Submission to the Senate Community Affairs Legislation Committee

Re: Social Services Legislation Amendment (Cashless Debit Card Trial Expansion) Bill 2018

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Introduction

Who we are

The Australian Association of Social Workers (AASW) is the professional body representing more than 11,000 social workers throughout Australia. We set the benchmark for professional education and practice in social work, and advocate on matters of human rights, social inclusion, and discrimination. The Queensland Branch represents over 2000 social workers who are based in multiple organisations and across the state.

The social work profession

The social work profession is committed to pursuing social justice and human rights. Social workers aim to enhance the quality of life of every member of society and empower them to develop their full potential. Principles of social justice, human rights, collective responsibility and respect for diversity are central to the profession, and are underpinned by theories of social work, social sciences, humanities and Indigenous knowledges. Professional social workers consider the relationship between biological, psychological, social, and cultural factors and how they influence a person’s health, wellbeing and development. Social workers work with individuals, families, groups and communities. They maintain a dual focus on improving human wellbeing; and identifying and addressing any external issues (known as systemic or structural issues) that detract from wellbeing, such as inequality, injustice and discrimination.

Our submission

The AASW welcomes the opportunity to contribute to the inquiry into the Social Services Legislation Amendment (Cashless Debit Card Trial Expansion) Bill 2018.

Social workers practice with a range of people across all life stages and within a range of social and cultural contexts, working with both individuals and communities. Social workers thus have extensive experience with people whose complex needs are related to key social determinants of health, most prominent being poverty and all the implications this brings. Social work is committed to the human rights of all, improving the wellbeing of all and to achieving an equitable society that means addressing systemic level barriers including access to basic rights and needs. This underpins the key messages in this submission.

The AASW opposes the expansion of the Cashless Debit Card as:

- it amounts to an unusual penalty on a group of vulnerable people united only by their location,
- undermines their autonomy and creates inconvenience and is not necessarily accompanied by any other intervention,
- lacks an adequate evidence base in relation to its benefits,
- does nothing to achieve long-term structural change nor individual recovery from addiction.

Response

1. AASW Queensland Branch Response to the proposed legislation

The Cashless Debit Card (CDC) undermines the dignity and autonomy of people who are forced to
use it, contravening our commitment to the human rights and dignity for all. It contravenes a number of articles, not least being:

Article 1: All human beings are born free and equal in dignity and rights. They are endowed with reason and conscience and should act towards one another in a spirit of brotherhood.

Article 23:

(1) Everyone has the right to work, to free choice of employment, to just and favourable conditions of work and to protection against unemployment.

(2) Everyone, without any discrimination, has the right to equal pay for equal work.

(3) Everyone who works has the right to just and favourable remuneration ensuring for himself and his family an existence worthy of human dignity, and supplemented, if necessary, by other means of social protection.¹

As such, we argue that the CDC is ethically unjust as it demonises and places ‘blame’ on the individual for their circumstances, when in fact these may have been the result of structural, systemic and community factors².

International research identifies the ongoing negative implications on people who are recipients of state income support (Beer & Forster, 2002; Carney, 2006a; Eardley, Abello, & Macdonald, 2001; Goodin, 1985; Handler, 2002; Wax, 2003³). Indeed the research demonstrates that income management results in citizens feeling “angry and shamed by removal of their budgetary autonomy; welfare conditionality imposed through income management replaces the concept of a right to welfare based upon need with behavioral constraints based on negative prejudice (Altman, 2013; Bielefeld, 2012; Cox, 2011)” (cited in Watts, p. 78)⁴.

The assumption that a CDC will address the complex issues that lead to unemployment, or alcohol or substance misuse or gambling is inherently flawed. Indeed the Auditor General’s report that ‘evidence is lacking’ to support any expansion of the card to the Hinkler electorate of Hervey Bay and Bundaberg in Queensland is significant. The Queensland Branch of the AASW endorses the conclusions of QCOSS in their analysis of the Cashless Debit Card Trial Evaluation last year. “This includes the lack of evidence of success, the evaluation methodology being questionable and the two new sites representing a markedly different environment. The report also recommended a clear articulation of costs and benefits of the trials before any further expansion"⁵.

There has been much written about and discussed with regards to the inadequacy of the Newstart allowance in actually assisting people to find employment, while also having to pay for their basic needs such as food and shelter. The CDC provides a further layer of discrimination and stigmatisation, which will further disadvantage this already disadvantaged group of people. The humiliation that will come with having to use the CDC also relates to the attitude that society has about certain individuals needing to have their income managed. In rolling this out the Commonwealth is creating yet another layer of members of our community who are pushed to the fringes of society, are excluded and treated as being less than. This in turn will have implications for overall health and

⁴ Ibid
⁵ QCOSS https://www.qcoss.org.au/cashless-debit-card
wellbeing.

The Queensland Branch endorses the policy statement of QCOSS which argues that there is a lack of evidence of a causal link between people receiving income support and people with alcohol, drug and gambling problems. Further that any participation in the Cashless Debit Card should only be on a voluntary basis and supported by a suite of relevant support services. This is supported by the evaluation undertaken by the Australian National University’s Centre for Aboriginal Economic Policy Research on various Australian income management schemes, finding that the most effective schemes generally were voluntary and specifically target people with high-needs as part of a holistic set of services (Klein, 2017).

Without appropriate resources to support young people with regards to the complex needs that influence their ability to complete education, find work, or maintain work, a CDC is not likely to achieve the stated outcomes. As argued by the AASW National Office, the proposed legislation includes no strategy for how change will occur other than there will be a reduction in purchase of drugs and alcohol, or gambling. The reason why someone is misusing these substances is not being addressed, rather, to continue to marginalise and stigmatise individuals is likely to result in further deterioration in the psychological and physical well being of the person.

The introduction of the CDC on the basis of a geographic location in itself creates a new group of marginalised and stigmatised people without justification.

A key common factor in the demographics of Hervey Bay and Bundaberg is their regional location, and a reliance on either tourism or farming for economic development. It seems counter intuitive to not invest in infrastructure, including opportunities for education and job creation opportunities in these areas. Furthermore, it is recognised that addressing intergenerational issues of unemployment, substance misuse and other social issues is complex and requires investment in supports at a prevention and early intervention level as well as at a tertiary level. Without this, the CDC becomes another expensive program to be administered without any real long term benefits. Returning to the fundamental human rights principles, surely it is more productive for our governments to invest in people and communities to work towards better outcomes for all? Without this commitment and an ongoing focus on punitive measures that aim to humiliate people to change their behaviour, nothing positive will be achieved.

Conclusion

The Queensland Branch of the AASW therefore opposes the introduction of the CDC, arguing that this is a short term, one dimensional strategy that does not address the key reasons and social and structural factors that result in the social issues experienced by this some people. Expanding the CDC in the face of the limited existing evidence of success makes this even more difficult to understand. A commitment to a genuine strategy to address the causes of complex social issues is necessary, which involves an holistic and integrated strategy that has at its core the wellbeing of all citizens and opportunities for all citizens to participate meaningfully and fully in our society.

Submitted by and on behalf of the Australian Association of Social Workers Pty Ltd

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7 Cited in QCOSS Policy Statement, Ibid.
8 ORIMA Research, Cashless Debit Card trial evaluation final evaluation report, ORIMA Research, Canberra, 2017.