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To the committee,

Thank you for the opportunity to comment on the *Social Security (Administration) Amendment (Income Management and Cashless Welfare) Bill 2019*.

I am pleased to submit a recently completed research report for consideration by the committee.

I am a Senior Lecturer in the Department of Anthropology at Macquarie University. Since the middle of 2017 I have been conducting interviews and fieldwork as part of research into “lived experiences of the Cashless Debit Card trial, Ceduna, South Australia”. My research aims to listen to those people directly affected by the CDC trial, and to understand its impact on their lives.

In light of my research findings, I cannot recommend passage of the *Social Security (Administration) Amendment (Income Management and Cashless Welfare) Bill 2019*.

My research raises serious concerns about the disempowering effects of a social policy perceived by many of my research participants to be race-based and punitive. Further, my research points to a widespread conviction that the CDC can be circumvented by people with a serious alcohol addiction. Finally, my research points to an urgent need for my transparency and communication regarding the Wellbeing Exemptions process and the Community Panel’s decision-making process.

As stated in the introduction of my report, the major themes of my research are as follows:

1. Dissatisfaction with the consultation process undertaken prior to the CDC’s introduction. (“*No one was told about it.*”);
2. A widespread understanding that the CDC trial in Ceduna has racial dimensions. (“*Targeting Indigenous people.*”);
3. Cynicism and confusion about the process by which the CDC policy trial has twice been extended;

4. Complex shame responses to being a card-holder. While **no** shame was felt by many Aboriginal research participants whose kin and friends were also on the card, other research participants expressed finding the card an “insult”, feeling “targeted”, describe involvement in the trial as “degrading”, and perceive they are regarded as lesser by those advocating for and implementing the CDC trial (*“They think we’re rubbish.”*);
5. A widespread perception that it is possible to get around the CDC, in order to access alcohol. (*“They think blackfellas is stupid. Blackfellas not stupid.”*);
6. Practical problems with the card. Some CDC holders describe the card as unreliable, which sometimes exacerbates pre-existing anxieties. (*“It’s the trepidation.”*);
7. Positive responses to the card: Some research participants reported liking the card and others relayed anecdotes about relatives who liked the card: in all of these cases an increased propensity to save money was identified. (*“I can save up on that Indue card.”*);
8. Frustration with the lack of transparency surrounding the panel and wellbeing exemptions process. As the committee is no doubt aware, the Ceduna Region Community Panel (‘the panel’) is empowered to assess applications to vary the split of restricted and unrestricted monies from 80 per cent / 20 per cent, so that up to 50 per cent of the applicant’s payments become available as cash (and 50 per cent remain available only on the CDC). Research participants raised numerous concerns with the panel. Some research participants were convinced the panel was not being equally accessed by Aboriginal and non-Aboriginal trial participants. Another research participant described the panel’s decision to grant them 40 per cent of their payments in cash, rather than the requested 50 per cent, as a “power trip”.

CDC holders might also be exempted from the trial, if participation in it would seriously risk that person's mental, physical or emotional wellbeing. One research participant believed that whitefellas were able to get off the card using the wellbeing exemptions but that Aboriginal people couldn't.

This set of expressed concerns are reflected in data obtained after a Freedom of Information request was lodged in September 2018. The results of this Fol request are included in full on pages 44-45.

9. Some research participants accept the CDC on the grounds it is now a familiar feature of everyday life, expressing their powerlessness to influence policy change. (*“...[N]ot much you can do about it.”*)



I would be very happy to elaborate on the contents of my report for the benefit of the committee.

Yours sincerely,

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Lived Experiences of the Cashless Debit Card Trial, Ceduna, South Australia: Final Research Report

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The report summarises research conducted into the Cashless Debit Card trial in Ceduna, undertaken between September 2017 and December 2018.

CONTENTS:

1. Summary.....	3
2. Background to the research.....	9
3. Research aims and method.....	12
4. Themes of the research	
4.1 "No one was told about it." The consultation process.....	16
4.2 "Targeting Indigenous people." Race and the Cashless Debit Card.....	22
4.3 "The government con us in, I reckon." Perspectives on the trial's extensions.....	25
4.4 "It's an insult." The question of shame and stigma.....	29
4.5 "Drunks gonna drink!" Getting around the card.....	34
4.6 "It's the trepidation." Practical problems with the card	37
4.7 "Some like it." Positive experiences of the card.....	41
4.8 "Not the panel's business!" The Community Panel and Wellbeing Exemptions	43
4.9 "Getting used to it." Ambivalence and acceptance.....	47
5. Acknowledgements.....	48
6. References.....	49

1. Summary

The Cashless Debit Card (CDC) quarantines 80 per cent of working age (15-64) recipients' state benefits in selected trial sites: 20 per cent of payments are deposited into the recipient's bank account; the remainder is available on a debit card barred from operating at any alcohol or gambling outlet across the nation.

