now is that that regulation will convert to guidance in early April.

The other issue that I want to cover today is testing. Regrettably, our freedom of manoeuvre here is severely limited by the fact that our funding is determined by UK Government decisions that are taken for England. However, we have sought, as far as we can, to reach the right decisions for Scotland. It is important to note that we are aiming for the same long-term position as England on testing. However, we consider that the transition should be longer. In England, testing for people without symptoms ended in mid-February and will do so at the end of this month for those with symptoms.

We intend the transition to last until the end of April. That is as far as we can go within funding constraints, but it allows us to take account of current case numbers and to better support the shift in our overall management of the virus. A paper that sets out the detail has been published on the Scottish Government's website. In summary, for the next month—until Easter—there will be no change to our testing advice. If you do not have symptoms, you should continue, for now, to use a lateral flow test twice weekly, daily for seven days if you are a close contact of a positive case, and before visiting someone who is vulnerable. If you have symptoms, you should continue to get a polymerase chain reaction test, either at a testing site or by post.

Following the Easter weekend, from 18 April, we will no longer advise people without symptoms to test twice weekly. With the exception of health and care settings, the advice to test regularly will end from 18 April for workplaces, early learning and childcare settings, mainstream and special schools, and universities and colleges. However, until the end of April, we will continue to advise the use of LFTs daily for seven days for people who are a close contact and on each occasion when visiting a hospital or care home, and we will continue to advise people with symptoms to get a PCR test.

Contact tracing of positive cases will continue until the end of April. PCR test sites will remain open during this period, although opening hours and locations might change during the transition. Although, as with all measures, we will keep this under review, our intention is that, from the end of April, all routine population-wide testing will end, including for people who have symptoms. Contact tracing will end at that point, too, although people with symptoms of respiratory illness will be advised to stay at home.

Physical test sites will close at the end of April, although mobile testing units and lab capacity will be retained for our longer-term testing purposes. During the transition, we will do everything that we can to support the people who have worked on the testing programme. I thank all of them for their invaluable contribution over the past two years.

From 1 May, in place of a population-wide approach, we will use testing on a targeted basis to support clinical care and treatment and to protect higher-risk settings and for surveillance, outbreak management and responding to significant developments such as a new variant. I stress that, for any purpose for which we continue to advise testing, access to tests will remain free of charge in Scotland.

Today marks steady progress back to normal life and a more sustainable way of managing the virus. However, while cases are spiking, there is still considerable pressure on the national health service and concern among the most vulnerable, in particular. Therefore, I ask everyone to be patient for a little while longer on face coverings and to continue to follow all advice on hygiene, ventilation, testing and, of course, vaccination.

I take the opportunity to again thank everyone for their continued efforts.

The Presiding Officer: The First Minister will now take questions on the issues raised in her statement. I intend to allow around 20 minutes for questions, after which we will move to the next item of business. Members who wish to ask a question should press their request-to-speak button now.

Douglas Ross (Highlands and Islands) (Con): I praise the Great British public for their welcoming attitude and compassion. As of this afternoon, more than 100,000 applications have been lodged to be part of the UK Government's homes for Ukraine initiative. In recent days in this Parliament, we have all agreed that more needed to be done to support people who have been displaced because of the war. I am pleased that progress is being made. Now is the time for collaboration, and it is encouraging that the Scottish Government is positively engaging with the UK Government on its proposals.

I turn to the Covid statement. More than two years ago, our lives were turned upside down by Covid. The pandemic has had a dramatic effect on us all. We have all had to make sacrifices, we have all lost loved ones to the virus and we have all changed our way of life.

Covid has not gone away, but we have learned to live with it. The UK's world-leading vaccination scheme has been a game changer, allowing us to move on and get back to normality. It is true that case rates are higher at the moment than any of us would like, but Covid cases were always going to rise as restrictions were eased.

We cannot get complacent with Covid, but we have to move forward. We cannot stay stuck with Covid rules for ever. That is why it will be a blow for households and businesses that the First Minister has decided to keep the face mask rules in place. Last month, the Government said the rules would be removed on 21 March, but that has now been delayed. Why will the First Minister not trust the Scottish public to take the steps that they think are right to protect themselves and their families? Why are we back to a wait-and-see approach, with no firm date to allow businesses and the public to plan ahead? The First Minister said that she will report to Parliament again before the Easter recess, but there is no guarantee that a positive announcement will be made then. What criteria are her Government basing that decision on and what will need to change for the face mask restriction to be removed at the next review?

Lastly, the First Minister is proposing to continue to provide testing kits for the whole population well into April. That does not come without significant cost, and that is funding that could be used to support our front-line NHS workers to tackle the backlog in routine treatments. Will she tell us exactly how much the extension of free testing here in Scotland will cost?

The First Minister: First, Scotland is not stuck. Let me remind everyone in the chamber and, indeed, all of Scotland that, as of Monday, every legal measure to help us to control Covid will have been lifted, with a limited temporary exception for a continued requirement to wear face coverings. Given the spike in cases that we are seeing right now and the very high risk of infection, that will help us to protect each other and, in particular during this spike, it will help us to protect the most vulnerable people in our communities and I think that it will help us to get the spike under control more quickly than might otherwise be the case.

That is very much in the spirit of solidarity and mutual concern for each other that has characterised the public response to the pandemic over the past two years. In the light of the very high number of cases right now, I think that many people in Scotland will welcome that precautionary move and that even people who may not welcome it—I understand that there will be people in that category—will nevertheless accept it and understand the reasons for it.

I will update Parliament again in two weeks' time, before the Easter recess. I would hope, and the expectation is, that we will then convert that regulation to guidance in the early part of April, with 4 April being the first Monday. I think that it is right to take that approach. How we will make that decision is set out in the strategic framework that we published three weeks ago. In short, though, we will want to see the increase in the number of cases stabilise and the risk of infection—it was at one in 18 in the most recent week, according to the ONS-start to reduce so that the most vulnerable people in our society, in particular, are not at the risk that they are right now. However, let me remind everybody that that will be the only legal measure that remains in place and it will be in place for a short, two-week period of time.

On testing, I have got news for Douglas Ross. We will now have to fund all our continued testing requirement, including the more proportionate and targeted testing system that will be in place for the longer term, because the consequentials are not continuing. Those decisions are, of course, driven by the situation that the UK Government arrives at for England. We will continue to assess the overall

cost of testing over the next period—[Interruption.] If the Conservatives want to listen to my answer—

The Presiding Officer: Colleagues, I ask for quiet across the chamber so that we can hear questions and answers.

The First Minister: The overall cost will depend on factors such as outbreaks and whether we see any new variants emerging, and we will have to flex that cost based on the reality of the situation. The cost of extending access to LFTs prudently for a period and, unlike the situation south of the border, making sure that, where we are advising testing, it is free of charge for people who need to test, will be a relatively small part of the overall annual cost. We will continue to judge that cost on the basis of the circumstances that prevail with the pandemic at any given time.

Jackie Baillie (Dumbarton) (Lab): The number of Covid cases is rising, hospitalisations are at their highest point since February 2021, health boards are raising concerns about capacity and I understand that the Queen Elizabeth university hospital was very close to declaring a code black last Thursday. All three NHS Lanarkshire hospitals are reportedly overwhelmed and staff absence is up. Will the First Minister give members more information about testing for health and social care workers after May, particularly in terms of frequency and the staff groups that will be targeted?

Key to our ability to return to normal is the use of antiviral medication, and I am pleased that testing remains for people who are immunosuppressed. However, there are reports that antivirals are not currently being administered within the five-day window for them to be effective and that some eligible patients are not being offered antivirals at all. One contacted her general practitioner but the general practitioner had no supplies and no ability to prescribe, and the five days passed without her receiving the antiviral medication that would have lessened the impact of Covid on a person with a serious underlying health condition.

Providing assurance to those with underlying health conditions becomes all the more important as restrictions are lifted. Therefore, what action is being taken to improve the administration of antiviral medication so that everyone is protected? How much antiviral medication is currently being administered in Scotland? Are there sufficient supplies? Will that now be done by GPs?

The First Minister: It is our intention that health and care workers will be advised to continue testing after the end of April. That is likely to be on a twice-weekly basis, at least initially, although that will be kept under regular clinical review. As I said in my statement, one of the purposes of

testing after the end of April will be the protection of high-risk settings, which will, of course, include hospitals and care homes.

The NHS is working hard to ensure that those who are eligible for antiviral treatment get access to it. I cannot comment on individual cases but, if the detail is sent to me, I would be happy to have that looked at. The availability of antiviral treatment continues to develop and increase, so the eligibility of people to be treated with antivirals will also increase. Again, that will be kept under very close review.

The five-day window is important. Obviously, that is why we have continued to support testing and will continue to support it to help with access to care and treatment. Principally, that will be to ensure that firm diagnosis can be given for those who may be eligible for antiviral treatment. That will not be a fixed group of people as time passes; it will be an increasing group of people as the availability and the effectiveness of those treatments continue to increase. We will continue to ensure that the health service is working in a way that best supports the quickest and most effective access to those treatments as that develops. I am sure that the Cabinet Secretary for Health and Social Care would be happy to provide more information as access to that scheme and its scope widen in the weeks and months to come.

Alex Cole-Hamilton (Edinburgh Western) (LD): It will be disheartening to many Scots to hear that, despite the extra sacrifices that we have made in Scotland, our infection rates are still so stubbornly high. The First Minister rightly mentioned the plight of Ukrainian refugees. I echo my party's support for her Government's efforts in that regard, and I want to ask about them with regard to Covid.

Before the invasion, the vaccine roll-out in Ukraine had reached only 35 per cent of adults. Ukrainian refugees will be coming to a country with one of the highest infection rates in the whole of Europe. After everything that they have been through, the last thing that they will need is a bad dose of Covid. What plans does the Scottish Government have to offer arriving refugees access to immediate vaccination for any who wish to take that up?

The First Minister: As I indicated earlier, I will set out in a statement tomorrow more details of the arrangements that we are working to put in place to welcome and support refugees to come here from Ukraine. However, I can say now that that includes intensive work with Public Health Scotland to look at exactly what we should offer by way of testing when people arrive and by way of vaccination if they are not already vaccinated. That work is under way as part of the wider

preparations to welcome people here, and I will set those out in more detail tomorrow.

Annabelle Ewing (Cowdenbeath) (SNP): Two years out—give or take a week—from the first lockdown, on 23 March 2020, thoughts inevitably turn to reflection on what we have all been through and to the heroic efforts of our NHS staff in getting us to this point. However, we also look to the months ahead, including to the potential for a further winter in the shadow of Covid. Is the First Minister in a position to advise when a second Covid booster vaccination will be available to the population as a whole?

**The First Minister:** That is an important question. I am not able to give that information right now because we depend on, and we follow, JCVI advice.

The advice that we have is what I have set out in my statement today. There will be additional boosters for certain groups of the population, when that has been recommended, and, of course, the offer of vaccination for all five to 11-year-olds. I encourage everybody in those groups to take up those offers as soon as they are available.

We await further JCVI advice on what might be required as we go into next winter. My expectation, and the Scottish Government's planning assumption, is that there will be a regular vaccination programme, but we still await final advice from the JCVI on exactly what the frequency will be, at whom exactly it will be targeted and how many doses might be involved. We will, of course, keep the Parliament updated on that as soon as the advice becomes available.

Sandesh Gulhane (Glasgow) (Con): Shamefully, the Scottish National Party-Green Government is still dragging its feet on establishing a network of long Covid clinics across Scotland. Up to 90 clinics are up and running across England, including the Hertfordshire clinic that I discussed with the Cabinet Secretary for Health and Social Care as an exemplar. Thousands of patients in Scotland are suffering with long Covid. When will the First Minister finally listen and ask her health secretary to deliver solutions instead of just announcing money?

The First Minister: That is not the case. We have published an action plan and have rightly devoted resources to it, and health boards are taking forward a number of the actions in it. Clinics are a part of that, but not the only part. Health boards have to ensure that they have in place holistic support services for people who are suffering from long Covid and that, as far as possible, they are provided with services from routine healthcare up to and including specialist healthcare. That work is under way and it will need

to continue alongside on-going efforts to ensure that we continue to understand the causes of long Covid and its impact on the health of individuals. That is all set out in the action plan, which will continue to be updated as appropriate.

Stuart McMillan (Greenock and Inverclyde) (SNP): The Guardian recently reported that the UK Government is to end funding for free Covid testing in special schools and children's care homes in England this month—a move that was greeted by sources in the UK Health Security Agency with "shock" and disgust. What assurances can the First Minister give that the Scottish Government's approach to testing will continue to be guided first and foremost by public health expertise and not by political pressure?

The First Minister: I have set out the funding constraints within which we operate, but within that, of course, we seek to take decisions on the basis of public health advice and considerations. I have set out our approach to testing, which is about ensuring that, as we transition to an end-state testing approach—a steady state, I would hope—we do so in a careful way, with an appropriate transition.

I have set out the timescales for ending routine testing with lateral flow devices in the general population and in education settings. However, I have also said that, for any purpose for which the Government continues to advise and recommend testing—I have set out the broad categories now, but they might change over time depending on the development of the pandemic—we will ensure that access to tests, whether those are LFD or PCR tests, remains free of charge for those who are advised to use them.

Monica Lennon (Central Scotland) (Lab): It has been more than 140 days since NHS Lanarkshire hit the panic button and declared a code black. None of us wants that to be the new normal for NHS patients and workers. Can the First Minister reassure my constituents and people across Scotland that the test and protect transition plan will not make achieving NHS recovery any harder? Can she indicate when NHS Lanarkshire is expected to de-escalate from code black?

The First Minister: The point of having a lengthier transition plan than we are seeing south of the border is to ensure that we migrate smoothly and effectively to the end state. As we have seen in recent times, the pandemic will continue to throw up challenges for us. The plan is intended to ensure a smooth transition, and the timeline that we have set out allows us to do that.

With regard to wider pressures on the NHS—including NHS Lanarkshire, although many other health boards are experiencing those pressures—we need to see the number of hospital cases

come down again. As of today, there are just under 2,000 patients in hospital with Covid. They will not all be in hospital because of Covid, but they are in hospital with Covid, and that brings additional challenges.

Part of the reason for being slightly cautious on face coverings to date is to help us—we hope—to get the spike under control. As we get the spike in cases, which is driven by the sub-lineage of omicron, under control, we will start to see the number of hospital cases come down again. That will then allow NHS Lanarkshire and other health boards to get back on track in restoring services to normal. I hope that we will see that happen very soon. The steps that we have set out today are intended to support that process and have it happen as quickly as possible.

Ruth Maguire (Cunninghame South) (SNP): Many people in the communities that we represent will be worried about the rising number of cases. I saw the chief medical officer mention vaccine effectiveness studies at the weekend, and I wish to ask the First Minister about those. What reassurance can they provide to the vaccinated, and what encouragement can they give to those who are yet to get their jags?

The First Minister: That is something that clinical experts keep under very close review. The data on vaccine effectiveness is scrutinised closely. Emerging evidence demonstrates that boosters continue to provide strong protection against serious illness. Recently published Health Security Agency data indicates that initial vaccine effectiveness against hospitalisation among older people increases to around 90 per cent two weeks after a booster and remains at around that level for more than 10 weeks, although there will continue to be strong protection after that. That is why we continue to encourage people to come forward for vaccination, even if they have not had boosters so far. It is not too late to do so, and it gives significant protection.

I mentioned Hong Kong in my statement. For people who are interested, it is worth looking at the data. Omicron is causing very severe illness there, and the death numbers are spiralling because vaccination rates are relatively low. That underlines the importance of vaccination and the fact that it is immune protection that is making omicron less severe rather than any inherent mildness of the variant.

Gillian Mackay (Central Scotland) (Green): This will be a worrying time for people who were previously shielding and who are still being cautious and reducing social contact. The transition away from routine asymptomatic and then symptomatic testing will make it much harder for them to avoid coming into contact with people who are Covid positive. Will the Scottish

Government consider continuing access to testing for families and carers of people who are clinically extremely vulnerable? What other mitigations will be put in place to ensure that vulnerable people continue to be protected from Covid?

The First Minister: In the paper that we have published today, we have set out our intended approach to testing after the end of April, and I have set out the summary of that in my statement. Many people who are extremely clinically vulnerable—not everybody, but many of them—will be among the categories of people who might benefit from antiviral treatment if they get Covid. They will therefore be among people who are still advised to test, even after the end of April. That group of people will remain under review as treatments develop and become more available.

I recognise that this is an anxious time for people as we make this transition back to normal, but we are doing so with appropriate caution and with those who are most vulnerable in mind. We have tried to do that at every step, and we will try to continue to do that at every step yet to come.

John Mason (Glasgow Shettleston) (SNP): Many people—including me—will be very concerned that we now have 1,996 people in hospital with Covid. Some of those people might be thinking that we should really be increasing measures and restrictions rather than reducing them. How would the First Minister respond to such comments?

The First Minister: I do not take that view. If I did take that view, the contents of my statement would have been different. I think that we are on a justified journey back to normality. Thanks mainly to vaccines but also to natural immunity, there has been a considerable weakening in the link between cases and severe illness. If we did not have vaccines or some natural immunity, we would be in a very different position and we would need additional protections to avoid people becoming seriously ill and dying. Thankfully, we are not in that position, so we can migrate back to normality with a different approach to managing the virus. However, it is important that we do that with appropriate care and caution, which we have done at every stage—particularly when this BA.2 spike is causing challenges. We will continue to do this carefully and cautiously, but I think it is in everybody's interests, given the wider harms of Covid restrictions, that we continue to get back to normality as soon as we possibly can.

Tess White (North East Scotland) (Con): It has emerged that the vaccination passport scheme has cost the taxpayer almost £7 million. That is more than 10 times the originally projected cost of £600,000. Can the First Minister account for how the costs were allowed to balloon like

that? Does the Scottish Government believe that that represents value for money for the taxpayer?

The First Minister: Yes, I think that the decisions that we have taken to try to avoid the number of Covid cases being even higher and the harm that is caused by Covid to be even greater than it has been will be shown, in time, to have been worth it. Obviously, we are about to have a public inquiry, which will look at all such issues and will hold the Government to account. That is right and proper.

Every time that somebody says that we should not have taken a particular step—in this case, introducing vaccination passports—and should have avoided those costs, they also have to consider the potential implications of not taking the step, such as higher numbers of cases, more people in hospital and more people becoming seriously unwell. All of those decisions would have a cost, too, and not just a financial cost. [Interruption.]

The Presiding Officer: Before I go on to the next question, I remind colleagues that we treat one another with courtesy and respect at all times in the chamber.

Siobhian Brown (Ayr) (SNP): Does the First Minister agree with the evidence that was given to the COVID-19 Recovery Committee by Public Health Scotland, which said that the economy is an important determinant of health and that the cuts to universal credit and other austerity policies have had a profoundly negative impact on public health?

The First Minister: Yes, I agree strongly with that; it is borne out by evidence. Right now, many people across Scotland and, indeed, the UK are suffering public health-related adverse impacts because of the poverty into which they have been plunged by the removal of the universal credit uplift. Unfortunately, those effects will be exacerbated by inflationary pressures and the increasing cost of living. As well as restoring that universal credit uplift, I call on the UK Government and the Chancellor of the Exchequer, when he makes his spring statement next week, to deliver significant support for people who are living in poverty, because that will help their health as well as ensure that their quality of life is better.

Paul O'Kane (West Scotland) (Lab): At the most recent meeting of the cross-party group on learning disability, the issue of access to vaccination was once again raised by people who have a learning disability and their family carers. Will the First Minister ensure that people who have a learning disability and can be more vulnerable are called for the spring booster programme? Will she ensure that, when reasonable adjustments are required—such as for people who have autism

and find it difficult to be in large vaccination sites—they are made?

**The First Minister:** The groups who will be called for the additional booster will, of course, be determined on the JCVI's advice, which we follow.

The point about accessibility and ensuring that those with particular conditions such as autism are properly catered for was well made. Given the stage that we are at in the vaccination programme, there is less reliance on large-scale vaccination centres and much more reliance on smaller-scale settings. We have tried all along to balance the need for speed and large-scale approaches to vaccination with accessibility, and we will continue to do so. Although there are still people who could come forward for vaccination, and we encourage them to do so, our high vaccination rates speak to the success of that approach. However, we will continue to bear in mind these important issues.

Jamie Greene (West Scotland) (Con): The Scottish Courts and Tribunals Service told the Criminal Justice Committee that the removal of the 1m physical distancing requirement will allow juries to get back into the courtroom and will help to tackle the huge backlog of cases. First, given that there are about 43,000 cases in that backlog, will the First Minister confirm that that physical restriction will also be removed on Monday, along with others? Secondly, if it is removed, will our courts now be able to move to other business-asusual operations that will increase the capacity of our courtrooms and the volume of cases that can be heard?

The First Minister: It is for the court service to manage its business. We have provided additional funding, including an increase in its routine resource budget, to help with recovery. All legal restrictions, with the exception of the short-term, temporary requirement on face coverings, will be lifted on Monday. Many of the restrictions have already been lifted, and the remaining ones will be lifted on Monday. We will continue to work with the court service, as we will do with other parts of the public sector, to get services back to normal and to catch up on backlogs as quickly as possible.

**The Presiding Officer:** That concludes the First Minister's statement on Covid-19.

# **Fisheries Management**

The Presiding Officer (Alison Johnstone): The next item of business is a statement by Mairi Gougeon, on developing a catching policy to deliver sustainable fisheries management in Scotland. The cabinet secretary will take questions at the end of her statement, so there should be no interventions or interruptions.

15:01

The Cabinet Secretary for Rural Affairs and Islands (Mairi Gougeon): Scotland's seas are wonderfully rich and diverse. That is reflected in the abundance of wildlife that we see and the benefits that we all enjoy, be it the delicious, healthy seafood that we eat, the jobs that our seas support or the benefits that coastal communities reap by having such a fantastic natural asset on their doorsteps.

With such diversity and abundance comes great responsibility. The sheer breadth of human activity at sea inevitably brings impacts for the marine environment. Therefore, it is incumbent on us all to understand, manage, mitigate and reduce those impacts to secure our natural resources for generations to come.

A key part of that is ensuring that fishing activity within Scottish waters operates sustainably and responsibly. That commitment to sustainable fisheries management is locked into our overarching fisheries management strategy and will drive many of the new policies and management improvements that are planned over the period to 2030.

However, it is also important to acknowledge the socioeconomic importance of fishing. The past year has not been easy for many in the fishing industry. The Covid-19 pandemic has caused significant continuing economic challenges and many businesses and individuals continue, and will continue, to feel the devastating impacts of the United Kingdom's exit from the European Union.

I am proud that the Scottish Government has been able to support the fishing industry during this period through the provision of hardship funding and support towards a more resilient and safe future—for example, with targeted funding for the nephrops sector, investment in safety improvements and training, and help for young fishers to enter the sector.

That support must go further still, as we work with the fishing industry and the wider fisheries stakeholder community, which includes other UK fisheries administrations and international partners, to adapt to the changing strategic and

operating environment and to deliver a just transition towards a more sustainable future.

The signing of the Bute house agreement, in August last year, means that the spotlight is now, more than ever, on the twin crises of climate change and biodiversity loss, which require urgent action to deliver change on a significant and long-lasting scale.

In our current programme for government, we committed to publishing our approach to the blue economy through an action plan. That recognises the importance of Scotland's marine space and marine sectors as national assets that are critical to meeting our ambitions for sustainable stewardship of the marine environment. The action plan will be underpinned by a vision and will provide a framing and ambition for Scotland's marine management policies, strategies and plans, including the fisheries management strategy.

Our vision for Scotland's blue economy is clear that the actions that are required to steward our marine environment sustainably cannot be delivered in isolation. We have a strong tradition of co-management within Scotland, working with our fisheries stakeholders to respond to topical and difficult issues.

I am confident that, by working in partnership through our co-management groups, we can deliver the best outcomes for Scotland's marine environment, our seafood sector and coastal communities. The 12 actions that underpin our fisheries management strategy are important building blocks in delivering those outcomes. Our initial actions will be prioritised around the environment, recognising the scale of the change that is needed and helping to tackle some of our most difficult fisheries management challenges.

Today sees significant progress on two key actions. I am delighted to announce that, this afternoon, we are publishing Scotland's draft future catching policy. As part of the common fisheries policy, the introduction of the landing obligation aimed to tackle the widespread, damaging and unacceptable issue of discarding across the EU. While part of the EU, Scotland played a key role in shaping the discard ban, and we remain fully committed to the principles that underpin the current regulations. However, we and stakeholders-including fishing and environmental groups-acknowledge that there have been issues with implementation and that the policy is not as effective as it could be. The future catching policy seeks to change that. By proposing a different approach, and by working closely with stakeholders, we will ensure that the right management measures are in place to support pragmatic decision making.

The consultation will test a number of the main components of the future catching policy. First, working in partnership with fishers, scientists and environmental groups, we aim to put in place additional technical and spatial management measures to reduce catches of unwanted fish. That might include increased net selectivity or spawning-stock area closures.

Secondly, we will help the fishing industry to avoid bycatch of sensitive marine species such as seabirds, seals and cetaceans. No fisher wants to catch those species, and we must work together to preserve them in the wider ecosystem.

Thirdly, we will take a pragmatic approach by considering different fleet segments, thereby avoiding the one-size-fits-all approach, which we know does not work in mixed fisheries with varied management issues.

Fourthly, we intend to adjust current rules around discarding to simplify them where required, and ensure that rules can be, and are, complied with.

Finally, we recognise that increasing pressure on available marine space is creating tensions among some parts of the fishing fleet. Therefore, we will seek views on additional management measures that might be required for the creel, gill net and long-line fisheries. Such measures will enable Scotland to deliver on the high-level goals that we have jointly agreed with other UK Administrations in the UK joint fisheries statement and fisheries framework.

That approach is a practical demonstration of this Government's aim to manage fisheries in the future by working in partnership to agree common goals. Given our unique circumstances, the details of the implementation will be left to our administration to take forward, thereby avoiding an ill-fitting, one-size-fits-all single UK fisheries policy.

The Scottish Government is committed to being a world leader in fisheries management. We take our role as guardian of Scotland's natural marine environment seriously. The future catching policy will build on our current approach and signal a step change in the way in which unsustainable fishing practices are tackled.

We hope to share learning with our UK and international fisheries partners, demonstrate leadership and support others to deliver the right outcomes for our shared fish stocks, fishing industries and local communities. To be clear, for both the future catching policy and remote electronic monitoring, all rules and regulations will be applied on a level playing field basis to Scottish vessels and to non-Scottish vessels that are fishing in Scottish waters.

Remote electronic monitoring—or REM as it is usually known—adds a crucial layer to the future catching policy and is fundamental to the success of our wider strategy. It will ensure that we are fishing sustainably and delivering accountability and confidence.

This morning, I published a consultation on the implementation of remote electronic monitoring to key parts of the fishing fleet. There is no doubt that Scotland's fishers produce a high-quality product that many of us enjoy, but we must have confidence that fish stocks are being fished sustainably and responsibly. Many fishers understand that and have taken positive steps to respond. However, given the remote nature of fishing operations, it can often be difficult to demonstrate compliance and deliver the confidence that we need.

Technology can help us, and it is only right that we embrace it. Many fishers have already recognised that, which is substantiated by the rise in uptake of voluntary REM installations on active Scottish scallop dredge boats since Covid restrictions started to ease. It is a significant achievement that more than 80 per cent of our active over-10m scallop dredge fleet now carry REM on board. In this case, that includes cameras.

The consultation on REM confirms this Government's commitment to introduce mandatory REM on board all scallop dredge and large pelagic vessels that operate in Scottish waters. Subject to parliamentary time and approval, we aim to have the legislation to do that in place by the end of 2022. The consultation seeks views on key aspects of implementation and on appropriate wider deployment to other parts of the fishing fleet.

REM will enhance the baseline commitment that was made in the Bute house agreement for all fishing vessels to be fitted with vessel-tracking equipment by the end of this parliamentary session. REM places an enhanced and independent level of monitoring on board—for example, by using cameras, sensors and GPS—so that we can determine the fishing activity that is taking place. In line with our commitment to proportionality, cameras will not necessarily be needed in every case, because REM can be adapted according to need. The simple but effective technology will demonstrate Scotland's leading approach to making best use of cuttingedge management tools.

REM will deliver on three main outcomes. First, through the gathering of spatially rich scientific data, it will enhance our knowledge of fisheries and, therefore, allow for better decision making. Secondly, it will deliver confidence and accountability in fishing practices and demonstrate that fishing activity is sustainable and lawful.

