

QCOSS

Queensland Council
of Social Service

Cashless Debit Card Trial Hinkler Survey Results



January 2019

About QCOSS

The Queensland Council of Social Service (QCOSS) is the state-wide peak body representing the interests of individuals experiencing or at risk of experiencing poverty and disadvantage, and organisations working in the social and community service sector.

For 60 years, QCOSS has been a leading force for social change to build social and economic wellbeing for all. With members across the state, QCOSS supports a strong community service sector.

QCOSS, together with our members continues to play a crucial lobbying and advocacy role in a broad number of areas including:

- place-based approaches
- citizen-led policy development
- cost-of-living advocacy
- sector capacity and capability building.

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.

Lend your voice and your organisation's voice to this vision by joining QCOSS. To join visit [the QCOSS website](http://www.QCOSS.org.au) (www.QCOSS.org.au).

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Executive summary

Queensland Council of Social Service (QCOSS) Cashless Debit Card Trial (CDCT) Hinkler Survey had strong and diverse engagement from the community with 128 responses, primarily from individuals, half of whom have family or friends in scope for the CDCT. About a third of services that responded expected to have clients in scope for the CDCT. While there was high awareness of the CDCT, this was primarily from non-government sources, with very low attendance at government community meetings.

Most respondents did not see the targeted issues of drugs, alcohol or gambling as significant problems in Hinkler, with only youth unemployment seen by a majority (74 per cent) as a serious issue. A significant majority (77 per cent) have concerns about the CDCT, and a majority (65 per cent) expect no benefits from the CDCT.

75 per cent of all respondents opposed the CDCT in its current form, with 12 per cent saying they would support it if it was voluntary. Other respondents provided feedback indicating that they would support it if it was more targeted.

Survey respondents indicated that the highest need for additional funding is mental health (78 per cent), employment (68 per cent) and drug and alcohol services (66 per cent). A majority (62 per cent) did not know if their service would have enough resources to address the issues targeted by the CDCT (alcohol, drugs and gambling), and a majority (70 per cent) also did not know if they would have enough resources to deal with problems arising from the CDCT.

QCOSS remains opposed to the implementation of the trial. We believe that addressing complex health and social issues, such as alcohol, drug and gambling problems, through the welfare system is fundamentally flawed. There is a lack of evidence of a causal link between people receiving income support and people with alcohol, drug and gambling problems. Participation in the cashless debit card should only be on a voluntary basis and supported by a suite of relevant support services.

QCOSS will consider a follow-up survey some months after the CDCT rollout to compare respondents' expectations with lived experience of the CDCT. QCOSS will continue to work with the local community and with the Department of Social Services to limit the negative impact of the CDCT. QCOSS will also work to help implement place-based, citizen-led, strengths-based approaches to developing more inclusive thriving communities.

QCOSS Cashless Debit Card Trial Hinkler survey results



QCOSS does not support the expansion of mandatory income management through a cashless debit card as attempts to address complex health issues through the welfare system are fundamentally flawed. The trial is due to extend into Hinkler from the end of January 2019.

We have engaged directly with the community to gauge the real impact of the Cashless Debit Card Trial. QCOSS will continue to support Hinkler residents affected by the trial.

Survey Respondents

128 responses collected

89% identified as individuals
11% responded on behalf of an organisation

48% expected friends or family to be in-scope for the trial

32% of services expect to have clients in-scope for the trial

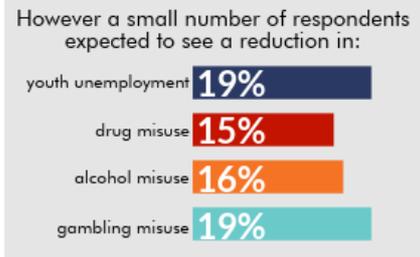
14% attended Department of Human Services meetings

Many reported not knowing about the info sessions

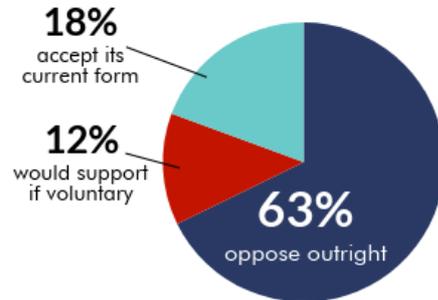
Concerns around the trial



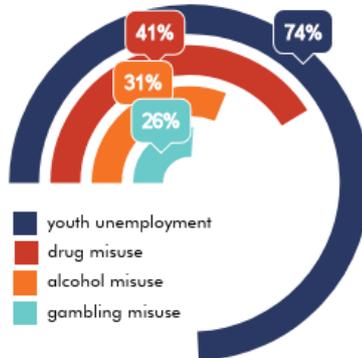
65% believe there will be no benefits from the trial



