LEGISLATIVE COUNCIL.

Tuesday, February 25, 1964.

The PRESIDENT (Hon. L. H. Densley) took the Chair at 2.15 p.m. and read prayers.

QUESTIONS.

HAMPSTEAD ROAD INTERSECTION.

The Hon. A. J. SHARD: I ask leave to make a statement prior to asking a question.

Leave granted.

The Hon. A. J. SHARD: During the present session I have asked several questions about alterations to the Hampstead Road corner. During the alterations a portion of a street which runs from west to east connecting with Hampstead Road and the Main North-East Road, and which is known as Brooke Street, has been made a one-way street at the eastern corner. I was under the impression and informed that this was for a trial period of six months. Judging by the work that has been taking place there, and the notices erected, it looks as though the one-way section is to be of a permanent nature. Can the Minister of Roads say whether the six months' trial period has elapsed, whether there is to be a permanent one-way street on the portion that has been declared, and whether the Government intends to ever install traffic lights at that intersection?

The Hon. N. L. JUDE: The honourable member's question is somewhat involved, containing at least four or five questions, so I ask him to put it on notice.

PEST CONTROL.

The Hon. C. R. STORY: Has the Minister representing the Minister of Agriculture a reply to my question of February 18 regarding pest control?

The Hon. Sir LYELL McEWIN: I have no report.

ISLINGTON WORKSHOPS.

The Hon. K. E. J. BARDOLPH: I ask leave to make a statement prior to asking a question.

Leave granted.

The Hon. K. E. J. BARDOLPH: I have been informed that there is considerable discontent at the Islington railway workshops in regard to the promotion of daily paid employees, particularly in the carriage building section. Can the Minister of Railways say what procedure is adopted by the Railways Commissioner in regard to the promotion of daily paid employees at Islington, does he consider the practical and technical qualifications of tradesmen, or does he consider them on a seniority basis?

The Hon. N. L. JUDE: I am not aware of the internal workings of the employment regulations within the Railways Department itself but I will get a report for the honourable member and let him have it.

GAWLER COURTHOUSE.

The Hon. M. B. DAWKINS: Has the Attorney-General a reply to a question I asked on February 18 about the Gawler courthouse?

The Hon. C. D. ROWE: A private firm of architects (Messrs. Bullock and Burton) has been requested to prepare sketch plans and estimates for the general improvements and renovations at the Gawler courthouse. The architects' reply as to the anticipated time of completion of the plans, etc., has not yet been received.

MAINTENANCE ORDERS.

The Hon. F. J. POTTER: I ask leave to make a statement prior to asking a question.

Leave granted.

The Hon. F. J. POTTER: In this morning's *Advertiser* there appeared a report of a case heard in Sydney in which Mr. Justice Dovey made a ruling refusing to recognize a maintenance order made in our Supreme Court by the Master. This matter has been a difficult one and there has been much discussion among members of the profession about the validity or otherwise of these orders. Indeed, earlier this session Parliament dealt with this matter but the actual passing of that Supreme Court Act hardly helps to determine the whole question of the validity of orders in the Commonwealth sphere. This is a most important matter. If the judge were right, every order for maintenance made by our Supreme Court Masters would be invalid. Has the Attorney-General any comments to make on that decision and on whether an early opportunity will be taken to test in the High Court the validity or otherwise of our orders?

The Hon. C. D. ROWE: I read that report and anticipated there might be a question about it in the Council today. Consequently, I have prepared the following detailed report:

Assuming the Judge in Divorce is correctly reported I would have considerable doubt as to his jurisdiction to question the legal validity of the order. I would have even greater doubt of the correctness of his opinion based on the statement in the report that the order was made by "an officer of the court, not a Judge".

The Supreme Court of this State is created by statute which provides that Rules of Court may be made for various purposes. One of these rules confers on the Master the jurisdiction of a Judge in Chambers except in respect of specified matters. This rule, as was pointed out by His Honour Mr. Justice Chamberlain in Nicholls v. Nicholls in 1962, provides part of the organization through which the State courts' jurisdiction and powers are exercised, and it is upon the court so organized that Federal jurisdiction under the Matrimonial Causes Act is conferred.

Since maintenance orders are not expected from the jurisdiction of the Masters, the South Australian Supreme Court has held that such jurisdiction exists, and that the practice which has obtained in this court for many years and which has continued since the Commonwealth Act came into existence, besides being eminently convenient to litigants and their advisers, as well as to Judges, is fully justified by law.

This question was discussed before the Commonwealth Act came into force and in the course of the discussions the Commonwealth Attorney-General, Sir Garfield Barwick, expressed the following views:

> "As I understand it, to invest a State court with Federal jurisdiction is to submit the administration of the Federal jurisdiction to the statutory organization of the State court. In other words, Federal jurisdiction may be exercised in exactly the same way as State jurisdiction is exercised. The court which is invested is not a group of Judges but a court as organized by statute; if the statute provides for delegation of function, the Commonwealth, if it invests that court with Federal jurisdiction, must submit to its exercise in accordance with that statutory organization including the provisions for delegation."

This appears to support the view expressed by Mr. Justice Chamberlain.

Furthermore, the practical advantages of this usage to the litigant are extremely valuable. They represent a saving in costs of a very considerable amount. By way of example I have a report of proceedings before a New South Wales Judge where the costs of an application resulting in an increase of an order for maintenance of a former wife from £1 10s. per week to £2 15s. per week totalled £150. In South Australia the costs of similar proceedings before the Master would not have exceeded £30.