Thirdly, it will improve the resilience of existing data collection processes by providing uninterrupted data collection, regardless of external factors, including Covid.

I hope that my colleagues from around the chamber will support the policies that I have outlined today, and I look forward to hearing their views as we progress with the development and implementation of our broader fisheries management strategy. I also encourage everyone who has an interest to access and respond to the consultations that have been announced today.

By publishing a future catching policy for Scotland and our proposals to require remote electronic monitoring by key parts of our fishing fleet, we are demonstrating Scotland's leadership in fisheries management on these islands and internationally.

We are cementing our credentials as responsible and sustainable fisheries managers and signalling to all fishing vessels that operate in Scottish waters that we can and must do better in order to protect and enhance our fantastic marine environment now and for the future. By doing so, we will help to deliver a sustainable future for our fishers, seafood industry and coastal communities.

The Deputy Presiding Officer (Liam McArthur): The cabinet secretary will take questions on the issues that were raised in her statement. I intend to allow 20 minutes for questions. Members who wish to ask a question should press their request-to-speak buttons or type R in the chat function.

Rachael Hamilton (Ettrick, Roxburgh and Berwickshire) (Con): I thank the cabinet secretary for prior sight of her statement.

Recent events have shown us the critical importance not just of energy security but of food security. In the light of concerns around the Bute house agreement's socioeconomic impact on Scotland's fishing communities, is the Scottish Government committed to fishing as an important part of Scotland's wider food security now and in the future? How will the Scottish National Party-Green coalition restore the trust and confidence of fishermen and coastal communities, following the failures—which the cabinet secretary acknowledged last week, in the Rural Affairs, Islands and Natural Environment Committee-in the recent botched process of regulation, flawed consultation, lack of evidence and zero financial compensation for fishing communities on the Clyde?

**Mairi Gougeon:** In response to Rachael Hamilton's first point, I note that she is absolutely right about the importance of food security. Fishing and the seafood industry are vital in that regard, because fish and seafood are sustainable sources

of protein, which we need to ensure that we can catch sustainably now and into the future. We have set out the policies and consultation today partly to provide assurances on that front.

Last week, I appeared in front of the RAINE Committee to give evidence about comanagement and the process in relation to Clyde cod, and said, rightly, that the process was far from ideal. I apologised for that at that committee because the process did not follow the principles of co-management that we seek to achieve and that we have previously achieved in relation to fisheries, through working with our stakeholders. Clyde cod fishing has been a really complex issue to balance. At the committee, I committed to ensuring that we will learn lessons from how that closure has been managed.

The policies that I have set out to Parliament today have been developed through working closely with our stakeholders. We want to hear views on those policies, which is why we are launching the consultation. We are fully committed to using a co-management process in the future.

Colin Smyth (South Scotland) (Lab): It is vital that our future catching policy is future proofed and is led by the best robust scientific evidence, in order to deliver sustainability. The Scottish Government's recent shambolic handling of the Clyde cod closure shows that there is a long way to go and that there remains a gulf between the cabinet secretary's rhetoric and the reality of the implementation of policy.

I welcome the two consultations that have been published today. I hope that they will lead to maximum roll-out of remote electronic monitoring and that they will not, in effect, amount to deregulation of discarding.

Will the cabinet secretary give an assurance that the actions that come from the consultations will ultimately be governed by a clear commitment by the Government to fishing quotas staying within robust scientific advice about maximum sustainable yields? Will we also see a significant long-term change in how quotas are allocated to fishing methods that widen socioeconomic benefits and minimise environmental impact?

Mairi Gougeon: Colin Smyth suggests that REM has the potential to lead to deregulation. That is absolutely not where we want to be. The future catching policy that we have sent out for consultation today has been developed with our stakeholders. We very much support the principles behind the landing obligation, which are reduction of waste, improvement of accountability, and safeguarding of sustainability. Our future catching policy—helped and supplemented by REM—will deliver accountability and ensure that we have a policy that works. We are committed to that. We

are trying to develop a policy that works for mixed fisheries and for how fisheries are operated in Scottish waters.

The member also asked about quotas. Our general approach to allocation of quotas was set out in our future fisheries management body of work, which was also developed after public engagement. Within that engagement, there was widespread support for continuing the fixed-quota allocation system. The Scottish Government has committed to that system's continued use for part of our quota.

We have stated that we will act differently in relation to the additional quota that Scotland receives as a result of exit from the EU. The distribution of that additional quota for 2023 onwards will be the subject of a forthcoming consultation.

Emma Harper (South Scotland) (SNP): The cabinet secretary mentioned mixed fisheries in her statement. I know that the Firth of Clyde and the Clyde catchment area are really important. Constituents have contacted me about the decision to include creel fishers in the seasonal closure of cod fishing between 14 February and 30 April. I understand that the seasonal closure has been a long-standing measure to protect fish stocks. Will the cabinet secretary ensure that the Scottish Government will work closely with creel fishers to ensure that they are able to plan for any potential future interruption to their business?

Mairi Gougeon: As I said in my previous response, we are absolutely committed to the comanagement approach. I understand Emma Harper's concerns, which were also raised during the committee meeting last week. There were specific reasons why we could no longer permit creeling within the Clyde cod box closure period. Those reasons have been outlined.

Co-management is at the heart of what we are trying to deliver and has been at the heart of our development of the policies that we have put out for consultation today. It will continue to be key in the future.

Finlay Carson (Galloway and West Dumfries) (Con): I am sure that much thought went into producing the future catching policy to reflect current EU policy as a result of the SNP's misguided desire to blindly align with the EU's disastrous common fisheries policy at the expense of Scottish fishers.

Is this not a missed opportunity to genuinely codesign a far better system that is suited to Scottish circumstances instead of tinkering at the edge of the EU's failed landing obligation?

It is concerning that there are multiple mentions in the statement of spatial restrictions, but not

enough about spatial pressures. What does the Scottish Government plan to do to address spatial pressures that arise between fishing and offshore wind? If those are not resolved, there will be even greater pressure between fleet sectors in the future.

Mairi Gougeon: I point out to Finlay Carson that the approach that we have set out today on our future catching policy is world leading. I say again that we completely support the principles that are behind the landing obligation. What we have set out—I do not know whether the member has had a chance to read the consultation document or to go through it in detail—is exactly tailored to our industry in Scotland. It will deliver on the principles and intended outcomes of the landing obligation in a way that works for our industry and recognises the nature of our fisheries.

The member also asked about offshore renewables and fisheries. We are aware that there are a number of conflicts there, and some specific issues. For example, we know that electricity cabling is a key issue for the fishing sector. We are seeking to facilitate early engagement with the fishing sector on those matters, and to guide developers within that.

A sectoral marine plan for the offshore grid is going to be undertaken by Marine Scotland in order to plan for the required network infrastructure, including cable corridors on the sea bed and cable landing points for the offshore grid. Commercial fisheries will be included in that planning process. Marine Scotland is continuing to prioritise and address some of the research gaps that we know exist, including on electromagnetic fields, through the Scottish marine energy research programme. We are also setting up a monitoring group that will consider EMFs.

Kenneth Gibson (Cunninghame North) (SNP): What does the Scottish Government anticipate the long-term impact of its fisheries management policies and conservation measures will be on Scotland's fisheries? Will the introduction of more no-take zones, such as the one in Arran's Lamlash Bay, form part of the conservation measures?

Mairi Gougeon: The fishing industry is a major beneficiary of the natural capital that our seas provide, so it is vital that we manage that resource carefully now as well as for future generations. Assessments have shown that action is needed for us to achieve good environmental status, which is why we have committed to developing by 2024 the remaining fisheries management measures for marine protected areas and key coastal biodiversity locations outside those sites. In addition, we have committed to designating at least 10 per cent of Scotland's seas as highly protected marine areas by 2026. That will go

beyond what we see in no-take zones, because it will exclude all extractive, destructive and depositional activities—not just fisheries.

**The Deputy Presiding Officer:** Rhoda Grant joins us remotely.

Rhoda Grant (Highlands and Islands) (Lab): It is concerning that the consultation appears to suggest that only marketable bycatch will be landed. That will do nothing to prevent the waste of dead fish being dumped back into the sea, and it could also encourage catching of marketable fish for which there is no quota. I urge the cabinet secretary to ensure that all bycatch is landed and that uses such as farmed-fish food are developed for otherwise unmarketable fish in order to cut waste. Will she also take steps to ensure that lucrative species for which there is no quota are not targeted, which would put stocks in danger?

**Mairi Gougeon:** I say again that a key part of what we are hoping to achieve with the future catching policy is that we ensure that everything that is caught is accounted for. I reassure Rhoda Grant on that point.

In relation to the other points that she raised, I note that the reason why we are having the consultation is to ensure that we get the policy right. That is absolutely what we want to achieve. I encourage the member and her constituents to fill in the consultation and make their views known on those specific issues.

Karen Adam (Banffshire and Buchan Coast) (SNP): How does what we are doing with the discard ban compare with the EU approach and what is happening elsewhere in the UK?

**Mairi Gougeon:** The landing obligation or discard ban is part of retained EU law. The current rules around discarding are consistent with those of the EU and the rest of the UK. As I have outlined in some of my previous responses, our commitment to tackling discarding is not going to change, but we know that we can make improvements to the implementation of the landing obligation that will make the rules around discarding more effective.

Through the future catching policy, we hope to improve on the current rules while staying true to the principles of the landing obligation. Key to that is tackling unwanted catch—that is, helping fishers to avoid catching fish and other species that they do not want to catch in the first place. We really want to ensure that we share the learning from our future catching policy with our partners in the EU and the rest of the UK so that we can all improve outcomes for our shared fish stocks.

**Beatrice Wishart (Shetland Islands) (LD):** It is not only the Scottish Government and environmental groups that want sustainable

fisheries management; fishermen whose livelihoods depend on healthy seas and thriving stocks want that, too. In a crowded marine environment, Scottish vessels are being squeezed further through practices such as gillnet fishing, which often add to marine litter, thereby exacerbating biodiversity loss. We have all seen images of seals and seabirds entangled in discarded fishing gear.

Any changes need to be based on fact, and fishermen must have confidence that the scientific evidence is accurate and up to date. How will the Scottish Government ensure just that—that the evidence that it is using is accurate and up to date?

**Mairi Gougeon:** I have outlined today our commitment to that co-management process and to listening to our stakeholders. That is very much what we want to achieve.

On the member's first point about the crowded marine environment and some of the conflicts that can be encountered in it, she has corresponded with me about some of those matters. I will touch on one of them. We know that there are issues with gillnets and longlines, which are raised in the consultation document.

It is essential that we work together to arrive at the solutions for allowing legitimate fishing operations to work alongside one another. We pose a series of questions in the consultation document to explore some of the options, and we hope to develop those into firm proposals following the consultation, working closely with our stakeholders.

We acknowledge that there can be issues with finding space in the shared marine environment. We expect all fishers to operate within the law and to do so safely and responsibly.

Jenni Minto (Argyll and Bute) (SNP): As the cabinet secretary has said, there is a need to balance environmental, economic and social interests when it comes to fishing. How will the policy do that? In particular, how will it reassure coastal communities that fishing is valued and has a viable future in spite of all the impacts of Brexit?

Mairi Gougeon: First, I offer that assurance. As our fisheries management strategy outlines, fisheries management can be complex, and our decision making will always need to take account of a variety of factors. As we take forward the individual policies and actions that are in the strategy, we seek to use co-management to inform their development. As part of our decision making, we will take account of the various economic, social and environmental factors. It is important to remember that there is no one-size-fits-all approach; it will depend on what we are trying to

achieve and on the specific policy that we are looking to deliver.

We know that the impacts of Brexit are being felt across Scotland and that the fishing industry has been hit particularly hard in relation to trade. The Scottish Government is supporting the seafood sector through the marine fund Scotland. Through that fund, around £13 million has been awarded to date across a range of different projects, including support for our young fishers to enter the sea fisheries industry; vessel refurbishment; and help to purchase new and more sustainable fishing gear. That is in addition to the £40 million that we provided under the European maritime and fisheries fund to support an innovative and competitive sector, which also helped to build vital capacity.

Ariane Burgess (Highlands and Islands) (Green): I thank the cabinet secretary for advance sight of her statement.

I welcome the consultations that have been published today and the commitment to delivering a fisheries management strategy that is prioritised around the environment, in recognition of the scale of change that is needed. Since big changes are required, it is more important than ever to take a genuine co-management approach that includes all stakeholder groups when developing policy to deliver fisheries for the future.

I particularly welcome the commitment to rolling out remote electronic monitoring across the Scottish fleet—a measure for which the Scottish Greens have been calling for some time.

The consultation indicates a staged approach to the development of REM in different fleet segments.

**The Deputy Presiding Officer:** Question, please.

**Ariane Burgess:** We must prioritise the segments with the highest risk of wildlife bycatch and the greatest need to change gear, vessels and practices, as a just transition requires sufficient time and support to make those changes.

Will the cabinet secretary provide an indication of timings for the roll-out of REM across the different fleets, including the demersal fleet, to provide an assurance that the majority of fishers will be given the tools that they need—

The Deputy Presiding Officer: I call the cabinet secretary.

**Ariane Burgess:** —to play an even greater role as stewards of the sea by the end of this parliamentary session?

The Deputy Presiding Officer: I call the cabinet secretary.

**Mairi Gougeon:** We want to ensure that, as we develop and then deliver the policy, we do so in a way that works and that we get it right. Installing REM is a huge undertaking, which is why we have proposed the approach that is set out in the consultation.

In relation to the member's point on prioritising fleet segments, we have focused initially on the pelagic sector and on the scallop dredge fleet. We know that 80 per cent of vessels of more than 10m in the scallop dredge fleet already have REM installed, so installing REM in rest of the fleet could be an easier undertaking. However, we know that doing that will be more of a challenge for other sectors in the fleet in which that technology has not been used. We have set out our approach on that basis and we ask in the consultation about rolling that out to further fleet segments.

We think that REM is critical in helping us to achieve the objectives of our future catching policy. We have tried to take a proportionate approach and to ensure that, when we deliver the policy, we do so in a way that works—and that we get it right.

The Deputy Presiding Officer: I gently remind members that, when I call someone to speak, it is an invitation for them to speak and for the person who is speaking to stop speaking.

Audrey Nicoll (Aberdeen South and North Kincardine) (SNP): Will the cabinet secretary explain how Scotland's catching policy will help to deliver the objectives in the Fisheries Act 2020 that we are now required to work towards?

Mairi Gougeon: The Fisheries Act 2020 and the joint fisheries statement set the common highlevel goals on fisheries management. Our future catching policy provides the details on how we will deliver that by implementing more sustainable fishing gear to reduce bycatch, minimising catches of sensitive species and using monitoring tools to ensure that vessels in Scottish waters fish to the highest possible standards.

To address the specific point about the Fisheries Act 2020, the future catching policy will ensure that all management measures are developed in collaboration with the latest scientific evidence and with the health of fish stocks in mind. That will ensure a sustainable future for Scottish fisheries and honour the sustainability, precautionary and scientific evidence objectives. The commitment to a level playing field for all measures in the future catching policy means that we will also be delivering on the equal access and national benefit objectives. With a suite of technical and spatial measures, the future catching policy will, ultimately, aim to be world leading in relation to how we address issues, with

bycatch, ecosystem and climate change objectives, too, in line with the Fisheries Act 2020.

**The Deputy Presiding Officer:** I call Edward Mountain, who joins us remotely.

Edward Mountain (Highlands and Islands) (Con): In 2015, the Cabinet Secretary for Rural Economy and Connectivity said that 21st century fisheries management needs 21st century tools. In 2016, the Scottish Government promised new legislation to address that point. Unfortunately, nothing has happened since.

We clearly need an inshore fisheries bill, which both Richard Lochhead and Fergus Ewing promised before they were sacked. Will the cabinet secretary deliver where they failed?

**Mairi Gougeon:** I am sorry, but I missed the first part of the member's comments. I emphasise to him that, in setting out the policies that are out for consultation today, which we will deliver through legislation later this year, what we are looking to achieve is truly world leading.

In 2020, we set out our future fisheries management strategy, which includes a 12-point action plan, and we will also publish our delivery plan. The consultation on the future catching policy that we have issued today and what we have set out on REM drive that strategy forward, making us world leaders in the field.

## **Conversion Practices**

The Deputy Presiding Officer (Liam McArthur): The next item of business is a debate on motion S6M-03597, in the name of Joe FitzPatrick, on behalf of the Equalities, Human Rights and Civil Justice Committee, on ending conversion practices.

I invite members who want to speak to press their request-to-speak button as soon as possible, or to put R in the chat function.

15:35

Joe FitzPatrick (Dundee City West) (SNP): As convener of the Equalities, Human Rights and Civil Justice Committee, I am grateful for the opportunity to open the debate and to set out the findings of our report on petition PE1817, "End Conversion Therapy".

The terms "conversion therapy" and "conversion practices" are used interchangeably in the report to reflect the wording that the petitioners and witnesses used. However, the committee's preference is to use the term "conversion practices". We consider that term to be more accurate. The word "therapy" typically suggests a benefit, whereas the evidence that we heard was clear: there is nothing beneficial about so-called conversion therapy for the individuals who are subjected to it.

The committee heard that current protective legislation is insufficient to prevent harm. Our report makes it clear that

"conversion practices are abhorrent and are not acceptable in Scotland. They should be banned."

PE1817 was lodged in August 2020 and referred to the session 5 Equalities and Human Rights Committee, which indicated in its legacy report that the petition should be given consideration by its successor committee. Our committee agreed to undertake an inquiry into the issues that the petition raised. We launched a call for views, which ran from 6 July to 13 August 2021. We received about 1,400 responses, predominantly from individuals. We held eight evidence sessions, in addition to which we held private informal sessions with individuals who had experienced conversion practices.

On behalf of the committee, I thank everyone who gave evidence in writing and orally. In particular, I thank the individuals who provided testimony of their experiences as victims and survivors of conversion practices. It took immense courage to recount those experiences. Committee members found the testimonies harrowing but invaluable to our work.

A key issue that was identified during our evidence taking and on which there was broad agreement, including from people who support a ban and people who express concerns about a ban, was the need for a clear definition of "conversion therapy" or "conversion practices". The terms are generally understood to refer to practices that demonstrate

"an assumption that any particular sexual orientation or gender identity is inherently preferable to another, and ... attempt to bring about a change of sexual orientation or gender identity or seek to suppress an individual's expression of sexual orientation or gender identity on that basis."

#### The committee

"recommends that the definition used in the Report on Conversion Therapy by the UN Independent Expert on protection against violence and discrimination based on sexual orientation and gender identity, should be adopted".

It is also anxious to ensure that, similar to the approach in legislation to protect victims of domestic abuse and female genital mutilation, the definition of "conversion practices" in forthcoming legislation

"makes it clear that consent to such practices can never be informed and should not be available as a defence to those who undertake such practices."

The majority of the religious organisations from which we heard are in favour of a ban on conversion practices. The committee said that

"It agrees that legislation should not pose any restrictions on ordinary religious teaching or the right of people to take part in prayer or pastoral care to discuss, explore or come to terms with their identity in a non-judgmental and nondirective way."

#### However, we noted that we

"heard evidence that most conversion practices take place within a religious setting including in the form of 'talking therapy' which is used with the intention to 'correct' sexuality or gender. The Committee believes and recommends that such practices should fall within a ban."

The committee also heard from many survivors of conversion practices persuasive evidence that their faith is part of their identity, and that they have felt that they have been forced to choose between faith and their sexual orientation or gender identity, which can have a devastating impact. The committee believes that

"it is vital to involve religious and community leaders as a Bill progresses, and that education and awareness is crucial to promote acceptance of diversity."

#### We recommend that the Scottish Government

"engages with a wide range of faith and belief organisations in order both to protect LGBT people"

and address concerns around protecting religious freedom. The committee agrees that

"there is no conflict in protecting religious freedom and preventing harm by putting a ban in place."

#### The committee

"notes that the majority of healthcare bodies in the UK have signed the Memorandum of Understanding",

which is a joint document that has been signed by health, counselling and psychotherapy organisations, including NHS Scotland, which aims to end the practice of conversion therapy in the UK. One witness told us that they were aware of a "limited number of instances" of alleged conversion practices in medical settings and that they wish to see a ban on that, where there is an intention to change someone's sexuality or gender identity.

The committee agrees that affirmative therapies,

"where individuals are seeking support and a space to explore their identity"

in a non-directive setting, and where no set or preferred outcome is intended, should be protected under the ban. We heard evidence, however, that there is some confusion and misunderstanding around the term "affirmative therapy". It would be helpful for clarity on that to be provided to the medical profession, counselling services and wider society.

Concerns were expressed to the committee about the rights of parents to bring up their children in a way that is consistent with their moral and religious beliefs. The committee believes that

"there is a clear distinction to be made between parents having the right to bring up their children in line with their morals and values and having the directed intent to change their child's sexuality, or gender identity."

#### The committee agrees that

"any proposals should not pose restrictions on parents or schools to provide a safe space for discussion and exploration but should prohibit harmful practices which attempt to change a person's sexual orientation or gender identity, including trans identities."

The UK Government has indicated that it plans to publish draft legislation in the spring of this year, which would cover England and Wales. The committee agrees that

"Scotland should not wait for UK legislation to be brought forward and considers that, within the powers available to the Scottish Government and Parliament, Scotland-specific legislation be brought forward as soon as possible."

The committee welcomes the Scottish Government's commitment to introduce legislation by the end of 2023, and the establishment of the expert advisory group to inform and develop policy. We recognise that

"work will be necessary to ensure the development of cross-border frameworks"

#### and we call on the UK Government

"to work with the Scottish Government and Scottish Parliament on a ban."

The committee agrees that prospective legislation should set out a fully comprehensive ban on conversion practices and should

"cover sexual orientation and gender identity, including trans identities."

#### It should

"cover adults and children in all settings without exception and include"

so-called consensual conversion practices. The committee also recommends that a ban should include

"a ban on advertising and promotion of conversion practices."

#### The committee also

"heard strongly expressed views that legislation alone will not be sufficient to address conversion practices and that non-legislative measures will also be necessary to protect and support victims."

The committee heard a broad range of suggestions for supported measures that could complement legislation. Paragraphs 154 to 157 of our report set some of those out in detail.

#### The committee further

"noted concerns around how enforcement of a ban could be effective and believes that consideration should be given to how this role could be fulfilled by a public body to ensure investigation, enforcement and accountability"

are possible. The committee is keen to ensure that time is not wasted gathering identical evidence from the same victims as it heard from during its private evidence sessions, because that might have the unintended consequence of retraumatising victims. We therefore ask the Scottish Government to work with the committee in that regard.

#### The committee

"is mindful of the volume of evidence that is already available, including the written and oral evidence it has received".

and we consider that it is important to introduce legislation promptly. In our report, we stated that we would welcome discussions with the Scottish Government on working together to introduce a ban "as quickly as possible." I welcome the minister's letter of 10 March, offering to progress discussions with the committee on next steps, and I look forward to that further engagement.

On behalf of the committee, I thank the minister and her officials for the detailed response that they have provided to each of our recommendations, and for the assurance that the recommendations will be progressed through the work of the expert advisory group.

I highlight once more the impact of the sessions that we held with individuals who have

experienced conversion practices. Although the formal written and oral evidence that we received helped our consideration of the actions that are being called for in the petition, it was the testimony of each of those individuals that really impressed on us the need for legislation to be introduced as soon as possible.

I move,

That the Parliament notes the Equalities, Human Rights and Civil Justice Committee's 1st *Report, 2022, (Session 6), Report on Petition PE1817: End Conversion Therapy* (SP Paper 88).

The Deputy Presiding Officer: I gently remind any member who wants to participate in the debate that they need to press their request-to-speak button.

15:45

The Minister for Equalities and Older People (Christina McKelvie): I am delighted to open for the Government in today's debate on the report on the petition to end conversion therapy. I will be clear from the outset that it is essential that we act now to end conversion practices in Scotland. As we have heard, those practices are harmful, discriminatory and have no place in our society.

There is no credible evidence to suggest that conversion practices can change a person's sexual orientation or gender identity. There is, however, very clear evidence of the serious harm that they cause, and there is evidence that they are still taking place today. I want to end conversion practices once and for all, and to ensure that everyone, regardless of their sexual orientation or gender identity, is safe from such practices in Scotland and free to be themselves.

The debate is taking place as a result of the Equalities, Human Rights and Civil Justice Committee's report on the petition to end conversion therapy. I welcome the report, which was published on 25 January, and have written to the convener, Joe FitzPatrick, noting my appreciation for the committee's detailed and sensitive work in this space. I addressed how the Scottish Government will approach the committee's findings as we push forward, with determination, to end the practices.

We hope to work closely with the committee to progress our approach to a ban and will consider how we can best do that together. I assure the committee's convener and members that I am keen to do that.

The committee's findings—in particular, the accounts from survivors and people with lived experience of these terrible practices—form a cornerstone of our understanding of conversion practices in Scotland. I thank the people who gave

evidence to the committee, especially those who shared their experience of conversion practices. Their bravery in stepping forward and telling their stories is not only vitally important but admirable and courageous. They will help us to reshape the future and I thank them for that.

**Dr Alasdair Allan (Na h-Eileanan an lar)** (SNP): As we have heard, the committee noted that many of the religious organisations that it heard from are in favour of a ban on conversion therapy practices, although views are varied, of course. It is therefore important that we always make it clear that the measures are not about restricting religious teaching or preaching. Does the minister agree that, in seeking to end the demonstrably harmful effects of the so-called therapies that we are talking about, it is important that we get representation from a broad range of religious and other organisations, in order to achieve the best possible legislation?

The Deputy Presiding Officer: I can give you the time back, minister.

Christina McKelvie: There are a number of points in my speech that will address Alasdair Allan's questions and, I hope, reassure him. We recognise the existing legal protections of the rights to freedom of religion, expression and a private and family life, among others. The expert advisory group will explore how legislation can best protect and support people who need that, while ensuring that freedoms are safeguarded. I will come on to that after explaining a little bit about the group and who will be on it.

As members know, the establishment of the expert advisory group on banning conversion practices was announced last November by the Cabinet Secretary for Social Justice, Housing and Local Government as a means to inform our approach to banning conversion practices as far as possible within devolved competence.

We want the membership of the group to be as intersectional and representative as possible, while ensuring a focus on actions and outcomes, given the pace at which it will be working. It will be a short-term working group, after all. Therefore, the membership includes individuals who are experts in their field from LGBTI organisations, and belief organisations and communities, the mental health profession, the legal profession, human rights organisations and academia. Importantly, the group will include members who have personal experience of conversion practices.

On timings for the expert advisory group, we plan to convene its first meeting at the end of this month. The short-life group will work until the summer, when it will report its findings and recommendations to the Scottish Government.

Following that, we will begin a process of public consultation that will run until autumn. A bill team will then be set up to work towards introducing legislation by the end of 2023.

Our expert group will work at pace. As I have said, it will consider all the relevant evidence that is currently available, including the committee's response, the UK Government's consultation responses and other existing research, to ensure that these harmful practices are banned.

One of the questions that we have been asked, and which has been asked in the committee inquiry, is on definition. There are a lot of questions around that. A key aspect for consideration by the expert group will be determining what practices should be prohibited. I agree with the committee that clarity is needed on what would be encompassed by a legislative ban. That must be crystal clear for organisations and individuals so that they understand their responsibilities and protections.

Pam Duncan-Glancy (Glasgow) (Lab): Will the minister set out how she sees the expert group working with the evidence that has been gathered by the committee?

Christina McKelvie: Most definitely. Some of the work that we will do with the expert group will allow it to work out how it wants to take that forward. We will set out at the first meeting the terms of reference and the work that it wants to do. There is a lot of work there. We are keen for the group not to duplicate work, because the committee has done a huge piece of work that I have described as the cornerstone of our approach going forward. There are a lot of academic studies on the subject as well.

The group was in the process of issuing invitations. A lot of people had to give a bit of thought to joining the group, so we want to make sure that they are all in place, then I will be able to announce who is on it. The breadth and depth of the group will show that it will be able to respond to those challenges and come up with ideas to fix them and resolutions.

