



Submission to the Senate Community
Affairs Legislation Committee on the
Social Services Legislation Amendment
(Drug Testing Trial) Bill 2018

UnitingCare Australia
11 April 2018

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UnitingCare Australia is the national body for social services in the Uniting Church in Australia, supporting service delivery and advocacy for children, young people, families, people with disabilities, and older people

UnitingCare Australia takes this opportunity to comment on provisions of the Social Services Legislation Amendment (Drug Testing Trial) Bill 2018.

We would like to reiterate the concerns around the establishment of a drug testing trial which we raised in our Submission to the Senate Committee Inquiry on the Social Services Legislation Amendment (Welfare Reform) Bill 2017. While we were pleased that the drug testing trial was removed from that original Bill, we are disappointed that the initiative has been reintroduced under a separate Bill with little consideration of the feedback provided by ourselves and others in the community service and health sector.

UnitingCare Australia is the national office representing the community services of the Uniting Church in Australia. Our services operate nationally across more than 1,300 sites in metropolitan, rural and remote Australia, delivering services to people across the life course. The views reflected in this submission are informed by the expertise from within the Uniting Church's community services network, particularly those focused on alcohol and other drug treatment and prevention.

Under the proposed legislation new recipients of Newstart Allowance and Youth Allowance (other) will be randomly selected to undertake a drug test in three locations across the country. Anyone who tests positive will be subject to income management for 24 months and be subject to further drug testing. If the recipient fails subsequent drug tests they will be referred to a Department of Human Services' contracted medical professional for assessment. If that professional recommends treatment, the recipient will be required to complete the recommended treatment activities designed to address their substance abuse as part of their Employment Pathway Plan. Where treatment is not immediately available, recipients will be required to be on a waiting list to satisfy part of their mutual obligation requirements.

Substantial evidence and research, from Australia and abroad, indicate that random drug testing policies have routinely proven ineffectual in achieving their aim of deterring drug use and dependency¹. Underpinning this research is the finding that addiction is a serious and complex health issue, characterised by an individual's propensity to relapse and engage in compulsive behaviours². Moreover, as observed in the *National Drug Strategy 2017-2026*, "people with mental health conditions use alcohol, tobacco and other drugs for the same reasons as other people, however, they may also use because the immediate effect can provide an escape from symptoms"³.

As such, responses to AOD treatment and prevention must be comprehensive and evidence-based, with a focus on addressing the root causes of the presenting issue. They must take into account both social and health determinants of drug use and dependency. We strongly caution that imposition of compulsory drug testing has not been shown to decrease drug dependency or incarceration rates, and indeed with some studies revealing potential further harms caused by this approach⁴.

¹ See Appendix 1.

² National Institute on Drug Abuse. 2012. *Understanding Drug Abuse and Addiction*. Available at: https://www.drugabuse.gov/sites/default/files/drugfacts_understanding_addiction_final_0.pdf

³ Commonwealth Department of Health. 2017. *National Drug Strategy 2017-2026*. Available at: [http://www.health.gov.au/internet/main/publishing.nsf/Content/55E4796388E9EDE5CA25808F00035035/\\$File/National-Drug-Strategy-2017-2026.pdf](http://www.health.gov.au/internet/main/publishing.nsf/Content/55E4796388E9EDE5CA25808F00035035/$File/National-Drug-Strategy-2017-2026.pdf)

⁴ Werb et al. 2015. *The Effectiveness of Compulsory Drug Use*. Available at: [http://www.ijdp.org/article/S0955-3959\(15\)00358-8/pdf](http://www.ijdp.org/article/S0955-3959(15)00358-8/pdf)

Furthermore, UnitingCare Australia highlights that AOD treatment services in Australia are currently overstretched and inadequately resourced to meet demand⁵. That full costs associated with implementing the trial have not yet been disclosed is of great and grave concern. Given that it is known at least half of all people in Australia who seek treatment for AOD issues/dependence are turned away due to lack of treatment availability, the spending of precious resources with little regard to evidence seems unfounded⁶. There are significant administrative and medical costs for implementing such a complex initiative. Clearly scarce resources are better expended on reducing the long waiting lists that already exist for people seeking access to treatment services for reducing drug dependency.

We take the opportunity to commend for reconsideration the following recommendations forwarded in the *National Ice Taskforce Final Report*⁷ and encourage the Government to pursue these as an alternative course of action:

- Recommendation 2 - The Commonwealth, state and territory government should provide additional funding to communities to empower them to develop locally-based solutions to ice and other illicit drug issues.
- Recommendation 3 - The Commonwealth, state and territory governments should work together to improve coordination between community-based alcohol and other drug services, and support referral pathways between local health, support, employment and other programmes.
- Recommendation 18 - The Commonwealth, state and territory governments should further invest in alcohol and other drug specialist treatment services. This investment must:
 - target areas of need—this includes consideration of regional and remote areas and Indigenous communities
 - be directed toward evidence-based treatment options and models of care for every stage of a patient journey
 - involve consultation across the Commonwealth, states and territories and the alcohol and other drug sector
 - be subject to a robust cost-benefit evaluation process
 - ensure service linkages with social, educational and vocational long-term supports.

