Report of workshop discussion

Substance use social work and Public Service Reform

Date: 10 November 2026
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Participants: Representatives from substance use social work services, children's services, Alcohol and Drug Partnerships (ADPs), and the National Social Work Agency.

1. Introduction

This workshop was convened to explore the implications of Scottish Government Public Service Reform for substance use social work. The discussion sought to identify potential risks arising from a reform agenda that is currently perceived to place significant emphasis on social care, whilst ensuring that the specific contribution of substance use social work is recognised and understood. Participants were invited to reflect on three key areas:

- What may be lost if substance use services are not explicitly included in reform discussions;
- What opportunities reform may present for improving outcomes for people affected by substance use; and
- What key messages should be communicated to policymakers and reform leaders.

2. Key Findings

2.1 Substance Use Social Work Risks Being Marginalised Within Reform Discussions

Participants expressed concern that current discussions on Public Service Reform frequently focus on social care provision without sufficient consideration of the wider role of social work. There was a strong view that substance use social work occupies a distinct area of practice which differs significantly from traditional models of adult social care.

Attendees noted that there remains a limited understanding of the scope and nature of substance use social work among policymakers and, in some cases, across partner agencies. Participants highlighted that substance use social work is characterised by:

- Intensive relationship-based practice;
- Outreach and persistent engagement;
- Work with individuals experiencing multiple and complex disadvantages;
- Collaboration across housing, justice, health, mental health and public protection services; and
- Long-term involvement supporting recovery and social inclusion.

Participants suggested that because this work does not align neatly with traditional perceptions of adult social care, there is a risk that its contribution may be overlooked during reform processes.

2.2 Defining Social Care and Understanding the Distinctive Contribution of Social Work

Participants discussed the increasing emphasis on social care within Public Service Reform and noted that the term itself is often interpreted differently across policy and practice settings. While some associated social care with practical support, care packages and support for independent living, others viewed it more broadly, encompassing community-based support, recovery communities and preventative services. This diversity of interpretation was seen as a challenge when considering the role of substance use services within reform discussions.

There was a strong view that social care and social work should be understood as complementary but distinct. Participants emphasised that social work draws upon a substantial academic and professional knowledge base and involves the application of professional judgement in situations characterised by complexity, uncertainty, risk and competing needs.

Within substance use services, social workers were described as addressing the interaction between substance use, trauma, poverty, mental ill-health, housing instability, family relationships, public protection concerns and wider inequality. Participants noted that this work extends beyond care provision and often involves advocacy, risk assessment, outreach, family intervention, multi-agency coordination and sustained relationship-based practice.

Participants also reflected that substance use social work is frequently misunderstood because much of its impact is preventative, relational and difficult to quantify. There was concern that reform discussions focused primarily on care

delivery, service activity or treatment pathways may fail to recognise the complexity and breadth of social work's contribution.

Overall, participants concluded that greater clarity is needed about what is meant by social care and how it relates to social work. They emphasised that future reform should recognise the distinctive contribution of social work while valuing the complementary role of social care, community support and lived-experience organisations within recovery-oriented systems of support.

2.3 Substance Use Must Be Understood as a Social as Well as a Health Issue

A recurring theme throughout the discussion was the concern that substance use is often framed primarily as a health issue, particularly within national policy discussions. Participants recognised the importance of clinical treatment and the significant investment associated with implementation of the Medication Assisted Treatment (MAT) Standards. However, there was a strong consensus that treatment alone cannot address the underlying causes of substance-related harm.

Participants highlighted that individuals presenting to substance use services frequently experience a combination of:

- Trauma;
- Poverty;
- Homelessness;
- Mental ill-health;
- Family breakdown;
- Involvement with the justice system; and
- Social isolation.

The group emphasised that effective responses must therefore extend beyond medical treatment and include social work interventions that address the broader social determinants of recovery and wellbeing.

2.4 The Importance of Prevention and Whole-Family Approaches

Participants stressed that substance use affects not only individuals, but also families and communities. There was concern that a narrow focus on adult social care could undermine whole-family approaches and diminish opportunities for prevention and early intervention.

Several contributors highlighted the relationship between substance use and wider social issues including:

- Child protection concerns;
- Children becoming looked after away from home;
- Youth justice involvement;
- Poverty;
- Family adversity; and
- Intergenerational trauma.

The group agreed that substance use social work makes a substantial contribution to prevention by addressing difficulties before they escalate into more serious health, social care, justice or child protection interventions. However, participants noted that preventative work is often difficult to quantify because it involves demonstrating outcomes that have been successfully avoided.

2.5 Complexity and Intensity Are Not Captured by Existing Performance Measures

Participants discussed the challenges associated with demonstrating the value of substance use social work through existing measurement systems. Concerns were raised that service performance is frequently assessed through quantitative indicators such as waiting times, throughput and caseload figures.

The group highlighted that these measures fail to reflect the intensity and complexity of the work undertaken by practitioners, including:

- Advocacy and coordination across agencies;
- Crisis intervention;
- Supporting access to treatment and housing;
- Building and maintaining therapeutic relationships;
- Harm reduction activities; and
- Sustained engagement with individuals who may be difficult to reach.

Participants suggested that an overreliance on quantitative performance measures risks undervaluing the aspects of practice most critical to achieving positive outcomes.

2.6 Relationships Remain Central to Recovery

The importance of relationships emerged as one of the most significant themes of the workshop. Participants consistently described recovery as being rooted in trust, connection and sustained support.

