



**St Vincent de Paul Society**  
NATIONAL COUNCIL *good works*

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

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## Introduction

The St Vincent de Paul Society opposes mandatory drug testing of people who receive income support. There is no evidence that mandatory drug testing has any positive effects. It is expensive, discriminatory and stigmatising and does not remove disadvantage. It deflects attention from underlying structural factors that drive inequality and poverty, while scapegoating people who receive income support.

Consequently, this Bill is not compatible with human rights. Although the stated object to reduce drug addiction is legitimate, the impact is neither reasonable, necessary nor proportionate. This Bill therefore should be rejected in its entirety.

## Who we are

The St Vincent de Paul Society (the Society) is a respected lay Catholic charitable organisation operating in 149 countries around the world. Our work in Australia covers every state and territory, and is carried out by more than 64,000 members, volunteers, and employees. Our people are deeply committed to social assistance and social justice, and our mission is to provide help for those who are marginalised by structures of exclusion and injustice. Our programs assist millions of people each year, including people living with mental illness, people who are homeless and insecurely housed, migrants and refugees, women and children fleeing violence from men, and people experiencing poverty.

## The seriousness of substance addiction

The members of the St Vincent de Paul Society are acutely aware of the seriousness of substance addiction and the pain and suffering that it causes to so many in our community. Each day members are in touch with people whose lives have been thwarted by drug addiction and abuse. As we reach out the helping hand of respect and compassion we cannot help but feel the pain that they and their families experience. In walking together with our companions, we are also aware of the many complex factors that lead to drug abuse as well as the great difficulty in overcoming it.

Along with the medical reasons that may make a person more vulnerable, for instance mental illness, there are also structural problems such as poverty and family history issues such as child abuse. We are also acutely aware that when a person starts to look for specialised help to overcome addiction, the resources to assist are scandalously few, and there are long waiting lists.

While the Society strongly opposes this particular legislation, it is not because substance addiction is not a serious problem. Rather, it is because this legislation will not lead to the desired outcomes and will divert resources from services and evidence-based approaches that would be successful. It also has the potential to create greater levels of harm, including increased stigma, marginalisation and poverty. While reducing the harmful effects of drug addiction is a legitimate policy objective, the social security system is neither an appropriate nor effective lever for achieving such outcomes.

## **A measure with no evidence is not reasonable**

One of the aims of this trial is to “test the effectiveness of decreasing substance abuse through random drug testing.”<sup>1</sup> The overwhelming opinion of those in the medical and drug rehabilitation field is that there is no evidence that mandatory drug testing of people receiving income support is useful in helping people overcoming drug addiction. Below is a sample of the many expert voices that have spoken out against the measure.

The Royal Australian College of Physicians in an earlier submission to the Senate on the *Social Services Legislation Amendment (Welfare Reform) Bill 2017* stated that the proposed drug testing regime “is not supported by current evidence.”<sup>2</sup> They further commented, “It is clear that drug testing regimes are not only expensive but also fail to identify problematic drug use.”<sup>3</sup>

In 2013, the Australian National Council on Drugs, which is a key advisory body on drug policy to the Australian Government, advised 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.”<sup>4</sup>

The National Drug Research Institute concluded that the proposed drug testing trial “is not based on reliable research, and there are no grounds for adopting it as a measure to reduce alcohol or other drug use or related harm. Instead it has the potential to increase harm, including stigma, marginalisation and poverty.”<sup>5</sup>

In a submission to the current inquiry, the Royal Australian and New Zealand College of Psychiatrists have noted that “more than fifty years of psychological research shows that positive reinforcement strategies are more effective than punitive strategies in terms of behaviour change.”<sup>6</sup>

When Australian experts in the field conclude that there is no evidence that drug testing of income support recipients will be successful in drug addiction, it cannot be argued that such a measure is reasonable. To be reasonable it must be based on facts, not political expediency and emotion.

## **A measure neither necessary nor proportionate**

The explanatory memorandum to this Bill also explains that “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 issues and assisting them to undertake treatment.”<sup>7</sup>

In the previous section it was outlined how the overwhelming expert opinion was that mandatory drug testing would be unsuccessful and therefore unreasonable. In this section it will be outlined how this results in unnecessary and disproportionate actions against people receiving income support payments.