75% oppose in its current form



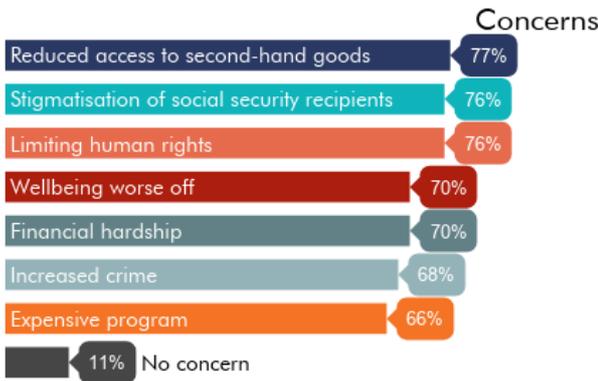
Which issues targeted by the card are serious in Hinkler?



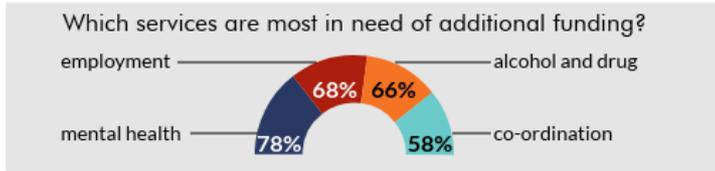
Some respondents saw the introduction of the Cashless Debit Card Trial as a serious issue itself

People linked this to a lack of empathy from elected representatives

QCOSS Cashless Debit Card Trial Hinkler survey results



Some respondents indicated they believe the trial will have the opposite effect from what is intended, and actually make the targeted problems worse



Individual impacts

A majority of respondents indicated people in the trial might need help dealing with



63% provided additional feedback when invited **90%** of which was negative

The Cashless Debit Card

- Ineffective**
Auditor-General: 'no evidence that it reduces social harm'
- Expensive**
Auditor-General: \$10,000+ per person
- Harmful**
32% said it made their lives worse
- Unsupported**
Evaluation: recorded community opposition
- Discriminatory**
Human Rights Committee: breaches rights of privacy and social security
- Paternalistic**
Human Rights Committee: removes people's agency to manage their affairs

Introduction

About the Cashless Debit Card Trial

The federal government has selected the Hinkler electorate, (that includes Hervey Bay and Bundaberg), as the next trial site for the introduction of compulsory income management through the cashless debit card. Hinkler was chosen partly due to high youth unemployment and because it is a non-remote location.

Beginning in January 2019, the trial will quarantine 80 per cent of social security payments onto an Indue debit card with restricted usage. All people living in the Hinkler region who receive Newstart, Youth Allowance or Parenting Payment and are under 36 years old will be placed on the card. The card restrictions include no cash withdrawals, no transfers to personal accounts and no alcohol or gambling purchases.

About the QCOSS CDCT Hinkler Survey

The QCOSS CDCT Hinkler survey ran from November 2018 to January 2019. The trial started in Hinkler on 29 January 2019.

The purpose of this survey was to identify the views, involvement and needs of the Hinkler community regarding the CDCT. QCOSS will continue to support Hinkler residents affected by the trial.

1. Please indicate whether you are completing this survey as (individual or organisation).

There has been strong engagement from the community with 128 responses. Most respondents (89 per cent) identify as individuals (rather than organisational representatives).

2. Please identify yourself and your organisation.

Of those identifying the organisations that they were representing:

- three were from activist groups
- two from neighbourhood centres
- two from large social service providers
- two from housing providers
- one each from an Aboriginal and Torres Strait Islander organisation, an employment service, a political party, and a mental health provider.

Awareness

For the following questions regarding Awareness, on average 99 per cent of respondents answered the questions.

3. Are you aware of the CDCT beginning in Hinkler in January 2019?

Most respondents knew of the CDCT (98 per cent), with 78 per cent saying they were aware of the details. Only two respondents had not heard of the trial.

4. Where do you get information on CDCT in Hinkler from?

Key sources of information about the CDCT were:

- social media (61 per cent)
- *Say No to the Cashless Card* activists (61 per cent)
- media (46 per cent)
- government (30 per cent)
- Department of Social Services (DSS) website (24 per cent)
- QCOSS/peaks (22 per cent)
- community organisations (20 per cent)
- Centrelink correspondence (18 per cent) and
- political party (16 per cent).

