

**MISSION
AUSTRALIA**

**Social Services
Legislation Amendment
(Drug Testing Trial) Bill
2019**

Social Services Legislation Amendment (Drug Testing Trial) Bill 2019 (Senate Standing Committee on Community Affairs)

Mission Australia is a national, non-denominational Christian charity that has been helping vulnerable Australians move towards independence for more than 160 years. In the 2017-18 financial year, we supported over 120,000 individuals through 461 programs and services.¹ We deliver a range of community and family services across Australia supporting people experiencing disadvantage including a large proportion of people in receipt of social security payments.

Mission Australia welcomes the opportunity to provide input into the Social Services Legislation Amendment (Drug Testing Trial) Bill 2019 (the Bill). This submission is based on a combination of research and insights from our direct service provision across Australia.

Recommendations

- The Bill be rejected in its entirety.
- The Government redirect the funding allocated for this trial to investing in more alcohol and drug treatment facilities within local communities depending on demand.
- Drug dependence should be treated as a health issue, rather than a social security compliance or justice issue.

Lack of evidence on effectiveness of this measure

Drug testing

Mission Australia has continuously opposed the introduction of drug testing of income support recipients. Experts, advocacy bodies, alcohol and drug services and community sector agree that drug testing income support recipients is inappropriate, ineffective and the investment can be directed for more effective strategies to support people in need. In 2013, the Australian National Council of Drugs stated that there is no evidence that drug testing welfare beneficiaries will have any positive effects for those individuals or for society, and some evidence indicating such a practice could have high social and economic costs.²

Considering that the rules in relation to drug tests are not finalised by the Government,³ and the explanatory memorandum acknowledging that there is a possibility of false positives for people who are

¹ Mission Australia, Annual Report, 2018, accessible at: <https://www.missionaustralia.com.au/publications/annual-reports/annual-report-2018>

² Australian National Council of Drugs, ANCD Position paper: Drug testing, 2013, p. 2, accessible at <http://www.atoda.org.au/wp-content/uploads/DrugTesting2.pdf>

³ Parliament of Australia, Social Services Legislation Amendment (Drug Testing Trial) Bill 2019, Explanatory Memorandum, Community Affairs Legislation Committee, , accessible at:

currently on various medications,⁴ it is possible that this measure will adversely impact on people who are unlikely to be dependent on drugs. Furthermore, those who test positive to drug use may or may not be dependent on substances.⁵ It is important to make a distinction between drug or alcohol ‘users’ and people who are ‘dependent’ on drugs.⁶ Evidence and research demonstrate that ‘some daily amphetamine users are not dependent’,⁷ however, the proposed trial will not make this distinction. There is also sufficient evidence to demonstrate that alcohol dependence is a much widespread issue compared to drug dependence.⁸

For those people who do have alcohol and drug dependency issues, stigma and shame are some of the most significant challenges to reaching out for support. Therefore, drug testing is likely to be counterproductive, as it may further stigmatise people experiencing a range of disadvantages and this stigma could disconnect them from community services and the social security system. This can increase the risk of homelessness, push people into poverty, increase dependence on emergency relief, health and other community services, and further marginalise people who are already experiencing disadvantage.

Further, we know from our experience in providing residential and non-residential services for people with alcohol and drug dependency across the country, that there is a severe shortage of available places or support options for people who are voluntarily seeking support. These challenges are aggravated with remoteness and there is a particular lack of services that are age appropriate, effective, flexible and culturally sensitive.

The *New Horizons: The review of alcohol and other drug treatment services in Australia* report estimates that between 200,000 and 500,000 more people would be in treatment if demand were to be fully met.⁹ From our service delivery experience, we know more detoxification and rehabilitation places are needed, including for young people. It is likely to be much more effective for the Government to redirect the funding allocated for this trial to invest in more early intervention supports and alcohol and drug treatment facilities.