In the matter which came before Mr. Justice Dovey the order was not, as Mr. Justice Dovey is reported as saying, an order of a "non-judicial officer"; it was an order of the Supreme Court of South Australia authenticated, as all such orders are, by the court seal, and the words "By the court, Master" with the Master's signature. I would think that such an order would in any case have been recognized and acted on by the court of another State without further inquiry by reason of section 118 of the Constitution which reads:

> "Full faith and credit shall be given, throughout the Commonwealth, to the laws, the public Acts and records, and the judicial proceedings of every State."

SWIMMING POOLS.

The Hon. JESSIE COOPER: I ask leave to make a statement prior to asking a question.

Leave granted.

The Hon. JESSIE COOPER: Last week I received an answer from the Minister representing the Minister of Education in reply to my question on the number of swimming pools in primary and secondary schools and the cost of their installation and maintenance. It seems to me that a greater use could be made of these pools with very great benefit to the people of this State. For over a month in the period of the year most ideal for swimming these pools are out of use. I am aware of the admirable learn-to-swim campaign, organized by the Education Department, which takes up approximately two weeks of the summer vacation, but during the remainder of that vacation, for about a month, the pools could be utilized for swimming instruction by expert teachers recognized by the department. It is difficult to teach children to swim—and to swim efficiently—without long practice periods, and this difficulty is enhanced by the shortage of swimming places and inland waters in South Australia. I am also aware of the difficulties involved in making these pools available, such as the need to have departmental supervision, but I am sure that the authorities of the Education Department could devise a workable scheme. In view of the alarming number of drownings and the rapidly increasing number of young people in our community, can the Minister representing the Minister of Education ascertain whether it is possible to formulate a scheme whereby the swimming pools in primary and secondary schools can be made available for swimming instruction during the long summer vacation period to persons recognized by the department as being competent and expert teachers?

The Hon. C. D. ROWE: I shall be pleased to refer the question to my colleague for his consideration.

FIRE BAN DAYS.

The Hon. G. O'H. GILES: Has the Attorney-General, representing the Minister of Agriculture, an answer to a question I asked on February 18 dealing with fire bans?

The Hon. C. D. ROWE: Yes. The Minister reports as follows:

The answer given by the Attorney-General is correct. Standards of assessment of fire ban days have not been changed. Wind speed is a major factor in fire bans and these have been notably low during this fire season.

RENMARK AVENUE.

The Hon. C. R. STORY: I ask leave to make a statement prior to asking a question.

Leave granted.

The Hon. C. R. STORY: The Minister of Railways will recall that long discussions have taken place at various times relating to fencing the railway line on the Renmark Avenue. The Railways Commissioner was adamant that it should be fenced in a certain way. Since that time the land along the railway line has reverted to its natural scrub condition of salt bush and so on, and it has been a source of annoyance and a traffic hazard to residents when they have tried to get from properties adjoining the railway line to the main avenue. Some representations have been made by the Renmark corporation to have this strip of railway line through the irrigation area cleaned up, but I do not think they have met with much success. Will the Minister take the matter up with the Commissioner with the object of having that railway reserve cleared and put in good order?

The Hon. N. L. JUDE: I shall take the matter up with the Railways Commissioner and supply a report to the honourable member.

TWO WELLS FIRE.

The Hon. L. R. HART: Has the Minister of Railways an answer to my question of February 18 in relation to a fire at Two Wells?

The Hon. N. L. JUDE: Yes. The Commissioner reports as follows:

At this time of the year, when there are heavy movements of grain and manures in addition to our regular traffic, it is impossible to avoid the use of steam locomotives because we have not sufficient diesel locomotives to handle the traffic. Departmental investigations do not indicate that the fire referred to started on railway property, or that it was caused by a spark from a locomotive.

GAWLER BY-PASS.

The Hon. M. B. DAWKINS: I ask leave to make a statement prior to asking a question.

Leave granted.

The Hon. M. B. DAWKINS: I think it would be generally agreed by those people who have used the Gawler by-pass that it is an excellent addition to our highway system and a good example of the improvement that a by-pass can effect. However, there are a few teething problems that have arisen, one of which is that I believe there are no "give way" signs at two or three minor intersections. In view of the general impression that there are "give way" signs on every intersection of that by-pass, will the Minister of Roads consider this matter? I am also wondering whether the Minister is yet able to furnish a report concerning the accidents that have happened on that road, particularly at the Red Banks Road intersection. I know the Minister is as concerned about this situation as anyone else and I know that investigations are being made.

The Hon. N. L. JUDE: With regard to the final question, I cannot give a report yet because investigations are being proceeded with and it takes considerable time to take counts to see what problems are involved. With regard to the other question, I was of the opinion that there were "stop" or "give way" signs on all those intersections, but I shall take the matter up departmentally and get the honourable member a report.

MOUNT GAMBIER INFANT SCHOOL.

The Hon. R. C. DeGARIS: Has the Attorney-General representing the Minister of Education a reply to the question I asked on February 19 about the Mount Gambier Infant School?

The Hon. C. D. ROWE: The Superintendent of Primary Schools reports as follows:

A two-acre site has been made available at the Mount Gambier Primary School for the erection of a new infant school but due to the very urgent need for new schools in rapidly growing areas in other districts, it has not been possible to proceed as yet with the planning of this school. This project, however, has been included in the list of proposed new works which is now under consideration but it cannot be stated at this stage when construction is likely to commence.

JOINT COMMITTEE ON TOWN PLANNING ACT APPEALS.