A ban will bring an end to the abhorrent practices that seek to "correct" sexual orientation and gender identity. That view is echoed by the memorandum of understanding on conversion therapy in the UK, which supports positive practices that assist individuals as they explore and accept their gender identity and sexual orientation at their own pace. The expert group will explore what that means in full, taking into account established definitions from organisations such as the United Nations and considering definitions from foreign jurisdictions. I hope that that answers Pam Duncan-Glancy's question about the areas that we will explore.

I turn to faith and belief, because I know that there are a lot of concerns and that issues and questions have been raised on the matter. I want to be clear that, while we build our understanding of how we can best protect and support those who are experiencing these horrendous practices, we must be mindful that freedoms—including freedoms of speech, religion and belief—are safeguarded. The Scottish Government welcomes and acknowledges the importance of engaging with faith and belief organisations, which is why the expert group's membership includes faith and belief representatives.

Alexander Stewart (Mid Scotland and Fife) (Con): It is very important that religious and faith groups are involved in the process, because they have the right to have their say on the issue. What views will be taken from the expert group about what will be achieved, and how will that be managed? It is a delicate situation to balance.

**The Deputy Presiding Officer:** Minister, can you begin winding up, please?

Christina McKelvie: I absolutely agree with Alexander Stewart that it is a delicate situation to balance, and we are very mindful of and sensitive to that. We are taking a lead from the committee's sensitive and balanced work on the issue.

It is clear that there are concerns and that there are potential impacts on religious freedom, but we will ensure that those are considered extremely carefully and sensitively. However, we are certain that the advancement of LGBTI rights and protections through ending conversion practices does not mean a regression of religious freedoms. We are mindful of the existing legal protections of the right to freedom of religion and expression, among others.

As was highlighted by Jen Ang of JustRight Scotland when giving evidence to the committee, it is essential that we nurture and promote safe spaces in religious communities and support appropriate pastoral care, because, for some, a religious setting is where they would best be able to access a non-judgmental and supportive environment in which to explore their gender identity and sexual orientation.

Pam Gosal (West Scotland) (Con): Will the member take an intervention?

**Christina McKelvie:** I have taken a few interventions and I am just about finished. I am sorry. Maybe the member could intervene in my summing up.

I will make a quick point about healthcare. I want to ensure that mental health services, religious bodies and other professionals are properly supported to provide appropriate services to people who are seeking help and advice in

relation to their sexual orientation or gender identity.

Representatives from specialist healthcare services on the expert group will be able to share their views, including on the capacity building that is needed in the sector. We also need to provide the necessary curriculum updates and training to provide support for mental health professionals to enable them to do their jobs effectively and with confidence. A holistic approach is needed.

In concluding, I welcome the committee's suggestions on non-legislative measures that need to be brought forward to protect and support victims, and I am glad that there is an acknowledgment that significant resource and planning would be required to do so. The expert group will consider those suggestions and investigate further what possible protections and support could be offered to victims and survivors.

**The Deputy Presiding Officer:** Minister, you do now need to be—

Christina McKelvie: I want to be absolutely clear that conversion practices have no place in Scotland, and I welcome hearing members' views on the committee's report and the measures that we need to take to push forward with ending those abhorrent practices.

The Deputy Presiding Officer: I am afraid that we are slightly behind the clock now, so interventions will have to be incorporated into the time for speeches.

15:55

Alexander Stewart (Mid Scotland and Fife) (Con): I am grateful for the opportunity to open the debate on behalf of the Scottish Conservatives, and I welcome the fact that the issue has been given parliamentary time this afternoon. I am sure that that view is shared by other members of the Equalities, Human Rights and Civil Justice Committee.

The case for introducing a ban on conversion practices has been one of the key bodies of work that the committee has focused on in this parliamentary session. I thank the many individuals, charities and campaign groups that provided evidence to the committee on the issue. In particular, I want to talk about the individuals who were willing to share their experiences of conversion practices. Those experiences were hard to hear, and sharing them was hard for those individuals to do. I remember clearly that one survivor of the practices described conversion therapy as "horrendous" and "threatening", and that he spoke of how badly his mental health had suffered because of it-it almost drove him to a nervous breakdown.

It will, no doubt, have been difficult to provide such personal testimonies of trauma, which are very important. We received some very trying testimonies. As I have said, it was not easy for witnesses to give us those testimonies, but I give them full respect for their attitude and their courage in bringing them to the committee and ensuring that we heard first hand how they had been treated and how the abhorrent practices took place. The Conservatives are therefore clear that we need to look forward to a ban on conversion practices.

Much of the evidence that the committee heard points to a comprehensive approach to a ban being preferable. Some medical professionals, for example, spoke about the possibility of a less comprehensive ban resulting in loopholes, which would cause concerns. It is clear that any proposed ban should mirror existing bans on acts such as female genital mutilation, in that it is not considered possible to provide legal consent to those practices.

Although I would welcome a comprehensive ban on the practices, it is perhaps disappointing that progress to get here has been a bit slow. I acknowledge that the Scottish Government has established an advisory group, and I am delighted that we have had some clarity on where we are with that, as it was announced back in November, and we are now in March. That has taken some time, but I am delighted that the minister has clarified what will happen.

Our committee report makes it clear that the Scottish Government should not wait for the UK Government to act before introducing legislation. We have now received confirmation that the UK Government ban will apply to England and Wales only. Despite that, it is important that we talk about the possibility of cross-border frameworks, which will no doubt be important. The UK Minister for Equalities, Mike Freer, has given assurances that the UK Government will work constructively with the Scottish Government in implementing the ban on conversion practices and therapy. Given that a comprehensive ban will include criminalisation of any practices falling within the definition of conversion therapy, it is very important that legislation in the devolved areas is clear.

The time to act is now, not later, and further steps need to be taken to ensure that that is the case. Given the consensus that a ban on the practices is needed, we should ensure that we move forward at pace. I look forward to seeing that happening.

There are already international examples of where such a ban has been put in place and is working. We know that 13 countries have already introduced a ban in some form, and I welcome the

Government's statement that it will consider existing examples of good practice. Scotland wants to ensure that it has the same opportunity to set an example, so it is important that, as we go forward, regardless of what is happening with the UK Government's legislative process, the Scottish Government does everything possible within its capabilities to ensure that we can look forward to banning the practice.

I am pleased that Parliament has given us the opportunity to debate the issue today, because it is vitally important that we send a very strong message from the chamber to the individuals and organisations involved that we will not accept what has been the practice in the past. We want to ensure that there is a constructive debate on the whole topic, and it is therefore good to see that there is cross-party consensus on banning this abhorrent practice. It is vitally important that the ban is effective, comprehensive and timeous in what it is trying to achieve.

As we move forward, I and the other committee members stand ready to scrutinise the Government's progress on the issue and to ensure that any forthcoming ban meets every one of the criteria that we have set out. That is important, because we said to the individuals who gave evidence that we would take on board their views and opinions in order to protect individuals in the future, and a ban will certainly do that.

16:01

Pam Duncan-Glancy (Glasgow) (Lab): After many months of committee work on this issue and on developing the report that is before Parliament, I am pleased to lead the debate for Scottish Labour today. I pay tribute to the hard work of Blair Anderson and Tristan Gray, who brought the petition on conversion practice to the Parliament and who both spoke powerfully in front of the committee on the need for a full and comprehensive ban on conversion practices. Their motivation, persistence and dedication to ending these hateful practices in Scotland is the reason why we are here today discussing the report, and I hope that we will be discussing real legislative changes in the not-too-distant future.

I share my deepest thank you with Blair and other survivors of conversion practice for their bravery in sharing their stories with the Equalities, Human Rights and Civil Justice Committee, which reinforced to us the horror of what can happen, and is happening, in the absence of legislation. When we talk about conversion practice, we may think that it happens in faraway countries or in places that we associate with regressive equalities and human rights laws—in cults, perhaps, or in vehemently hardline religious settings. That is why hearing from survivors has been so important,

because the reality is that it is happening here in Scotland, and the reality of where it takes place and how it manifests is far more complex. For example, Blair's experience happened at the hands of his parents, in his own family home. Another testimony that I heard spoke of conversion practice that took place over several years in an evangelical setting, by people whom the survivor described as having

"Some of the biggest hearts I'd ever encountered."

These things are happening in small places close to home, which, as Eleanor Roosevelt reminds us, is exactly where our human rights begin. This issue is about human rights—that is why it matters and why it is incumbent on us to act. For people out there who are living through that trauma right now, things are moving slowly and not at the pace that is required to prevent what is in effect a process of torture. We cannot tolerate that. The committee has heard a wealth of evidence on the practices that continue to take place in Scotland and, as a country that prides itself on its progressive values, we would fail in our duty to act if we held off any longer. I am pleased to hear the commitment from the minister today that we will move apace.

The Scottish Government has previously argued that it must wait and see what the UK Government legislation that is due to come forward in this area looks like before it introduces its own legislation. In that respect, the evidence that I have seen from the UK Government so far worries me. The Prime Minister himself has spoken of "gay conversion therapy", suggesting that, although a ban might come, it would not be the full and comprehensive ban that we need. I make it clear that any legislation must include all non-affirmative forms of therapy for trans people, too. We heard in our evidence sessions that trans people are likely to be those in the LGBT+ community who are at most risk from such practices. It is crucial, therefore, that a ban ensures that they are protected and that it applies to both sexual orientation and gender identity.

Looking to international best practice, I note that the Change or Suppression (Conversion) Practices Prohibition Act 2021 in Victoria, Australia, sets out three criteria to define conversion therapy: that the conduct is directly targeted, that it has taken place on the basis of someone's sexual orientation or of their gender identity, and that the conduct has a predetermined outcome to change a person's behaviour.

My vision of a full and comprehensive ban, informed by much of the evidence that our committee heard, would have to go at least as far as that to be a worthy piece of legislation that ensures that the abhorrent conversion practices that fulfil those criteria are prohibited and

criminalised. I am clear that a ban in that framework must protect affirmative approaches and alleviate concerns that medical or religious professionals could be punished for offering therapy like that. The committee heard that affirmative therapy

"is about holding the space for the individual to find out who they are and ensuring that they can come to that decision themselves"—[Official Report, Equalities, Human Rights and Civil Justice Committee, 14 September 2021; c 5.]

in a supportive way. That, I believe, is crucial, as it outlines the clear difference between those vital supportive conversations, which allow people to grow and develop themselves, and the practices that we would be seeking to ban—practices that force someone down a particular route.

For the future legislation to deliver on its aims, there must be no room for loopholes or exemptions. It must be comprehensive and watertight. The UK Government legislation is likely to fall short in that respect. So far, there has been a worrying indication that the UK Government believes that consent to conversion practice is possible. Allowing manoeuvre or interpretation in that area would allow for consent to be used as a defence. Survivors have been clear: "consent" is a misnomer, a red herring and a completely misleading use of terminology. As Blair Anderson so strongly put it, people "cannot consent" to being tortured or abused.

We have closed such loopholes in legislation before in the laws banning female genital mutilation and forced marriage. We can and must do it again. In this case, as we move forward with what I hope will be a concrete piece of legislation in the coming period, we must do the same here.

We have no time to lose on this. I urge colleagues across the chamber to act with impatience and to act here, in this place, to end conversion practices as soon as possible.

16:06

Willie Rennie (North East Fife) (LD): The Equalities, Human Rights and Civil Justice Committee has done some excellent work, and Joe FitzPatrick delivered his speech with passion and care. The committee's report is good, sensitive and thorough. The whole Parliament should be grateful, as this is a committee doing its work at its best.

A survey of 108,000 LGBT+ people in the UK showed that nearly one in 13 have been offered, or have been compelled to receive, conversion therapy or practice—"therapy" in their mind; "practice" in ours. That number rose to one in seven among transgender people. I agree with Joe FitzPatrick on this: I think that the word "therapy" is incredibly misleading and extremely

inaccurate. Such practices are not a benefit, so they are not a therapy. The author and sociologist DaShanne Stokes said:

"It's not conversion 'therapy', it's conversion brainwashing."

We should say what we mean.

Some of those who facilitate this practice do so out of a misguided idea that they are somehow helping, but the evidence is to the contrary, and it is abundantly clear. Those who have suffered through it have spoken of the negative effects on their lives and the trauma that it has left them with.

The mental health charity Mind has said that this practice

"can cause a great deal of psychological distress",

often leading to long-term

"feelings of isolation and low self-esteem."

As a result, far too many people are left to struggle with anxiety and depression, which in some cases results in self-harm and even suicide.

People coming to this therapy are often at a vulnerable point in their lives. Just when they are most in need of a space to share their thoughts and feelings openly and freely, they are being met with judgment and ignorance. People are being let down. As Pam Duncan-Glancy said, the situation is urgent.

Any practice that seeks to suppress or change a person's sexual orientation or gender identity is a harmful practice, and it is quite baffling why that is still happening in Scotland. I therefore support the committee on the adoption of the UN definition.

My party has a proud tradition of fostering diversity and championing the rights of the individual to privacy and autonomy. We believe that people should be able to live their lives as they see fit, unencumbered and without intrusion. Those principles are crucial to the protection of LGBT+ orientations and identities, which is why we believe that conversion practices should be banned entirely. As is shown in the committee's report, six countries and 20 US states have already enforced a ban, so what are we waiting for?

I was pleased with the minister's response and the constructive engagement between her and the committee. That bodes well for getting this right. I do not think that we should wait for UK legislation. We have done that before, but we should just crack on with it. We should bring forward legislation now to rid ourselves of such practices.

I will finish with the words of Carolyn, a trans woman in her 70s who has written of the impact that the practice still has on her life years later:

"Whenever I remembered the treatment I'd had, I would start physically shaking. In that sense you could say that the therapy 'worked', in that it affected my body. But, in terms of my mind, and my thoughts, it only made me hate myself more.

It was only when I retired early—aged 55—that I felt I could live openly as myself. And while things got so much better, I'd still have flashbacks from my conversion therapy sessions 40 years later."

For Carolyn and so many others, let us just get this done.

The Deputy Presiding Officer: We move to the open debate.

16:11

Fulton MacGregor (Coatbridge and Chryston) (SNP): It is a great pleasure to speak in the debate, which has, so far, been very consensual across the chamber. As a member of the Equalities, Human Rights and Civil Justice Committee, I associate myself with the words of the convener: there should be little argument about whether conversion practices should end in Scotland. Such practices are abhorrent, cause undue harm and trauma, and have absolutely no place in today's Scotland.

I welcome the Scottish Government's commitment, as outlined by the minister, to introduce legislation to ban conversion practices by 2023. The UK Government's proposals do not go far enough in protecting people in Scotland, so we need to do what we can in this chamber.

The committee has heard extensive and, often, emotional and harrowing testimonies from those who have survived conversion practices in one form or another. Other members have already spoken eloquently about those testimonies. Like them, I put on record my thanks to those individuals, because I know that it could not have been easy for them. I hope that what they told us will shape legislation that will protect others.

As others have done, I encourage the Government and, ultimately, the advisory group not to duplicate the work that we have done, because we do not want people to have to share their stories again and potentially relive their trauma. The minister has already acknowledged that issue.

It is important that the advisory group takes into account, as the committee did, international examples of best practice, such as in Victoria, in Australia, as Pam Duncan-Glancy mentioned. We can learn from those jurisdictions because, as we have heard, things could perhaps have been done differently and they are now looking to make changes. If there are international examples of best practice, we can look to them.

Unfortunately, the truth is that such practices very much still exist in Scotland. In 2018, the UK Government's national LGBT survey found that 5 per cent of LGBTQ+ people had been offered but did not proceed with conversion therapy and that a further 2 per cent had undergone conversion therapy.

As we know, the Scottish Government is committed to ensuring that everyone, regardless of their sexual orientation or gender identity, is safe from such horrendous conversion practices in Scotland. As the minister said, there is absolutely no credible evidence that the practices even work. However, it is not about whether they work; at its core, the notion that we can change someone's sexual orientation or gender identity is simply wrong.

Practices that encourage suppression and denial are also wrong and, ultimately, cause individuals great harm, as we have heard. They impact people's mental health in a multitude of ways. Being LGBTI is not a choice, so we cannot treat it as such.

I am pleased that the committee's report takes the view that the definition of conversion practices in any proposed legislation should make it clear that there is no such thing as informed consent to such practices, and that that cannot be used as a defence by those carrying them out. Pam Duncan-Glancy quoted one of the committee's witnesses, who said that

"people cannot consent to torture."—[Official Report, Equalities, Human Rights and Civil Justice Committee, 7 September 2021; c 8.]

Evidence shows that those who are said to consent are actually coerced and do so under significant pressure from others.

It is also important to highlight the point that most faith leaders support a ban on conversion practices, as that is the area of most discussion. Legislation should not restrict ordinary religious teaching or the right of people to take part in any prayer or pastoral care to discuss, explore or come to terms with their identity in a non-judgmental and non-directive way. In fact, the committee heard evidence that, for many survivors of conversion practices, their faith was and is a big part of their identity. They have often felt forced to choose between faith and their sexual orientation or gender identity. That is clearly wrong and should not happen.

Some of the faith leaders who had concerns about a ban on conversion therapy shared their views that the practice was abhorrent, but their concerns were about the technicalities of how it might be banned.

**The Deputy Presiding Officer:** I am afraid that you need to conclude now, Mr MacGregor.

#### Fulton MacGregor: Thanks, Presiding Officer.

It has been a short debate and there is more that I could have said. I welcome the committee's report and the Government's response to it. I look forward to a day when the abhorrent practice of conversion therapy is banned.

16:16

Meghan Gallacher (Central Scotland) (Con): As we have already heard from voices around the chamber, there is consensus among MSPs on banning conversion practices in Scotland. Should a ban on conversion therapy be voted through, Scotland would follow 13 other countries worldwide that have already banned the practice,

including Brazil, Norway, Switzerland and several

I share the view of many MSPs that conversion therapy—or, as it is sometimes referred to, "gay cure therapy"—is wrong and has no place in modern-day society. Therefore, it is upsetting to learn that, as Fulton MacGregor highlighted, as recently as 2018, the national LGBT survey found that around 5 per cent of LGBT respondents had been offered conversion therapy

"to 'cure' them of being LGBT".

regions of Spain.

Being gay, lesbian, or bisexual is not an illness. People within the LGBT community have nothing to be ashamed of. In fact, they should be able to love who they want and be comfortable in their own skin.

In preparation for the debate, I read statements from conversion therapy survivors such as Justin Beck, who realised that he was attracted to men and turned to his place of worship for guidance. He put himself forward for conversion therapy and was left emotionally traumatised by the experience, which he described as "enforced repression". Justin is, of course, only one example of many individuals who have been subjected to conversion therapy. We must continue to listen to people who have endured such practices to ensure that the Parliament finally implements the ban.

The persecution of LGBT people has a horrific and dark history, and we must continue to consider and debate ways to help and support members of that community. One way to do that would be to consign conversion therapy to the history books during this session of Parliament.

In October 2021, the UK Government announced that it would consult on proposals to implement a legislative ban on conversion therapy across England and Wales. The proposed bill would criminalise talking conversion therapy, thus preventing any non-consensual attempt to convince or coerce a gay person to be straight or

vice versa. My understanding is that the Scottish Government has taken a different approach to banning conversion therapy, as is its right as a devolved Administration. Discussions have taken place between the UK and Scottish Governments to ensure consistency in the approach to that important issue.

It is also welcome that, after hearing robust evidence from the Equalities, Human Rights and Civil Justice Committee, the Government has set up an advisory group to investigate how to implement the ban in Scotland. I acknowledge the minister's comments on religious freedoms and the concerns that religious groups have raised. It is a delicate situation, and I hope that the advisory group will continue to consider and engage with all views on conversion therapy as we move forward.

As my colleague Alexander Stewart rightly highlighted, it now falls on the Scottish Government to ensure that progress is made to prevent yet more LGBT people facing the humiliating and mentally traumatising practice of conversion therapy. However, as the group will not meet until the end of the month, we still need reassurance from the Scottish Government—the minister has given some of that already—that the matter will be treated with the urgency, care and respect that it deserves, especially as this issue was first raised with the Scottish Parliament in 2020 through a petition that secured more than 5,000 signatures. We are now two years down the road. Survivors and campaigners will be eager to see the ban put in place as soon as possible.

There is overwhelming support across the Parliament and throughout our communities to end conversion therapy practices. Therefore, I join calls from across the chamber to introduce the bill as quickly as possible and to ban conversion therapy in Scotland.

16:20

Karen Adam (Banffshire and Buchan Coast) (SNP): I shall certainly never forget the work that the Equalities, Human Rights and Civil Justice Committee has done on the report over the past few months. It was not only my first substantial piece of work as an MSP and committee member, but is vital in making progress towards become a more inclusive society. Mostly, however, I will remember the work because of the evidence that I heard during our sessions.

I thank everybody who came and gave evidence to the committee, especially those who shared their lived experience. In particular, I mention the End Conversion Therapy Scotland campaign, which has worked tirelessly to ensure that the harmful practice comes to an end here, in Scotland.

I know that there are some out there who believe that LGBT conversion practices will rectify sexual or gender identity, but to rectify something insinuates that it needs fixed. Generations of LGBT people have been made to feel less than, or that there is something fundamentally wrong with who they are, simply for being same-sex attracted or discovering that their gender identity does not correspond with the assumed gender that they were assigned at birth. In that regard, the only thing that is wrong is how societies across the world inflict harm on LGBT people simply for existing.

To get an idea of how unreasonable conversion practices are, I ask members to imagine a world in which cis-gendered straight people were made to undergo methods to change their sexual orientation and gender identity, and instructed to alter their heterosexual or cis-gendered lifestyle.

The psychological torture of lesbian women, gay men, bisexual and trans people cannot continue. Just as cis-gendered straight people are left to live out their lives in peace, with their sexual orientation and gender identity never being brought into question, it is time to leave LGBT people in peace, without intervention.

Not only must conversion practices in Scotland come to an end, but all of us in the chamber today, as role models, public figures and lawmakers, must take responsibility for embodying that change in our day-to-day lives by calling out bigotry where we see it, offering support to those who need it and standing shoulder to shoulder against all forms of abuse.

During one of the committee's evidence sessions on conversion practices, we heard from two people in a closed meeting. After that session, I broke down; I was in my office with my face in my hands. It was extremely hard to hear of the practical methods of torture in reality and the psychological harm that we as a society have inflicted on so many. The torment that had been endured by an individual I had just spoken with was cruel and torturous. The entire time, I could not stop thinking about how unnecessary that woman's experience was; it happened simply because she is trans. What she had needed more than anything was love, support and acceptance; instead, she endured torment and abuse in the form of gaslighting. The stigma and outdated pressures that forced that situation to happen are, thankfully, now not seen as acceptable.

Many in society now support a ban. As colleagues have said today, many medical and psychology professionals, regulatory bodies such as the British Medical Association, and most faith leaders support a ban. I am delighted that the hard-working campaigners have been heard and that the voices of those with lived experience have

been listened to. I am also delighted to see the work that the Government is doing to progress a ban on those practices. However, we must take that as one part of the many that are required to eradicate any notion that being LGBTQIA+ is anything but okay.

We must move to acknowledge that being cis gendered and heterosexual is not the default setting for a human being. Not only should we not discriminate against someone based on their sexuality or gender identity, we should actively welcome and embrace into our culture here, in Scotland, the many varied and wonderful people who make up our country.

#### 16:25

Paul O'Kane (West Scotland) (Lab): I am pleased to contribute to this extremely important committee debate and to follow powerful speeches by colleagues across the chamber.

I also pay tribute to colleagues in the Equalities, Human Rights and Civil Justice Committee for their work thus far in investigating and reporting on conversion practices and for the report's recommendation of a comprehensive legal ban. As a substitute member of the committee, I have had a little insight into the power of testimony that has been offered by witnesses, particularly from those who have suffered the pain of so-called conversion therapy.

It is also right that we pay tribute to the petitioners, to End Conversion Therapy Scotland and to the many organisations that have supported them and the committee's work.

Conversion practices are dangerous and cruel, and they cause lasting damage to those who experience them. They are in violation of fundamental human rights and, as Amnesty International points out, they are

"inherently humiliating, demeaning and discriminatory".

Evidence shows that the majority of conversion practices are carried out in a faith setting. As a person of faith, I find that horrifying and, as a gay person, I have found that terrifying. I am fortunate that I have never had to experience what survivors bravely spoke about to the committee. As a survivor from Glasgow described,

"I'm not sure I could ever put into enough words the effect it has had on my life. I mean, it has nearly cost me my life on several occasions because I could not cope with who I was—who I am. I feel robbed of joy, of safety, of selfworth, of opportunity, of who I actually am, and who I should have been, free to explore and live my life. So much of what I went on to experience, and how I have struggled to navigate through life has stemmed from this."

That is hard to contemplate, because joy, safety and self-worth are fundamental to our very existence.

Although I have never directly experienced conversion practices, as a Christian, I have had some encounters that I believe can lead to those practices being employed. I have been told that being LGBT+ is a sinful choice for which conversion is required and that there is something intrinsically disordered about LGBT+ people. I have been held to different standards to my heterosexual peers. When I was young, someone at church wrote to my dad to out me, in the expectation that he would do something about the incompatibility of my faith and my sexuality. I was lucky—in response, my family has shown me only love and affirmation, but not everyone is so fortunate.

As we have heard already, 7 per cent of LGBT+ people in Scotland have undergone or been offered so-called conversion therapy, including 10 per cent of trans people. We know from evidence that that is often as part of family pressure.

I was particularly pleased to be at the committee on the day that Jayne Ozanne of the Ozanne Foundation gave compelling evidence in that regard, and I have been heartened to see the committee find that the majority of religious organisations are opposed to conversion therapy and support a ban. On an international level, I particularly praise the work of Father James Martin SJ and Dr Mary McAleese, former president of the Republic of Ireland, for their work, which has had a profound impact on me and my faith.

Today is another step towards ending conversion practices in Scotland, but we now need a bill for a comprehensive ban. I note what the minister has said with regard to that and I associate myself with the comments of colleagues on the need for urgency. However, legislation alone is not enough. We need resources and support services for victims and survivors, as well as a comprehensive awareness campaign on the unacceptability of conversion practice.

For now, for LGBT+ people of all faiths and none, I finish with a quote:

"I am fearfully and wonderfully made"

and so are you.

#### 16:28

John Mason (Glasgow Shettleston) (SNP): Thank you for the opportunity to speak. I welcome the committee report and I am also happy to support a ban. We should start with what we all agree on, and I hope that we are all against any attempts to force people to change what they are, and also against any use of beating or other types of violence.

However, there is likely to be some disagreement about the definitions and terms that

are being used. For example, in many religious circles, conversion is seen as a positive word. It means turning around and is good if someone is turning away from something bad, such as alcohol or drug abuse. One of the best-known conversions was that of St Paul, who turned from persecuting Christian believers to becoming one himself, and most people would see that as positive.

We also need to draw a distinction between sexual orientation and sexual activity. The main thrust of Bible teaching is about activity. For example, the Bible teaches that sexual relationships should be within marriage, although there is also teaching against attitudes such as lust. Whereas society and our legal set-up allows multiple sexual relationships, Christian teaching encourages sexual relations with only one person and only within marriage.

We can, I presume, accept that a religion or a club or association should be free to have its own teaching above and beyond the law of the land, whether that be a dress code in a bowling club or nightclub or teaching about alcohol or sex in a religious setting. If a Christian leader engages in a sexual relationship outside marriage, as I know has happened recently with a prominent church leader in Canada, that person would be expected to stand down and to repent their wrong actions, despite no Canadian law having been broken.

As convener of the cross-party group on freedom of religion or belief, I urge Parliament to be careful about interfering too much with religious beliefs and practices. That certainly applies to the practice of prayer, which is primarily about a person's relationship with God. I accept-and Jesus himself taught—that prayer can be abused and can end up being more about speaking to people than about speaking to God. However, at its heart, prayer is about an intimate relationship with God and includes bringing problems to him and asking for his wisdom in dealing with them. Only God knows our hearts, our true intentions and our deepest thoughts, so the state must be wary of interfering in someone's relationship with God through prayer, whether that be an individual praying, two people praying together, or prayer in a group setting.

Self-control is another aspect. In the New Testament, there are nine great values, which are known as the fruits of the Holy Spirit. They include love, joy and peace. One of those is self-control. Therefore, Christian teaching and prayer would not so much be about right or wrong sexual orientation. If that is what someone is, that must, to a large extent, be accepted.