If the drug testing trial proceeds, there will be more demand on already stretched alcohol and drug treatment services due to the increased number of people referred by Centrelink. This may mean that

<https://www.aph.gov.au/en/Parliamentary%20Business/Bills%20Legislation/Bills%20Search%20Results/Result/Second%20Reading%20Speeches?BillId=r6395>

⁴ Ibid p. 26

⁵ See further: R. Isralowitz, *Drug Use, Policy and management*, Second Edition, Westport CT, 2002 and A. Maxine, *Current Medical Diagnosis and Treatment*, McGraw-Hill Education, 2017.

⁶ Ibid

⁷ T. Waller and D. Rumball, *Treating Drinkers and Drug Users in the Community*, Chapter: prescribing Interventions, 2004, p. 201.

⁸ See further: Department of Health, *National Drug Strategy 2017–2026*, accessible at:

https://www.health.gov.au/sites/default/files/national-drug-strategy-2017-2026_1.pdf

⁹ A. Ritter, et al, *New Horizons: The review of alcohol and other drug treatment services in Australia*, Drug Policy Modelling Program National Drug and Alcohol Research Centre, 2014, p. 191.

people who are unprepared to access services are prioritised over those who are currently ready and waiting for the same opportunities to access services.

The vast majority of people accessing social security do not have drug and alcohol dependency issues and this measure is not well-targeted. Drug addiction is a health issue that impacts people regardless of their employment situation and should not be treated as a social security compliance issue.

The reading of the Bill¹⁰ and the Department of Social Service Drug Testing Trial Factsheet¹¹ highlighted that people receiving social security payments are three times more likely to have recently used drugs such as meth/ amphetamines than those who were employed. However, it is important to note that not all unemployed people are likely to be recipients of social security payments and that the proportions of people who use drugs are a small proportion of those surveyed. For example, 4.6% unemployed people have used meth/amphetamines compared to 1.5% people in employment, which means over 95% of the unemployed people surveyed indicated that they have not recently used meth/amphetamine.¹² An even smaller proportion of people who are unemployed have used cocaine recently (2.4% compared to 3.8% of employed people).

As discussed above, use of these drugs does not directly translate to drug dependence and the challenges to obtaining employment are often systemic issues. A significant proportion of people who are currently not in the workforce are experiencing a range of systemic challenges that are beyond their control such as lack of employment opportunities, changes in the labour market such as casualisation of work, lack of access to transport and discrimination. According to Australian Bureau of statistics, currently the general unemployment rate is 5.4% (seasonally adjusted) and youth unemployment rate is 11.9%.¹³ With similarly high levels of underemployment (people currently in employment looking for more hours), it is clear that many people are experiencing long-term unemployment due to the systemic and structural factors.

Compulsory income management

There is limited evidence both nationally and internationally to demonstrate that income management is an appropriate tool to support people receiving social security payments.¹⁴ However, evidence is available on the extensive negative impacts of the application of income management including

¹⁰ Parliament of Australia, Social Services Legislation Amendment (Drug Testing Trial) Bill 2019, Community Affairs Legislation Committee, accessible at: <https://www.aph.gov.au/en/Parliamentary%20Business/Bills%20Legislation/Bills%20Search%20Results/Result/Second%20Reading%20Speeches?BillId=r6395>

¹¹ Department of Social Service Drug Testing Trial Factsheet, 2017, accessible at: https://www.dss.gov.au/sites/default/files/documents/12_2017/c-b_fact_sheet.pdf

¹² Australian Institute of Health and Welfare, National Drug Strategy Household Survey 2016: Detailed findings, 2018, p. 52.