This qualitative research seeks to understand and analyse cashless debit card holders' *lived experiences* of the CDC in the first CDC trial site of Ceduna, South Australia.

The themes emerging from this research are:

9. Dissatisfaction with the consultation process undertaken prior to the CDC's introduction. (*"No one was told about it."*);
10. A widespread understanding that the CDC trial in Ceduna has racial dimensions. (*"Targeting Indigenous people."*);
11. Cynicism and confusion about the process by which the CDC policy trial has twice been extended;
12. Complex shame responses to being a card-holder. While **no** shame was felt by many Aboriginal research participants whose kin and friends were also on the card, other research participants expressed finding the card an "insult", feeling "targeted", describe involvement in the trial as "degrading", and perceive they are regarded as lesser by those advocating for and implementing the CDC trial (*"They think we're rubbish."*);
13. A widespread perception that it is possible to get around the CDC, in order to access alcohol. (*"They think blackfellas is stupid. Blackfellas not stupid."*);

14. Practical problems with the card. Some CDC holders describe the card as unreliable, which sometimes exacerbates pre-existing anxieties. (*"It's the trepidation."*);
15. Positive responses to the card: Some research participants reported liking the card and others relayed anecdotes about relatives who liked the card: in all of these cases an increased propensity to save money was identified. (*"I can save up on that Indue card."*);
16. Frustration with the lack of transparency surrounding the panel and wellbeing exemptions process. The Ceduna Region Community Panel ('the panel') is empowered to assess applications to vary the split of restricted and unrestricted monies from 80 per cent / 20 per cent, so that up to 50 per cent of the applicant's payments become available as cash (and 50 per cent remain available only on the CDC). Research participants raised numerous concerns with the panel. Some research participants were convinced the panel was not being equally accessed by Aboriginal and non-Aboriginal trial participants. Another research participant described the panel's decision to grant them 40 per cent of their payments in cash, rather than the requested 50 per cent, as a "power trip".

CDC holders might also be exempted from the trial, if participation in it would seriously risk that person's mental, physical or emotional wellbeing. One research participant believed that whitefellas were able to get off the card using the wellbeing exemptions, but Aboriginal people couldn't. This set of expressed concerns are reflected in data obtained after a Freedom of Information request was lodged in September 2018. The results of this Fol request are included in full on pages 41-42.

17. Some research participants accept the CDC on the grounds it is now a familiar feature of everyday life, expressing their powerlessness to influence policy change. (*"...[N]ot much you can do about it."*)



Overall aim of the research: Listening to people “affected by the card directly”

In November 2018, an Indigenous resident of Ceduna reflected on the October 2016 visit of then prime minister, Malcolm Turnbull, which marked six months since the CDC’s implementation in the Ceduna region. This person addressed the following statement to the prime minister: *“Have you even bothered to listen to the actual people that are affected by the card directly? Because we’re hearing it from all these other people, rather than the people themselves.”* This research responds to this challenge.

The reader of this report is urged to listen to people directly affected by the CDC, and take seriously their analysis of its rationale and effects. The report presents anonymous excerpts that serve to illustrate consistent themes in the research, and give voice to research participants’ lived experiences.

2. Background to the research

The CDC can be understood as a form of ‘welfare quarantining’ or of ‘conditional welfare’. While there has been a shift toward more punitive and conditional welfare regimes in a range of societies around the world since the 1980s, analysts of the Australian welfare state argue that “Australia took conditionality further [than other comparable nation states] through the introduction of Compulsory Income Management (CIM) in 2007”.¹

CIM involves the quarantining of a designated percentage of social security payments, prohibiting specific goods such as alcohol for purchase, and was first introduced as part of the Northern Territory National Emergency Response (‘the Intervention’). This development entailed the suspension of the *Racial Discrimination Act 1975*. Income Management was also introduced into Cape York in 2008; here the Cape York Welfare Reform Trial explicitly targets “irresponsible” behaviours, potentially quarantining the benefits of community members who are called before the Family Responsibilities Commission because they are either: the subject of a child safety concern; have not enrolled their child in school or failed to send them to school for three days without a reasonable excuse; have committed a petty crime or; have violated a public housing tenancy agreements.