Other sources identified including watching parliament live, local contacts in DSS or Indue and inter-agency support service meetings.

5. Do you think you, members of your family and/or friends will receive a Cashless Debit Card?

48 per cent of respondents expected family / friends to be on the CDCT, with 12 per cent saying that they didn't know.

6. Have you been involved in any meetings about the CDCT in Hinkler?

Involvement in government CDCT meetings was low, with 13 per cent attending a Department of Human Services (DHS) / DSS meeting before Hinkler became a trial site in September 2018, and 10 per cent since. 53 per cent of respondents had not attended any CDCT meeting, (government or otherwise). Feedback included not being aware of any meetings, finding out afterwards, difficulty in attending because during work time, or because of a disability. Some said DHS delivered sessions in-house at services, or at inter-agency meetings.

Position on the CDCT

For the following questions regarding CDCT position, on average 95 per cent of respondents answered the questions.

7. Which of these issues do you believe are serious problems in the Hinkler Region?

Of the issues being targeted by the CDCT, only youth unemployment (74 per cent) was perceived by most respondents as being a serious issue for Hinkler. Alcohol (31 per cent), gambling (26 per cent), drug misuse (41 per cent) were perceived as serious issues in Hinkler by fewer respondents.

Other feedback included 17 respondents indicating a lack of employment opportunities, others mentioning housing (five respondents) and domestic violence as serious issues, and some respondents indicated that poor Centrelink service, or the discriminatory treatment of people accessing income support was a serious issue.

Several respondents saw the introduction of the CDCT itself as a serious issue in Hinkler and linked this to a lack of empathy from elected representatives. One respondent made the point that these problems are serious for some, but not everyone, and the CDCT should only be issued to those with these problems.

8. What concerns (if any) do you have about the CDCT?

Over 75 per cent of respondents had concerns about the CDCT, with the leading concerns being:

- reduced access to second-hand goods (77 per cent)
- stigmatisation of social security recipients (76 per cent)
- limiting human rights (76 per cent)
- wellbeing worse off (70 per cent)
- financial hardship (70 per cent)
- increased crime (68 per cent)
- expensive program (66 per cent)
- punitive and paternalistic (54 per cent) and
- reduced personal agency (46 per cent).

Only 11 per cent of respondents said they had no concerns. A number of respondents highlighted the compulsory and non-targeted nature of the CDCT being a concern.

9. What do you believe will be the benefits (if any) of the CDCT?

A majority of respondents (65 per cent) believed there would be no benefits of the CDCT. A small number of respondents thought there would be reduced gambling (19 per cent), alcohol (16 per cent), or drug misuse (15 per cent). Less than 18 per cent of respondents saw any other benefits, for example, better budgeting, wellbeing improved, reduced cash harassment, reduced cash in community, or improvement employment opportunities.

Four respondents believed there would be benefits of the CDCT to the financial provider (Indue).

Some respondents indicated that it will have the opposite effect intended, making the targeted problems worse. Some respondents gave feedback that children will be fed, or spouses could control payments. One respondent thought it might encourage some to try and find employment. One respondent said it was not about reducing the targeted behaviour but about preventing “taxpayers dollars” being spent on target behaviours.

10. What is your position regarding the CDCT?

Three quarters of respondents (75 per cent) do not support the CDCT in its current form, with 63 per cent opposing it outright, and 12 per cent saying they would support it if it was voluntary. A number of respondents indicated in their feedback comments that they opposed all forms of income management.

18 per cent indicated that they supported the CDCT in its current, compulsory form. Some respondents indicated they would support the CDCT if it was a ‘genuine’ trial with transparent evaluation. Some indicated they may support it if it was more targeted.

Individual impact

Questions 11 to 13 were intended for Individuals who will receive a Cashless Debit Card. For the following questions regarding individual impact, on average 50 per cent of respondents answered the questions and 50 per cent skipped them.

11. What help, or support do you think you might need with being on the Card?

Respondents indicated that people in the CDCT might need help with:

- dealing with stigma and discrimination (61 per cent)

- disasters (56 per cent)
- exclusion from venues / services (56 per cent)
- access to 2nd hand goods (56 per cent)
- online purchases (53 per cent) and
- family cash needs (53 per cent).

Only eight per cent believed that those on the CDCT would not need help. One respondent described how they manage their own fortnightly payment without using Centrepay or anything that “prevents me taking full responsibility” by setting aside amounts for bills. One respondent identifying as Aboriginal and Torres Strait Islander, linked the CDCT to the experience of stolen wages. One respondent stated quarantining 80 per cent of their income will reduce their bank balance below the threshold for a ‘fee-free’ account and they will start being charged fees by their bank.