UnitingCare Australia also raises concerns regarding how the drug testing trial will be administered. The legislation proposes that at a first appointment the recipients will be notified that they are required to undertake a random drug test immediately. We raise significant concerns with this approach, given the evidence available indicating that enabling positive behavioural change to reduce or prevent drug dependency is more likely to occur when approaches are rational, empowering and provide autonomy to individuals, as well as a sense of them 'feeling connected'. UnitingCare Australia raises concerns around the ability of Centrelink staff to be adequately prepared and trained to deliver this information and support recipients appropriately.

We cite the recommendation of the *National Drug Strategy 2017-2026* that, "investing in strategies to enhance social engagement [and] re-integration with community, is central to

⁵ Drug Policy Modelling Program - National Drug and Alcohol Research Centre. 2014. *New Horizons: The Review of Alcohol and Other Drug Treatment Services in Australia*. Available at: [http://www.health.gov.au/internet/main/publishing.nsf/content/FD5975AFBFD7013CA258082000F5DAB/\\$File/The-Review-of-alcohol-and-other-drug-treatment-services-in-Australia.pdf](http://www.health.gov.au/internet/main/publishing.nsf/content/FD5975AFBFD7013CA258082000F5DAB/$File/The-Review-of-alcohol-and-other-drug-treatment-services-in-Australia.pdf)

⁶ Ritter, A and Stoope, M, *Alcohol and other drug treatment policy in Australia*. Available at: <https://www.mja.com.au/journal/2016/204/4/alcohol-and-other-drug-treatment-policy-australia>

⁷ National Ice Taskforce. 2015. *Final Report of the National Ice Taskforce*. Available at: https://www.pmc.gov.au/sites/default/files/publications/national_ice_taskforce_final_report.pdf

successful interventions that can reduce alcohol and drug demand and related problems, including dependence”⁸.

UnitingCare Australia also questions the ability of testing alone – when not accompanied by a comprehensive health assessment to determine dose, frequency of drug use and other factors – to provide any useful information regarding the extent to which drug use impacts other issues, such as an individual’s ability to find employment. Specifically, the need to determine whether drug use has a greater impact on unemployment than other issues, such as lack of available employment opportunities, is vital, given the Bill’s purported intention of improving a recipient’s capacity to find employment or participate in education or training. Additionally, there is little detail on who would undertake the assessments given the limited number of appropriately skilled doctors in Australia and the concern from the medical profession to the drug testing concept.

Other components or anticipated consequences of the drug testing trial that the believe are of concern include:

- the propensity for increased stigmatisation of people with substance dependencies resulting from the need to engage in compulsory drug testing and the likelihood that stigmatisation may further impede their effective treatment;
- a lack of detail regarding who will constitute a “Department of Human Services’ contracted medical professional”, and whether they will be required to have specific qualifications in AOD treatment and prevention;
- the extent to which testing is likely to return false negative and false positive outcomes, even with use of the most accurate technologies, and the costs associated with confirming accurate results;
- the inability of the proposed drug testing to distinguish between occasional drug users and those who are drug dependent, which will likely impede the effectiveness of the strategy in positively changing behaviours around drug use. This is on the basis that, as identified in the *National Drug Strategy 2017-2026*, “a range of harms are associated with different types and patterns of drug use” and “the response to these harms requires a multifaceted response”⁹; and
- the problematic reliance on findings from the Ceduna and East Kimberley Income Management trials, which provide an insufficient basis of evidence from which to anticipate effectiveness of the proposed strategy¹⁰.

UnitingCare Australia observes that limited consultation appears to have occurred with medical professionals or other experts in the health and welfare sectors to develop the trial proposal. We strongly advocate the need for expertise from these areas to inform the design of any strategies or activities aimed at AOD treatment and prevention. This position is consistent with the *National Drug Strategy 2017-2026*’s focus on building strong and effective partnerships across different jurisdictions to design and implement successful strategies towards AOD treatment and prevention.

We commend to the Committee a video resource produced by Uniting in NSW and ACT, featuring representatives of MSIC and Newpin, highlighting the powerful impact of effective

⁸ Commonwealth Department of Health. 2017. *National Drug Strategy 2017-2026*. Available at: [http://www.health.gov.au/internet/main/publishing.nsf/Content/55E4796388E9EDE5CA25808F00035035/\\$File/National-Drug-Strategy-2017-2026.pdf](http://www.health.gov.au/internet/main/publishing.nsf/Content/55E4796388E9EDE5CA25808F00035035/$File/National-Drug-Strategy-2017-2026.pdf)

⁹ Commonwealth Department of Health. 2017. *National Drug Strategy 2017-2026*. Available at: [http://www.health.gov.au/internet/main/publishing.nsf/Content/55E4796388E9EDE5CA25808F00035035/\\$File/National-Drug-Strategy-2017-2026.pdf](http://www.health.gov.au/internet/main/publishing.nsf/Content/55E4796388E9EDE5CA25808F00035035/$File/National-Drug-Strategy-2017-2026.pdf)

¹⁰ For further information on UnitingCare Australia’s position regarding this issue, see Appendix 1.

prevention and early intervention services that can deliver lasting results that positively impact on people's lives¹¹.

In conclusion, UnitingCare Australia believes that investment is better targeted at prevention and early intervention strategies that are evidence-based and will deliver more positive and sustainable results for people seeking treatment and support. Such measures will also deliver a stronger return on the investment of Government resources.

We thank the Committee for its consideration of the feedback provided and invite the opportunity to comment further on any of the issues raised in this submission.

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¹¹ Available at: <https://www.youtube.com/watch?v=dL8HHXHqmls&feature=youtu.be>