However, the need for self-control and choosing not to put your thoughts or desires into action is key. I might have a natural desire to eat the attractive food that I see. Many of us are tempted to eat too much chocolate or to drink too much alcohol. That is where self-control comes in. We sometimes need to say, "No" to ourselves. Following on from that, any repentance and prayer would be focused on wrong activities, rather than on wrong orientation. It was wrong to drink so much alcohol: how can I change? It was wrong for me to have sex with various people: how can I change?

I am broadly happy to support a ban on conversion practices, but on the condition that we are careful about definitions in the legislation and that we do not attempt to interfere in freedom of religion or belief.

16:33

Gillian Mackay (Central Scotland) (Green): I thank the Equalities, Human Rights and Civil Justice Committee for its work in gathering evidence and compiling the report into ending conversion practices in Scotland. I thank campaigners, the witnesses who gave evidence and all those who have written to their MSPs to express support for decisive action.

When we see significant moments of progress for LGBTQ+ people, such as the repeal of section 28 or the bringing in of marriage equality, it can be all too easy to think that the job is done and the fight for equality is won. It can be easy to forget all those who have been left behind or forgotten in those moments, and those whose stories we never get to hear.

By definition, conversion therapy is silencing. It tells LGBTQ+ people that who they truly are must be shut up and hidden away, that they are broken and need to be fixed, that they are sick and must be cured, and that they are wrong and should be converted.

I hope that we can all speak today with one voice and without reservation or hesitation to all of Scotland's LGBTQ+ people and especially to those who are not yet able to say this aloud for themselves. You are not broken. You are not sick. You are not wrong. You do not need to be fixed, cured or converted, because who you are is perfect. We will protect you from those who would try to change you.

Although we have seen progress on LGBTQ+ equality in Scotland during the lifetime of the Parliament, in recent years we have also seen a deeply concerning rise in transphobia in Scottish public life, and especially online. At the heart of homophobia, biphobia and transphobia is hatred and fear of those who are different—of those whose sexual and gender diversity goes against what has often been considered to be the norm. Conversion therapy puts that hatred and fear into practice. It tells people—and often forces people—

to shut up, deny themselves and go back into the closet.

One of the most common concerns that I have seen in public debate in recent months is about the impact of a ban on conversion therapy on trans people, and especially young trans people. Some people seem to be concerned that a ban on conversion therapy will criminalise parents who are trying to support children who are struggling with their sexuality or gender identity, or that we will be complicit in forcing confused young people to be trans. That is not true.

The idea that there is a big conspiracy or agenda to turn young people trans is a lie that is designed to scaremonger. It is one that we have heard before against cis lesbians, gay and bi people in the debates around section 28 and equal marriage. It is designed to stir up fear and anxiety about those who are different. What was true then is still true now: LGBTQ+ people are not trying to turn people's children gay or trans. They are trying to build a world where gay or trans children are safe, loved and accepted.

I am grateful to the committee for spelling out so clearly in its report the reality of affirming care and what it means for young people. It does not mean that anyone will try to turn someone into something that they are not. It means that people who are struggling with their sexuality or gender identity will be given a safe and accepting space in which to come to terms with who they truly are, without prejudice or pressure.

I hope that, one day soon, we will be not just debating conversion practices but passing legislation that ends them for good. Scotland's young people deserve a country in which they can grow up to be who they truly are, and that requires a conversion therapy ban that protects all of Scotland's LGBTQ+ people.

16:37

Emma Roddick (Highlands and Islands) (SNP): Presiding Officer, as the first out parliamentarian to represent the Highlands and Islands, the issue is very close to my heart and it strikes very close to home. As you represent part of the region, I know that you, too, understand how important greater acceptance of LGBTQI neighbours is, particularly in rural and island communities.

The implication of conversion therapy is that my sexuality and the sexualities and gender identities of many of my friends and others in the community are wrong or something that should or could be "fixed", and that is offensive to me. As my colleague Mr FitzPatrick outlined in his opening remarks, "therapy" is an inaccurate way of describing conversion practices. A member of my

team told me today that the word "therapy" derives from the Greek word for healing. Conversion practices are just the opposite, because they inflict severe pain and suffering, resulting in long-lasting psychological and physical damage.

As someone with mental health issues brought on by trauma, it is disgusting to me that this is something that anyone would wish to debate. Anyone who feels that there is any defence for openly stating that anyone should be legally free to cause harm—and we know that conversion therapy does cause real harm—to someone else because of something that they cannot choose or control should be deeply ashamed of themselves.

I echo the important point that other members have made, that many people of faith firmly believe in ending conversion practices and supporting LGBTQI people. Like many members, I have been contacted by some who are concerned that an end to conversion practices will infringe on their right to religion. I respect people's rights to have a religion and to hold personal beliefs, and I respect that religion often influences those beliefs. Attending Scripture Union and being part of a religious community had a huge impact on the development of my moral compass and my world views.

What I do not respect are views that I do not consider to be deserving of respect—namely, views that I and people like me are not worthy of respect because of who we are, that we should not have a right to bodily autonomy or that our human right not to be subjected to torture or degrading treatment should not be upheld. I do not respect hate and I do not respect the use of religion as a shield for bigotry.

I was taught Christianity by some of the kindest people that I have ever known, who taught me to accept and forgive and that it was not for me to pass judgment on others. This is not a matter of freedom of religion. Homophobia and transphobia are not religions. The violence of psychologically tormenting LGBTQ people is not a protected belief. The right to hate others has nothing to do with the Christianity that I know.

Self-control is an admirable virtue only when the thing that someone is trying to control is inherently wrong. Being a queer person is not wrong; it is beautiful. No queer person should be told to control themselves. I suggest that those who feel the need to try to control and change others, to the point that they want to intervene in their human rights, should show some self-control and consider whether it is their place to judge, or to decide that someone else's behaviour or sexual orientation is something to be fixed. People are gay. People are trans. Get over it.

I will finish by directly addressing my colleagues in the Scottish National Party and all those who share my aim to create a better Scotland. We are rightly proud of Scotland's historic record on LGBTQI rights. Such a basis for the Scotland of the future makes me so hopeful about the future of our country. We cannot allow ourselves to slip or to slow down in our determination to make the country the best that it can be. We must follow the example of France and Canada and ban conversion practices in Scotland for good.

#### 16:41

Craig Hoy (South Scotland) (Con): I thank the Equalities, Human Rights and Civil Justice Committee for its report, and I thank the minister for the commitment that she has given today. As a gay man, I say at the outset that the process of coming out and coming to terms with sexuality is not simple. Different people take very different routes on the same journey. For some, coming to terms with being gay will be a straightforward step. However, for others, the path that they take will be far more difficult to travel. Many will engage the support of family or friends, and some might seek counselling. However, that should never involve counselling to find a cure, and it should never involve coercion, because there is no illness to treat and no abnormality to be normalised.

Arguing against people being gay in Scotland is like arguing against the Scottish weather. The young gay men and women who walk past—or into—the Parliament every day are as much a part of the natural fabric of Scotland as the drizzle that falls on them all too frequently. Trying to influence the weather would prove futile and ineffective; so, too, would seeking to influence people's sexuality—even though, in the past, the state, the law, religion and, sometimes, the medical profession have tried to do so. Since then—thankfully—society has changed. However, the views of some have not.

People have a right to believe different things. We cannot and should not legislate against that. However, we need to legislate to protect people from its consequences. That is what we are debating.

Conversion practices are dangerous, especially—albeit not only—if coercion is involved. They can damage mental health and scar people's lives irreparably, as Willie Rennie said. They rely on discredited practices that have for decades been rejected by medical and mental health professionals. However, sadly, such practices are not uncommon. As we have heard, 5 per cent of respondents to the national LGBT survey in 2017 said that they had been offered conversion or reparative therapy and a further 2 per cent had undergone such therapy.

A ban on conversion therapy is overdue. I welcome the minister's commitment, and I hope that the Government will move swiftly. For any individual or organisation to try to change or suppress someone's sexuality is fundamentally wrong. However, not all agree. I looked closely at the words of the Christian Institute, which warned that laws on conversion therapy could put at risk

"prayer, preaching, parenting and pastoral care".

I will look with interest at how its opposition will be sustained—particularly as I hope that the legislation will carefully address and protect religious freedoms.

I welcome the committee's report and I understand the need for urgency, but I hope that the safeguards that we put in place will be broadly aligned across the UK. I therefore hope that this Parliament will look closely at the recommendations by and the laws that come forward from the UK Government, which will apply in England and Wales. If we determine that that legislation does not go far enough, we, in this Parliament, can legislate in that regard.

The words of conversion practice survivors influenced the committee's report. I thank those brave individuals and the groups involved for opening up and sharing their stories.

Today, the advertisements that we see on television often feature lesbian and gay couples. Being gay no longer requires a person to tell lies or feel guilty or abnormal. Nobody should feel the need to change who they are, and nobody should pressure them into doing so. I look forward to the UK joining other progressive nations in introducing a comprehensive ban on conversion practices.

The Deputy Presiding Officer: We move to the closing speeches.

#### 16:45

Pam Duncan-Glancy: I welcome the debate that has taken place today, and I am pleased that there is cross-party support for legislation to be introduced at pace for a comprehensive ban on conversion practices. I particularly welcome the minister's commitment to end the practices soon.

I thank my committee colleagues for the passion and fervour that they have brought to scrutinising the issue. I am proud to associate myself with their words today. I thank Joe FitzPatrick, in particular, for steering us through the work and for setting out the importance of the difference between therapy and practice. I agree with him, Willie Rennie, Emma Roddick and others that such practices are of no benefit and therefore cannot be considered to be therapy.

I strongly welcome Gillian Mackay's words that LGBT people are not wrong and do not need to be converted. I also thank her for clarifying what the ban will and will not do in relation to trans people. I also thank the committee's convener for setting out the committee's strong support for a comprehensive ban.

I note comments that have been made to acknowledge the concerns that some religious organisations have raised about potential conflict. I will address some of those concerns. I state clearly that undermining religious relationships and support is not at all what legislation would seek to do. Many people spoke to the committee about the need to ensure that they can live how they are and embrace their faith. The legislation would seek to create the best environment in which religion could remain a positive influence in people's lives.

Although much evidence of conversion practice has shown that it often takes place in religious settings, it cannot be ignored that religion remains a strong factor in many people's lives and that, for those whose sexual orientation or gender identity does not marry up to their religious views of themselves or those around them, it is an incredibly difficult situation to feel that there is a need to choose between the two things. My colleague Paul O'Kane said that it is "horrifying" to have to make that choice. We must protect belief by supporting people to continue to express it, as well as protecting LGBT people's rights to be who they are. I thank my committee colleagues, including the convener, for setting out that the committee shares that view.

I often speak in the chamber about my commitment to human rights. We should all share that commitment, and I know that many of my colleagues in all parties do. I offer reassurance that human rights, including protection from torture and abuse, that legislation seeks to protect do not and should not contradict each other. In this case, I am equally committed to protecting article 9 under the Human Rights Act 1998, which is on protecting freedom of thought and religion.

It is poignant to note that, far too often in recent times, the human rights of different groups have been weaponised and held up as direct contradictions to one another. That is not how human rights work. They are indivisible, interdependent and interrelated, and it is only when they are treated as such that they can be truly enjoyed.

I recognise the Scottish Government's intentions and I welcome the minister's commitment to progress a ban as soon as possible and follow many other countries in doing so, as Meghan Gallacher noted.

I also welcome the minister's commitment to use the committee's evidence as a cornerstone of the Government's approach. The evidence that the committee heard and the report that it has produced are comprehensive and detailed. Probing for further evidence, particularly from those with lived experience, could retraumatise people. My colleague Karen Adam has spoken passionately about the impact that that evidence had on us as third parties listening to it. Imagine how hard it is to live and relive that.

Like Fulton MacGregor and Alexander Stewart, I understand the need to work with the expert group to refine the legislation, but I urge that it does not duplicate or delay work.

I suggest gently to my colleague Craig Hoy that we should not wait to see whether the UK Government's legislation goes far enough. Vic Valentine from the Scottish Trans Alliance told the committee that we have the powers to act now without waiting for the UK Government to act. They said:

"the bulk of the legislative aspect is about the criminal ban, and that would be fully devolved to the Scottish Parliament."—[Official Report, Equalities, Human Rights and Civil Justice Committee, 14 September 2021; c 7.]

This Parliament has been bold and progressive before—in fact, we are being bold right now in taking forward progressive legislation on other issues. We can and will be bold again.

Let us not wait any longer. All five Holyrood parties committed in their election manifestos to a ban on conversion practices. That commitment has been reiterated in the chamber today. The will is here and the motivation is here. Let us have legislation and consign conversion practices to the history books once and for all.

16:49

Pam Gosal (West Scotland) (Con): I am grateful for the opportunity to close the debate on behalf of the Scottish Conservatives. As a member of the Equalities, Human Rights and Civil Justice Committee, I begin, as my committee colleagues did, by expressing my gratitude to the witnesses for sharing their traumatic experiences of conversion practices. I echo what Pam Duncan-Glancy said about the bravery of survivors. Their bravery will go a long way in preventing protecting practices conversion and supporting individuals who have been, are being or could be subjected to such practices.

We heard from Karen Adam and Willie Rennie how conversion practices can cause great psychological stress and long-term harm. We heard that such practices are cruel and torturous, and Paul O'Kane said that they are dangerous and cruel and leave long-lasting damage.

The witness testimonies that the committee heard were heart-wrenching and in some cases horrifying. One witness said:

"it can totally strip away all the good bits of you and leave you desolate and completely isolated."

The witness said that, twice, when he was in his darkest moments, he went to the Forth bridge and looked over the edge.

The Scottish Conservatives believe that conversion practices are shocking and unacceptable. We therefore whole-heartedly support an effective and comprehensive ban on conversion practices. As Fulton MacGregor and Joe FitzPatrick said, such practices are not acceptable and have no place in Scotland. Conversion practices should be banned.

I appreciate that creating robust legislation can be time consuming. However, as we heard from my colleague Alexander Stewart, a ban itself and subsequent criminalisation are devolved matters. We would therefore like the Scottish Government to make more timely progress on legislation. It was welcome to hear from the minister that the Government will work with the committee through the expert group. It is essential that we act now, as conversion practices are harmful.

Throughout the consultation, I wanted to grasp how conversion practices affect minority groups. The consensus is that conversion therapy presents in many different settings and manifestations, which depend on factors such as background, ethnicity and religion. We established that there is a deep need to connect with people who are often unreachable by mainstream services. Third sector organisations such as Hidayah LGBTQI+, which are tailored to people in honour-based cultures, will be key to reaching and supporting individuals.

The committee heard that, in many cases, victims are LGBT individuals of faith, which is why striking a balance between freedom of religion and banning conversion practices is so important. Many individuals seek comfort, understanding and hope from religious settings, and we do not seek to discourage pastors or individuals from building such relationships.

We therefore welcome the Scottish Government's commitment to work alongside religious and community leaders to ensure that religious settings still feel confident in their ability to provide care for LGBT individuals of faith, while ensuring that the law is robust enough to prevent conversion practices. John Mason said that the state needs to be very wary when people are attending just to pray.

Many members, including Emma Roddick and Gillian Mackay, talked about the importance of

having the right definition, as the right definition is not always used.

Despite legislation being in place to prevent domestic abuse, domestic abuse still happens. Despite legislation being in place to stop FGM, FGM still happens. Conversion practices often take place underground and behind closed doors, so, if a ban is to be truly effective in stamping out conversion therapy, effective whistleblowing and oversight mechanisms must be in place. Such mechanisms must be implemented prior to legislation being passed.

During committee proceedings, I asked who should be responsible for such oversight and whether that should be a public body or a third sector organisation. I ask the Scottish Government to consider that at this stage.

We have heard many thoughtful contributions from across the chamber. My colleague Craig Hoy raised the importance of working co-operatively across the UK to ensure consistency in safeguards against conversion practices. As my colleague Meghan Gallacher rightly stated, we have the opportunity now to consign conversion practices to the history books.

I will round off by repeating some of my remarks. First, the Scottish Conservatives fully support a ban on conversion practices and are committed to working in a cross-party way to ensure that the legislation is effective and works for everyone—especially those who have been let down. Secondly, while legislation is being developed, mechanisms such as support services, third sector organisations and mainstream services can be actioned. Last but not least, education and awareness are key to the effectiveness of legislation, and any information campaign should be targeted and detailed.

16:56

Christina McKelvie: I thank everyone for their thought-provoking and detailed contributions. Like other members, including Karen Adam, Alexander Stewart, Pam Duncan-Glancy, Pam Gosal, Meghan Gallacher, Willie Rennie and Fulton MacGregor, I thank the people who gave their testimony to the committee. We can never express our gratitude enough to people who have been through such an horrendous situation for helping to inform us in our work and move it forward. We must always be mindful of the impact that providing such testimony has on those individuals.

I want to make a point about religious freedom. We know there are concerns about the potential impact on religious freedoms, which will be considered carefully as we go forward. My door and my ears are wide open to hear any support, understanding or ideas from across the chamber.

We will consider all Pam Gosal's points. She brings a different dynamic to our schedule of work, and we will get back to her on how we can respond to her points.

The urgency of a ban has been mentioned, as has the issue of sensitivity. I hope that we have got the balance right, although I have no doubt that members will tell me differently. Our work with the committee will help to inform that, too.

Many members know that we need to take the necessary steps, both legislative and non-legislative, to end conversion practices in Scotland. Like Gillian Mackay and Emma Roddick, I send a message to our LGBTI community: you are valued, you are not broken and you do not need fixed. We are absolutely clear that these abhorrent, harmful and discriminatory practices have no place in our society. As Meghan Gallacher told us, 13 other countries have already taken the step of implementing a ban. We will look at all those examples to learn and understand and to get our law right for the people of Scotland.

We will take into consideration the recommendations of the expert advisory group and our human rights obligations, which will inform our views on the steps that are needed to ban conversion practices. I understand the concerns expressed by Willie Rennie, Emma Roddick and others about the use of the term "therapy". That is why we have changed the language that we use to "practices". We need to make that absolutely clear. Many members, as a result of being witness to that testimony and those experiences, have reminded us how important the ban is.

By the end of 2023, we will introduce legislation within our devolved powers to bring in a ban that is as comprehensive as possible. That commitment was set out in our most recent programme for government, and it is mirrored in the Bute house agreement. I look forward to seeing the advice from the expert advisory group and others, and we will build on the recommendations from the Equalities, Human Rights and Civil Justice Committee.

**Pam Gosal:** Can the minister provide an assurance that different religious groups will be part of the expert group, including black and minority ethnic religious groups?

Christina McKelvie: Pam Gosal and I took part in the international women's day event at the Parliament, where we pre-empted each other on everything. The next line in my speech is on exactly that.

We want to ensure that everyone's voice, including those in relation to all intersections such as race, faith and other communities, is expressed. I took a note of Pam Gosal's point—she is absolutely right that those intersections are

incredibly important. Hearing as many voices as possible is important, which is why, following the work of the expert advisory group, the Scottish Government will begin a full public consultation period that will run right through the autumn.

I say to John Mason that I hear him on the need for clarity on definitions and the delicate balance that must be struck. We are very clear about that.

It is clear that we still have a lot of work to do to ensure that we build a Scotland in which everyone feels safe to be themselves. The UK Government is taking forward measures for England and Wales only. We are committed to legislating separately in Scotland to ensure that we have the right measures that fit with what Scotland needs. Like Pam Duncan-Glancy and Fulton MacGregor, I believe that the UK Government's proposals do not go far enough to offer the protections that we want. However, I am keen to work with the UK Government and others to ensure that we get it right for Scotland.

Collectively, we must get it right, and I am sure that all members in the chamber agree that we want to be on the right side of history and end these damaging practices once and for all. As we move forward with this extremely important work, I want us all to continue to think about why the ban is so important.

As was expressed most eloquently by Paul O'Kane, the protection of people who have experienced these insidious practices should be at the heart of everything that we do. We must build the necessary legislative measures to stop such practices in their tracks and ensure that the appropriate resources and support are in place for people who need help.

In response to Craig Hoy's eloquent speech, I note that we might not be able to change the weather in Scotland, but we can certainly make it impossible for the practices to ever take place again, so that future generations will know that this chapter of Scotland's history is closed.

As Karen Adam, Gillian Mackay and Emma Roddick reminded us, being LGBTI is not a choice.

As Fulton MacGregor said, it is the responsibility of us all to challenge discrimination against LGBTI people in Scotland, whether in the mainstream media, on social media or in community settings. It is essential that we preserve and promote a society in which people feel accepted and able to explore their sexuality and gender identity without feeling pressure to suppress or change who they

I am delighted to see the cross-party support and consensus in the debate. I sincerely believe that we will reach our goals, and I am sure that all members in the chamber will play their part in achieving a ban on conversion practices in Scotland once and for all.

17:02

Maggie Chapman (North East Scotland) (Green): I am pleased to close the debate on behalf of the Equalities, Human Rights and Civil Justice Committee. I thank Joe FitzPatrick and all my fellow committee members for their thoughtful work on the issue and for their speeches in the debate.

I am grateful to all the witnesses who gave evidence to the committee in person, virtually or in writing. In particular, I give special thanks to the victims and survivors who shared their experiences of conversion practices with us. Their stories were harrowing to hear and we recognise the courage that that took.

The committee can be rightfully proud of the inquiry that led to the report that the committee has published, the production of which clerks and others so expertly supported. It is significant that the committee unanimously agreed that conversion practices are abhorrent and not acceptable in Scotland, and that they should be banned. I am pleased that, from their speeches, colleagues around the chamber concur, and I thank Willie Rennie and other members for their kind words about the work of the committee.

There are a couple of issues that I want to highlight, especially given the correspondence that I and, I am sure, all other MSPs have received since the publication of the committee report. I am grateful to all the people who have written to us to express their thoughts and concerns about the impact of a conversion therapy ban, particularly on other rights such as those relating to religion and belief.

As a committee, we were conscious throughout the evidence-gathering process about the need to hear as wide a variety of perspectives as possible, including those of faith leaders, advocacy groups and national health service chaplains. A clear majority of religious organisations that we heard from are in favour of a ban on conversion practices.

We are of the view that legislation should not pose any restrictions on ordinary religious teaching or interfere in the right of people to take part in prayer or pastoral care to discuss, explore or come to terms with their identity in a non-judgmental and non-directive way. At the same time, it should be recognised that, in a significant number of cases, conversion therapy is conducted in religious settings and often through the medium of prayer. Paul O'Kane described being both

horrified and terrified by that. I agree, and I thank him for his powerful contribution.

We do not want to ban prayer; we want to ban conversion practices in whatever form. A significant number of faith and rights experts agree with us on that, as do most faith leaders. The Global Interfaith Commission on LGBT+ Lives has had almost 2,000 signatories to its declaration, which called for an end to violence against LGBTQI+ people and a global ban on conversion therapy. Signatories include 14 archbishops, 78 bishops, 100 rabbis and various religious leaders from the Sikh, Muslim, Buddhist and Hindu religions.

Indeed, the UN special rapporteur on freedom of religion or belief, Dr Ahmed Shaheed, says that

"banning such discredited, ineffective, and unsafe practices that misguidedly try to change or suppress people's sexual orientation and gender is not a violation of the right to freedom of religion or belief under international law."

We welcome that clarity that there is no conflict between freedom of religion or belief and the protection of the rights of LGBTQI+ people. I hope that that gives some comfort to Alasdair Allan and John Mason, and to any others who have potential concerns in that area.

**Dr Allan:** In case the member thinks that I have concerns, I should make it clear that I said that I consider these so-called therapies to be unacceptable and harmful.

**Maggie Chapman:** I heard that very clearly. I just noted Dr Allan's intervention on one of the earlier speeches.

We are reassured by what we have heard today, which is that Parliament will work with faith communities and organisations to ensure that, in protecting LGBTQI+ people from conversion practices, the legislation will not impinge on people's right to practise their faith and beliefs.

I want to echo something that we heard repeatedly from survivors. Often, when someone goes through conversion practices, including through prayer, it is not their faith or belief that motivates them. We heard that people who go through, or who are pressured or advised to go through, conversion practices often do so because of external pressure. Even when someone volunteers for or "consents" to conversion practices, they are often in environments where they are coerced into doing so or it is expected of them.

Some of the most common responses to the question why someone would try to change their sexual orientation are that they believed that their desires were sinful; they were ashamed of their desires; their religious leader disapproved; their friends or family disapproved; and they believed

that being anything other than straight was not acceptable in their culture.

We must protect Scotland's LGBTQI+ people from conversion practices in all forms, wherever and however those practices take place. That may mean protecting them from the coercion, pressure or force of people around them—people who love them or who are in positions of power and who would try to change the unchangeable and tell them that they are wrong for being who they are. I thank Craig Hoy, Karen Adam and Emma Roddick for their passionate words and such clear articulations of that point. Psychological torture is not acceptable.

That is why it is so important that when legislating for a comprehensive ban we make it clear that consent to such practices can never be informed and should not be available as a defence in relation to conversion practices, as Pam Duncan-Glancy, Alexander Stewart and others have stated. We also need to ensure that the legislation that is introduced is appropriately enforced, as Pam Gosal and others noted.

I will pick up on another key issue. The committee is clear that legislation alone will not be enough to address conversion practices. We need non-legislative measures, too, to protect and support victims and survivors. Such measures should include, but not necessarily be limited to, education and awareness raising across different parts of society, mental health support services for people who have experienced conversion practices, a helpline and a whistleblowing mechanism. We should also consider a separate and distinct reporting mechanism for children.

The minister outlined the process that will be undertaken by the expert advisory group. I thank her for that and for the Scottish Government's responses to the committee's recommendations. However, I stress—as others have done—that we need to move swiftly now. We must act to bring forward a comprehensive ban via a process that does not retraumatise victims and survivors who have already told their stories, and which does not duplicate the work that the committee has already undertaken. I know that the committee is keen to work closely on that with the Scottish Government. Anything that we can do to shorten the timescale that the minister outlined would be most welcome.

I thank all colleagues for their contributions this afternoon and for their passion, conviction and commitment to getting a ban enforced.

I want to speak directly to all LGBTQI+ people by repeating Gillian Mackay's powerful words. You are not broken. You are not sick. You are not wrong. You do not need to be fixed, cured or converted, because who you are is perfect. We will protect you from those who would try to change you.

Let us make good on those words and act.

The Deputy Presiding Officer (Annabelle Ewing): That concludes the debate on ending conversion practices.

Before we move on to the next item of business, I remind members of the Covid-related measures that are in place and that face coverings should be worn when moving around the chamber and across the Holyrood campus.

# Covid-19: Scotland's Strategic Framework

The Deputy Presiding Officer (Annabelle Ewing): The next item of business is a debate on motion S6M-03617, in the name of John Swinney, on "Covid-19: Scotland's Strategic Framework Update".

17:11

The Deputy First Minister and Cabinet Secretary for Covid Recovery (John Swinney): This debate will deliver on the First Minister's commitment to seek the approval of Parliament for the Scottish Government's updated strategic framework, which we published on 22 February.

Earlier, the First Minister announced that, from next Monday, 21 March, the remaining domestic legal measures—with one temporary precautionary exception—will be lifted and replaced with appropriate guidance. We will lay in Parliament tomorrow regulations to implement those changes.

The requirement to wear face coverings on public transport and in certain indoor settings will be retained for a further short period, due to the current spike in case numbers. That decision is consistent with our evidence-based approach to managing the pandemic. We will review that again in two weeks—before the Easter recess—and our expectation now is that that regulation will convert to guidance in early April.

For the debate, I will set out the key strands of the new framework and explain what it will mean for our collective response to Covid-19 in the coming months and years.

However, before I do that, I am sure that colleagues throughout the chamber will want to join me in offering our condolences to everyone in Scotland who has suffered a loss during the pandemic. Everyone in our society has been affected by the pandemic, and there have been some very dark times, but our country has demonstrated significant resilience over the past two years.

I also express my gratitude to all those who have worked so hard and sacrificed so much during the pandemic to enable our society to make the recovery that we have been able to make from the challenging circumstances that we have faced.

Despite the on-going presence of the pandemic, we believe that we are now able to look forward to the rest of 2022 with increased optimism. That has been made possible by the remarkable progress on vaccinations and new treatments. Indeed, at the heart of our framework is an increasing

confidence in our ability to achieve a sustainable return to a more normal way of life, even as we remain prepared for any future threats that Covid-19 might present. That is important, because there are many issues other than Covid-19 that we need to tackle as a society.