The Hon. N. L. JUDE (Minister of Local Government) moved:

That the members of this Council appointed to the Joint Committee on Town Planning Act Appeals have power to act on that joint committee during recess.

Motion carried.

ALCOHOL AND DRUG ADDICTS (TREATMENT) ACT AMENDMENT BILL.

Adjourned debate on second reading.

(Continued from February 20. Page 2029.)

The Hon. S. C. BEVAN (Central No. 1): The Bill contains 27 clauses and three pages of closely printed consequential amendments to

the principal Act, which was assented to on November 16, 1961, and has not yet been proclaimed. The Act deals exclusively with the treatment and care of alcoholics and drug addicts and is in three categories—persons admissible to institutions as a result of court proceedings, persons admissible on the application of families, relatives or others, and persons admissible on their own application. The Act provides for the establishment of detention centres for the treatment of alcoholics and drug addicts but apparently administrative difficulties have been encountered in giving effect to it. It is felt that the setting up of a detention centre, as provided in the principal Act, would not have the desired effect because volunteers would enter the same institution as persons who were ordered there by the court. This caused serious administrative difficulties and an advisory committee was appointed to consider the Act and report to the Government. I am sure that this Bill is the result of that report.

Addiction to alcohol and drugs is a disease for which no real cure has yet been found and this applies not only to this country but is world wide. Other countries have attempted and are attempting to do something to cure alcohol and drug addiction but no real cure has yet been found. In other countries establishments exist for the treatment of addicts but there is always the type that is incurable. Alcohol and drug addiction requires specialist treatment and if it is provided I can see no reason why many sufferers cannot be cured and rehabilitated. Various organizations in this State are doing wonderful work to assist sufferers who volunteer for treatment but they are restricted in their work by insufficient funds and accommodation. The only other centre now provided for persons convicted of habitual drunkenness is Her Majesty's prison. If the Bill is passed I hope the co-operation of the organizations I have referred to will be sought. The work and knowledge of these people is valuable, and it is hoped that they will continue in their work with the co-operation of all concerned. I have pointed out that the only other institution to which these unfortunate people can go is Her Majesty's prison. A conviction for drunkenness is not the solution of the problem. When a person is sentenced to a term of imprisonment for being under the influence of liquor no treatment is given to him at the prison in an attempt to cure him of his trouble. At the end of his imprisonment he is discharged but he associates himself with old acquaintances and soon finds himself back in prison on a charge of drunkenness.

This important matter of an alcoholics centre was referred to the Public Works Committee on May 10, 1962, and after a lengthy investigation the committee presented a report on December 17, 1963, which shows that the committee made an extensive inquiry into the treatment of alcoholics and drug addicts. During its inquiries the committee took lengthy and important evidence from interested people. No person who wanted to place evidence before the committee was denied the opportunity to do so. Mr. J. H. Allen (Sheriff and Comptroller of Prisons) gave expert evidence. We are all aware of his work in the treatment of alcoholics. He has made a close study of the matter and is desirous of doing everything possible for these unfortunate people in an attempt to effect a cure. Mr. Allen should be commended for his work in this connection. Others to give evidence were Mr. W. S. Boundy (Chairman of Archway Port, Inc.), Mr. R. C. Heairfield (Deputy Sheriff and Deputy Comptroller of Prisons), the Reverend W. C. S. Johnson (founder and member of the board of Archway Port, Inc.), Miss F. J. MacLennan (Director of Social Welfare for the Diocese of Adelaide), Father Tracey (member of the board of directors of the State Foundation on Alcoholism), and Doctor H. J. W. Willson (honorary medical officer and member of the board of Archway Port, Inc.). They tendered extensive evidence to the committee on their work in an attempt to find a solution of this problem, which work has been of great assistance to these unfortunate people. They have acted on a voluntary basis and what they have done has been appreciated.

The committeee visited Victoria and inspected the Alexandra Parade clinic at Fitzroy, after taking evidence from Doctor E. Cunningham Dax (Chairman of the Mental Hygiene Authority). The committee also discussed at the clinic the problem of alcoholism with Doctor A. Bartholemew (Psychiatrist Superintendent). The clinic is hampered in its work because of the difficulty in getting sufficient experienced workers. The committee saw a man making his way upstairs at the clinic. It seemed that he was going back to the institution for assistance. He was well-dressed and in his approach to people acted like a gentleman, but he was completely under the influence of alcohol. We asked Doctor Dax some questions about the man, and the doctor said "Yes, he was one of our patients, and he knows where to

come for assistance to be put back on to the right track.'' This indicates the work that is being done at the Victorian clinic. After its inquiries the committee found that the desire expressed in the legislation would not be achieved. It felt that if all people were admitted to the one institution it would not be conducive to persons going there on a voluntary basis. The committee felt that some sort of stigma would apply to those who went to the institution voluntarily. Its views, as expressed in the report, were:

1. That an institution to which patients are committed by court orders might not attract applications for admission from the other categories of alcoholics.

2. That the successful treatment of alcoholism has a relatively short history and has not yet produced any large number of experienced and trained workers in its specialized field.

3. That the interstate clinic inspected by the Committee, and which impressed the Committee, was hampered by lack of staff although the clinic was of modest proportions.

4. That it would be more than difficult to find suitable staff for the proposed Alcoholics Centre.

They were some of the views expressed by the committee in its report. The actual findings of the committee are:

1. That it is inexpedient to proceed with the proposed public work of the construction of a Centre for the reception, care, control, treatment and rehabilitation of alcoholics; and

2. That as a first step it is desirable that special units for the treatment of alcoholics should be established at psychiatric or general hospitals and that the special units should maintain outpatients clinics in appropriate locations.