The Australian Medical Association (AMA) has previously raised concerns about the drug testing trial. In the first instance they point out that there is no distinction between people with substance dependence and those who are occasional or one-off drug users. They comment that “This means that welfare recipients who return a positive test will be subject to exactly the same response – income management, subsequent drug testing, mandatory treatment and ultimately cancellation of their payment – despite having very different needs.”<sup>8</sup> This can hardly be regarded as a proportionate response as it will penalise those who do not need treatment and whose occasional drug use does not in any way interfere with their job seeking activity.

Furthermore, the great majority of people forced to submit to a drug test will not be users of illicit drugs. For instance, the Australian Institute of Health and Welfare Household Survey of 2013 indicated that 75.5% of unemployed people had not used illicit drugs in the previous 12 months.<sup>9</sup> This large group will therefore be subject to intrusive and possibly stigmatising drug tests that will have no benefit to them. Should members of this group refuse the drug testing for reasons unrelated to drug usage, for example because of misunderstanding or needle phobia, then they will be further penalised. Blanket testing of populations can have many unforeseen consequences.

The AMA also raise the concern about the lack of any additional funding commitments to drug intervention to help people referred because of the testing at a time when demand for treatment in Australia outweighs availability of services. A process that increases referrals to services that are currently overstretched can hardly be regarded as necessary. What is necessary is to increase treatment services so that all those who wanted to voluntarily use them could access them. Given the potentially high costs of a mandatory testing program, the money would be far better spent on improving services for the people already eager to use them.

Furthermore, as the Kirby Institute have pointed out “poverty remains a major issue for people with alcohol and other drug dependence. Any policy that actually increases inequality reduces health outcomes. The removal of income support payments is precisely such a policy. There is no evidence that keeping people in poverty decreases consumption of alcohol or other drugs or improves health.”<sup>10</sup> This is yet another example of why the measures in this Bill are not proportionate.

## Conclusion

This is a Bill whose claims for efficacy in addressing the serious issue of drug addiction has no basis in evidence. It will inconvenience large numbers of people who receive income support who have never used drugs. It will drive many people into deeper poverty. It will not help people with a serious drug addiction. It will be expensive and divert resources away from treatment services that are evidence-based. Its purpose appears to be not to help, but simply to symbolically create a distinction between us and them.<sup>11</sup> This Bill should be rejected in its entirety.

## REFERENCES

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- <sup>4</sup> ANCD. Position Paper: Drug Testing August 2013. p.2. <http://www.atoda.org.au/wp-content/uploads/DrugTesting2.pdf>
- <sup>5</sup> NDRI. Submission to the Inquiry into the Social Services Legislation Amendment (Welfare Reform) Bill 2017. Submission no 23. p.1. [https://www.aph.gov.au/Parliamentary\\_Business/Committees/Senate/Community\\_Affairs/WelfareReform/Submissions](https://www.aph.gov.au/Parliamentary_Business/Committees/Senate/Community_Affairs/WelfareReform/Submissions)
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- <sup>7</sup> Explanatory Memorandum. Social Services Legislation Amendment (Drug Testing Trial) Bill 2018. p.4. [http://parlinfo.aph.gov.au/parlInfo/download/legislation/ems/r6065\\_ems\\_5df415e5-bf55-4745-8db8-6d653265a900/upload\\_pdf/665144.pdf;fileType=application%2Fpdf](http://parlinfo.aph.gov.au/parlInfo/download/legislation/ems/r6065_ems_5df415e5-bf55-4745-8db8-6d653265a900/upload_pdf/665144.pdf;fileType=application%2Fpdf)
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- <sup>9</sup> AIHW. National Drug Strategy Household Survey detailed report: 2013. Table 8.3: Drug use by employment status. <https://www.aihw.gov.au/reports/illicit-use-of-drugs/2013-ndshs-detailed/data>
- <sup>10</sup> The Kirby Institute. Submission to the Inquiry into the Social Services Legislation Amendment (Drug Testing Trial) Bill 2018. Submission no 4. p.3. [https://www.aph.gov.au/Parliamentary\\_Business/Committees/Senate/Community\\_Affairs/DrugTestingTrial/Submissions](https://www.aph.gov.au/Parliamentary_Business/Committees/Senate/Community_Affairs/DrugTestingTrial/Submissions)
- <sup>11</sup> Peter Whiteford. Budget 2017: welfare changes stigmatise recipients and are sitting on shaky ground. <https://theconversation.com/budget-2017-welfare-changes-stigmatise-recipients-and-are-sitting-on-shaky-ground-77394>