In the early stages of the pandemic, we focused our strategic intent on suppressing case numbers. Now, with widespread vaccination and immunity, we are more focused on reducing and mitigating wider harms than we were able to be previously. Our new strategic intent is therefore to manage Covid-19 effectively, primarily through adaptations and health measures that strengthen our resilience and recovery, as we rebuild for a better future.

Murdo Fraser (Mid Scotland and Fife) (Con): The Deputy First Minister mentioned the First Minister's announcement this afternoon that the legal requirement to wear a face mask would continue for some weeks. Can he tell us how

many people have been sanctioned for breaking that law over the past six months?

John Swinney: I cannot tell the member that. However, I can say that, when one looks at the data on compliance where there is a legal requirement for face coverings to be worn and the data on where there is a voluntary approach, the difference in the numbers can be quite considerable. Where there are legal measures in place, compliance tends to reach a high of 80 per cent, whereas with voluntary measures it tends to be about 60 per cent.

We know—this is well-established information from the World Health Organization and various other clinical advisers—that the wearing of face coverings is a significant impediment to circulation of the virus. Just now, as members will know, we are currently seeing significant spreading of the virus. That provides the rationale that has led the Government to take the decision that we have taken, and which the First Minister set out to Parliament today.

It is important, as we look at adaptations and health measures, to understand that the approach that we are taking in the strategic framework does not mean that we will allow the virus a free hand, regardless of the harm that it might cause. Instead, the framework will help us to ensure that our overall approach, and any future use of protective measures should we face a significant new threat, is, as always, proportionate and consistent with our broader purpose of protecting public health and creating a more successful, sustainable and inclusive Scotland.

I make it clear that the Government will aim to convert the remaining domestic legal requirements for wearing of face coverings into guidance as soon as it is safe for us to do so. That will help us to promote good public health behaviours, while retaining the ability to regulate in the future, should the public health situation require that. Despite the planned shift away from legal requirements, we will still need to manage Covid-19 effectively, because the virus remains a threat. We are likely to continue to see outbreaks in Scotland over the coming years, and we can expect new variants to appear globally.

We have, therefore, set out in the framework a system of threat levels and potential responses that enables us to provide as much clarity as we can for planning purposes, while retaining the crucial flexibility to ensure that responses are both effective and proportionate to the threat level.

We do not believe that an approach that relies on predetermined automatic triggers for a response would be appropriate. We have seen, throughout the pandemic, that clinical and scientific advice and data, legal and equalities considerations and many other factors need to be combined to inform our decision making, and that all that must be overlaid by experience and judgment on the right steps to take. As we go forward, we will manage Covid-19 on the basis of measures that are commensurate with the assessed threat.

At this point, it is right to note the need for collaborative management of Covid-19 to be shared by central Government, local government, wider public services, the third sector, communities and individuals. We have achieved remarkable levels of co-operation in managing the harms of the pandemic; that will be essential for managing the challenges that lie ahead.

Pam Duncan-Glancy (Glasgow) (Lab): A report that Glasgow Disability Alliance published this week looks at the experience of disabled women during the pandemic. One of the issues that it highlights is that

"Many universal approaches, pandemic responses perhaps unintentionally—ignored the needs of disabled people, creating inequalities, injustices and eroding human rights for disabled people and disabled women."

That is quite difficult to hear. Can the cabinet secretary set out how the Government intends to address those concerns, which were raised this week?

John Swinney: Those points have to be taken very seriously. They indicate the challenge that policymakers and decision makers face in enabling us to deal with a widespread public health emergency across our whole society, while taking approaches to address the specific circumstances of individuals with disabilities, as Pam Duncan-Glancy has highlighted.

The identification of targeted and focused support for individuals is, as part of the wider response to managing the pandemic, crucial in order to address people's given circumstances. That will need to be at the heart of the response that public authorities take forward to address the issues that Pam Duncan-Glancy has fairly put to me.

We will continue to consider the needs of everyone in society—this relates to the point that Pam Duncan-Glancy made—in developing future adaptations, mitigations and protective measures, because there is clear evidence that harm has been felt unevenly across our society. The Government has published separately the detailed impact assessments that informed the content of the framework and that will inform our decision making.

We will ensure that any continuing or new measures do not exacerbate inequality, which is why equality, inclusion and human rights remain at the heart of our on-going response and, indeed, at the heart of our Covid recovery strategy. We know that an uncertain time lies ahead for those who remain at the highest risk and that not everybody in society welcomes the removal of protective measures. We will continue to provide advice and guidance, informed by our clinicians, as we support the people who are on the highest-risk list, while we get back to a more normal way of life. The strategic framework update therefore outlines a wide range of concrete actions that are designed to improve outcomes across society and that are consistent with our Covid-19 recovery strategy.

Before I bring my remarks to a conclusion, I wish to put into context the Coronavirus (Recovery and Reform) Scotland Bill, which supports the strategic framework and will ensure greater resilience against future public health threats. Although we intend to rely much less on legal requirements in response to Covid in the future, the framework is clear that our legislation must be kept up to date in order to support our ability to manage future outbreaks. We hope that that will not be needed in the future, but it is only right that Scotland has permanent public health protection powers, as have been available in England and Wales for more than a decade. There is a crucial distinction between having appropriate powers available to respond to public health threats and actually using them in given circumstances.

The strategic framework sets out what we must all do as we come to rely much more on positive behaviours and actions to manage Covid-19 effectively and sustainably. We have set out how we plan to respond effectively and proportionately, should the virus again pose an acute threat to our health, to enable people and organisations to plan for the future with greater confidence.

We will listen to the developing lessons and research, which can help us to navigate better through future pandemics and other emergencies, to protect our people and to ensure that we are able to build a fairer, resilient and more prosperous Scotland as a consequence of our response to the pandemic that we have faced.

## I move,

That the Parliament welcomes the publication of the Strategic Framework Update on 22 February 2022; offers its condolences to everyone in Scotland who has suffered loss and its gratitude to all those who have worked so hard and sacrificed so much during the pandemic; notes that Scotland is now able to look forward to the rest of 2022 with increased optimism, made possible by the remarkable progress on vaccination and in new treatments; supports the new strategic intent to manage COVID-19 effectively, primarily through adaptations and health measures that strengthen resilience and recovery, as the country rebuilds for a better future; acknowledges that the threat from COVID-19 has not gone away and that the approach is to manage COVID-19 going forwards on the basis of four broad response categories that reflect the assessed threat; notes that the Scottish Government will aim to convert remaining COVID-19 regulations into guidance to promote good public health behaviours, while retaining the ability to regulate in future should the public health situation require it; agrees that there is a need for collaborative management of COVID-19 to be shared by central and local government, wider public services, businesses, the third sector, communities and individuals, and notes that the pandemic poverty exacerbated inequalities, disadvantage and that the Strategic Framework outlines a wide range of concrete actions that are designed to improve outcomes across society, consistent with the COVID-19 Recovery Strategy.

## 17:22

Murdo Fraser (Mid Scotland and Fife) (Con): I welcome this opportunity to debate the updated strategic framework for Covid recovery. It is hard to believe that we are now two years on from Covid first appearing on our shores. I do not think that any of us expected at that time that, two years later, we would still be dealing with a deadly virus. I join the Deputy First Minister in remembering all those who have lost their lives as a result of the virus. We offer our condolences to their families, and we express our gratitude to all those, in the public sector and elsewhere, who have worked over the past 24 months to protect the public. In particular, we should recognise the tremendous success of the United Kingdom's vaccination programme in providing a level of protection to the public that is the envy of many other countries and that has enabled us to get back to ordinary life.

That said, the impacts of Covid continue to be felt, not just directly but indirectly, with a worryingly high number of excess deaths from other causes and with much more to be done to restore our public services to where they should be. I will say more about those issues a little later.

In relation to the question of on-going legal restrictions, we have argued for some weeks that we, in Scotland, should be following the lead of all other parts of the United Kingdom, with all major restrictions removed. First Wales, then Northern Ireland, then England announced the end of restrictions, and Scotland is the outlier in lagging behind. We were hoping that the First Minister might come to the chamber today to confirm that all legal restrictions, including the wearing of face masks in certain settings, would be dropped from Monday, but she disappointed us by saying that that would be extended by some weeks yet.

We know from all the evidence that has been produced that, despite the fact that we have had stricter restrictions in Scotland, and for longer, than elsewhere in the UK, outcomes in terms of Covid infections and impacts have been virtually identical across all parts of the United Kingdom. Indeed, it is now more than six months since the legal requirement to wear face masks in public places was removed entirely in England, while that law has been maintained in Scotland. However. the evidence tells us that the rate of Covid infection in Scotland has been at least as high as it has been in England throughout that period. Indeed, over the past few weeks, it has been substantially higher, so the case for on-going legal restrictions is simply not supported by the evidence.

Christine Grahame (Midlothian South, Tweeddale and Lauderdale) (SNP): Will the member advise me on whether all Covid infections in Scotland are home grown? They could be coming into Scotland from other parts of the UK or from abroad. He is making a false argument without the evidence.

Murdo Fraser: The evidence tells us the rate of infection, but I am not sure that we can drill down to the source of the infections. Of course, there are as many people going in and out of other parts of the UK as there are going in and out of Scotland—probably more so—so I am not sure that the argument that the member has made takes us very far.

It is also worth making the point that the claim that is made in some quarters that the UK has the worst Covid death rate in Europe is simply untrue. According to a paper that was published in *The Lancet* last week on the first peer-reviewed global estimates of excess deaths over the first two years of the pandemic, the UK's death rate is actually 29th in Europe, below the western European average and at the same level as that of France and Germany. That paper also makes the case that there is no clear relationship between levels of excess mortality and different levels of restrictions. What does make a difference is vaccination, on which the UK, including Scotland, has done well.

That is not to say that we should throw all caution to the wind. Public health advice should still advise people to take reasonable precautions, including exercising good hygiene, distancing from other individuals and wearing face masks where they deem it appropriate to do so.

The Scottish people have demonstrated in spades their willingness to adhere to public health advice. For example, there has never been a requirement in law in Scotland to self-isolate following a positive test for Covid, yet, on the whole, people have adhered very strictly to that instruction. I believe that we can move to a position of personal responsibility and health guidance; we should not use the law to force people to act in a particular way.

Nor do we need to have the Scottish Government's extraordinary and emergency powers entrenched permanently. There is overwhelming public opposition to the proposed Coronavirus (Recovery and Reform) (Scotland) Bill, with 85 per cent of those who responded to the Scottish Government's consultation being against it.

Jim Fairlie (Perthshire South and Kinrossshire) (SNP): The member knows as well as the rest of us who sit on the COVID-19 Recovery Committee that, if the Scottish Government does not extend the powers beyond 21 March, all the powers that it currently has will fall with the parent legislation. That would mean that, were there to be another rise in Covid numbers in Scotland, we would be left without the ability to put in place legal restrictions.

**Murdo Fraser:** There are two responses to Mr Fairlie's point. First, the Parliament has already demonstrated its ability to legislate extremely quickly in the event of circumstances changing. Secondly, he did not listen to the point that I made a few moments ago: a paper in *The Lancet* last week makes the case that there is no relationship between levels of excess mortality and different levels of restrictions. He needs to bear that in mind, too.

I will go back to what I was saying about the Coronavirus (Recovery and Reform) (Scotland) Bill. Scotland's children's commissioner has been clear that, in his view, the plans to restrict children's education breach human rights and, on that basis, might well be defeated in the courts. The bill is an unwarranted and unnecessary power grab by Scottish ministers, and we will resolutely oppose it.

Let us look instead at where the future focus should be. The COVID-19 Recovery Committee has heard alarming evidence about the level of excess deaths over the past two years. The Royal College of Emergency Medicine claims that, in

2021, 500 people died as a result of delays in being admitted to hospital.

That is 10 people per week dying because an ambulance does not turn up on time or because of a delay in getting them from the ambulance into the emergency ward. That statistic alone shows that much more needs to be done to get our national health service back to the point at which it is safe for all patients. That is not to take account of all the undiagnosed cancer—according to evidence that we heard in committee last week, 17,000 people have been diagnosed too late, with potentially serious outcomes for them—and all the other undiagnosed conditions, such as heart disease and stroke.

Already the NHS across Scotland is struggling to cope and that problem is likely to get much worse. That is why an NHS recovery plan—and, in particular, a workforce plan—is so important. The focus must be on training for the future enough doctors and nurses to replace those who are currently retiring or leaving the professions.

Much more needs to be done and my colleagues will highlight some of those points during the debate. Covid is not yet over, but it is time to move towards a new approach that is based on personal responsibility and not continued legal restrictions.

I move amendment S6M-03617.2, to leave out from "welcomes" to end and insert:

"notes the publication of the Strategic Framework Update on 22 February 2022; offers its condolences to everyone in Scotland who has suffered loss and its gratitude to all those who have worked so hard and sacrificed so much during the pandemic; notes that Scotland is now able to look forward to the rest of 2022 with increased optimism, made possible by the remarkable progress on vaccination and in new treatments; acknowledges that the threat from COVID-19 has not gone away but believes that the public in Scotland can be trusted to act responsibly and follow guidance promoting good public health behaviours and that, accordingly, ongoing regulations are not required; notes the overwhelming public opposition to the Scottish Government's proposals to permanently hold emergency powers to make health regulations; agrees that there is a need for collaborative management of COVID-19 to be shared by central and local government, wider public services, businesses, the third sector, communities and individuals; notes that the pandemic has also exacerbated inequalities, poverty and disadvantage, and calls on the Scottish Government to bring forward credible proposals to tackle the NHS backlog, and invest in a national tutoring programme and school catch-up premium to support children and young people who have suffered from two years of disrupted learning."

17:30

Jackie Baillie (Dumbarton) (Lab): I, too, pay tribute to all the people who worked hard to protect us during the pandemic, and I send my condolences to everyone who lost loved ones.

It may be two years on, but I note that the pandemic is not over. The latest strain of omicron, BA.2, is more infectious than previous strains, as is demonstrated in the extraordinary rise in case numbers. Over the past four days, 38,770 positive cases were reported and there were 1,996 people in hospital. The increase in hospital cases is the greatest single rise in 24 hours since the start of the pandemic. NHS Lanarkshire reports that its three hospitals are overflowing and the Queen Elizabeth university hospital was on the brink of declaring a code black last Thursday. The pressure on the NHS remains intense and, of course, lots of staff are themselves off ill with Covid, which causes further strain to the service.

Although it goes without saying that we all support measures to control the virus and save lives, there are many lessons to learn now and for the future in the handling of Covid. That is why I genuinely find the Covid-19 strategic framework a little disappointing. It appears to contain a number of reheated Scottish National Party promises and pledges and it fails to give any of the real detail that the public and businesses need. After almost two years of the pandemic, I am puzzled as to why the Scottish Government does not have a better idea of what should happen.

The Government says that it wants to help people and organisations to manage Covid-19 effectively and sustainably. I could not agree more with that sentiment, but the Government needs to have credible plans. I will give members an example. If the Government wants to improve air quality and ventilation in classrooms, it should organise high-efficiency particulate air—HEPA—filters, make sure that windows are not painted shut and not chop the bottoms off classroom doors. A five-year-old could have told the Government that.

The First Minister announced earlier that whole-population testing, isolation and self-isolation payments end in April. I am surprised at the speed of that. In accepting it, I say that it is important that further detail is provided for the two categories for which testing will continue: in health and social care settings and for people with underlying health conditions.

The Scottish Government has already been busy withdrawing contracts for the test and protect service and the people who did such a tremendous job staffing call centres are already being made redundant on a Microsoft Teams call. That is not the way that it should be done. What will be left for the testing that needs to continue and what surge capacity will be built in? It would be helpful to know that, because it is not possible to administer antivirals within a five-day window to people who test positive and have underlying health conditions if we remove the capacity of the

test and protect service to get to people quickly. Assurance on that point is important, as is a convincing response on the availability and administration of antiviral medication.

The Royal College of Nursing Scotland has called for FFP3 masks to be the default in any care of Covid or suspected Covid cases. It has also outlined concerns that risk assessments are still not being offered to staff. As hospitals begin to come under increased pressure and staff absences start to grow, that is critical to protect staff. I hope that the Deputy First Minister agrees.

What about vaccination? We know that it is key to reducing the impact of the virus but that protection is wearing off. As we begin to offer a fourth jab for the immunosuppressed and the over-75s, what will the Scottish Government do to address the fact that half a million Scots have still not had their first booster, and will it finally outline a sustainable workforce plan for the vaccination programme?

Here is another example of what is missing from the framework: according to figures from the Office for National Statistics, 119,000 people in Scotland are living with long Covid, but, despite an announcement in September, not one penny has reached health boards. Services are thin—in fact, I am probably being kind; services are non-existent. Businesses that have been at the sharp end of the pandemic need certainty about what support will be in place if there is the need for any further restrictions in the future.

We cannot have a system of ad-hoc, last-minute decisions. It is vital that the big decisions on future restrictions are discussed in and voted on by Parliament, to allow the public the chance to have its voice heard on the issues that impact it. The shameless power grab that is being sought by the SNP must be rejected. The Parliament has demonstrated that it can scrutinise legislation quickly and robustly, so there is no need for the Government to have sweeping powers. The people of Scotland deserve a strategic framework that will aid recovery, but this plan falls short of what is needed. Scotland deserves better.

I move amendment S6M-03617.1, to leave out from "welcomes" to end and insert:

"notes the publication of the Strategic Framework Update on 22 February 2022; offers its condolences to everyone in Scotland who has suffered loss and its gratitude to all those who have worked so hard and sacrificed so much during the pandemic; notes that Scotland is now able to look forward to the rest of 2022 with increased optimism, made possible by the remarkable progress on vaccination and in new treatments; supports the new strategic intent to manage COVID-19 effectively, primarily through adaptations and health measures that strengthen resilience and recovery, as the country rebuilds for a better future; acknowledges that the threat from COVID-19 has not gone away and considers that there is a

need to maintain Test and Protect infrastructure, including free access to testing, to help monitor and contain future outbreaks; agrees that there is a need for collaborative management of COVID-19 to be shared by central and local government, wider public services, businesses, the third sector, communities and individuals; believes that future closures of businesses and services should only ever be a last resort, and that businesses should have clarity in advance about the financial support that they will receive in such a situation; further believes that all future restrictions should be subject to a vote in the Parliament; notes that the pandemic has also exacerbated inequalities, poverty and disadvantage, and agrees that addressing these areas must be the priority of delivering a successful recovery."

## 17:36

Beatrice Wishart (Shetland Islands) (LD): I associate myself with the condolences that are offered in the motion by the Deputy First Minister and that have been offered by others in the chamber today.

During the peak of measures, people were unable to be at the side of their loved ones at the end of their lives, and saying a final farewell at a funeral was strictly limited. It was the knowledge that we all had a part to play to limit Covid's spread that enabled many of us to make those necessary sacrifices.

The First Minister addressed the rising case rates in the past few weeks. I note that the wearing of face masks will be retained as a precaution for a short time, and I hope that that contributes to flattening the upward turn in cases. Legal requirements will become guidance, but we should all be mindful that Covid is still around. There are mitigations that we can use to limit the spread, including vaccination; hands, face, space; and ventilation. As we transition away from requirements, we must remember that some people are not as comfortable as others are.

We have all just lived through a collective trauma, and the ramifications are yet to be fully understood. I am pleased that, throughout the strategic framework, the issue of mental health is raised. Addressing the long-term aftermath of Covid will be fluid, and services must be flexible to adjust to that.

Investment in and the expansion of child and adolescent mental health services, as laid out in the framework, are welcome, as is a commitment to providing accessible mental health support directly through doctors' surgeries. Scottish Liberal Democrats have been calling for that for many years, because CAMHS waiting lists were long even before the pandemic. Providing money to local authority partners to ensure that every secondary school has access to counselling services is also welcome.

Support in Mind Scotland points to the 1 million or so Scots who live in rural, remote and island

communities. The strategic update only mentions "rural" once, when discussing scaling up new digital treatments and therapies to ensure that they are also accessible in rural areas. Mental health support and services should be accessible to everyone in rural and island Scotland, and not just digitally. More needs to be done to build resilience in rural and island communities and to provide accessible, face-to-face services in the places where people live.

Long Covid is also addressed in the framework. The condition is still new to medical professionals, and the healthcare system will need all the support that the Scottish Government can provide to help the estimated 119,000 people who are affected to get treatment and support. Many have had their lives turned upside down, which also impacts on those around them. I met a constituent who has long Covid. They are constantly breathless and can hardly walk up the stairs. They can no longer run around with their football-playing son, who turned to his parent and said, "I wish you'd never got Covid." The eldest child has, in effect, become a young carer. To hear the telling of that family's Covid experience was heartbreaking.

Scottish Liberal Democrats would like swifter action to have been taken to make comprehensive adaptations to the ventilation in schools and classrooms. Rates in schools have now risen, and air filters in every classroom could have helped to stem that rise. I note that the Covid-19 ventilation short-life working group will report back by the end of March with its recommendations on next steps for healthier buildings.

Lastly, we would like to see an end to the domestic vaccination passport scheme. We now know that, although vaccines provide high levels of protection, vaccinated people can still pass on the virus, so we should focus on continuing to encourage people to keep testing. It will soon become guidance for people to stay at home when they have any symptoms of a respiratory infection. That advice should become the norm, so that we continue to help protect each other. As others have said, Covid has not gone away.

## 17:40

Paul McLennan (East Lothian) (SNP): As we discuss the Covid framework this afternoon, we are reminded that Covid is still very much with us. The First Minister's statement this afternoon highlighted the fragility of the position that we are still in, hence the flexibility.

Case rates are increasing across all age groups. That increase is driven by the now dominant BA.2 variant, and 85 per cent of cases in Scotland are thought to be of that variant. Here and globally,

Covid is still a public health risk and is likely to remain so for the foreseeable future.

In the short time that I have to speak, I will focus on the need, as we emerge from the pandemic, to reduce the health inequalities that are mentioned in the framework.

We urgently need to address the health inequalities that were already present. The pandemic has worsened the impact of those inequalities across a range of groups, including households on low incomes or in poverty, low-paid workers, children and young people, older people, disabled people, minority ethnic groups and women. Those groups also overlap.

Reducing health inequalities must be at the heart of our Covid-19 recovery strategy. It is also a key consideration in the remobilisation and redesign of our health and social care system. There is much to do, and we need to take the opportunity to address many of the deep-rooted health inequalities. The impact of the pandemic is driving demand and complexity across all services and particularly in the most deprived areas.

The "Report of the Primary Care Health Inequalities Short-Life Working Group", which was published yesterday, was very welcome. Key recommendations included the potential creation of a new health inequalities commissioner, empowering primary healthcare workers. improving equalities data, investment into wellbeing communities and strengthening the focus on inequalities through the general practitioner contract. The recommendations will have a sustained and long-term impact on health outcomes, especially for those who face the most significant barriers to good health.

We need person-centred holistic care that considers social and financial wellbeing, and the role of the Scottish social prescribing network will be key in that delivery. That work will include community link workers, who provide invaluable support to people with issues such as debt, social isolation and housing, and who will continue to be at the forefront of our efforts to tackle health inequalities.

Finlay Carson (Galloway and West Dumfries) (Con): Will the member take an intervention?

Paul McLennan: I am sorry—I have only four minutes.

Welfare rights and money advice services are embedded in 150 general practices, and we need to build on those successes by creating a network of 1,000 additional staff, to help grow community resilience and direct social prescribing. Providing people with the right support locally and connecting them to the right services is crucial to our recovery.

Other approaches need to go hand in hand with those initiatives, such as legislation to restrict promotions of less healthy food and drink, tackling alcohol consumption and harms and refreshing the tobacco action plan. The pledge to double investment in sport and active living to £100 million a year by the end of this parliamentary session, so that more people can enjoy active lives, is also very welcome.

The factors that impact on people's health and wellbeing go beyond what the health and social care system can deliver. Socioeconomic inequalities drive health inequalities. The best way to tackle those inequalities is to support actions that end poverty and increase fair access to the employment, education and training commitments in the plan. The scale of the problem is seen by the massive increase in the use of food banks in my constituency, which, year on year, is up by 40 per cent, 28 per cent and 54 per cent over the past three months.

A place-based approach to tackling inequalities at a local level is key. Local communities are best placed to cultivate person-centred approaches that are aimed at preventing ill health and reducing inequalities by addressing their root causes. In East Lothian, I have already held a poverty workshop to look at health inequalities.

We need to support our local health and social care providers to become active anchor institutions and build wealth in their communities. The recovery from the pandemic will be tough, and reducing health inequalities must be one of our core objectives.

## 17:43

Jeremy Balfour (Lothian) (Con): Tomorrow marks the second anniversary of the Prime Minister's address to the nation when he introduced the first national lockdown. Since then, it has been a rocky road but, along the way, extraordinary efforts have led to the development and distribution of life-saving vaccines and antivirals, which have allowed us to open up and pursue a normal life.

Like many members in the chamber and people across the country, I look forward to the lifting of most of the restrictions on Monday, although I find myself asking why it has taken so long to do so.

Murdo Fraser has already talked about masks and the other measures that have been imposed on the Scottish people for what has turned out to be little benefit. The First Minister and her Cabinet are fond of claiming that their approach has been evidence led. However, as we have heard, the decision taken to delay the ending of the prolonged requirement to wear face masks flies in the face of that basic evidence. England moved

past mask wearing weeks ago and there has been no great surge in infections. There is certainly no evidence that the Scottish Government's continued mandate has led to less transmission in Scotland. The Government should look at that again.

Many difficulties have been caused by the pandemic. Education, health and social care have all been affected. I am sure that others will comment on those during the debate. As we heard in an intervention, it is Scotland's disabled and older people who have been most affected. For two years, the services that older and disabled people rely on, such as day centres, have been closed and have been unable to serve those who desperately need them.

Day centres not only provide welcome support and respite for carers but offer and foster a community for disabled people to join. It is therefore imperative that those centres reopen as they were two years ago. Sadly, that is not the case in many local authority areas across Scotland. There is no clear guidance or timeline for when those centres will reopen. How will they continue to be funded? What support will they be given by the Scottish Government and local authorities?

I urge the Scottish Government to work with the Convention of Scottish Local Authorities and with local government to get those centres open and functioning as they were before the pandemic. Those who have suffered are disabled people and their carers, many of whom have not one day off in the past two years.

Lastly, I will raise an issue that we will come to later in legislation with regard to funerals and bereavement. I raise this as the convener of the cross-party group on funerals and bereavement. The issue is the registering of deaths under the current emergency legislation.

Under the emergency regulations, all deaths rightly had to be registered online. For many in the industry, that was a welcome change that brought many benefits. I understand from speaking to undertakers that, if the emergency powers continue, there will be no ability to register the death of a loved one in person. That can provide closure for many people. Will the minister reflect on whether we should keep both options open? Registering online will be fine for the majority, but for those who want to register the death of a loved one in person, that should be allowed to happen so that they can say their farewells in that way. I know from personal experience how important it was for me to do that.

We must move on. The virus is here with us. We must live as normally as we can and open

services for those who are most vulnerable and who have been most affected.

17:48

Christine Grahame (Midlothian South, Tweeddale and Lauderdale) (SNP): Managing Covid-19 effectively and getting the right balance between public health and the economy changes as we progress through the pandemic. I agree that we must adapt as the virus moves—we hope—from being pandemic to being endemic.

A minority of the public is already giving up the wearing of face masks in supermarkets. It is not always possible to sanitise trolleys or even hands. It is time to remind ourselves, weary though we all are, that Covid is alive and kicking among us. Retaining a legal requirement to wear face coverings is a small sacrifice to make in the short term

In support of that position, I will focus on the comments of Professors Gregor Smith and Jason Leitch, both of whom recommend caution. Scotland's chief medical officer has said that data shows that some older people are beginning to adapt their behaviour by reducing their contacts slightly, while their use of face masks is also up. But older and disabled people require other people to protect them, which means that those others should be wearing face masks. Asked what advice he would give to ministers, he said:

"I think that a cautious approach at this point in time is probably the right approach."

Professor Jason Leitch, Scotland's national clinical director, has spoken about his worries about the state of the pandemic in Scotland, but he added that he was "not panicking" about increasing case numbers. He said:

"You should still be cautious, particularly around those who are vulnerable".

Therein lies the rub. Who are "those who are vulnerable"? Being in the older age group, I am thankful, like others, for the vaccinations. Wearing face coverings helps, but not if the majority are not wearing them and keeping their distance. Goodness knows, I find it difficult to breathe through a mask, like many other folk do, but many are complying for the time being.

