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3 April 2018

Submission Regarding Social Services Legislation Amendment (Drug Testing Trial) Bill 2018

We welcome the opportunity to make a submission regarding the *Social Services Legislation Amendment (Drug Testing Trial) Bill 2018* currently before the Standing Committee on Community Affairs Legislation Committee.

360Edge is Australia's leading specialist alcohol and other drug consultancy, combining decades of academic research and clinical experience to provide effective evidence-based solutions to alcohol and drug related policy and responses.

As was previously outlined in our submission regarding the *Social Services Legislation Amendment (Welfare Reform) Bill 2017* (Cth),[1] 360Edge has significant reservations about the proposed drug-testing trial.

In particular, we emphasise that:

1. The drug testing proposal is not supported by any evidence and is unlikely to achieve its intended objective.
2. The proposal reflects an over-simplified understanding of the complex relationship between drug use and unemployment
3. The proposal is likely to unethically impact and discriminate against welfare recipients who use drugs.

Lack of evidence supporting drug testing

There is little evidence in support of drug testing

Drug testing does not represent evidence-based public policy. Despite implementation in some jurisdictions overseas, there have been very few peer-reviewed evaluations of the effectiveness of drug testing welfare recipients.

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[1] 360Edge Submission, Senate Community Affairs, 2 August 2017

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Drug testing is ineffective in changing behaviour

Drug tests have not proven a viable intervention to impact behaviour change in areas such as the workplace[2] or schools[3].

The evidence suggests it is likely to be ineffective at decreasing rates of illicit drug use amongst welfare recipients, and therefore serves only to effectively punish people for using illicit drugs.

Drug testing can increase risks and harms

Drug testing cannot test for all drugs, so the risk is that people will merely shift to other types of (more dangerous) drugs in order to avoid detection, rather than ceasing drug use, increases the overall impact and harms associated with drug use.

Without evidence of effectiveness, costs associated with implementing drug testing in Australia far outweigh the benefits, if there are any.

Unemployment and Drug Use

The proposed amendments implicitly assume that illicit drug use has a direct role in persistent unemployment.

Although the proportion of unemployed people who use drugs is higher than the proportion of employed people, the vast majority of people who use drugs are employed.

According to the 2016 National Drug Strategy Household Survey, unemployed people are around 1.3 times more likely to have used illicit drugs in the last 12 months when compared to employed people.[4] However, the 2016 National Drug Strategy Household Survey also found that unemployed people are more likely to have never used illicit drugs than employed people (See below).

This demonstrates a complex relationship between illicit drug use and unemployment. Fewer unemployed people use drugs but those that do are more likely to have used in the last 12 months.

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[2] Lee N, Roche A, Duraisingam V, Fischer J, Cameron J, Pidd K. 'A systematic review of alcohol interventions among workers in male-dominated industries.' (2014) 11(2) *Journal of Men's Health* 53-63.
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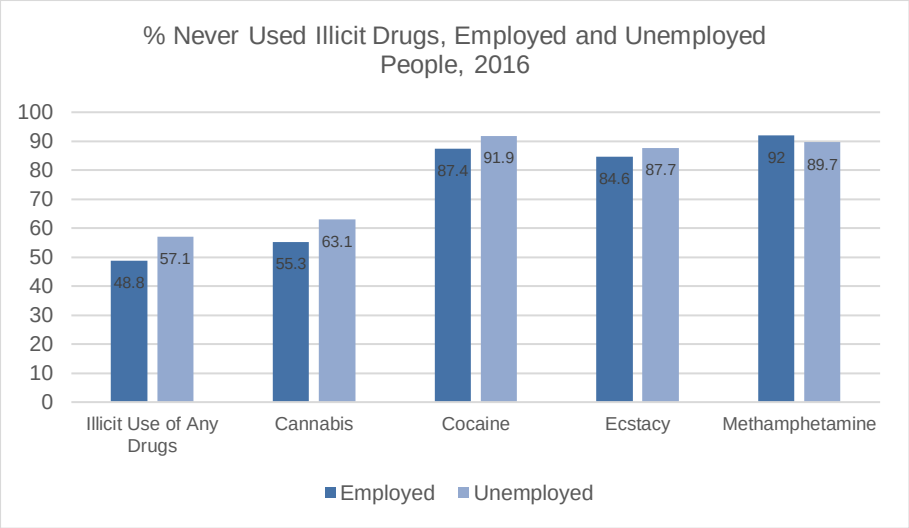

