

WANADA Response to Senate Community Affairs Committee

Social Services Legislation Amendment (Drug Testing Trial) Bill 2019

About WANADA

The Western Australian Network of Alcohol and other Drug Agencies (WANADA) is the peak body for the alcohol and other drug education, prevention, treatment and support sector in Western Australia. WANADA is an independent, membership-driven not-for-profit association.

WANADA is driven by the passion and hard work of its member organisations, which include community alcohol and other drug counselling; therapeutic communities; residential rehabilitation; intoxication management; harm reduction; peer based; prevention; and community development services.

WANADA's Position

WANADA is not supportive of the proposed welfare drug testing trial and believe there to be more effective options available to improve both job readiness and access to specialist alcohol and other drug services. This is the third time WANADA has provided a submission on the proposed drug testing trial since 2017. We remain disappointed that the Federal Government continues to prioritise this initiative over other substantive reform measures.

Drug testing as a condition of receiving income support is a coercive and punitive measure. Expert consensus, as demonstrated through a multitude of submissions to the previous two inquiries on the topic, indicate significant concern that the trial will:

- not address the underlying causes of unemployment and disadvantage;
- fail to provide an appropriate referral pathway to specialist treatment and support; and
- result in a range of unintended consequences, further risking the health and wellbeing of vulnerable people.

WANADA is particularly concerned that under the proposed trial, specialist alcohol and other drug treatment services are being framed as a punitive response to alcohol and other drug issues.

The factors contributing to socio-economic hardship and income support cannot be singularly reduced to illicit drug use. This inappropriate and stigmatising focus fails to recognise the structural economic, programmatic and social issues that contribute to hardship and vulnerability. This focus also does not recognise alcohol and other drug dependence as a health and social issue, or reflect the broader context and reasons for drug use.

It is WANADA's position that significant system investment must come before there can be any clear determination of system gaps requiring coercive responses. Research has consistently demonstrated that the alcohol and other drug service system cannot currently meet voluntary community demand¹, and that existing cross-sector pathways to specialist alcohol and other drug treatment are inefficient or absent.

WANADA notes that the Federal Government has committed some funding to support specialist alcohol and other drug treatment services in the trial sites. While this funding is welcomed, it further highlights the need for service expansion as a priority. The funding commitment also creates a significant precedent regarding the accompanying investment required to support any national roll-out of welfare drug testing.

¹ See WA Mental Health, Alcohol and Other Drug Services Plan 2015-2025 and Plan Update 2018.

The proposed initiative punishes and stigmatises people with a health issue

Alcohol and drug dependence is a chronic health condition prone to relapse, similar to other chronic health conditions such as diabetes. Treatment, therefore is often a long term proposition.

Alcohol and other drug dependence typically co-occurs with a range of other issues, with individuals presenting to alcohol and other drug treatment with complex needs (for example co-occurring mental health; domestic and family violence/relationship; acute and other chronic health conditions; child protection and corrections engagement; housing and homelessness issues etc.). The complexity of alcohol and other drug issues must be taken into account in the design and delivery of any initiative in this field. A reductive approach to process development risks systems failure and/or increased harm.

Past and current National Drug Strategies, as well as multiple inquiries, have identified the need to address the stigma associated with alcohol and other drug use for any reform to be effective. Stigmatising and discriminatory practices have the potential to cause increased harm to people, families and communities. This initiative will result in increased stigma and social isolation for people with a recognised health condition.

Address the gap and service access as a priority

The highest priority is to ensure there are enough specialist alcohol and other drug services to meet demand.

Every year across Australia between 200,000 and 500,000 people are unable to access the treatment they seek.² While this remains inadequately addressed, the issues experienced by people with alcohol and other drug dependence become increasingly more complex. The drug testing trial, if enacted, will result in further demand pressures for access to specialist alcohol and other drug treatment and support services.

With enough specialist services available, cross-sector capacity building and referral pathways are essential.

Cross sector referrals remain a significant, and largely unrealised, opportunity to support improved access to specialist alcohol and other drug services. There is a need to support capability development across health, welfare and human service sectors to conduct brief interventions, and appropriately refer people to specialist alcohol and other drug services. This issue has been repeatedly identified in state and national inquiries.³

Prioritising meeting demand and cross-sector capability development present a viable, effective and comprehensive solution to reduce the harms associated with alcohol and other drugs.

Recent development highlight the importance of cross-sector capability development. A number of welfare reforms introduced in 2017 were intended to support welfare recipients to access alcohol and other drug services. While the overall intent to incentivise access to treatment was well-meaning, the nature of the reform and its implementation had a range of negative consequences, including:

- inappropriate referral and case management; and
- a significant increase in the administrative burden on an already over-burdened not-for-profit alcohol and other drug treatment service sector.

WANADA recommends:

- The Senate Committee advise against proceeding with the Social Services Legislation Amendment (Drug Testing Trial) Bill 2018.
- The Federal Government direct funding to more effective and cost efficient initiatives such as service investment and improving cross-sector referral pathways.

²Ritter, Alison et al., *New Horizons: The review of alcohol and other drug treatment services in Australia*. National Drug and Alcohol Research Centre, 2014, p. 13

³ See Methamphetamine Action Plan Taskforce Final Report; Inquiry into Crystal Methamphetamine (Ice)