The discussion highlighted that effective substance use social work is characterised by persistence, continuity and what participants described as the “stickability” of social workers. Practitioners often remain involved with individuals when other services have disengaged, helping to rebuild trust and address the impact of stigma and exclusion.

Participants considered these relational aspects of practice to be central to recovery outcomes, while recognising that they remain difficult to measure through conventional performance frameworks.

2.7 Recovery Communities and Lived Experience Are Critical Components of Support

The workshop highlighted the importance of recovery communities, peer support and lived experience services within a recovery-oriented system of care. Participants described these services as essential partners in supporting recovery and reducing social isolation.

Examples were provided of community-based recovery organisations delivering flexible and accessible support, often reaching individuals who may not engage readily with statutory services. Participants emphasised that these supports should not be regarded as supplementary but as integral elements of an effective recovery system.

There was also recognition that communities, families and lived experience organisations make a significant contribution to prevention and early intervention.

2.8 Effective Integration Depends on Relationships Rather Than Structure Alone

Participants discussed the potential opportunities associated with greater integration between services. While examples of successful co-location and integrated referral pathways were highlighted, there was broad agreement that structural reform alone is unlikely to improve outcomes.

Instead, participants identified a number of factors that contribute to effective integrated working:

- Shared understanding of objectives;
- Clear pathways and referral processes;

- Professional relationships between services;
- Physical co-location where appropriate; and
- Strong partnerships with third Service organisations.

Successful examples of integrated working were reported in areas where social work, health, mental health, housing and third Service organisations worked closely together and maintained regular communication.

2.9 Workforce Sustainability Presents a Significant Challenge

Participants expressed concern regarding workforce capacity, recruitment and retention. The complexity of cases, increasing demand and workforce shortages were all identified as contributing pressures.

The discussion highlighted concerns regarding:

- Burnout;
- Vicarious trauma;
- High levels of risk management;
- Staff shortages; and
- Increasing complexity of need.

Participants noted that existing models often depend on practitioners carrying substantial emotional and professional demands. While there was pride in the commitment shown by workers, concerns were raised about the sustainability of relying on goodwill and resilience in the absence of adequate investment. Public Health Scotland workforce evidence and Service surveys were identified as important sources of supporting evidence regarding these challenges.

2.10 Workforce Learning and Development Requires Further Attention

The future development of the workforce was also discussed. Participants reflected on whether current qualifying and post-qualifying routes adequately prepare social workers for the complexity of contemporary practice.

Particular emphasis was placed on:

- Developing knowledge of substance use and trauma;
- Strengthening interdisciplinary learning;
- Supporting newly qualified social workers;
- Expanding post-qualifying learning opportunities; and

- Building workforce confidence to operate within "no wrong door" models of support.

Participants suggested that greater attention should be given to supporting practitioners to work confidently with complexity and intersections between substance use, mental health, justice, poverty and family support.

3. Conclusions

The workshop demonstrated strong and consistent concern that the distinctive contribution of substance use social work may not be sufficiently recognised within current Public Service Reform discussions. Participants argued that substance use social work occupies a unique position at the intersection of public protection, health, justice, housing, mental health and family support.

Participants concluded that greater clarity is required regarding the concepts of social care and social work within Public Service Reform discussions. While there was strong support for strengthening social care, participants expressed concern that reform debates can inadvertently reduce complex social work interventions to questions of service provision or care delivery. The workshop highlighted the need for reform frameworks to recognise social work as a distinct professional discipline, underpinned by a substantial academic, legal and ethical knowledge base, and uniquely positioned to address the interaction between individual circumstances and wider social determinants of health and wellbeing.

A central conclusion was that substance use cannot be understood solely through a health or treatment lens. While treatment remains an important part of recovery, participants consistently emphasised the importance of social work interventions that address trauma, relationships, social exclusion, family wellbeing and inequality.

The discussion further highlighted the importance of prevention, relationship-based practice, community recovery supports and partnership working. These factors were viewed as essential components of an effective response to substance-related harm and should be reflected within future reform developments.

Overall, participants considered substance use social work to be a distinctive and highly skilled area of practice, drawing upon a robust academic and practice knowledge base and making a unique contribution to prevention, recovery, public protection and community wellbeing. They concluded that this contribution should be explicitly recognised and reflected within Scotland's evolving programme of Public Service Reform.

4. Recommended Next Steps

The workshop identified a number of potential actions that could support future engagement with reform processes.

Short-Term Actions

- Share this discussion with the wider Social Work Scotland Substance Use Subgroup.
- Develop a concise position statement on the role of substance use social work within Public Service Reform.
- Collate existing workforce, experiential and evaluation evidence from national and local sources.
- Gather illustrative case studies demonstrating the preventative impact of substance use social work.

Medium-Term Actions

- Develop a national narrative describing the distinctive contribution of substance use social work.
- Improve the visibility of preventative and relationship-based outcomes within evidence and reporting frameworks.
- Strengthen links with policymakers involved in Public Service Reform discussions.
- Promote examples of effective integrated and community-based practice.

Longer-Term Actions

- Advocate for explicit recognition of substance use social work within national reform programmes.
- Promote models of support based on "no wrong door" principles.
- Support investment in recovery communities, lived experience services and preventative approaches.
- Develop outcome measures capable of capturing qualitative and relational outcomes alongside quantitative indicators.

In summary, participants considered substance use social work to be a distinctive and highly skilled area of practice whose contribution to prevention, recovery, public protection and community wellbeing should be explicitly recognised and reflected within Scotland's evolving programme of Public Service Reform.

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