This Bill will enable the committee's findings to be given effect to and various centres to be set up in the State, as suggested in those reports. The principal departure in this Bill from the principal Act is in relation to administration. The principal Act provides for a principal to be in charge of the centre itself and to have direction of it, whereas this Bill provides for the establishment of a board. I have no doubt that the members of the board appointed by the Governor would be persons of high standing, with an intimate knowledge of the problem of addiction to drink. One could probably nominate the three members who would constitute the board when set up. Unhesitatingly, one could name two of them, both of whom are gentlemen with a wide experience of welfare work, the administration of welfare and other matters in this State. We would find that the Sheriff and Comptroller of Prisons would certainly be one member. We know well the work he has done in this field and the interest he has shown in it. He has been overseas inquiring into these matters; he has visited various homes and centres under government control in various countries. Unhesitatingly, I say that he would be a member of the board.

Another member, who would perhaps be its chairman, would be the Chairman of our Children's Welfare and Public Relief Board. Any remarks I make about the setting up of the board do not reflect upon any persons who may be elected to it. My main objection to this Bill is the setting up and the powers of the board.

Under clause 5 a new Part is inserted in the principal Act, dealing with the setting up of the board itself, its administration and its duties. It lays down the duties of the board and what it may or may not be able to do. I have no doubt that the board will have full powers in relation to the administration of the Act and the establishment of the centres or clinics, whatever they may be called. Perhaps there will be a permanent establishment where persons convicted by our courts will be detained for treatment.

As an illustration of the powers of this board, let us turn to clause 6 of the Bill, which inserts new subsections in section 5 of the principal Act. The proposed subsections state:

(1) The Minister may—not ''shall''—on the recommendation of the Board, establish such institutions as he thinks fit for the purposes of this Act.

(2) The Governor may, on the recommendation of the Board, by proclamation declare any such institution or part of an institution to be a committal centre or a voluntary centre and thereupon the institution or part of the institution so declared shall, subject to subsection (3) of this section, be a committal centre or voluntary centre, as the case may be, for the purposes of this Act.

My interpretation of that clause is that the Minister may, on the recommendation of the board, do something. If the board does not make a recommendation to him, then the Minister is powerless to act. Under this clause the Minister may act after receiving a recommendation from the board itself. That is definitely wrong. Any State establishment should be under the administration of the appropriate Minister. The whole control of it should be under the Minister and his department.

Clause 8 (*b*) states that the board is directly responsible to the Minister but the board can carry on without any consultation with the Minister and do various things. It can acquire various properties and that sort

of thing without any consultation with the Minister. All it does is to report, "We have done such and such a thing." It is just too bad for the Minister. That is all wrong. The administration of this Act should be directly within the Minister's jurisdiction. If it is possible to amend this legislation, I would move an amendment in this Council to strike out the phrase "in so far as this board is concerned the Minister may . . .". Clause 7 uses similar phraseology when dealing with the Governor. It states, "The Governor may, on the recommendation of the board . . .". Here again if the Governor gets no recommendation from the board nothing can be done. That is not right at all.

Every member in this Chamber has probably had dealings with boards. From time to time questions are directed to a Minister who, in turn, seeks information from the chairman of a board, which means that it is the chairman's opinion that is expressed and not the Minister's at all. We have experienced many times a board's doing things that are not in the best interests of the State. I refer to the issuing of permits by the Transport Control Board, which has not acted judiciously in many instances. That can happen if this Act is placed under a board's administration, and that is my objection to this provision.

As I have said, it is impossible to amend the Bill because it contains 27 clauses and the schedule contains three closely printed pages of consequential amendments. The only way that objections could be met would be to withdraw and redraft the Bill and place the whole of the administrative powers under the Minister and not the board. Clause 23 seeks to strike out section 33 and insert in lieu thereof:

Unless otherwise provided by or under this Act, all patients shall be entitled to receive gratuities at such rates and subject to such conditions as may be prescribed.

I should like the Minister to enlighten me on that provision and say just how far it goes and what it really means. At present the Act provides that the board has the right to dispose of articles manufactured by people while under detention by sale or other means. Does this clause mean that they will receive something for their work? A person who voluntarily enters one of these centres hoping to be cured may leave a family without sustenance. Does this clause mean that, say, the wife and children will receive some benefit while the husband is undergoing treatment, similarly to what happens when a person is treated for tuberculosis in South Australia? The latter person's family receives a pension and, if the relevant clause means that the same thing will apply in the case of a person being treated for alcoholism, I am sure that this will be a great inducement to a person, who desires to receive treatment, to come forward voluntarily.

However, if the person knows that his family will not be provided for at all while he receives treatment, he will be reluctant to volunteer and we shall have to rely on another provision in the Act to commit him to an institution. I do not think this is in the best interests of the State. I fully appreciate the intention of the Bill to establish centres where alcoholics may be treated in the hope that they will be rehabilitated, but we cannot do that until these centres are established. I repeat that these centres should be State undertakings under the direct administrative care of the Minister and his department, such as the Sheriff's and Gaols and Prisons Department or the Welfare Department. I support the second reading.