Source: AIHW 2016 National Drug Strategy Household Survey

Moreover, the focus of drug testing on illicit drug use does not give a clear indication of problematic patterns of use likely to impact job seekers.

Very few people who use drugs develop dependence (sometimes referred to colloquially as 'addiction'). Of the 1.4% of Australians over 14 years that use methamphetamine, for example, around 15% meet the threshold for dependence[5]. This means that 85% of people who recently used methamphetamine are not dependent. Similarly, 10% of people who use cannabis[6] and 6% of people who drink alcohol[7] are likely to be dependent. Most people who use illicit drugs use less than once a month.

Drug testing is likely to impact people who are not dependent, and whose illicit drug use does not pose a barrier to wilful employment. While illicit drug use is an illegal activity, there are already mechanisms that apply to the whole community to respond to illicit drug use, and additional measures among welfare recipients are merely discriminatory.

In addition, according to Ross Bell, Executive Director of the New Zealand Drug Foundation, implementation of a drug testing measure for welfare recipients for certain job placements in New Zealand has resulted in so few positive tests (450 out of 95,000 tests), the Australian scheme Is not likely to be cost effective.[8] The result would be further stigmatisation of both people on welfare and people who use drugs to no benefit to the individual, community or the government.

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ABC News, published online 13 May 2017 < http://www.abc.net.au/news/story-streams/federal-budget-2017/2017-05-13/federal-budget-2017-nz-welfare-orgs-warn-drug-test-dole-policy/8523738>

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Discrimination

Accuracy problems

Drug testing is also not without significant accuracy flaws. One review of drug testing in the United States found that the method was subject to both false positives (positive test results for those that had not used drugs) and false negatives (negative results for those that had used drugs).[9] This raises serious ethical concerns given the punitive income management consequences of a positive drug test.

Testing does not address underlying causes of dependence

Drug dependence is a chronic, relapsing condition. The overall relapse rate for people who are dependent on drugs is around 50% after one year[10], a similar relapse rate to other chronic conditions such as heart disease and diabetes[11]. Even for people are making progress in treatment, full abstinence is not always an immediate outcome of treatment[12]. There are multiple and complex reasons for relapse[13].

Moreover, drug dependence is strongly correlated with a range of co-occurring conditions and personal factors, which can impact recovery. These include poor mental health, childhood abuse or trauma as well as poor emotional regulation skills [14].

Income management will not address the underlying causes of drug dependence, nor its consequences, and may increase stress, stigma and the likelihood of relapse. People who feel stigmatised are more likely not to seek help, further reducing the likelihood of reducing use through these measures[15].

Rights to refuse treatment

In addition, implicit in the proposed legislation is 'defacto' forced treatment for those who test positive to illicit drugs multiple times. There is little evidence for the effectiveness of forcing people into treatment.[16] More generally, most state mental health legislation has moved explicitly or implicitly to enable people to competently refuse treatment they do not want, aligning with physical health rights.

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Conclusion

Overall the proposed amendments reflect a narrow, punitive approach to drug dependence that is not in keeping with the latest research into drug treatment and recovery.

Given the lack of evidence supporting drug testing of welfare recipients, and the significant increase harms likely to result from this legislation, 360Edge does not support the *Social Services Legislation Amendment (Drug Testing Trial) Bill 2018* (Cth).

Yours sincerely,

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