12. What information do you need about the Cashless Debit Card?

The key category of information that respondents thought would be needed was ‘How people Exit from the CDCT’ (68 per cent). A smaller number of respondents indicated they thought how people get help about the card would be needed (28 per cent). 28 per cent of respondents to this question felt no information would be needed. Feedback included asking why there was not adequate consultation, why is it proceeding when evidence indicated ineffectiveness, and asking how could the CDCT help at risk people when they have already been exempted from it. One respondent stated that it cannot be called a trial when it is compulsory.

13. Where would you go for information, help or support?

The leading likely source of information, help or support for respondents was the *Say No to the Card* activists (60 per cent), followed by Centrelink (37 per cent) and community services (23 per cent). Several respondents indicated difficulty in finding any accurate information about the CDCT. Two respondents said they would go to DSS for information, help or support. One respondent indicated they would go to QCOSS for information, help or support.

Service impact

Questions 14 to 21 were intended for support services. For the following questions regarding service impact, on average 60 per cent of respondents answered the questions and 40 per cent skipped them.

14. Do you believe that support services in Hinkler are effective?

Many respondents believed that support services in Hinkler were ineffective (63 per cent). One respondent suggested that “measuring effectiveness of support services in a community is extremely difficult and rarely done”. Respondents also indicated a lack of adequate funding, training, resourcing and that money spent on the CDCT would be better spent on services. One respondent stated that “drug and alcohol misuse are health related concerns, so government needs to increase help in these areas rather than taking steps to punish everyone”. Some respondents indicated a need for better collaboration, better referral systems, and a need for non-stigmatising, strengths-based services.

15. Which services most need additional funds to address targeted issues in Hinkler?

The highest perceived need for additional funds for services were:

- mental health (78 per cent)
- employment (68 per cent)

- alcohol & drug (66 per cent) and
- co-ordination (58 per cent).

There was also some perceived need by some to better fund financial counsellors (48 per cent), problem gambling services (45 per cent) and community legal (40 per cent).

Housing services were also identified as needing additional funding included homeless shelters, domestic violence shelters, crisis housing, short term supported housing and long-term affordable housing. Some respondents also indicated the need to provide more employment opportunities.

16. What is your organisation type?

The organisation types identified across all respondents included community development (10 per cent), housing and homelessness (eight per cent), family & children (six per cent) youth (six per cent), seniors (six per cent), disability (six per cent) and mental health (five per cent).

17. Does your service have enough resources to deal with the issues targeted by the CDCT?

A majority of 62 per cent did not know if their service would have enough resources for the issues targeted by the CDCT (alcohol, drugs, gambling or youth unemployment), with 32 per cent saying that it would not have enough resources, and only five per cent saying that they would. Multiple respondents said they currently have to refer all clients to other services.

18. Does your organisation have clients who will be in scope for compulsory income management through the cashless debit card?

The expectation of respondents' service having clients in scope for the CDCT was 32 per cent.

19. Does your service know enough about the CDCT to help your clients who may be on the card?

A majority of respondents (66 per cent) indicated that they did not know if their service knew enough about the CDCT to help clients. A minority of respondents (21 per cent) indicated that their service does have enough information about the CDCT.

20. What information would your service like included in a cashless debit card fact sheet?

In line with the information required by individuals, the key element that services would like to see included in a CDCT fact sheet is 'how to exit' (51 per cent). Other key elements that services would like to see included are 'how people get help' (44 per cent), 'restrictions' (44 per cent) and 'how to use' (34 per cent).

21. Does your service have enough resources to support people who may have problems with the cashless debit card?

A significant majority (70 per cent) did not know if their service would have enough resources to support people who have problems with the CDCT. A minority of respondents (24 per cent) indicated that their service would not have enough resources to support people with CDCT problems. One respondent said, "we have received no information about the card... we could not address this question with certainty". Some indicated that their service was volunteer-based and would need more support staff.

Other support and feedback

22. Is there anything else that QCOSS or the DSS can do to help individuals who are included in the CDCT?

More than 20 respondents indicated that the key action needed to help individuals on the CDCT is to stop the compulsory CDCT.

23. Is there anything else that QCOSS or the DSS can do to help services impacted by the CDCT?

10 respondents indicated that cancelling the CDCT was a key action needed to help support services. Other suggestions included additional funding for support services and more accurate information.