The Hon. JESSIE COOPER (Central No. 2): I rise to support the Bill. I think the Government is to be commended for its sincere approach to this problem in our community, but I have one fault to find with the Bill. Whereas it has been generally recognized that an efficient centre for the treatment of alcoholism for those who are prepared to seek it voluntarily is highly desirable, it appears to me that this amendment to the Act recognizes this fact only in so far as it gives lip service to that idea by proposing that certain institutions should be established and known as voluntary centres. I have perused the Act most carefully and it seems to me that it provides for a centre that is anything but voluntary once a patient has attended or entered the premises to accept treatment. It is easier to get in than to get out. According to clause 10 of the Bill section 13 of the Act is amended in a certain way. Section 13(1) commences:

Any person may be received into and detained in an alcoholics centre upon the application in writing in the prescribed form of—

(*a*) the person himself; or

That is all very good. That is voluntary in the true sense of the term, but paragraph (*b*) states:

Any relatives of the person; or

By the principal Act "any relative" is defined as meaning the father, mother, stepfather, stepmother, spouse, grandparent, brother, sister, stepbrother or stepsister of that person or a brother or sister of a parent of that person, and where the person is under the age of 21 years it includes the legal guardian of

that person. It can be seen that "any relative" of a person is a very wide provision indeed, and I am sure all honourable members can envisage the possibility of an aunt or uncle who has a completely wrong idea of the provision coming forward and trying to get a relative to enter an institution voluntarily.

Thirdly, a welfare officer can be appointed under the Act. In this case it might be that a police officer would be appointed as a welfare officer and he could quite rightly suggest that a man enter an institution on a voluntary basis because that person is a nuisance and is inclined to get drunk regularly. In other words, the provision that any person, the relative of any person, or a welfare officer appointed under the Act can suggest that a person be committed to an institution on a voluntary basis is very wide. According to the provisions of clause 10 a person, having voluntarily entered the institution, may thereafter be detained up to six months by the board or its servants and if he should escape or wander off he may be apprehended and returned to the institution with nothing voluntary on the part of the patient.

I believe that all the foregoing will completely hamper the public's demand for an institution where treatment can be given to those who are prepared to seek voluntary treatment in order to be cured of alcoholism. Very few people are going to volunteer for treatment if it means that they may lose all their freedom by virtue of this Act and by the will or opinion of those who administer its provisions. This will completely defeat the frequently emphasized desirability of having a well-established freely-come, freely-go institution for treating sufferers, whether they suffer mildly or severely from alcoholism or drug addiction in any form. I draw attention to the success that Alcoholics Anonymous has had where there is no compulsion on the individual and where everyone works for the good of the patient.

In fact, I consider that once more a board is being given excessive powers. This can be seen in other boards but in this case we are being asked to legislate against the personal freedom of private individuals who, once they are under the authority of a public institution, cease to have any power at all. I cannot subscribe to the idea that a person coming for voluntary treatment of alcoholism or drug addiction should have to suffer the same loss of freedom and the same control as a certified mental defective. In other respects, I am pleased to support the Bill.

The Hon. Sir ARTHUR RYMILL (Central No. 2): I am concerned with the same question that concerns the Hon. Mrs. Cooper and it relates to clause 10 (*a*) (1), which reads:

Any person may be received into and detained in a voluntary centre upon the application in writing in the prescribed form of—

(*a*) the person himself; or

(*b*) any relative of the person; or

(*c*) a welfare officer appointed under this Act;

The question of a person making an application himself lines up with the rest of the clause, but the question of a relative, as dealt with by the Hon. Mrs. Cooper, or a welfare officer applying for a person to be detained surely is a compulsory and not a voluntary detention. I believe these terms are completely contradictory. I recognize that the legislation's intention is good, but I cannot get right in my mind that a person should be detained in a so-called voluntary centre on the application of anyone but himself. The Act provides for a compulsory centre and surely if a person is not making the application himself that is the place for him to go. The position is rendered worse because once a person goes to a voluntary centre he cannot get out, except under certain circumstances. There are provisions for him to be detained.

The Hon. S. C. Bevan: There is a right under the 1961 Act.

The Hon. Sir ARTHUR RYMILL: No. When the principal Act was enacted the institution was regarded as an alcoholics centre, not a voluntary centre. This clause is a substitution for that, and refers to a voluntary centre. I can see the reasons for it, but the terms used are contradictory. I assume that the intention was that no stigma should be attached to those going to the voluntary centre, but once a person gets into such a centre he must remain there for a period not exceeding six months as the board determines. There is nothing voluntary about this, and it is an aspect that I do not like. A voluntary centre is provided and part of the committal to the centre relates to the person himself. That is all right, but there is provision for other people to take action. Where a welfare officer attempts to commit a person to a voluntary centre it is necessary to have a certificate from two medical practitioners, and that is some sort of safeguard, but it still does not make it a voluntary act on the part of the person being committed. In his second reading speech the Minister of Health said:

Clause 10 amends section 13 of the principal Act to enable a person to be admitted to a voluntary centre on his own application or

on the application of a relative or welfare officer and abolishes the power of a member of the Police Force to make such an application. The clause also makes it unnecessary for a personal application to be supported by two medical certificates as at present.

I have no quarrel with the latter part of that explanation, but I would like the Minister, at the appropriate time, to explain why the centre is to be regarded as a voluntary centre when that is not so. I would also like to know why, in a voluntary centre, a person can be kept there for a period completely outside his own control. Clause 17 says:

> The board may cause a patient to be transferred from one institution to another, but shall not cause a patient to be transferred from a voluntary centre to a committal centre unless he has been committed thereto pursuant to this Act.

In his second reading explanation the Minister said that this prevents the transfer of a patient from a voluntary centre to a committal centre. My reading of the clause is that it does that as such, but it does not affect the right to commit a patient, even if in a voluntary centre, to a compulsory centre by initiating the other procedures in the legislation. Therefore, I imagine it does not afford a real protection. I would be glad to have an explanation why section 13 of the principal Act is being amended by clause 10, so as to establish a voluntary centre that does not appear to be a voluntary centre. In the meantime, I support the second reading.