We can tell when somebody is elderly, but there are also folk who have underlying health conditions and are therefore especially vulnerable to Covid. When we wear a face mask, we are protecting them, not ourselves. We might pass them in a shop or sit beside them on a bus or train and we will not know about their vulnerability. That is the point. Some of those people have been isolating for years, and they should be free, even if some of us have to give up some freedoms.

**Graham Simpson:** I know that Christine Grahame feels really strongly about face coverings. Are there any circumstances in which she would get rid of the legal requirement to wear them and rely on guidance?

Christine Grahame: Law works by public consent, and that is how it has worked so far. We just have to remind people that this is a legal requirement. Enforcement should not really be necessary. We want people to comply because they see the good reason for the rest of the community to comply. Circumstances may arise where it is not necessary, but I do not think that we are there yet.

I have a little more to say, so I hope that I will get a little more time. In the early days of Covid, my email inbox exposed the huge differences between the haves and the have-nots—between those who were stuck in flats with children and no easy access to outdoors and those who could find comfort in their gardens, and between those who could ride out the economic deprivation and those who could not. Covid threw a harsh light on the divisions in society.

We rightly focus on Ukraine and its people, and the devastation there, but we should also ensure that we do not just return to business as usual. Covid has shown us all that we must do better for those in Scotland who do not have equal opportunities to enjoy a healthy, happy and fulfilling life. Covid exposed that inequality to every single one of us in the chamber, through our inboxes. Let us remember that and, while dealing with Covid, let us also deal with the inequalities that it has exposed in our society.

17:52

Martin Whitfield (South Scotland) (Lab): It is a great pleasure to follow Christine Grahame's very powerful speech reminding us of the inequalities on which Covid has shone such a harsh light. I feel that some people might have tried to ignore those inequalities.

As Jackie Baillie said, the strategic framework presents a number of reheated SNP promises and commitments. It is a long document, but it is light on detail, particularly in respect of those who are suffering from long Covid. There has been much talk of what that group of 119,000 people will get, and there have been many promises, but they have seen very little of that in reality.

I will use the short time that I have in the debate to address the parts of the framework that deal with progress on schools. We now have Professor Muir's report available to us, and it is enormously important that we address where this Government is in agreement with that report and where it is only in broad agreement. I reiterate the request

that I made last week for the Government to say when it will bring a debate on that subject to the chamber.

I am curious about the development proposals for education buildings. In the framework document, reference is made to "Education Recovery: Key Actions and Next Steps", which dates back to October last year. The document discusses

"preparatory work to ready the school estate"

for the

"influx of new technology",

that is hoped for from 2023-24. However, I find it disappointing that it does not contain information on how we are going to improve the estate properly with regard to ventilation.

With the emergence of Covid, there was a suggestion that windows and doors should be opened. That was sensible, because that was the only technology that was available at the time, if opening windows and doors can be described as a technology. There was then a discussion about HEPA filters. However, we are also looking forward with hope to a rebuilding of our school estate. Ventilation should play an important part in the design, so that we can future-proof our schools against any Covid or similar pandemic.

I will spend some time discussing the important matter of pupils with additional support needs. This spring—I suggest that we are into spring—I hope that we will see the updated additional support for learning action plan, and I hope that the Deputy First Minister will say when that will be published.

According to statistics that have been published today, 232,753 pupils in Scotland have ASN status—in order to engage in mainstream education or beyond, those pupils require additional support that is tailored to their very specific needs. That is the largest figure that we have ever had in Scotland. In some ways, that is understandable, because of the growth in understanding and appreciation of the challenges that some of our young folk have to confront. However, what is disappointing is the number of additional support teachers that are available to help those young people. Back in 2008, it was 858. It is now 444 just in our primary schools, and our 357 high schools are short of 120 teachers with additional support experience.

Those very vulnerable children come from groups that have suffered greatly during Covid. They suffered before Covid. They need our additional support so that, as adults, they will be able to take a full and proper part in life. Where is the real detail for those children?

17:56

Jim Fairlie (Perthshire South and Kinross-shire) (SNP): Presiding Officer:

"Life is what happens while you're busy making other plans".

John Lennon is famously quoted as saying that, and no one in the world does not now fully understand the simplicity and power of that statement. What were we all planning to do on 31 December 2019, when the WHO was informed of a cluster of cases of pneumonia of unknown cause that were detected in Wuhan city? I doubt whether any but a few had planned at that time for the unfolding of events that we all have been lucky enough to live through.

I say "lucky enough to live through" because, as we know, so many others have not been so lucky. It is on that point that I am happy to associate myself with the caution of my colleague Christine Grahame. Losing someone is, in itself, painfully hard to bear. However, the pain of losing someone was compounded by the need to isolate-not to be able to be with a loved one at the end or to do that most human of things: to mourn a loss collectively, to grieve together, to share memories, to laugh, to cry, to hug and to help each other through those painful and difficult days. All those things were taken away from us by a virus that we could not see, hear or smell. Not knowing where our enemy was, or what it looked like, was part of what was most terrifying.

We have also lost the big-ticket occasions. No one turns 18 twice or is born twice, and our way of celebrating the big life events has been curtailed massively—emphasising Mr Lennon's prophetic, simple statement. It has been a hellish few years for those reasons and more. Businesses and livelihoods have been lost and, quite simply, people have had to reassess where their life is going. Many are still trying to work that out.

However, we are here, thanks in large part to the amazing efforts of those people who worked across our vital sectors to keep the wheels on the bus, and those ingenious folk who developed the vaccinations that have slowly but surely started to give us back our freedoms. We are all due them an enormous debt of gratitude. We are, however, still going to encounter new variants and the danger that they pose will have to be monitored closely, so that we can react with the efficiency and pace that are needed.

At this point, I pay tribute to the ordinary, everyday people of the country for their forbearance and fortitude in accepting those restrictions on their lives, rolling up their sleeves and getting those vaccines into their arms. That collective spirit of working as one for the greater good of us all is in large part why we are at this

milestone of a positive outlook for our future. I believe that the Scottish Government's leadership through the pandemic, its integrity of messaging and its honesty stand comparison to those of any other country in the world—and they are better than in some. There is no doubt that mistakes have been made, but they were made in good faith and with the best of intentions. Hindsight was in zero supply.

I welcome the Scottish Government's new strategic framework, which was published last month. It is measured and appropriate, and it shows a clear route towards resuming life that is as close as possible to levels before the pandemic. The Scottish Government has already removed many of the temporary measures, but, if the experience of Covid has taught us anything, it is that we need to be able to respond quickly and nimbly to whatever threats may face us in the future

The summary of the framework document says:

"We know, however, that while securing stability is crucial, the future path of the pandemic is uncertain and that the threat of new and potentially more harmful variants remains. We must therefore remain vigilant and ready to respond in a proportionate manner to any future threats, in order to mitigate the harm that they might otherwise cause."

We should all support that sensible approach.

18:00

Ross Greer (West Scotland) (Green): This afternoon's update from the First Minister and the recent daily case rate data are grim reminders that the pandemic is far from over.

The Government's strategic framework recognises that many of the restrictions that we saw during the previous phases of the pandemic should now be avoidable. Obviously, we cannot say with certainty what characteristics future variants will have, so it would be irresponsible to rule out specific measures for all time. However, the combination of what we have learned about the virus, the treatments that have been developed to support those suffering from it and the success of the vaccination programme have all put us in a very different place to where we were in 2020 and 2021.

That being said, I want to question some of the recent claims about why this is the point at which we should base our response solely on the exercise of individual responsibility rather than on collective measures.

We recognise that our individual health and safety is not dictated by our actions alone but rather by a combination of our actions and the actions of those around us. That is hardly unique to Covid. Every adult in Scotland has the individual right to smoke if they want to, but they do not have

the right to do that in an indoor public space because of the harm that it does to others.

I note the example of my train journey this morning. I sat opposite an individual who was not wearing a face mask. I choose to believe the best in people, so I am sure that they had a legitimate reason for not doing so. The individual clearly has a very frustrating job—certainly the work that they were doing on their laptop was frustrating them because, throughout the journey, they were repeatedly exhaling deeply in frustration at whatever it was that they were working on. It was like sitting opposite an office fan.

# Jeremy Balfour rose—

Ross Greer: I am reasonably healthy and relatively young, so although that was not exactly a pleasant experience, I was willing to accept that level of risk to come to work. However, I have far greater freedom to take that risk than many of the clinically vulnerable people and those with clinically vulnerable relatives who, rather than feeling freer and freer, are feeling more and more isolated by ever-loosening restrictions.

Like Christine Grahame, I know people who have not taken the bus or train in more than two years because of the fear of encountering someone who is not wearing a mask. That is why I am instinctively uncomfortable with the language of "living with Covid". It implies that the experience of living in a society in which the virus is present is an equally manageable experience for all of us.

However, as the Government's strategic framework notes, that is not the case. We have all experienced and continue to experience the pandemic, but we have not had the same experience. For disabled people, for those on low incomes—

**Jeremy Balfour:** Will the member take an intervention?

**Brian Whittle (South Scotland) (Con):** Will the member take an intervention?

**Ross Greer:** I will take Mr Balfour's point. I apologise to Mr Whittle.

Jeremy Balfour: We live with flu, which has a more severe effect on older people and disabled people. Do we not have to get to a situation in which we live with Covid as we live with flu? "Living with Covid" will affect people differently, but it is terminology that they understand.

Ross Greer: I am not objecting to the principle that we will simply have to live with Covid. The reality is that we cannot eradicate the virus. However, we have to acknowledge—as I think that the member did—that we do not all live with or experience it in the same way and that some people are more vulnerable than others.

New inequalities have emerged as a result of the pandemic, but most existed before the pandemic and have simply been widened since. That cannot be accepted as our new normal. As the strategy states, we cannot let Covid

"become established as a disease of the poor, disadvantaged or clinically high risk."

The strategic framework is a relatively high-level document and not the place for all the details on exactly how we turn that agreeable sentiment into reality. However, we need further detail on what a society living with Covid but rightly unwilling to live with increased inequality and marginalisation of vulnerable groups would look like. We are hardly in a unique situation, so there will be plenty of best practice elsewhere to draw from.

Before closing, I want to touch briefly on the effect on front-line healthcare staff of rhetoric around the pandemic being over and of the push to get rid of all restrictions without delay. We all know of hospitals and care homes whose staff are on their knees. I know of one hospital ward that has been treating Covid patients almost exclusively and has seen six nurses hand in their notice in the past six weeks. Those nurses are not leaving to take up positions on other wards; they have simply reached breaking point. We need to acknowledge the effects of all our discussions on healthcare workers, who are still under vast pressure.

The framework broadly gets that balance right and the Greens certainly support it, but there is much more work to do if we are to undo, rather than live with, the inequalities that Covid has brought.

**The Deputy Presiding Officer:** I call Siobhian Brown, who joins us remotely.

18:05

**Siobhian Brown (Ayr) (SNP):** I welcome the Scottish Government's update to the strategic framework. This is an important moment in our recovery.

The past two years have affected everyone in Scotland, some more than others. We have all had to sacrifice a great deal, and many people have lost loved ones before their time. I join members in expressing my condolences to them.

In March 2020, when Covid-19 hit, the world was not prepared. Close to two years to the day later, we can say that lessons must be learned so that we are never again in that position. I am glad that the Scottish Government is committed to learning the lessons of the pandemic, to bolster Scotland's response to any future crisis. That is the responsible thing to do. It is not a power grab.

Our vaccination programme has been a tremendous success, thanks to the work of the dedicated staff and volunteers. Because of that, we have a bright and optimistic future ahead of us.

The strategic framework marks the point at which we move away—I hope sustainably—from legal restrictions to reliance on sensible behaviour, adaptations and mitigations. Our return to normality must go hand in hand with a continuing determination to look out for one another.

I hope that members of all parties will welcome the transition of most of the remaining restrictions from legislation to guidance—[Inaudible.] Now is the right time to make those changes. The majority of the population is vaccinated and numbers in intensive care are low.

However, we must remember that case numbers continue to be high, due to the BA.2 variant of omicron. Only last week, the COVID-19 Recovery Committee heard that, during the week before last, more than 4,000 NHS staff members in Scotland were off work with Covid. We must acknowledge the impact of that on our services. As Jackie Baillie said, the pressure on the NHS is immense.

We must also acknowledge that Scotland is not alone in facing pressure on its health services. Countries around the globe face on-going challenges because of Covid-19.

As we transition to the new phase, I welcome the fact that the Scottish Government will continue to consider people who are at the highest clinical risk in a way that provides reassurance and support to people who feel particularly vulnerable and anxious. We all have a part to play in ensuring a safe and sustainable recovery.

At the moment, media attention is, quite rightly, largely focused on the on-going crisis in Ukrainedevelopment another that is. heartbreaking; it is the last thing that the world needs right now. However, the emergence in December of the omicron variant showed us that we need to remain vigilant. If a new variant emerges, we will get very little warning and the Government might need to act swiftly to curb the spread of the virus. No one wants that, but it is right that the Scottish Government is vigilant and prepared to respond quickly to mitigate harm and potentially avoid the need for more stringent interventions later.

Therefore, although the future appears to be positive and we can start to work towards recovery from the pandemic, I thank the Scottish Government for its honesty in saying that it is unable to rule out negative setbacks that are outwith its control. What politician does not want a crystal ball? The strategic framework provides as much clarity as possible.

As convener of the COVID-19 Recovery Committee, I particularly welcome the fact that the Scottish Government will listen to and learn from third sector organisations, to link up our thinking on how best to tackle situations. The committee has received feedback on that time and time again from the organisations that have given the committee valuable evidence. After all, the Covid-19 pandemic was not the first pandemic and it will not be the last.

I hope that I do not sound all doom and gloom. Let me finish on a positive note. A unique opportunity is ahead of us as we recover. We can decide the approach that we take, and we should not waste the opportunity. Together, we can build a fairer and more equal post-pandemic Scotland, where we can solve the inequalities that Covid exacerbated. The strategic framework will help us get to that position.

18:09

Brian Whittle (South Scotland) (Con): It is hard to imagine that it was two years ago that we sat in Parliament and passed emergency Covid legislation, and that every party in the chamber put party politics aside for the good of the nation and backed the Scottish Government. At that point, we had watched as Covid made its way across the world from China. We had watched as Covid devastated countries such as Italy, and we were getting an idea that the most vulnerable to the virus would be the elderly and infirm, and those with an underlying health condition. Still, when Covid got here, we were unprepared for what was to come.

I want to stress that if emergency powers had been available to the Scottish Government at the time, it would have made absolutely no difference to the response. That is why the Scottish Government's plan to make emergency powers permanent, bypassing parliamentary scrutiny, is not based on a need and is a power grab. After all, when asked, Parliament passed emergency legislation in no time at all.

Martin Whitfield: Does Brian Whittle agree that the way that the Parliament operates now—with the hardware that we have in place, which was not available two years ago—means that it is in a far better position to pass emergency legislation, almost at the drop of a hat?

**Brian Whittle:** Absolutely. I would agree with that. We passed emergency legislation quickly last time and we can do it even more quickly now.

In asking for and receiving the backing of Parliament to take on emergency powers, the Scottish Government also took on responsibility to be open and transparent with Parliament about what actions were being taken and to share the evidence to back those decisions. That is where the Scottish Government fell down. It was almost as though it thought that being scrutinised for its decisions was beneath it. That is where most of the subsequent discourse between the Scottish Government and Parliament has arisen.

been made by every have Government in every part of the world. When one country seemed to be doing better than us, all of a sudden that country's approach was better and we must follow it. Another country was then the frontrunner and the jump to its approach was the way to go. The truth is that nobody had the right answers. Every Government's response was, in the main, reactionary and dependent on an analysis by its version of experts. What can be in no doubt, though, is the importance of the substantial financial support from the UK Treasury, which supported businesses and jobs in the UK, and the roll-out of the UK vaccination programme. Those were the real game changers that allowed us to get to the place we are now, with most restrictions revoked and our economy mainly intact and quickly recovering.

Being wise after the fact is an easy road to take, but the investigation into the approaches taken, if done impartially and thoroughly, can help us to develop a strategy for any future health emergency. We should, for example, be looking at the level of personal protective equipment retained at any one time. Our ability to shield the vulnerable should be scrutinised and planned for. Let us not forget the decision to move Covid-positive patients into care homes and the devastation that that caused

If we are smart and invest in our ability to gather and analyse big data, we can learn much from our response to the pandemic. Our ability to gather and share data has always been a problem—we have always been behind the curve in Scotland. That was often discussed in the Health and Sport Committee in the previous session of Parliament. Covid has shone a light on the importance of an information technology system that can be used to gather and share data. That investment is long overdue.

More than that, though, we have an opportunity to reset how we view health. We know that more than 60 per cent of those lost to Covid were obese and that approximately one third were diabetic, and we know about all the other comorbidity issues that contributed to Covid being so prevalent on death certificates. We know that those conditions are more likely to appear in lower Scottish index of multiple deprivation areas—the same areas where Covid deaths are highest.

Scotland is the unhealthiest country in Europe, and it has been throughout the SNP tenure and before. Surely, as part of our preparedness for

future health emergencies, the preventative health agenda needs to be addressed at long last. In fact, what Covid has done is to shine a light on the health issues that Scotland has faced for decades. That is where the SNP Government's focus should be, and definitely not on trying to bypass Parliament by unnecessarily retaining emergency powers.

## 18:14

Emma Harper (South Scotland) (SNP): I welcome the opportunity to speak in the debate and I welcome "Scotland's Strategic Framework Update". I want to be crystal clear: Covid-19 is still with us, as we heard from the First Minister earlier. Although vaccination is protecting us from the worst impacts of the virus, infected people are still requiring hospital attention, including intensive care support. Thankfully, that requirement is now less than we previously experienced.

The publication of the updated version of the Covid-19 strategic framework marks the point at which we move away from legal restrictions and instead rely on personal behaviours, adaptations and mitigations. I welcome the fact that the requirement for face coverings has been extended a wee bit, and I welcome the other measures that have been put in place. This is an important point in our national journey through and out of the pandemic, and our return to normality must go hand in hand with a continued determination to look out for and look after one another.

We all have a part to play in ensuring a safe and sustainable recovery by continuing to follow public health advice on getting vaccinated, testing as regularly as appropriate, wearing face coverings when required or recommended and keeping rooms ventilated. All of that still matters, even as we lift the remaining legal requirements. We know how successful face coverings have been in protecting one another from the virus, and it is absolutely vital that we look to support and protect people. I know that it is not as comfortable to wear a face covering as it is to not wear one, but we must ensure that people who want to continue to wear them feel that they can do so without fear of being judged. I would support any action to make available FFP2 masks, which are more secure fitting and protect the wearer more effectively than other standard face coverings.

The threat of new variants remains. In the past 14 days, we have heard of the emergence of a sub-lineage variant called deltacron BA.2, which is another variant of the SARS-CoV-2 virus. It appears to be even more transmissible than the already highly transmissible omicron variant. Professor Adrian Esterman, who is a former World Health Organization epidemiologist, said that the

BA.2 variant is "pretty close to measles" in transmissibility, and measles is

"the most contagious disease we know about."

It is therefore right that the strategic framework update sets out how we will respond to future threats at national level. The strategic intent has been revised from a focus on suppressing cases to a focus on managing Covid effectively using adaptations and health measures, which include vaccination, treatment, surveillance, strengthening the resilience of health and social care in general, and adaptations in behaviours and physical environments.

The update sets out a clear framework of threat levels and potential responses, which provides as much clarity as possible for planning purposes and retains crucial flexibility to ensure that responses are effective and proportionate.

I highlight the Support in Mind Scotland briefing that we received ahead of the debate. We must continue to recognise how people's mental health has been affected during the pandemic, including people who had a mental health diagnosis prior to Covid. I acknowledge that tailored direct mental health support must continue.

On vaccinations, I understand that, currently, 34.5 per cent of people in Ukraine have had a first dose of the vaccine, which compares with 73.1 per cent of people in Scotland. I would be interested to hear from the Deputy First Minister about how we can commit to helping people arriving from Ukraine—who we welcome—to access their first, second or, if appropriate based on clinical need, additional dose.

I support the motion, I welcome the framework and I look forward to the Deputy First Minister's response.

The Deputy Presiding Officer: We move to closing speeches. Alex Rowley is joining us remotely.

## 18:19

Alex Rowley (Mid Scotland and Fife) (Lab): In winding up for Labour in this debate on the updated framework, I join the Deputy First Minister, Jackie Baillie and many other members who have talked about the pain and heartache of people who have suffered throughout Scotland. Our condolences go to everyone who has lost a loved one or a friend. We recognise that many people are still struggling and need support, whether that be mental health, financial or other support.

Many members have rightly thanked front-line workers, particularly health and social care workers, for all that they have done, but, as Jackie

Baillie pointed out, the pressure on our hospital staff is immense. I meet and talk with nurses, doctors and other people who work in our health services and they tell me that they are completely overrun. Therefore, priority must be given to ensuring that we deal with the issues, get proper workforce planning in place and get resources to where they are needed in the health service.

That brings to me to my next point. I note that the document talks about

"strengthening the resilience of health and social care generally",

but I say to the Deputy First Minister that, if we do not tackle the inequalities that exist in the social care workforce and the poor terms and conditions and underpayment of care workers, the Government will not be able to fix the growing crisis in social care.

Words are one thing, but we need action on health and social care from the Government: it must act. It disturbs me that money is being put into social care, but we are talking about a review of social care. The main problems that stick out in relation to why we have a recruitment and retention issue are underfunding and the unfair treatment of social care workers. Those problems must be tackled if we are to address the crisis in social care.

In my last 30 seconds, I will mention that we must support those who are most in need. People acknowledge that levels of deprivation and poverty have grown significantly. We have to target support. MSPs, including me, will get £150 to help with the cost of living crisis. It is ridiculous that that is how we are trying to help the people who are suffering most through the cost of living crisis; we should be targeting that money much better at the people who are most in need. When I raised that with the Cabinet Secretary for Finance and the Economy, she told me that it was very difficult to target the money directly, but as Councillor Stephen McCabe has pointed out, the council tax system already has a means-tested rebate system in place. Why are we giving MSPs and others who earn similar wages £150 to help them with the cost of living crisis when we should be focusing all our resources on those who are most in need?

Again, I note that the document sounds good, but we need action to follow it up. Most people in Scotland will recognise that the extension of the guidance on face coverings for a few more weeks is the correct thing to do, given what we have come through. As members have pointed out, the virus is still out there and cases are rising. Everybody knows somebody who has Covid. We have to be cautious.

I will leave it at that, Presiding Officer.

18:23

Sandesh Gulhane (Glasgow) (Con): The Scottish Government's motion is 236 words long and we back 112 of them. Our condolences go out to all those who have lost loved ones during the pandemic. We salute the people who work hard to keep our vital services going. Let us make no mistake about it—they are still working hard today.

The vaccination programme has been a huge British success story and, going forward, government at all levels, public services, charities, businesses and communities need to work together to manage Covid-19 and its variants.

We recognise that the pandemic has hit many hard-working families and has exacerbated the problems that are faced by disadvantaged people in our communities. However, 124 words of the SNP-Green motion make the case for an illiberal Covid power grab. The Government has become so hooked on controlling people's lives that it wants to make emergency powers permanent. It wants the powers to close schools and release prisoners early, and to do so without Parliament's consent. Let us not forget that the alarming overreach of power can be made possible only if the Green Party remains in line and in support.

Ross Greer: I ask this question in all sincerity, because there is no Green member on the COVID-19 Recovery Committee, so I am unfamiliar with how Conservative members have interacted with the Coronavirus (Recovery and Reform) (Scotland) Bill so far. Do the Conservatives sincerely commit to opposing all aspects of that bill, including the relatively benign commitments on continuing to protect people from evictions, on bankruptcy measures and so on? Are the Conservatives genuinely objecting to the bill in its entirety? Many of the proposals in it were supported by Conservative members when they were introduced. That was done not with the idea that they would be only temporary but because they just make sense.

**Sandesh Gulhane:** It is not our fault that everything has been put in one bill. Things need to be separated out, which could have been done, but the choice was that it would not be done.

I am surprised to hear that Ross Greer supports the motion, because his Green Party has a guiding principle that states that individuals should control decisions that affect their own lives. With regard to the motion, I note that our amendment is what the Green Party's principles should look like. The Scottish Conservatives' amendment recognises that the public

"can be trusted to act responsibly and follow guidance promoting good public health behaviours".

Christine Grahame: Is Sandesh Gulhane, as a medical practitioner, saying that there should not

be a mandatory requirement to wear face coverings while Covid is on the increase in Scotland, as has been indicated in the advice of the chief medical officer and the clinical director?

**Sandesh Gulhane:** I am glad that Christine Grahame brought that up, because face masks are not as effective as we think they are. That is because most people wear them with their nose out of them and they pull down their masks to talk. [Interruption.]

**The Deputy Presiding Officer:** Can we have a wee bit less noise across the chamber?

Sandesh Gulhane: If I am asked a question, I would be quite—

Emma Harper: Will the member give way?

The Deputy Presiding Officer: I have already indicated that members should allow Dr Gulhane to continue. Please continue now. Dr Gulhane.

**Sandesh Gulhane:** The masks that I see everyone wearing here and in public should not be reworn once a journey is completed, but 56 per cent of people reuse single-use masks and 34 per cent wear reusable masks more than four times before they wash them. That is why we oppose the SNP-Green proposals to retain emergency powers.

Dr Alasdair Allan (Na h-Eileanan an Iar) (SNP): Will the member take an intervention?

The Deputy Presiding Officer: I am sorry, but I do not think that Dr Gulhane will give way to you. Please continue, Dr Gulhane.

Sandesh Gulhane: The SNP and the Greens are failing to read the room. There is no acknowledgment in their motion of the crisis in our NHS that must be tackled. There was a crisis before Covid, and the NHS is now past breaking point. Our treasured health service—dentists, doctors, nurses and ambulance crews—is being failed by the Government, so I ask it, please, to wake up.

Another example of shambolic SNP stewardship is in education. The Government must really get a grip and support our young people—our country's future—who have suffered from two years of disrupted learning. I cannot fathom why the Government left healthcare and schooling out of its motion, why there is no statement of intent, and why there is only a call for more power and more control. That smacks of arrogance—or maybe the Government is deeply embarrassed by its record on health and education over the past 15 years.

Jackie Baillie asked what should be done with test and protect. In February, the Scottish Conservatives published "Back to Normality: A Blueprint for Living with Covid". We proposed phasing out test and protect, replacing it with a

smaller system and reinvesting the resources in front-line NHS services.

We also called for an end to legal restrictions, with future pandemic management through advisory public health guidance and personal responsibility. Our amendment is consistent with that position and addresses two key areas that the Scottish people care deeply about: the NHS and children's schooling.

On the other hand, the Government's motion is opportunist. It is a clinging on to power and it is illiberal. It is a clear message that the Government does not think that we have learned anything from the past two years and that the Government does not trust the people of Scotland to do the right thing.

**Jim Fairlie:** Will the member take an intervention?

**The Deputy Presiding Officer:** The member is concluding, Mr Fairlie.

**Sandesh Gulhane:** To conclude, I say that if members believe that individuals should be allowed to make decisions about their own lives, they should support Murdo Fraser's amendment.

I declare an interest: I am a practising NHS doctor.

**Emma Harper:** On a point of order, Presiding Officer. I forgot to mention earlier that I, too, am a practising NHS employee who has been a vaccinator for the past two years, since the vaccines were introduced.

**The Deputy Presiding Officer:** Thank you. That is now on the record.

I call the Deputy First Minister, John Swinney, to wind up for the Scottish Government.

## 18:30

John Swinney: In her contribution to the debate, Beatrice Wishart said that, while legal requirements will become guidance, Covid is still very much around and not everyone will be comfortable with the relaxation of restrictions. With that, she summed up the reality of the dilemmas that exist-dilemmas that have been studiously ignored in the contributions from Conservative members—and the fact that some members of our society are profoundly uneasy about the circumstances that they now face. Those points were also made by my dear and respected colleague, Christine Grahame, who spoke about the situation that is faced by people who have vulnerabilities and are anxious about re-emerging into society.

Given the casual dismissal of those concerns by Conservative members today, and the very

aggressive dismissal of them by the Conservatives' social media feeds over the past 24 hours, in the face of overwhelming evidence that justifies the decisions that the Government has arrived at today, those points should be a stunning wake-up call for the Conservatives.

