

QCOSS and QNADA position statement

Drug Testing Trials

Our position

Everyone in Queensland deserves to live a good life, but many people on low incomes don't have enough money to afford the basics. Queensland Council of Social Service (QCOSS) and the Queensland Network of Alcohol and Other Drug Agencies (QNADA) believe an effective social security system is a critical part of a civil society and supports social cohesion. However, the current social safety net is fundamentally inadequate.

We do not support the proposed drug-testing trial. There is no evidence that drug testing people who access income support results in increased employment, decreased drug use, or increased access to treatment. We stand with the numerous health and policy experts who described the drug testing trial in their submissions to the previous Senate Inquiry as a harmful response to important community and health issues.

The drug testing trial will further stigmatise people who receive income support and contribute to people experiencing problems with drugs being less likely to seek help. The proposed trial incorrectly associates drug use with unemployment, and wrongly equates regular or problematic patterns of drug use with intensive or dependent patterns of use.

Increasing income support and increasing access to alcohol and other drugs treatment options are both more likely to have positive outcomes for people whether or not they are experiencing employment issues or alcohol and other drugs issues.

We must end the stigmatisation of people accessing income support as 'undeserving'. They are not in need of punitive motivation in order to achieve self-reliance or a work ethic. Instead we must ensure **everybody** is able to access the supports they need to live a meaningful life. This is not possible with inadequate income support payments leaving people vulnerable.

Recommended actions

We call on politicians and policymakers to make decisions that prioritise equality, opportunity and wellbeing for every person in every community, by:

1. recognising that most people who use drugs do not experience unemployment and most people who are unemployed do not use drugs.
2. ceasing attempts to introduce drug testing trials for people accessing income support, when there is evidence it is harmful.
3. accepting the evidence on effective responses to problematic substance use and on employment issues.
4. exploring alternative solutions to increase employment opportunities.
5. adopting a place-based, citizen-led approach to reduce harms from substance use that ensures people impacted by the approach are involved in decision-making.
6. ensuring that the approach incorporates an economic development focus to make sure that participants have a pathway to employment.
7. ending stigmatising narratives that frame people receiving income support as 'welfare dependent', and people who use drugs as non-contributing members of society.

Rationale

Purpose and objectives

The Bill misunderstands drug use, dependence and associations with employment issues. There is no causal link between drug use and employment issues. According to the National Drug Strategy Household Survey detailed findings (2016), of those who used drugs in the last

year, around 17.6 per cent were employed and 23.6 per cent were unemployed. Regardless, around 11-12 per cent of people who use drugs experience dependence or require treatment (UNODC, 2017).

The Department of Social Services (DSS) indicated to the previous inquiry *“that the drug testing trial would be used to assess whether drug use in the welfare context is inhibiting people from moving into employment.”* (SCALC, 2018). However according to the Bill’s Explanatory Memorandum (Commonwealth, 2019) the aim of the trial is *“to improve a recipient’s capacity to find employment or participate in education or training by identifying people with drug use issues and assisting them to undertake treatment”*, presuming that *“substance abuse [sic] is a major barrier to social and economic participation”*, despite the stated aim of testing this assumption.

Other problems with the purpose and objectives of the Bill include:

- It does not distinguish between people experiencing problems or dependence and those who use occasionally or recreationally.
- It is silent on alcohol, which contributes to the most harm.
- There is no explanation or guidance on how testing errors will be managed.
- Similar trials around the world show that drug testing leads to several adverse consequences, without achieving the objectives of supporting people into employment, or improving the integrity of the social security system, (ANCD, 2013).

Process and cost

An estimated 5,000 people are expected to be tested at least once during the trial. One of the trial sites would be Logan, Queensland, in which 2,500 income support recipients will be tested (DSS, 2017). Based on the statistics cited above (UNODC, 2017), there is likely to be about one in four people tested who may have used an illicit drug in the last year (1,250 people nationally). Of those, around 12 per cent will be experiencing dependence or require treatment. If all 1,250 were to return positive results, which is highly unlikely, this amounts to 150 people. This means there are likely to be fewer than 150 people who are clinically indicated for treatment and even fewer where drug use is the primary factor impacting on employment.

Testing each of the 5,000 participants has been estimated to cost between \$500-\$900 per test; a total cost of \$2.5 million at the most conservative end. This is around \$16,500 per person if 150 were clinically indicated for treatment, costing more than the annual Newstart allowance for a single person with a dependent child.