The Hon. R. C. DeGARIS (Southern): I support the second reading of the Bill, which makes many varied amendments to the principal Act passed in 1961. Virtually two alterations are made to the concept of the matter. Firstly, the administrative machinery is altered, and the administration goes from a director to a board of three, one of whom must be a medical practitioner. Secondly, a distinction is made between the voluntary centre and the committal centre. To the first a person can be admitted on his own volition, or on the application of certain people mentioned in the legislation, and to the other go persons committed by the court. The Hon. Mr. Bevan said that the amendments are so many that it is difficult to include them in the principal Act. I suggest to the Parliamentary Draftsman that when so many amendments are made to legislation those who study the position should be given the chance to find something that has been omitted, but that is not so with this Bill because the amendments cover the ideas completely and accurately. The amendments contain references to a voluntary centre, a committal centre and institutions. I presume that further types of centres or institutions are envisaged. I feel that the present concept is for voluntary and committal centres, but there seems to be a thought about other types of institution, say, an outpatients' clinic, which could later come under the Act.

In tackling the problem of alcoholism we must first recognize that it is not a crime but a disease. This matter was well put by the Hon. Mr. Bevan and the Hon. Mrs. Cooper. The disease is costing the nation a colossal sum of money. It is a problem that affects not only Australia but countries throughout the world, and in the last 10 years many attempts have been made to solve the problem. One has only to read of the amount of money expended by many American business corporations in an attempt to overcome or alleviate the problem among their own employees to realize that it is an economic necessity for this State to attempt the care, treatment and rehabilitation of people addicted to alcohol or drugs. This must be undertaken if only for purely economic reasons.

We have come a long way along the line in recognizing alcoholism as a disease, but we still have a long way to go to the complete acceptance of this concept by the whole community. The original legislation set out to provide treatment, care and rehabilitation for those suffering from an addiction to alcohol or some drug. Its prime purpose was, I believe, to remove these people so suffering from the ordinary penal institutions. This Act and the proposed amendments are designed largely to cater for the alcoholic in that bracket. Concern with this problem has been evident throughout the world during the past 10 to 20 years and much effort has been made to grapple with the problem. I am quite sure that our outlook on it will alter as time goes on. I do not think at the moment we have sufficient knowledge or evidence of the right way to handle this problem. This amending Bill makes some move along this line to cope adequately with alcoholism.

I have no doubt that, as more information is gained and as more people come to recognize the grave problems involved, the approach to it will alter and further amendments will be made to this Act from time to time. So far, little constructive work has been done. We have to recognize the fact that the correct place for the care, treatment and rehabilitation of the alcoholic is not a prison or mental home.

Somehow or other we have to shift the prison or mental home atmosphere from the treatment of these unfortunate people. Penal authorities throughout the world give different figures of the numbers of inmates committed to their establishments purely on charges of drunkenness. Some are as high as 50 per cent. In South Australia the figure is about 44 per cent: in other words, 44 per cent of the inmates of the penal institutions are there primarily for the crime of drunkenness.

From a State point of view, this is a bad business. It is sheer economic waste to have these people in a penal institution, with the expense of caring for them there, their apprehension, their trial and their detention, without any efforts being made for their rehabilitation. The whole point of alcoholism is that the motivation for treatment must come from the alcoholic himself. Without that motivation from him, the chance of any rehabilitation is small. One of the main things in the treatment and rehabilitation of an alcoholic is to preserve his anonymity. People who go for treatment desire that they do not become a name on a card. They desire if possible to remain anonymous. The principal Act and the amendments to it are designed to make some effort to care for these alcoholics in a certain bracket, those who today are in our prisons and are committed there for the crime of drunkenness. This Bill offers something in this regard, although I do not think it offers anything for the other type of alcoholic who would not use a voluntary centre as conceived in the Bill. Even though we have a voluntary centre where he can go, where he hands his name in, it is put on a card and he becomes known, there are many alcoholics who will not use a voluntary centre of this type.

A great deal is being done, and much more can be done, about alcoholism if this problem of the person's remaining anonymous is taken into account. The approach to alcoholism must be based on prevention, education and counselling. Those are three important points in this other bracket of alcoholics that I believe this Bill does not cater for. I am certain that it is aimed at those people who are in our prisons for the crime of drunkenness. As time goes on, we shall discover much more about alcoholism. In a short time this Act will be further amended as we gain more knowledge. In the meantime, I believe this is an improvement to the principal Act and I support the second reading of the Bill.

The Hon. Sir LYELL McEWIN (Minister of Health): I thank honourable members for the observations they have made on this Bill. I shall endeavour to answer some of the queries raised. Honourable members will remember that in 1961 a Bill was passed unanimously providing for alcoholic centres and the treatment of patients who made voluntary application to go into them. This Bill provides for something else, that there shall be other centres to deal with volunteers so that they will not have to share accommodation with committal cases. There is ample justification for this as a committal case can be the average type of case, of which there are hundreds in this State. They are people who get a short sentence for drunkenness; they come in, get a clean up and go out again, only to be picked up about three days later; then they go back again. The Sheriff, who has always been anxious to rehabilitate people (and in that respect he has an excellent record in the Gaols and Prisons Department), deemed it wise to make certain investigations. The Government sent him overseas to see what he could ascertain elsewhere, and he was able more or less to confirm his ideas, because, after all, this scheme is perhaps an experiment. We have found nothing comparable elsewhere.