**Sandesh Gulhane:** The idea is that, in two weeks' time, the Scottish Government will remove the legal requirement for face coverings to be worn. Is the Deputy First Minister saying that people who are anxious now will not be anxious in two weeks' time?

**John Swinney:** No, I am not. I am saying that the Conservatives disregard the feelings and opinions of those individuals, and that they do so in a casual and unrelenting fashion. Earlier today, I sat in the chamber and listened to Douglas Ross, the leader of the Scottish Conservatives, absolutely racing past that argument.

Ross Greer and Alex Rowley made a point about the pressure that national health service staff face. That is one of the realities with which the Government has wrestled in taking the decisions that we have announced to Parliament today, which we believe are proportionate, given the scale of the challenges that we face.

I want to address a number of points that have been made in the debate. Murdo Fraser overstated—not for the first time—the case that he made to Parliament, in two respects. The first relates to the effect of precautionary measures that the Scottish Government has taken. Mr Fraser asked what the evidence was for the performance of those measures. As one example of evidence, I cite the ONS infection survey, which showed that from 31 October 2021 to 5 February 2022—the period to which Mr Fraser referred in taking exception to the different positions of the Scottish Government and the United Kingdom Government in their application of restrictions in Scotland and in England—around 26 per cent of people in Scotland were infected with Covid, while the figure for England was 34 per cent.

I use that data to illustrate my point to Mr Fraser. I could go on to talk about the differences in deaths within 28 days of a positive test by area. The survey shows that, over the duration of the pandemic, the figure for Scotland was 200 deaths per 100,000 of the population, whereas in England it was 250 per 100,000. I use that data simply to illustrate that these decisions are not easy for any Government, in any part of the United Kingdom. However, we have tried to take measured and appropriate steps to protect the population, and I believe that the announcements that the Government has made today, and the contents of the strategic framework, are consistent with that position.

Finlay Carson: The Deputy First Minister talks about "measured and appropriate steps". Given that 98 per cent of Scotland is rural and that 1 million people live in rural Scotland, why is "rural" mentioned only once in his whole document? It suggests that those with mental health conditions should have access only to digital treatments. Does the Deputy First Minister believe that everyone should be supported, no matter where they live, or does he think that people with mental health conditions in rural areas should get less support from services than everybody else in Scotland?

**John Swinney:** I am producing a strategic framework that is relevant and appropriate for every citizen of our country, regardless of where they live. I am proud to represent a rural area in the Parliament, and I take no lessons from Finlay Carson about how to represent rural Scotland.

The second way in which Murdo Fraser overstates his case is in relation to the Coronavirus (Recovery and Reform) Scotland Bill—and he was, of course, echoed by numerous others, such as Mr Whittle, into the bargain. For the sake of clarity, let me reassure Mr Balfour on the issue that he raised about the possibility of undertaking the registration of deaths in person: the bill provides for that. That removes one reason why Mr Balfour could be opposed to the bill, so I look forward to his support for it as a consequence of my directly addressing the issue about which he was concerned.

One of the familiar points that is raised with us is the importance of learning lessons from things. The Government is learning the lessons of the pandemic and wants to ensure that the Parliament and the country have in place law that enables us to react as quickly as we need to react to the challenges that we might face. We have all agreed, and everybody has accepted, that Covid is still around. It may reappear with much greater virulence than has been the case, and we must have the legislative arrangements in place to deal with that.

On any other day, the Conservatives would be coming here and telling us, "You should have learned the lessons. You should have prepared the statute book for all of this." We now find ourselves here preparing the statute book for all of that—not for the Government to have automatic powers, but to have powers that will be able to be used only with parliamentary consent and with appropriate evidence of the gravity of the situation, as provided by the chief medical officer.

Some of the language that we have heard from the Conservatives today is completely over the top.

## Murdo Fraser rose—

## Brian Whittle rose—

**John Swinney:** I am spoilt for choice between Mr Fraser and Mr Whittle. Since I have mentioned Mr Fraser, I will give way to him.

**Murdo Fraser:** On the point that the Deputy First Minister has just made about parliamentary consent, is he therefore now ruling out what is in the bill, which is the use of the made affirmative procedure, which means laws coming into force without the Parliament considering them first?

John Swinney: For all the years that he has been here, Mr Fraser has displayed the most appalling ignorance of parliamentary procedure. The made affirmative procedure is an accepted statutory mechanism that involves parliamentary scrutiny, so there is no bypassing of Parliament whatever involved in the Government's legislation. If we are at the stage when I am having to lecture Mr Fraser on elementary parliamentary procedure, it is no wonder that the Conservatives are in the sorry state that they are in.

The Scottish Government is taking the necessary and proportionate steps to respond to the challenges that we face. We have done that throughout the pandemic. I am profoundly grateful to members of the public for the way in which they have supported the measures that the Government has taken, for the way in which they have embraced those measures and for the way in which they have acted responsibly to protect other members of our society. The Government intends to provide the leadership to enable that to continue in the period to come.

**The Deputy Presiding Officer:** That concludes the debate on "Covid-19: Scotland's Strategic Framework Update".

# **Business Motion**

# Decision Time

18:38

The Deputy Presiding Officer (Annabelle Ewing): The next item of business is consideration of business motion S6M-03638, in the name of George Adam, on behalf of the Parliamentary Bureau, on changes to this week's business.

Motion moved.

That the Parliament agrees to the following revisions to the programme of business for—

(a) Wednesday 16 March 2022—

after

2.00 pm Portfolio Questions:

Justice and Veterans; Finance and Economy

insert

followed by Ministerial Statement: Update on

Refugees from Ukraine

(b) Thursday 17 March 2022—

after

followed by Scottish Government Debate: Delivering

on Active Travel Commitments

insert

followed by Legislative Consent Motion: Cultural

Objects (Protection from Seizure) Bill

(UK Legislation).—[George Adam]

Motion agreed to.

18:39

The Deputy Presiding Officer (Annabelle Ewing): There are four questions to be put as a result of today's business. The first question is, that motion S6M-03597, in the name of Joe FitzPatrick, on behalf of the Equalities, Human Rights and Civil Justice Committee, on ending conversion practices, be agreed to.

Motion agreed to,

That the Parliament notes the Equalities, Human Rights and Civil Justice Committee's 1st *Report, 2022, (Session 6), Report on Petition PE1817: End Conversion Therapy* (SP Paper 88).

The Deputy Presiding Officer: I point out to members that, if the amendment in the name of Murdo Fraser is agreed to, the amendment in the name of Jackie Baillie will fall.

The next question is, that amendment S6M-03617.2, in the name of Murdo Fraser, which seeks to amend motion S6M-03617, in the name of John Swinney, on "Covid-19: Scotland's Strategic Framework Update", be agreed to. Are we agreed?

Members: No.

The Deputy Presiding Officer: There will be a division.

There will be a short suspension to allow members to access the digital voting system.

18:40

Meeting suspended.

18:44

On resuming—

The Deputy Presiding Officer: We move to the vote on amendment S6M-03617.2, in the name of Murdo Fraser. Members should cast their votes now.

The vote is now closed.

Claire Baker (Mid Scotland and Fife) (Lab): On a point of order, Presiding Officer. I could not connect to the app. I would have voted yes.

**The Deputy Presiding Officer:** Thank you, Ms Baker. That vote will be duly recorded.

For

Baillie, Jackie (Dumbarton) (Lab)
Baker, Claire (Mid Scotland and Fife) (Lab)
Balfour, Jeremy (Lothian) (Con)
Bibby, Neil (West Scotland) (Lab)
Boyack, Sarah (Lothian) (Lab)
Briggs, Miles (Lothian) (Con)

Burnett, Alexander (Aberdeenshire West) (Con) Cameron, Donald (Highlands and Islands) (Con)

Carlaw, Jackson (Eastwood) (Con)

Carson, Finlay (Galloway and West Dumfries) (Con)

Clark, Katy (West Scotland) (Lab)

Cole-Hamilton, Alex (Edinburgh Western) (LD)

Dowey, Sharon (South Scotland) (Con)

Duncan-Glancy, Pam (Glasgow) (Lab)

Findlay, Russell (West Scotland) (Con)

Fraser, Murdo (Mid Scotland and Fife) (Con)

Gallacher, Meghan (Central Scotland) (Con)

Golden, Maurice (North East Scotland) (Con)

Gosal, Pam (West Scotland) (Con)

Grant, Rhoda (Highlands and Islands) (Lab)

Greene, Jamie (West Scotland) (Con)

Griffin, Mark (Central Scotland) (Lab)

Gulhane, Sandesh (Glasgow) (Con)

Hamilton, Rachael (Ettrick, Roxburgh and Berwickshire) (Con)

Hoy, Craig (South Scotland) (Con)

Johnson, Daniel (Edinburgh Southern) (Lab)

Halcro Johnston, Jamie (Highlands and Islands) (Con)

Kerr, Liam (North East Scotland) (Con)

Kerr, Stephen (Central Scotland) (Con)

Leonard, Richard (Central Scotland) (Lab)

Lockhart, Dean (Mid Scotland and Fife) (Con)

Lumsden, Douglas (North East Scotland) (Con)

Marra, Michael (North East Scotland) (Lab)

McArthur, Liam (Orkney Islands) (LD)

Mochan, Carol (South Scotland) (Lab)

Sarwar, Anas (Glasgow) (Lab)

Simpson, Graham (Central Scotland) (Con)

Smith, Liz (Mid Scotland and Fife) (Con)

Smyth, Colin (South Scotland) (Lab)

Stewart, Alexander (Mid Scotland and Fife) (Con)

Sweeney, Paul (Glasgow) (Lab)

Webber, Sue (Lothian) (Con)

Wells, Annie (Glasgow) (Con)

White, Tess (North East Scotland) (Con)

Whitfield, Martin (South Scotland) (Lab)

Whittle, Brian (South Scotland) (Con)

Wishart, Beatrice (Shetland Islands) (LD)

## **Against**

Adam, George (Paisley) (SNP)

Adam, Karen (Banffshire and Buchan Coast) (SNP)

Adamson, Clare (Motherwell and Wishaw) (SNP)

Allan, Dr Alasdair (Na h-Eileanan an Iar) (SNP)

Arthur, Tom (Renfrewshire South) (SNP)

Beattie, Colin (Midlothian North and Musselburgh) (SNP)

Brown, Keith (Clackmannanshire and Dunblane) (SNP)

Brown, Siobhian (Ayr) (SNP)

Burgess, Ariane (Highlands and Islands) (Green)

Callaghan, Stephanie (Uddingston and Bellshill) (SNP)

Chapman, Maggie (North East Scotland) (Green)

Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)

Constance, Angela (Almond Valley) (SNP)

Dey, Graeme (Angus South) (SNP)

Don, Natalie (Renfrewshire North and West) (SNP)

Doris, Bob (Glasgow Maryhill and Springburn) (SNP)

Dunbar, Jackie (Aberdeen Donside) (SNP) Ewing, Fergus (Inverness and Nairn) (SNP)

Fairlie, Jim (Perthshire South and Kinross-shire) (SNP)

FitzPatrick, Joe (Dundee City West) (SNP)

Forbes, Kate (Skye, Lochaber and Badenoch) (SNP)

Gibson, Kenneth (Cunninghame North) (SNP)

Gougeon, Mairi (Angus North and Mearns) (SNP)

Grahame, Christine (Midlothian South, Tweeddale and

Lauderdale) (SNP)

Greer, Ross (West Scotland) (Green)

Harper, Emma (South Scotland) (SNP)

Harvie, Patrick (Glasgow) (Green)

Haughey, Clare (Rutherglen) (SNP)

Hepburn, Jamie (Cumbernauld and Kilsyth) (SNP)

Hyslop, Fiona (Linlithgow) (SNP)

Kidd, Bill (Glasgow Anniesland) (SNP)

Lochhead, Richard (Moray) (SNP)

MacDonald, Gordon (Edinburgh Pentlands) (SNP)

MacGregor, Fulton (Coatbridge and Chryston) (SNP)

Mackay, Gillian (Central Scotland) (Green)

Mackay, Rona (Strathkelvin and Bearsden) (SNP)

Macpherson, Ben (Edinburgh Northern and Leith) (SNP)

Maguire, Ruth (Cunninghame South) (SNP)

Martin, Gillian (Aberdeenshire East) (SNP)

Mason, John (Glasgow Shettleston) (SNP)

Matheson, Michael (Falkirk West) (SNP)

McAllan, Màiri (Clydesdale) (SNP)

McKee, Ivan (Glasgow Provan) (SNP)

McKelvie, Christina (Hamilton, Larkhall and Stonehouse) (SNP)

McLennan, Paul (East Lothian) (SNP)

McMillan, Stuart (Greenock and Inverclyde) (SNP)

McNair, Marie (Clydebank and Milngavie) (SNP)

Minto, Jenni (Argyll and Bute) (SNP)

Nicoll, Audrey (Aberdeen South and North Kincardine)

Regan, Ash (Edinburgh Eastern) (SNP)

Robertson, Angus (Edinburgh Central) (SNP)

Robison, Shona (Dundee City East) (SNP)

Roddick, Emma (Highlands and Islands) (SNP)

Slater, Lorna (Lothian) (Green)

Somerville, Shirley-Anne (Dunfermline) (SNP)

Stevenson, Collette (East Kilbride) (SNP)

Stewart, Kaukab (Glasgow Kelvin) (SNP)

Stewart, Kevin (Aberdeen Central) (SNP)

Swinney, John (Perthshire North) (SNP)

Thomson, Michelle (Falkirk East) (SNP) Todd, Maree (Caithness, Sutherland and Ross) (SNP)

Torrance, David (Kirkcaldy) (SNP)

Tweed, Evelyn (Stirling) (SNP)

Whitham, Elena (Carrick, Cumnock and Doon Valley)

(SNP)

Yousaf, Humza (Glasgow Pollok) (SNP)

The Deputy Presiding Officer: The result of the division on amendment S6M-03617.2, in the name of Murdo Fraser, is: For 47, Against 65, Abstentions 0.

Amendment disagreed to.

The Deputy Presiding Officer: The next question is, that amendment S6M-03617.1, in the name of Jackie Baillie, which seeks to amend motion S6M-03617, in the name of John Swinney, "Covid-19: Scotland's Strategic Framework Update", be agreed to. Are we agreed?

Members: No.

The Deputy Presiding Officer: There will be a division.

# For

Baillie, Jackie (Dumbarton) (Lab)

Baker, Claire (Mid Scotland and Fife) (Lab)

Bibby, Neil (West Scotland) (Lab)

Boyack, Sarah (Lothian) (Lab)

Clark, Katy (West Scotland) (Lab) Cole-Hamilton, Alex (Edinburgh Western) (LD)

Duncan-Glancy, Pam (Glasgow) (Lab)

Grant, Rhoda (Highlands and Islands) (Lab)

Griffin, Mark (Central Scotland) (Lab)

Johnson, Daniel (Edinburgh Southern) (Lab)

Lennon, Monica (Central Scotland) (Lab)
Leonard, Richard (Central Scotland) (Lab)
Marra, Michael (North East Scotland) (Lab)
McArthur, Liam (Orkney Islands) (LD)
Mochan, Carol (South Scotland) (Lab)
Rowley, Alex (Mid Scotland and Fife) (Lab)
Sarwar, Anas (Glasgow) (Lab)
Smyth, Colin (South Scotland) (Lab)
Sweeney, Paul (Glasgow) (Lab)
Whitfield, Martin (South Scotland) (Lab)
Wishart, Beatrice (Shetland Islands) (LD)

## **Against**

Adam, George (Paisley) (SNP)

Adam, Karen (Banffshire and Buchan Coast) (SNP) Adamson, Clare (Motherwell and Wishaw) (SNP) Allan, Dr Alasdair (Na h-Eileanan an Iar) (SNP)

Arthur, Tom (Renfrewshire South) (SNP)

Balfour, Jeremy (Lothian) (Con)

Beattie, Colin (Midlothian North and Musselburgh) (SNP)

Briggs, Miles (Lothian) (Con)

Brown, Keith (Clackmannanshire and Dunblane) (SNP)

Brown, Siobhian (Ayr) (SNP)

Burgess, Ariane (Highlands and Islands) (Green)

Burnett, Alexander (Aberdeenshire West) (Con)

Callaghan, Stephanie (Uddingston and Bellshill) (SNP)

Cameron, Donald (Highlands and Islands) (Con)

Carlaw, Jackson (Eastwood) (Con)

Carson, Finlay (Galloway and West Dumfries) (Con) Chapman, Maggie (North East Scotland) (Green)

Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)

Constance, Angela (Almond Valley) (SNP)

Dey, Graeme (Angus South) (SNP)

Don, Natalie (Renfrewshire North and West) (SNP)

Doris, Bob (Glasgow Maryhill and Springburn) (SNP)

Dowey, Sharon (South Scotland) (Con) Dunbar, Jackie (Aberdeen Donside) (SNP)

Ewing, Fergus (Inverness and Nairn) (SNP)

Fairlie, Jim (Perthshire South and Kinross-shire) (SNP)

Findlay, Russell (West Scotland) (Con)

FitzPatrick, Joe (Dundee City West) (SNP)

Forbes, Kate (Skye, Lochaber and Badenoch) (SNP)

Fraser, Murdo (Mid Scotland and Fife) (Con)

Gallacher, Meghan (Central Scotland) (Con)

Gibson, Kenneth (Cunninghame North) (SNP)

Golden, Maurice (North East Scotland) (Con)

Gosal, Pam (West Scotland) (Con)

Gougeon, Mairi (Angus North and Mearns) (SNP)

Grahame, Christine (Midlothian South, Tweeddale and

Lauderdale) (SNP)

Greene, Jamie (West Scotland) (Con)

Greer, Ross (West Scotland) (Green)

Gulhane, Sandesh (Glasgow) (Con)

Hamilton, Rachael (Ettrick, Roxburgh and Berwickshire) (Con)

Harper, Emma (South Scotland) (SNP)

Harvie, Patrick (Glasgow) (Green)

Haughey, Clare (Rutherglen) (SNP)

Hepburn, Jamie (Cumbernauld and Kilsyth) (SNP)

Hoy, Craig (South Scotland) (Con)

Hyslop, Fiona (Linlithgow) (SNP)

Halcro Johnston, Jamie (Highlands and Islands) (Con)

Kerr, Liam (North East Scotland) (Con)

Kerr, Stephen (Central Scotland) (Con)

Kidd, Bill (Glasgow Anniesland) (SNP)

Lochhead, Richard (Moray) (SNP)

Lockhart, Dean (Mid Scotland and Fife) (Con)

Lumsden, Douglas (North East Scotland) (Con)

MacDonald, Gordon (Edinburgh Pentlands) (SNP)

MacGregor, Fulton (Coatbridge and Chryston) (SNP)

Mackay, Gillian (Central Scotland) (Green)

Mackay, Rona (Strathkelvin and Bearsden) (SNP)

Macpherson, Ben (Edinburgh Northern and Leith) (SNP)

Maguire, Ruth (Cunninghame South) (SNP)

Martin, Gillian (Aberdeenshire East) (SNP)

Mason, John (Glasgow Shettleston) (SNP)

Matheson, Michael (Falkirk West) (SNP) McAllan, Màiri (Clydesdale) (SNP)

McKee, Ivan (Glasgow Provan) (SNP)

McKelvie, Christina (Hamilton, Larkhall and Stonehouse)

(SNP)

McLennan, Paul (East Lothian) (SNP)

McMillan, Stuart (Greenock and Inverclyde) (SNP)

McNair, Marie (Clydebank and Milngavie) (SNP)

Minto, Jenni (Argyll and Bute) (SNP)

Nicoll, Audrey (Aberdeen South and North Kincardine)

(SNP)

Regan, Ash (Edinburgh Eastern) (SNP)

Robertson, Angus (Edinburgh Central) (SNP)

Robison, Shona (Dundee City East) (SNP)

Roddick, Emma (Highlands and Islands) (SNP)

Ross, Douglas (Highlands and Islands) (Con)

Simpson, Graham (Central Scotland) (Con)

Slater, Lorna (Lothian) (Green)

Smith, Liz (Mid Scotland and Fife) (Con)

Somerville, Shirley-Anne (Dunfermline) (SNP)

Stevenson, Collette (East Kilbride) (SNP)

Stewart, Alexander (Mid Scotland and Fife) (Con)

Stewart, Kaukab (Glasgow Kelvin) (SNP)

Stewart, Kevin (Aberdeen Central) (SNP)

Swinney, John (Perthshire North) (SNP)

Thomson, Michelle (Falkirk East) (SNP)

Todd, Maree (Caithness, Sutherland and Ross) (SNP)

Torrance, David (Kirkcaldy) (SNP)

Tweed, Evelyn (Stirling) (SNP)

Webber, Sue (Lothian) (Con)

Wells, Annie (Glasgow) (Con)

White, Tess (North East Scotland) (Con)

Whitham, Elena (Carrick, Cumnock and Doon Valley)

(SNP)

Whittle, Brian (South Scotland) (Con)

Yousaf, Humza (Glasgow Pollok) (SNP)

The Deputy Presiding Officer: The result of the division on amendment S6M-03617.1, in the name of Jackie Baillie, is: For 21, Against 94, Abstentions 0.

Amendment disagreed to.

The Deputy Presiding Officer: The fourth and final question is, that motion S6M-03617, in the name of John Swinney, on "Covid-19: Scotland's Strategic Framework Update", be agreed to. Are we agreed?

Members: No.

The Deputy Presiding Officer: There will be a division.

## For

Adam, George (Paisley) (SNP)

Adam, Karen (Banffshire and Buchan Coast) (SNP)

Adamson, Clare (Motherwell and Wishaw) (SNP)

Allan, Dr Alasdair (Na h-Eileanan an Iar) (SNP)

Arthur, Tom (Renfrewshire South) (SNP)

Beattie, Colin (Midlothian North and Musselburgh) (SNP)

Brown, Keith (Clackmannanshire and Dunblane) (SNP)

Brown, Siobhian (Ayr) (SNP)

Burgess, Ariane (Highlands and Islands) (Green)

Callaghan, Stephanie (Uddingston and Bellshill) (SNP)

Chapman, Maggie (North East Scotland) (Green)

Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)

Cole-Hamilton, Alex (Edinburgh Western) (LD) Constance, Angela (Almond Valley) (SNP)

Dey, Graeme (Angus South) (SNP)

Don, Natalie (Renfrewshire North and West) (SNP)

Doris, Bob (Glasgow Maryhill and Springburn) (SNP)

Dunbar, Jackie (Aberdeen Donside) (SNP) Ewing, Fergus (Inverness and Nairn) (SNP)

Fairlie, Jim (Perthshire South and Kinross-shire) (SNP)

FitzPatrick, Joe (Dundee City West) (SNP)

Forbes, Kate (Skye, Lochaber and Badenoch) (SNP) Gibson, Kenneth (Cunninghame North) (SNP)

Gougeon, Mairi (Angus North and Mearns) (SNP)

Grahame, Christine (Midlothian South, Tweeddale and

Lauderdale) (SNP)

Greer, Ross (West Scotland) (Green)

Harper, Emma (South Scotland) (SNP)

Harvie, Patrick (Glasgow) (Green)

Haughey, Clare (Rutherglen) (SNP)

Hepburn, Jamie (Cumbernauld and Kilsyth) (SNP)

Hyslop, Fiona (Linlithgow) (SNP)

Kidd, Bill (Glasgow Anniesland) (SNP)

Lochhead, Richard (Moray) (SNP)

MacDonald, Gordon (Edinburgh Pentlands) (SNP)

MacGregor, Fulton (Coatbridge and Chryston) (SNP)

Mackay, Gillian (Central Scotland) (Green)

Mackay, Rona (Strathkelvin and Bearsden) (SNP)

Macpherson, Ben (Edinburgh Northern and Leith) (SNP)

Maguire, Ruth (Cunninghame South) (SNP)

Martin, Gillian (Aberdeenshire East) (SNP)

Mason, John (Glasgow Shettleston) (SNP)

Matheson, Michael (Falkirk West) (SNP)

McAllan, Màiri (Clydesdale) (SNP)

McArthur, Liam (Orkney Islands) (LD)

McKee, Ivan (Glasgow Provan) (SNP)

McKelvie, Christina (Hamilton, Larkhall and Stonehouse)

McLennan, Paul (East Lothian) (SNP)

McMillan, Stuart (Greenock and Inverclyde) (SNP)

McNair, Marie (Clydebank and Milngavie) (SNP)

Minto, Jenni (Argyll and Bute) (SNP)

Nicoll, Audrey (Aberdeen South and North Kincardine) (SNP)

Regan, Ash (Edinburgh Eastern) (SNP)

Robertson, Angus (Edinburgh Central) (SNP)

Robison, Shona (Dundee City East) (SNP)

Roddick, Emma (Highlands and Islands) (SNP)

Slater, Lorna (Lothian) (Green)

Somerville, Shirley-Anne (Dunfermline) (SNP) Stevenson, Collette (East Kilbride) (SNP)

Stewart, Kaukab (Glasgow Kelvin) (SNP)

Stewart, Kevin (Aberdeen Central) (SNP)

Swinney, John (Perthshire North) (SNP)

Thomson, Michelle (Falkirk East) (SNP)

Todd. Maree (Caithness, Sutherland and Ross) (SNP)

Torrance, David (Kirkcaldy) (SNP)

Tweed, Evelyn (Stirling) (SNP)

Whitham, Elena (Carrick, Cumnock and Doon Valley) (SNP)

Wishart, Beatrice (Shetland Islands) (LD)

Yousaf, Humza (Glasgow Pollok) (SNP)

## **Against**

Baillie, Jackie (Dumbarton) (Lab)

Baker, Claire (Mid Scotland and Fife) (Lab)

Balfour, Jeremy (Lothian) (Con)

Bibby, Neil (West Scotland) (Lab)

Boyack, Sarah (Lothian) (Lab)

Briggs, Miles (Lothian) (Con)

Burnett, Alexander (Aberdeenshire West) (Con)

Cameron, Donald (Highlands and Islands) (Con)

Carlaw, Jackson (Eastwood) (Con)

Carson, Finlay (Galloway and West Dumfries) (Con)

Clark, Katy (West Scotland) (Lab)

Dowey, Sharon (South Scotland) (Con)

Duncan-Glancy, Pam (Glasgow) (Lab)

Findlay, Russell (West Scotland) (Con)

Fraser, Murdo (Mid Scotland and Fife) (Con)

Gallacher, Meghan (Central Scotland) (Con)

Golden, Maurice (North East Scotland) (Con)

Gosal, Pam (West Scotland) (Con)

Grant, Rhoda (Highlands and Islands) (Lab)

Greene, Jamie (West Scotland) (Con)

Griffin, Mark (Central Scotland) (Lab)

Gulhane, Sandesh (Glasgow) (Con)

Hamilton, Rachael (Ettrick, Roxburgh and Berwickshire)

Johnson, Daniel (Edinburgh Southern) (Lab)

Halcro Johnston, Jamie (Highlands and Islands) (Con)

Kerr, Liam (North East Scotland) (Con)

Kerr, Stephen (Central Scotland) (Con)

Lennon, Monica (Central Scotland) (Lab)

Leonard, Richard (Central Scotland) (Lab)

Lockhart, Dean (Mid Scotland and Fife) (Con)

Lumsden, Douglas (North East Scotland) (Con)

Marra, Michael (North East Scotland) (Lab)

Mochan, Carol (South Scotland) (Lab)

Ross, Douglas (Highlands and Íslands) (Con)

Rowley, Alex (Mid Scotland and Fife) (Lab)

Sarwar, Anas (Glasgow) (Lab)

Simpson, Graham (Central Scotland) (Con)

Smith, Liz (Mid Scotland and Fife) (Con)

Smyth, Colin (South Scotland) (Lab)

Stewart, Alexander (Mid Scotland and Fife) (Con)

Sweeney, Paul (Glasgow) (Lab)

Webber, Sue (Lothian) (Con)

Wells, Annie (Glasgow) (Con)

White, Tess (North East Scotland) (Con)

Whitfield, Martin (South Scotland) (Lab)

Whittle, Brian (South Scotland) (Con)

The Deputy Presiding Officer: The result of the division on motion S6M-03617, in the name of John Swinney, on "Covid-19: Scotland's Strategic Framework Update", is: For 68, Against 46, Abstentions 0.