Expert evidence

Health and drug treatment experts have unanimously opposed the proposed trial in their submissions to the previous Senate Inquiry, citing a range of evidence against the trial:

- A review of evidence by the Australian National Council on Drugs (ANCD) led to the recommendation that people accessing income support not be drug tested. Their paper concluded that *“There is limited evidence available on the effectiveness of drug testing welfare recipients for deterrence of drug use, increasing employment participation, or reducing welfare spending”* (ANCD, 2013).
- An expert review of a Canadian Government drug testing trial proposal in Ontario published in the *International Journal of Drug Policy* found that such a program could increase crime, health problems and be legally challenged as a violation of human rights, (Macdonald et al, 2001).
- Recent systemic reviews concluded there is no evidence that suggests improved outcomes related to other models of compulsory treatment, with some studies suggesting the potential of severe harms (Werb et al, 2016).
- There are a range of misunderstandings and interpretation issues regarding the data used to justify the Bill. For example, the statement *“those who were unemployed were 3.1 times more likely to use ice and other amphetamines than those who were employed”* (DSS, 2017) included in a DSS fact sheet about the drug testing trial is

selective and misleading when taken out of the context of the full National Drug Strategy Household Survey detailed findings (2016).

Ethics and human rights

The drug testing trial creates ethical issues for its implementation and effective evaluation:

- The trial is not being implemented with existing recipients of income support due to consent being required before the testing can be administered. For new recipients of income support, consent is gained by coercion (that is if a person refuses to consent to drug testing, they will not receive income support). Drug testing is invasive (that is follicle, saliva or urine) and limits the right to privacy and dignity of new recipients who have not done anything to warrant such limitations.
- The Law Institute of Victoria believes that drug testing people accessing income support raises issues of discriminatory treatment under the International Covenant on Economic, Social and Cultural Rights, (McFadden, 2017).
- The Australian Human Rights Commission sets out in their submission (AHRC, 2018) the criteria for income management measures, in accordance with the Racial Discrimination Act 1975, that they must be evidence-based, a last resort, and the least restrictive option. This trial does not meet this criteria.

Change the narrative

Our income support system is intended to provide a critical safety net for people when they need it. People who access income support come from a range of backgrounds, require support for a range of reasons. In many cases they have been disadvantaged by a complex web of systemic factors and let down by the systems that are meant to provide support when people most need it. Governments and media must end the stigmatisation of people accessing income support as 'undeserving'. It is counter-productive to imply that these people need punitive motivation and discipline to achieve self-reliance and a work ethic.

The federal House of Representatives select committee on 'intergenerational welfare dependence' report "*Living on the Edge*" sets a good example on this issue (House of Representatives Select Committee, 2019). The committee is to be applauded for responding to criticism of the title of the inquiry and replacing the term 'intergenerational welfare dependency' (which falsely implied personal fault) with 'entrenched disadvantage' throughout the report. This correction acknowledges the complex cause of entrenched disadvantage, which includes the systems intended to support people.

A key finding of this committee review was that poverty itself is a driver for entrenched disadvantage, and as such the report recommends a review of the adequacy of income support payments (including Newstart). Implementing such an increase to income support and improving access to alcohol and other drugs treatment through funding treatment services to better meet demand will address the issues that the proposed drug testing trial seeks to solve.

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QCOSS

We are QCOSS (Queensland Council of Social Service), Queensland's peak body for the social service sector.

Our vision is to achieve equality, opportunity and wellbeing for every person, in every community.

We believe that every person in Queensland – regardless of where they come from, who they pray to, their gender, who they love, how or where they live – deserves to live a life of equality, opportunity and wellbeing.

We are a conduit for change. We bring people together to help solve the big social issues faced by people in Queensland, building strength in numbers to amplify our voice.

We're committed to self-determination and opportunity for Aboriginal and Torres Strait Islander people.

QCOSS is part of the national network of Councils of Social Service lending support and gaining essential insight to national and other state issues.

QCOSS is supported by the vice-regal patronage of His Excellency the Honourable Paul de Jersey AC, Governor of Queensland.

Join us to mobilise a force for equality, opportunity and wellbeing. To join visit the QCOSS website (www.QCOSS.org.au).

QNADA

The Queensland Network of Alcohol and Other Drug Agencies (QNADA) is the peak organisation representing the views of the non-government alcohol and drug sector in Queensland. QNADA provides representation and support to the alcohol and other drugs treatment and harm reduction sector.

QNADA is committed to supporting our member agencies to deliver high quality services to individuals, families, and communities affected by alcohol and other drugs.

QNADA members provide a range of alcohol and other drugs services including residential treatment, withdrawal management (detox), individual and family counselling, outreach, case management, intoxication management, continuing care and harm reduction services. We actively engage and support staff at all levels of each member agency, recognising that every part of an organisation contributes to the quality of services provided.

QNADA is committed to supporting our member agencies to deliver high quality services to individuals, families, and communities affected by alcohol and other drugs. The services provided to our member agencies are evolving as we grow. We actively engage and support staff at all levels of each member agency, recognising that it is every part of an organisation that contributes to the high quality of services provided.

To join visit the QNADA website (<https://qnada.org.au/>).

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