Alcoholics Anonymous was mentioned today. That, of course, is something which functions from the desire of the individual concerned to join such an organization and, by association with those who have been able to cure themselves of this disease or temptation, the individual derives a great deal of benefit. There is a branch of Alcoholics Anonymous at Cadell where there are people who, through alcoholism, have committed crimes resulting in long sentences of imprisonment. In their rehabilitation these people have found Alcoholics Anonymous of great assistance. From reports made to me by the Australian Medical Association and other interested parties it appeared that we should have some other form of institution for voluntary cases. That is just what the Bill provides for: that there shall be another place.

In fact voluntary cases are being dealt with at present but failures occur for the same reasons as with short sentences. I think the Hon. Mr. DeGaris said that these voluntary centres will not appeal to those who have to take a course of treatment. That may be so. When alcoholics go into an institution voluntarily they are not going in for a weekend or for a bath and a clean-up and coming out on

the Monday, only to repeat the performance. That would be completely defeating the purpose of this legislation. It is necessary that patients have the desire to undergo a course of treatment over a certain period. Under the present Act if a person went along and said, "I am an alcoholic and have come here to stay for a while", he would be subjected to an examination and, if the doctors agreed and decided that he was an alcoholic, he would stay long enough for a period of treatment. That principle is not new. There is provision in the Mental Defectives Act for an arrangement for voluntary patients and an opportunity for members of their families, or for the police in certain cases, to have people examined.

Only this morning I had a case brought to my notice and the question arose how this person should be dealt with. I have known him for years and he has in the last few years—he is not in the aged class—developed certain characteristics, concerning hygiene and in other ways, which are offensive to everybody around him. In this case the question was asked, "How can something be done for this person?" It is necessary for certain procedures to be taken by whoever makes the initial move and it is also necessary, even in the most mild cases, for a doctor to give a certificate that he thinks that the person concerned requires some treatment, in which case he goes to a receiving home to be dealt with psychiatrically. He is kept there until he is considered fit to be removed. There is no question of such people being allowed to go in and to come out after the weekend.

Perhaps it is thought inconsistent to call them volunteers but I suggest that a rose by any name would smell as sweet and I do not know what better word there could be than "voluntary" because the initial move is voluntary. It is only after a person has volunteered to go into an institution that he can be treated and cured. A person does not go into hospital to be operated upon for appendicitis, walk out that night and undo the good that has been done. He goes in for treatment and comes out only after that treatment and a reasonable period of convalescence. I think that is the principle that should be applied to the Act. It could be incorporated in the Act, but I must point out that this Bill is an attempt to do something that has not been attempted before.

If, through experience, it were found that we needed more institutions, that matter could be dealt with in the period of experience that followed the practical application of this legislation. The Hon. Mr. Bevan referred to what happened in the way of occupational therapy. There is nothing to this effect at present in the Act but I should think that the same considerations would apply as apply in our mental institutions, where the patient enjoys the reward of his work. They are details—

The Hon. S. C. Bevan: What concerned me was what happened to the family of a person who went into those institutions.

The Hon. Sir LYELL McEWIN: I think the same thing happens to the family as happens in many cases. While the husband—if it be a husband—is in an institution the family is probably having a bad time in any case and is perhaps being looked after by the Children's Welfare and Public Relief Department. That course is always available to anybody in distressed circumstances. That department would be the body to consider the welfare of the family concerned. I venture to say that in some cases the family is probably better off than under the bad conditions when there were drunkenness and possibly ill-treatment. The family would probably be better off under the care of the Children's Welfare and Public Relief Department until the bread-winner was put into proper condition to resume his normal responsibilities.

I hope that I have not missed any points and that I have given the information that has been requested. The Hon. Mr. DeGaris mentioned a problem and I think he was referring to clause 27, where much has been put into the schedule. I looked at that and found that they were consequential amendments which all depended on the preceding clauses. If there are any spelling errors they will be picked up. They are consequential amendments to alterations which have been made to certain clauses. I refer to matters such as whether we dispense with a director and create a board.

I thank honourable members for their attention to this measure. It is a problem of long standing. I have been told by many that there is no solution to it but I venture to say that to do nothing and to attempt nothing is not the right approach to any problem. There have been institutions established where, because of the very fact that people have been allowed to walk out without any control, no effective work has been done. That applies to many well-meaning institutions in existence today.

It is generally agreed that unless a person can be held sufficiently long—be it three months or six months—to be given adequate treatment and to get his co-operation and

confidence we shall not do any good in this field. The whole purpose of the period of detention is for time to be given for the purpose of effecting a cure. This will give members of the medical profession, who are interested in this matter, an opportunity to do something for sufferers; this opportunity has been denied them previously. Some people say the medical profession has had 100 years to do something about this problem but has not done anything. It has not had the opportunity. Unless a doctor is given time to do something for a patient and unless a patient is given an opportunity to do something for himself satisfactory results will not be achieved. I commend the Bill to honourable members.

Bill read a second time.

In Committee.

Clauses 1 to 10 passed.

Clause 11—"Amendment of principal Act, section 14."

The Hon. R. C. DeGARIS: One point worries me. Section 14 of the principal Act, as amended, reads:

(1) Where a person is convicted by a court of any offence . . . . and the court is satisfied by evidence on oath that that person is an addict, the court may, by order, in lieu of or in addition to any sentence it may impose on such conviction, release the person upon his entering into a recognizance, with or without sureties, to ensure his appearance before the court for sentence unless he presents himself at, and undergoes, treatment at a voluntary centre for such period, not less than six months, as the court may order, and for such period, not exceeding three years, as the court may order, remains under the supervision of a welfare officer appointed under this Act and abstains from consuming or using any alcoholic or intoxicating liquor or any specified drug.