## Motion agreed to,

That the Parliament welcomes the publication of the Strategic Framework Update on 22 February 2022; offers its condolences to everyone in Scotland who has suffered loss and its gratitude to all those who have worked so hard and sacrificed so much during the pandemic; notes that Scotland is now able to look forward to the rest of 2022 with increased optimism, made possible by the remarkable progress on vaccination and in new treatments; supports the new strategic intent to manage COVID-19 effectively, primarily through adaptations and health measures that strengthen resilience and recovery, as the country rebuilds for a better future; acknowledges that the threat from COVID-19 has not gone away and that the approach is to manage COVID-19 going forwards on the basis of four broad response categories that reflect the assessed threat; notes that the Scottish Government will aim to convert remaining COVID-19 regulations into guidance to promote good public health behaviours, while retaining the ability to regulate in future should the public health situation require it; agrees that there is a need for collaborative management of COVID-19 to be shared by central and local government, wider public services, businesses, the third sector, communities and individuals, and notes that the pandemic also exacerbated inequalities, poverty disadvantage and that the Strategic Framework outlines a wide range of concrete actions that are designed to

improve outcomes across society, consistent with the COVID-19 Recovery Strategy.

The Deputy Presiding Officer: That concludes decision time. I ask the members who are leaving the chamber to do so quickly and quietly.

# Marie Curie Great Daffodil Appeal 2022

The Deputy Presiding Officer (Liam McArthur): The final item of business is a members' business debate on motion S6M-02957, in the name of Gillian Martin, on the Marie Curie great daffodil appeal 2022. The debate will be concluded without any question being put. I invite members who wish to participate to press their request-to-speak button or place an R in the chat function.

## Motion debated,

That the Parliament welcomes Marie Curie's Great Daffodil Appeal 2022, which runs throughout March; praises Marie Curie nursing and hospice staff who have been on the frontline throughout the COVID-19 pandemic for providing palliative and end of life care support to hundreds of dying people, their families, and carers, including in the Aberdeenshire East constituency; understands that Marie Curie cared for over 9,000 people in Scotland during 2020-21, which is reportedly the highest number of patients cared for in a single year since the charity was established 70 years ago; commends what it sees as the dedication, hard work and contribution of Marie Curie volunteers across Scotland; considers that the pandemic has highlighted how crucial access to palliative and end of life care is for terminally ill people to ensure a positive end of life experience that reflects what is important to the individual; understands that Marie Curie needs to raise £250,000 per week to support its frontline services; commends the vital care and support that Marie Curie provides across local authorities and hospices; praises the Marie Curie Information and Support services. which are available for everyone affected by terminal illness, including for bereavement support, and the volunteer Helper services, which have adapted during the pandemic to continue providing what it sees as vital emotional support, companionship, and information to terminally ill people, their carers, and families; believes that wearing the daffodil pin unites millions of people who consider that dying people should get the care and support that they need, and notes the calls encouraging as many people as possible to support the Marie Curie Great Daffodil Appeal in March 2022.

18:53

Gillian Martin (Aberdeenshire East) (SNP): I am delighted to lead this year's members' business debate to highlight the work of Marie Curie and draw well-deserved attention to the Marie Curie great daffodil appeal 2022.

Like so many charities and services, Marie Curie has been affected by the coronavirus pandemic and the many challenges that it has presented. However, despite those challenges, Marie Curie has gone above and beyond to deliver the vital care that it gives to people when they need it most. Although Marie Curie's work might not always make newspaper headlines or news bulletins, the work of its staff means the world to those who are receiving the care and to the relatives and carers to whom they give vital

support—just one conversation with someone who has seen them in action will tell you that.

The great daffodil appeal runs throughout March, and next week, on 23 March, Marie Curie will be holding a national day of reflection—a time for the millions of people who are grieving to connect and remember the family, friends, neighbours and colleagues who have been lost to us over the past two years. There are a lot of ways in which people can take part, from joining the minute's silence at 12 noon on 23 March to hosting a wall of reflection in their community, wherever they are. We will be able to come together to remember the mums and dads, daughters, sons, brothers, sisters, cousins and friends who are no longer with us.

In bringing the debate to the chamber, I hope that all my MSP colleagues who are speaking in the debate or listening along will take the appeal back to their constituencies or regions and further raise awareness of the work of Marie Curie, thereby encouraging more people to volunteer and raise funds so that its vital work can continue. There is a long tradition of our doing that in Parliament. I thank all my colleagues from all sides of the chamber who have supported my motion. I ask them to join me and our party leaders in the garden lobby on Thursday, after First Minister's questions, for the yearly photo call, which we have not had the chance to do for the past two years. In addition, I will be delighted to host Marie Curie at a Parliament event tomorrow night, and I hope to see members there.

Over the years, the need for Marie Curie end-oflife care has increased. That care has meant the world to those who receive it, but the cost of delivering that incredible service is £250,000 per week. The work that Marie Curie does allows people to die with dignity and comfort in a care home or hospice or in their home. At present, half of people with terminal illness die in hospital. Although both nurses and doctors provide an incredible service in hospital, that can bring challenges for relatives in terms of time and the cost of travel to and from the hospital. Enabling people to have the opportunity to die at home means that they can be in a place that is familiar and in surroundings that give them comfort, andprobably most important—with the people whom they love the most beside them.

During the pandemic, Marie Curie has been able to provide end-of-life care at home. When I look at my area of Aberdeenshire, I see that, incredibly, across the whole NHS Grampian area, 54 Marie Curie nurses provided care, making 330 visits to people in Aberdeenshire between 2020 and 2021, while working under the most challenging of conditions. In addition, 94 per cent of people at the end of their lives who were

supported by Marie Curie nurses were able to die in their place of choice, usually at home.

None of that care would have been possible without the generosity of people locally and across Scotland, and the many fundraising volunteers. Right now, in our shopping centres—although, from looking at the clock, I think that they may all be closed—and in our supermarkets and high streets, you will see volunteers collecting money from the generous citizens of Scotland to help fund Marie Curie services. The volunteers are easy to spot, as they are clad in yellow bibs, and some have big yellow top hats—you cannot miss them. They are all part of the great daffodil appeal, for which we, as MSPs, are showing our support by wearing our daffodils this month.

As summer arrives, we will prepare to host our blooming great tea parties, also in support of Marie Curie. However, we do not have to wait for those events or to be approached by the yellow-clad volunteers. Many supporters of Marie Curie set up monthly direct debits online, and every penny that we can give helps.

As more people live to an older age, it is estimated that, by 2040, 10,000 people every year will need palliative care. We also know that, by 2040, if current trends in where people die continue, two thirds of all Scots could die at home or in a care home or hospice. We know that health inequities exist, with certain groups of people receiving less palliative care than others who have a comparable need. By supporting all people with terminal conditions across our society, we can not only help them, but help to relieve pressures on acute services, for example by reducing unnecessary hospital admissions, including those through accident and emergency.

I will finish with the words of senior Marie Curie nurse Ann-Marie Craig, who works in the NHS Grampian area. Speaking to *The Press and Journal* at the end of last year, Ann-Marie spoke movingly about how rewarding her role as a Marie Curie nurse can be. She said:

"You do get job satisfaction knowing that you're looking after people at a really difficult time ... When somebody has passed away, that's when people make contact with us. People regularly contact me because they want to make a donation and they remember the nurse's name. They will specifically say 'can you thank Linda' or whoever because they've been there a long time, in the house for nine hours, and you get to know them as well as patients."

To Ann-Marie, to all the nurses, staff and volunteers at Marie Curie who go above and beyond each day, and to everyone who donates and allows Ann-Marie and her colleagues to give our loved ones that care, I say thank you for all that you do.

19:00

Stephen Kerr (Central Scotland) (Con): It is a real honour to participate in this debate on the Marie Curie great daffodil appeal 2022, and I congratulate Gillian Martin on bringing it to the chamber. It is a very important matter because most individuals in the chamber and across the country have, like me, had direct experience of relatives and friends requiring palliative and end-of-life care. In fact, it is one of the very few inevitable things about life for every one of us.

The passing of a loved one is a testing time for all families. The support that is given by nursing and hospice staff eases the suffering that we face as individuals and families, as well as the suffering of those who are facing the end of life. Nursing and hospice staff, through their dedication to their profession, create space for moments of joy in the last months and weeks of someone's life, and we all need our memories of loved ones.

Worryingly, however, pressures on the social care and palliative care sector are increasing. That is not a new phenomenon, but it is evidence of our lack of collective political will to deal with the issues with which we are presented in that sector. I am minded to suggest that we should perhaps have some form of legal right to appropriate palliative and end-of-life treatment. Every member in the chamber understands the importance of such care. We all, as parliamentarians, have a duty, at times, to leave behind political manoeuvring and come together to support something that is actually a matter of life and love.

The scale of the challenge that we collectively face has been magnified by the Covid-19 pandemic. As Gillian Martin points out in her motion,

"Marie Curie cared for over 9,000 people in Scotland during 2020-21, which is reportedly the highest number of patients cared for in a single year since the charity was established 70 years ago".

In my Central Scotland region, we have the Strathcarron Hospice, which cares for 1,400 people across Forth valley, Cumbernauld and Kilsyth. That support is able to be provided only because of the generosity of fundraisers and donors. As the motion points out, Marie Curie requires £250,000 per week to deliver its front-line services; Strathcarron Hospice requires £14,315 a day to keep its services running. The fact that so many people are willing to support that care is inspiring, which helps to involve us all in supporting the very real costs that are incurred as we help one another with the end of life.

When we actively play our part in providing funding through lotteries, appeals, raffles, bake sales, coffee mornings and so on, we are actually all part of a great movement. Charities such as

Marie Curie add love to what they do. It is about not only the love of those who give, who leave bequests or who get involved in fundraising efforts, but the love of those who provide those services and their devotion and dedication, which is enabled by the voluntary giving of so many thousands of our fellow countrymen and women.

I hope that, on the day of reflection on 23 March this year, we will all take time to remember those whom we have loved and lost.

I will conclude with the memorable words of Her Majesty the Queen on grief and mourning. She said:

"Grief is the price we pay for love."

I think that we owe one another an obligation to make sure that, as each of us in turn reaches the end of life, the appropriate level of love and care is there. Marie Curie does that in such a splendid and wonderful way.

19:04

Rona Mackay (Strathkelvin and Bearsden) (SNP): I am very pleased to speak in the debate, and I thank my colleague Gillian Martin for bringing it to the chamber.

Over the past two years, all our lives have been turned upside down as a result of Covid-19. We have been through some terrible, unpredictable times; in fact, we are still going through them as we try to learn to live with the virus. If it has been bad for us, we should remember the front-line medical workers—every single one of those dedicated people who work throughout all areas of healthcare—who have been heroic.

I have been fortunate enough to speak in most debates on Marie Curie's great daffodil appeal since I was elected in 2016. In an unpredictable and ever-changing world, Marie Curie is a constant reassurance—it is like a big comfort blanket—that gives people the knowledge that they or a family member or friend will have choice and dignity in the event of terminal illness.

As the motion says,

"Marie Curie cared for over 9,000 people in Scotland during 2020-21, which is ... the highest number of patients cared for in a single year since the charity was established 70 years ago".

That is remarkable, even by Marie Curie's standards. To support those front-line services and continue the vital care and support that it provides across local authority areas and in hospices, the charity needs to raise £250,000 a week. That is why the appeal is so important.

Marie Curie and its amazing army of volunteers offer much to everyone who is affected by terminal illness. That involves helping families and

providing bereavement support, emotional support, carer support and companionship. The amazing Marie Curie information and support service is invaluable to patients and their families in their time of need. It offers unconditional support and advice, and nothing is too much trouble.

As Gillian Martin said, the horrible Covid virus has brought into focus how necessary access to palliative and dignified end-of-life care is. We are extremely fortunate to have some amazing organisations, such as Marie Curie and Macmillan Cancer Support.

I am in favour of assisted dying for terminally ill people, but I also support palliative care, should the person should choose that, to allow a dignified and peaceful death. However, that is a very personal decision.

I am delighted to say that there are Marie Curie fundraising groups in Bishopbriggs, Kirkintilloch, Lenzie and Bearsden in my constituency. They are just some of the 85 or so groups in Scotland that do fantastic work.

In my previous speech on the matter, I highlighted research into there being too many people who care for someone at the end of life going unidentified and unsupported. That should be addressed. Carers need to be identified early, and it is everyone's responsibility to identify them—not least general practitioners, social workers and district nurses—and to signpost them to Marie Curie so that they can at least have a break, even for just a few hours. Financial support and advice are also vital.

The problem is that carers often do not see themselves as carers; rather, they see themselves as a mother, a son, a brother or a friend doing what they do out of love, so they do not identify as a carer or ask for help, often to the detriment of their own health. Carers should know that Marie Curie is always there to step in and help to care for their loved one with tenderness and professionalism.

Marie Curie nurses give people with terminal illness choice and dignity. They make it possible for people who are faced with a terminal illness to have the choice to die peacefully in their own home, surrounded by the people whom they love. None of us knows when or if we will need the support of Marie Curie nurses, but we should all be eternally grateful that, if we do, they will be there.

The great daffodil appeal is Marie Curie's biggest annual fundraising campaign. From wearing a daffodil pin to organising large gala dinners or small bake sales, there are countless ways for people to get involved and to know that they are contributing to an absolutely wonderful charity.

19:08

Jackie Baillie (Dumbarton) (Lab): I congratulate Gillian Martin on securing debating time for an important topic and on the content of her speech, and I acknowledge the very helpful briefing that Marie Curie provided in advance of the debate.

The indispensability of the work of Marie Curie, the entirety of the hospice staff team and the community nurses, especially during the past two years, cannot be overstated. I record my thanks for all that they have done and continue to do. When family members could not be with their loved ones, Marie Curie was there. Staff have provided dignified and important palliative and end-of-life care, supported those who were dying and supported their families. They have been the backbone of our communities throughout the pandemic.

End-of-life care is as important as any other aspect of our health and social care system, but it is often overlooked. As Gillian Martin rightly said, around 50 per cent of people die in Scottish hospitals, but the majority would prefer to die at home or in a homely setting. We must do more to honour their wishes by better supporting our hospices and palliative care nurses who deliver services at home.

Hospices have faced deep and difficult challenges since the pandemic began, and they have risen to those challenges time and time again. Between 2020 and 2021, Marie Curie cared for more than 9,000 people in Scotland—the highest number since the charity was formed 70 years ago.

St Margaret's hospice in Clydebank, where a number of my constituents are cared for by the indomitable Sister Rita and her dedicated team, coped with similar pressures. The pressures are immense, yet staff at St Margaret's and Marie Curie hospices continue to provide care day in and day out.

It is estimated that, by 2040, more than 62,000 people across Scotland each year will die with palliative care needs. In my constituency, 89.5 per cent of the people who pass away each year spend the final six months of their lives at home or in a community setting. As the need for palliative care increases, it is crucial that we support hospices to deliver that work.

I thank the Marie Curie volunteers who contribute so much through their fundraising activities, and I give a special shout-out to the Marie Curie shop in Alexandria, in which I have spent some time during volunteers week each year.

I very much welcome the Scottish Government's commitment to a national clinical lead and a new national palliative care strategy, which will require a whole-system, public health approach to terminal illness at national and local level. Members will not be surprised to hear me say that that should be introduced sooner rather than later.

The third sector needs to be at the heart of shaping the proposals. The strategy urgently needs to address concerns about workforce capacity, co-ordination of care and sustainable funding for community-based palliative care services, which has been a perennial issue.

We also need to address the inequalities in our society, which are mirrored in palliative care. Many groups receive less palliative care than others that have comparable needs. Such groups include people over 85, people from ethnically diverse backgrounds, people from deprived areas, people who live with mental health needs and people who identify as LGBTQ. Those people are all less likely to ask for help when they need it. That must be addressed by the strategy.

The trend towards more deaths at home has stayed high, even as the pandemic has become more manageable. That highlights the need for well-equipped services and an adequate workforce to manage demand. We must support hospice staff in their work more than ever.

We all wear our yellow daffodil badges with pride, and rightly so, but it is time to put that pride into action and ensure that Marie Curie and hospices throughout the country are supported to continue to deliver the world-class care that people in Scotland need and deserve.

19:13

**Paul McLennan (East Lothian) (SNP):** I thank Gillian Martin for bringing this debate to the chamber. I also thank Ellie Wagstaff from the team at Marie Curie for the briefing for the debate.

Marie Curie provides a nursing service in 31 out of our 32 local authorities and is the third largest provider of palliative care for adults in Scotland. I have seen its helper service in action, providing support and companionship to people who are affected by terminal illness in all 32 local authorities. There are also information and support lines, including the dedicated bereavement line, which provides key emotional support for families during a very difficult time.

As members said, in 2020-21 Marie Curie supported more than 9,000 people with a terminal illness, which is its highest-ever number.

A key part of Marie Curie's work is its partnership work with the NHS, local authorities and other charities that deliver care services. Each

year in East Lothian, approximately 1,150 people die, and about 1,000 of those have palliative care needs. Last year, Marie Curie made 312 visits in my constituency, and 88 per cent of those people spent the final six months of their lives at home or in a community setting. During the pandemic, there was a 43 per cent increase in the number of deaths at home.

That trend is likely to continue, so it is important that we consider future demands on palliative care services as our population ages. As people live into older age, they often have multiple conditions. Marie Curie estimates that the number of people who need palliative care will go up by about 10,000 by 2040. Without substantial investment in community-based care, hospital deaths could account for about 57 per cent of deaths by 2040.

Covid-19 has provided an insight into what increased demand for palliative support in the community might look like. As has already been said, there were 6,000 more deaths at home in Scotland in 2020-21 than in previous years. That trend is likely to continue.

The briefing from Marie Curie refers to the challenges of workforce capacity, care coordination and the integration of health and social care, and to the need for funding for community palliative care services. Those are challenges for us all. I would like to hear the minister touch on those issues when summing up.

Finlay Carson (Galloway and West Dumfries) (Con): Will the member join me in recognising the dedication of Marie Curie workers and volunteers across the country, particularly in rural areas, where they support dying people and their families? The challenge of providing palliative care in rural areas has never been greater. Staff and volunteers from Marie Curie have stepped up and have supported people, no matter where they live.

**Paul McLennan:** I fully support that. My constituency is not as rural as Mr Carson's, but there are some rural areas in my constituency. That is a challenge. I know the support that Marie Curie gives and I fully support Mr Carson's point.

The Scottish Government has said that it is committed to a national clinical lead and a new palliative care strategy. That is welcome. Marie Curie has welcomed that, saying that a whole-system public health approach to terminal illness should be adopted. As Mr Carson suggested, it is important to cater for local circumstances.

The briefing from Marie Curie also asks that the strategy sets out a plan for palliative care in all settings, to include hospitals, hospices, care homes and people's own homes. That would also involve local circumstances. The briefing also states that care must include bereavement support, which is incredibly important for families.

There is a need to work with all care providers, including the NHS, social care and the independent and third sectors, towards ending inequalities in palliative care. Patients in this group struggle to access vital palliative care services. Marie Curie is also calling for the establishment of a new national palliative and end-of-life care network, linking key stakeholders with health boards and other integration authorities.

Marie Curie also supports the establishment of a national care service but says that it must provide a framework for palliative care to flourish and to support terminally ill people to have an end-of-life experience that reflects what is most important to them. A whole-system public health approach will be crucial to the design and delivery of the national care service. The third sector must be at the heart of informing the design and structure of the national care service, given the key role it plays in integrated services.

I thank Marie Curie for the amazing care given to so many families over the years and at such a difficult time.

## 19:17

Gillian Mackay (Central Scotland) (Green): I, too, thank everyone caring for people at the end of life, throughout the pandemic and beyond. Anyone who has seen Marie Curie nurses caring for a loved one in the final days and weeks of their life will be keenly aware of the incredible work that they do. They give people a good death and provide kindness, care and compassion for people and their families as they go through the unimaginable. Constituents have told me about the incredible support that Marie Curie nurses have provided to them and to family members and how the nurses did everything possible to make the most difficult experience in their lives a little less painful.

I also take the opportunity to associate myself with the remarks that Stephen Kerr made about the Strathcarron hospice in our Central Scotland region. The hospice does amazing work and has wide-ranging support from people and businesses across the area.

The pandemic has led to more open conversations about what a good death looks like and how we can afford people dignity in death. We must keep those discussions going as we enter recovery. Scotland's ageing population means that a greater number of people will die in the coming years. Marie Curie research suggests that up to 10,000 more people with palliative care needs will die each year by 2040. People will also be more likely to die in the community, either in their own homes or in residential care homes. We should enable people to have the death that they want

and that reflects their wishes. Palliative care will play an essential role in that.

Many people who die at home will be cared for by family and friends. It is vital that they get the right support while they are in the caring role and after their loved one has died. Marie Curie estimates that, every year, around 40,000 to 50,000 carers in Scotland are bereaved. We must ensure that they can access dedicated mental health support when they need it. People can often be left not knowing where to turn after the death of a loved one or who can help them to process their grief. We must be proactive about identifying carers who have been bereaved and signposting them to support such as that provided by Marie Curie's bereavement support service.

We must also improve our ability to identify people with palliative care needs at an early stage. There is currently significant unmet need, as one third of Scots with terminal conditions die without having an anticipatory care plan in place.

Marie Curie has pointed out that the inverse care law applies to palliative care just as it does to other parts of the health and care system, and that significant inequalities exist. People from minority ethnic backgrounds and from rural and deprived communities are less likely to receive palliative care. They are also less likely to ask for it. Research conducted by Marie Curie has revealed that many people from ethnically diverse groups do not access palliative care and that, when they do, palliative care delivery is not always sensitive to their different needs, particularly around culture and religion.

Research has also shown that one LGBTQ+ person in six is discriminated against when using public services such as palliative care and that half of LGBTQ+ people expect to be discriminated against. That can discourage them from accessing the care services that they need.

There are also misconceptions about who is entitled to palliative care, such as that it is only for people with cancer. Those misconceptions must be challenged. We need to improve awareness of what palliative care is available and how it can be accessed, but we also need to ensure that palliative care services are person centred, are culturally competent and have the resources that they need to identify and engage with people who are terminally ill.

I thank Gillian Martin for bringing the debate to the chamber, and I thank everyone who works at Marie Curie. As the motion states,

"Marie Curie needs ... £250,000 per week to support its frontline services",

which is why it is so important that the Parliament takes the time to highlight the great daffodil appeal

and encourages people to support it however they can.

#### 19:22

Emma Harper (South Scotland) (SNP): I was not planning on speaking, but I contributed in previous years and I wanted to support my colleague Gillian Martin by being in the chamber when she led the debate. I thank her for leading the debate this year. I remember Bruce Crawford leading previous debates on the topic when I was a newbie MSP.

In my career as a registered nurse, I looked after terminally ill people in the perioperative or perianaesthesia environment, not directly in end-of-life care. I was also able to look after people in a ward setting. When I was a clinical educator in NHS Dumfries and Galloway, I worked with the team in the Alexandra unit at Dumfries and Galloway royal infirmary and the Dalrymple ward at Galloway community hospital, where end-of-life and pain-management care is provided by an amazing team. I thank them all because they are awesome.

I also thank the Marie Curie staff, nurses, carers and volunteers. Without them, we could not raise the funds that are needed. They are all fantastic and I could not do what they do every day.

The briefing that Ellie Wagstaff from Marie Curie sent us ahead of the debate talks about the £250,000 per week that is needed to support front-line services. Stephen Kerr mentioned the £14,000 that is needed for the hospice in his area. That highlights how investment is required to provide the best person-centred end-of-life and palliative care that Gillian Mackay mentioned in her speech.

It is interesting to hear everybody else's speeches. As Paul McLennan said, 31 out of the 32 local authorities have Marie Curie services.

I welcome the great daffodil appeal and the reception that will take place in Holyrood on Wednesday 16 March, where speakers will reflect on their personal experience, which I am sure will be very valuable for all of us to hear.

I end by again thanking Gillian Martin for, and congratulating her on, leading this year's debate. I look forward to hearing the minister's response. I once again thank all the volunteers who are fundraising for this year's great daffodil appeal.

## 19:25

The Minister for Public Health, Women's Health and Sport (Maree Todd): On behalf of the Scottish Government, I, too, welcome this year's great daffodil appeal, and I thank Gillian Martin for lodging her motion.

The past two years have been difficult for all of us in many ways, and I know that it has been a particularly difficult time for those working in the third sector. I am absolutely delighted to be here to celebrate Marie Curie's great daffodil appeal and to have the opportunity to thank all Marie Curie staff for their tireless and selfless work over the past few years. The contributions of Marie Curie to the wellbeing of those near the end of life, and those around them, are invaluable.

We have heard from other members just how much Marie Curie's services mean to people across Scotland and the difference that they make to local communities. I know that Marie Curie, even in the past challenging year, has made more than 1,000 visits to people in my area, which is covered by NHS Highland, and I thank its staff for that.

I want take a moment to thank all those across Scotland whose generous donations have helped to make the great daffodil appeal such a great success since it began in 1986. The donations are so important to ensuring that Marie Curie can continue to provide vital support and the high-quality, person-centred care that we all associate with the organisation.

Death, dying, bereavement and preparing for the end of life is a subject that is not often discussed openly. The pandemic has shone a spotlight on the importance of having those conversations early and meaningfully to ensure that people get the care that is right for them.

The Scottish Government has long been committed to driving a culture of openness about death, dying and bereavement—that was one of the key actions set out in our previous "Strategic Framework for Action on Palliative and End of Life Care", which was published in 2015.

Throughout the pandemic, we have continued our work with organisations such as Marie Curie and the Scottish Partnership for Palliative Care to ensure that people and their families are supported to have those difficult discussions, so that they can receive the care that is right for them. As Marie Curie has rightly pointed out, the demand for such services will only grow, so it is important that we take time to reflect on the work that we have done to date and think about what we can do better.

Scotland is a world leader in the field of palliative and end-of-life care, and I am proud of the improvements that have been made since we published our previous strategy. That includes increasing the number of people who have a key information summary in place, increasing the availability and spread of palliative care services, and undertaking an innovative programme of

health and social care integration, of which palliative care has been a key component.

We have come a long way since the framework was published, but there is still much more that can be done to make Scotland a place where everyone has access to high-quality, compassionate and timely palliative and end-of-life care that is tailored to their circumstances.

In our programme for government, we committed to developing a new palliative care strategy and appointing a new palliative care lead clinician to help to lead the work. The preparatory work to develop the strategy is already well under way and the process to appoint a lead clinician has concluded. I look forward to sharing more details of that appointment with Parliament in the near future.

In developing the strategy, we want to learn from the innovative and adaptive work of Marie Curie, and the wider palliative and end-of-life care community, to develop a pragmatic and meaningful framework for further improving our palliative and end-of-life care services. It is important to me that, as other members said, the new strategy takes a whole-system, public health approach to ensuring that everyone who needs palliative and end-of-life care can access it, regardless of their geographical location, age or medical condition.

That is why, as part of our work to develop the new strategy, we will focus on key areas that can make a real difference to a person's experience towards the end of life. Those areas include data collection and use, anticipatory care planning, commissioning, service planning and children's palliative care—to name but a few.

Only by working closely with key stakeholders such as Marie Curie have we been able to make so much progress in taking forward our previous strategy. Marie Curie is already working in partnership with others, including the NHS, local authorities and other charities, to deliver integrated services that provide person-centred care. I am confident that, with organisations such as Marie Curie as part of our palliative care community, we will be able to progress further work to ensure that people and their families get the right care, when they need it most.

Let me finish by drawing members' attention to the symbol of today's event—a daffodil, which symbolises new beginnings and rebirth. I was interested to find that the daffodil also represents creativity, inspiration and reflection. Today's event is an excellent opportunity to reflect on the creative work that Marie Curie and the palliative and end-of-life care community undertake to support people and their families at the end of life. Let us celebrate that work.

I am inspired by Marie Curie's continuous work for a better end of life for all, and I welcome its efforts to raise and maintain awareness of the topic through events such as this one. I am proud to support the great daffodil appeal.

Meeting closed at 19:32.

This is the final edition of the <i>Official Report</i> for this meeting. It is part of the Scottish Parliament <i>Official Report</i> archive and has been sent for legal deposit.	
Published in Edinburgh by the Scottish Parliamentary Corporate Body, the Scottish Parliament, Edinburgh, EH99 1SP	
All documents are available on the Scottish Parliament website at:	For information on the Scottish Parliament contact Public Information on:
www.parliament.scot	Telephone: 0131 348 5000 Textphone: 0800 092 7100
Information on non-endorsed print suppliers is available here:	Email: sp.info@parliament.scot
www.parliament.scot/documents	