24. Is there anything else that you would like to say about the CDCT?

A majority (63 per cent) of survey respondents provide additional feedback when invited, most (90 per cent) of which was negative, opposing the CDCT. These responses were often quite passionate variously described the CDCT as pointless, disempowering, a burden, shocker, draconian, terrible, demonising, ruining business, ludicrous, criminal, a disgrace, a violation of privacy and rights, a rort, discriminatory, corrupt, a farce, paternalistic, cruel, unfair, evil, stigmatising, wrong, and a waste of money. Only eight of these additional feedback responses were supportive of the CDCT in some form.

Conclusion

The QCOSS Cashless Debit Card Trial Hinkler Survey results highlight a lack of community support for the CDCT in Hinkler, with strong opposition and concerns expressed by respondents. There are also strong indicators that the majority of respondents believe CDCT will not achieve its objectives, may cause additional harm, and that local community services are not adequately resourced to deal with the issues targeted by the CDCT, or by issues arising from the CDCT. It is clear from some very strong sentiments expressed both in support of and in opposition to the CDCT that it is divisive within the community.

This survey adds to the body of evidence against the CDCT that indicate it is:

- **ineffective** - there was no evidence that it reduces social harm (Australian National Audit Office (ANAO), 2018)
- **expensive** - it costs over \$10,000 per person (ANAO, 2018)
- **harmful** – 32 per cent of respondents to the government evaluation said it made their lives worse (Orima, 2017)
- **unsupported** - the government evaluation acknowledged that the CDCT did not have universal support from the local community (Orima, 2017)
- **discriminatory** - breaches human rights of privacy and social security (Parliamentary Joint Committee on Human Rights, Community Affairs Legislation Committee, 2018)
- **paternalistic** - it removes people's agency to manage their affairs (Parliamentary Joint Committee on Human Rights, Community Affairs Legislation Committee, 2018).

QCOSS will consider a follow-up survey some months after the CDCT rollout to compare respondents' expectations with lived experience of the CDCT. QCOSS will continue to work with the local community and with the DSS to limit the negative impact of the CDCT. QCOSS will also work to help implement place-based, citizen-led, strengths-based approaches to developing more inclusive thriving communities.

References

ANAO (2018) *The Implementation and Performance of the Cashless Debit Card Trial, The Auditor-General Report No.1 2018–19*, Australian National Audit Office (ANAO)
https://www.anao.gov.au/sites/g/files/net4981/f/Auditor-General_Report_2018-2019_1.pdf

Community Affairs Legislation Committee (2018) *Social Services Legislation Amendment (Cashless Debit Card Trial Expansion) Bill, (incl. Parliamentary Joint Committee on Human Rights)* August 2018.
https://www.aph.gov.au/Parliamentary_Business/Committees/Senate/Community_Affairs/CDCTrialExpansion/Report

Department of Social Services (2018) *Cashless Debit Card Bundaberg and Hervey Bay region Letter and Fact Sheet*. Commonwealth of Australia, Canberra,
https://www.dss.gov.au/sites/default/files/documents/11_2018/cashless-debit-card-letter-and-factsheet.pdf

Department of Social Services (2018) *Social Services Legislation Amendment (Cashless Debit Card Trial Expansion) Bill 2018 Explanatory Memorandum*, Commonwealth of Australia, Canberra, http://parlinfo.aph.gov.au/parlInfo/download/legislation/ems/r6130_ems_9baf413-5f49-4db7-94f4-2247c4d09854/upload_pdf/674588.pdf;fileType=application%2Fpdf

Orima Research (2017) *Department of Social Services Cashless Debit Card Trial Evaluation: Final Evaluation Report*. August 2017.
https://www.dss.gov.au/sites/default/files/documents/08_2017/cashless_debit_card_trial_evaluation_-_final_evaluation_report.pdf

PJCHR (2017) *Parliamentary Joint Committee on Human Rights - Human rights scrutiny report. Report 9 of 2017*. 5 September 2017, Commonwealth of Australia, Canberra
http://www.aph.gov.au/Parliamentary_Business/Committees/Joint/Human_Rights/Scrutiny_reports/2017/Report_9_of_2017

QCOSS (2017) *Review of the Cashless Debit Card Trial and Evaluation*. Queensland Council of Social Service (QCOSS), September 2017.
<https://www.qcross.org.au/sites/default/files/QCOSS%20Review%20of%20the%20Cashless%20Debit%20Card%20Trial%20and%20Evaluation.pdf>

QCOSS (2018) *QCOSS Position Statement Cashless Debit Card (CDC) Trial*. Queensland Council of Social Service (QCOSS), July 2018.
<https://www.qcross.org.au/sites/default/files/QCOSS%20Position%20Statement%20Cashless%20Card%20%28Expansion%29.pdf>