Clause 11 will add "except on the authority of a legally qualified medical practitioner." It has been brought to my notice that all members of the medical profession are not aware of some of the problems of alcoholics. I know of a case where a man was cured of alcoholism (he had not had a drink for 17 months) and was advised by his medical practitioner that it would be quite all right for him to have a drink because he was over his addiction. It was not long before he was once again in Northfield. I am worried by the words, "the authority of a legally qualified medical practitioner". It might be worthwhile instead of having "except on the authority of a legally qualified medical practitioner" to have "on the authority of the medical practitioner of the voluntary centre" or words to that effect. I am not moving an amendment but I should like the Minister's view on this matter.

The Hon. Sir LYELL McEWIN (Minister of Health): I do not know whether the honourable member was saying that this clause dealt with somebody who has been treated as an alcoholic and then comes before a court. If that is so I do not read the clause that way at all. It deals with a person who is convicted before a court for doing something because of drunkenness and instead of being committed to an institution he can be admitted to a treatment centre. The other provisions deal with that by his entering into a recognizance.

The Hon. R. C. DeGARIS: Part of section 14 reads:

. . . remains under the supervision of a probation officer appointed under this Act and abstains from consuming or using any alcoholic liquor or any specified drug.

The amendment inserts after "specified drug" the words "except on the authority of a legally qualified medical practitioner". I take this to mean any legally qualified medical practitioner. I wonder whether in some way that is not dangerous. I have mentioned one case where it was dangerous and I wish to know whether it is worthwhile amending the clause to refer to the medical officer in charge of the centre to which a person has been committed.

The Hon. Sir LYELL McEWIN: It is not unusual for people to be put under the care of a medical practitioner. I believe this clause is a safety provision because it may be that a doctor prescribes the use of certain drugs and the effect of those drugs does something that brings a person into conflict with the law. The clause would provide him with a defence he would not otherwise have. After all, no-one should be held responsible for taking something that may have been prescribed and which affected him differently than it affected others. Surely this clause is in the interests of the person concerned rather than a danger to him.

The Hon. A. J. SHARD (Leader of the Opposition): This clause is two-pronged, there being arguments for and against it. The Minister of Health mentioned the case of a person who was a drug addict but for health reasons, on the advice of his doctor, had to take a drug. A defence might be open to him under this clause. However, I know of a person who went to his doctor. He had been a complete alcoholic but for a period of 18 months to two years he never touched alcohol. What happened in this case happened in the case mentioned by the Hon. Mr. DeGaris.

After about 18 months or two years the doctor told the man there would be nothing wrong with his again having a drink, but unfortunately he soon got back to where he had been. Only time can correct the position and we can learn from the experience of others. What the Minister said was true, and what the Hon. Mr. DeGaris said was also true. The matter of the dividing line must be watched closely.

Clause passed.

Remaining clauses (12 to 27), schedule and title passed.

Bill reported without amendment. Committee's report adopted.

PREVENTION OF POLLUTION OF WATERS BY OIL ACT AMENDMENT BILL.

Received from the House of Assembly and read a first time.

The Hon. N. L. JUDE (Minister of Local Government): I move:

That this Bill be now read a second time.

The principal object of this short Bill is to insert in three of the sections of the principal Act the word "agent". The first of the sections concerned and the main one is section 5 which provides for the offence of discharging oil into waters. Paragraph (*a*) of that section makes both the owner and the master of the ship liable to the penalty. It is proposed to amend this section by including the agent, thereby making not only the owner and master, but also the agent, of the ship responsible. The necessary amendment in this connection is made by clause 4. "Agent" will be defined in section 3 of the Act, the necessary definition being set out in clause 3 of the Bill.

Clauses 5, 6 and 7 make consequential amendments. Clause 5 inserts the word "agent" also in section 6 of the principal Act which confers special defences upon persons charged and it is clearly necessary to enable the agent to take advantage of any special defences which are open to an owner or master. Likewise, clause 6, which relates to the making of regulations regarding the keeping of records will, by subclause (*a*), be extended to cover regulations covering agents. Subclause (*b*) will amend section 6 (*a*) of the principal Act, which penalizes owners and masters for breach of the regulations, by including agents. Clause 7 amends section 12 of the Act which places restrictions upon the transfer of oil at night. Section 12 attaches the penalty to the master of the ship and the amendment will include also the agent and the owner. Members will appreciate the reason for the amendments to which I have referred. In most cases it is not possible for practical reasons to proceed against an owner or master of the ship; the owner is in most cases outside the State and it is not possible to serve process upon a master after he has left the jurisdiction. With the amendments it will be possible to proceed against the agent of the vessel. The provisions to include agents were inserted in the Victorian Act, although they do not appear in the legislation in other States. I believe that the amendments are necessary if we are to be in a position to police the Statute. Clause 8 corrects four typographical errors in the original Act, which was based upon the uniform Bill. They relate to the evidentiary provisions in section 18 where the references to relevant sections are incorrect. The opportunity has been taken to correct the errors in this Bill rather than by way of a Statute Law Revision Bill.

The Hon. A. J. SHARD secured the adjournment of the debate.

ADJOURNMENT.

At 4.10 p.m. the Council adjourned until Wednesday, February 26, at 2.15 p.m.