¹³ Australian Bureau of Statistics, 6202.0 - Labour Force, Australia, Jul 2019, accessible at: <https://www.abs.gov.au/AUSSTATS/abs@.nsf/Latestproducts/6202.0Media%20Release1Jul%202019?opendocument&tabname=Summary&prodno=6202.0&issue=Jul%202019&num=&view=>

¹⁴ E. Cox, When job seekers outnumber jobs 5 to 1, punitive policy is harmful, The Conversation, 9 July 2014, accessible at: <https://theconversation.com/when-job-seekers-outnumber-jobs-5-to-1-punitive-policy-is-harmful-28839>

increasing shame and stigma, issues with use of the card and the requirement to have access to internet, phones and other devices and unwarranted financial restrictions causing distress and having a negative impact on physical and emotional wellbeing.¹⁵ Some of these negative implications are highlighted in the evaluation report.¹⁶

Given the lack of availability of national or international evidence to support the use of income management and the significant hardship the card is causing people, Mission Australia does not support mandatory income management programs, including in response to drug testing.

Drug dependence is a health issue not a justice or social security issue

The Outcome Document of the 2016 United Nations General Assembly Special Session on drugs (UNGASS 2016), unanimously approved by the 193 Member States, recognised 'drug dependence as a complex multifactorial health disorder characterised by chronic and relapsing nature that is preventable and treatable.'¹⁷

United Nations International Standards for the Treatment of Drug Use Disorders promote science-based, humane and *voluntary services* and advocates that all measures must respect the rights of the person and the patient, including in such matters as *consent to treatment*, privacy and confidentiality, and that all strategies and services for drug treatment meet the same standards of care enjoyed by patients affected by other chronic diseases.¹⁸ Thus, the broader drug related harm reduction strategies should identify measures to categorise alcohol and drug dependence as a health issue and move away from criminal justice related responses. This shift in policy is likely to increase and encourage help seeking behaviour.

Encouragingly, New Zealand passed the Misuse of Drugs Amendment into law in August 2019, giving police discretion to take a health-centred approach rather than prosecuting those in possession of

¹⁵ J. Rob Bray, M. Gray et al, Evaluating New Income Management in the Northern Territory: Summary Report, 2014, accessible at:

https://www.tangentyere.org.au/publications/research_reports/Evaluating%20New%20Income%20Management%20in%20NT%20Summary.pdf and E. Klein, As costs mount, the government should abandon the Cashless Debit Card, The Conversation, 12 December 2017, accessible at: <https://theconversation.com/as-costs-mount-the-government-should-abandon-the-cashless-debit-card-88770>

¹⁶ K. Mavromasras et al, Cashless Debit Card Baseline Data Collection in the Goldfields Region: Qualitative Findings, University of Adelaide, 2019, p., accessible at:

https://www.dss.gov.au/sites/default/files/documents/04_2019/cdc-baseline-data-collection-qualitative-findings-29-march-2019.pdf

¹⁷ United Nations Office on Drugs and Crime, The Outcome Document of the 2016 United Nations General Assembly Special Session on drugs: Our joint commitment to effectively addressing and countering the world drug problem, 2016, p.6, New York, accessible at:

<https://www.unodc.org/documents/postungass2016/outcome/V1603301-E.pdf>

¹⁸ United Nations Office on Drugs and Crime, International Standards for the Treatment of Drug Use Disorders, 2016, accessible at: https://www.unodc.org/docs/treatment/UNODC-WHO_2016_treatment_standards_E.pdf

drugs, including class A drugs like methamphetamine, heroine and cocaine.¹⁹ To support the new legislation, the New Zealand government has increased funding for substance dependence treatment services and is establishing a multi-agency drug early warning system.²⁰ A similar approach can be adopted in Australia to change the current justice related response to ensure people are able to access alcohol and drug treatments voluntarily.

¹⁹ M. Abbott, New law gives NZ police discretion not to prosecute drug users, but to offer addiction support instead, The Conversation, 9 September 2019, accessible at: <https://theconversation.com/new-law-gives-nz-police-discretion-not-to-prosecute-drug-users-but-to-offer-addiction-support-instead-122323>

²⁰ *ibid*