CIM was extended to non-Indigenous people with the introduction of New Income Management in 2010, Place-Based Income Management, introduced in 2012, and with the 2016 introduction of the CDC.

The CDC represents a modification of recommendations made by mining magnate Andrew Forrest in his 2014 report, *The Forrest Review: Creating Parity*.² (Indeed, when I asked a prominent CDC proponent in Ceduna about the origins of the CDC they immediately nominated the moment they read an opinion piece by Forrest in *The Australian* as the beginnings of the process.) In *Creating Parity*, Forrest

proposed quarantining 100 per cent of welfare payments onto a “Healthy Welfare Card”.

The CDC quarantines 80 per cent of working age (15-64) recipients’ state benefits in selected trial site: 20 per cent of payments are deposited into the recipient’s bank account; the remainder is available on a debit card barred from operating at any alcohol or gambling outlet across the nation. Age Pension and Veterans’ Pension recipients in the trial sites are not placed on a CDC, but may volunteer to participate.³

The *Social Security Legislation Amendment (Debit Card Trial) Bill 2015* outlined four objectives for the trial. The trial aims to: reduce the amount of certain restrictable (sic) payments available to be spent on alcoholic beverages, gambling and illegal drugs; determine whether such a reduction decreases violence or harm in trial areas; determine whether such arrangements are more effective when community bodies are involved; and encourage “socially responsible behaviour”.

The CDC trial commenced in the Ceduna region of South Australia on 15 March 2016 and encompasses Koonibba, Scotdesco, Yalata and Oak Valley communities. As of September 2016, there were 752 people participating in the Ceduna trial, 565 of whom were Indigenous.⁴

A second trial commenced in the East Kimberly region, Western Australia on 26 April 2016 and a third trial commenced in the Goldfields region, Western Australia on 26 March 2018. At the time of writing, a fourth trial is currently being rolled out in Hervey Bay and Bundaberg, Queensland.

In Ceduna, the CDC is referred to as the “grey card”, after its silver-grey appearance, or the “Indue card”, after the private company contracted by the federal Department of Human Services to issue and effectively administer the CDC trial’s operation. Researchers Elise Klein and Sarouche Razi have established that “Indue was granted more than \$10.8 million of the \$18.9 million spent on the trial



(up to April 2017) for operating the CDC during the trial (in both Ceduna and the East Kimberley) and building the technology".⁵

Consultancy firm ORIMA was contracted to produce a report evaluating the CDC. The ORIMA evaluation method involved short quantitative surveys with CDC holders: in Ceduna, 196 trial participants were interviewed as part of the 'Wave 1' survey (average duration of interview: approx. 16 minutes), and 239 trial participants were interviewed as part of the 'Wave 2' survey (average duration of interview: approx. 21 minutes).⁶

The shortcomings of the resulting report have been highlighted by numerous authors, who point out that self-reported behavior change may well be influenced by the interviewee's reluctance to admit to engaging in drinking or, especially, illicit drug use (a limitation acknowledged by ORIMA).⁷ Most damningly, the Australian National Audit Office (ANAO) released a report in July 2018 analysing the implementation and performance of the Cashless Debit Card trial. The ANAO report stated that it is difficult to ascertain "whether or not there had been a reduction in social harm" as a result of the CDC's introduction.⁸

3. Research aims and methods

On 11 September 2017, I gained approval to conduct research into Ceduna residents' lived experiences of the cashless welfare card trial (Macquarie University Human Research Ethics Committee Reference No: 5201700541). This followed a two-week scoping trip to Ceduna in July 2017.

This research builds on long-term research relationships established in Ceduna since late 2006, and a year spent living on the Far West Coast in 2008-2009. My earlier research resulted in the 2017 book, *'Against Native Title': Conflict and Creativity in Outback Australia*, published by Aboriginal Studies Press.⁹

I have spent three months conducting fieldwork in Ceduna since mid-2017.

I explain to potential research participants: *"I am **not** evaluating the cashless debit card. I am seeking to record people's life experiences in all of their complexity. I want to get beyond the label of 'welfare recipient' and better understand how people affected by the trial see themselves, see their lives and describe their personal experience of welfare reform."*

The research thus seeks, first, **to understand and analyses cashless debit card holders' lived experience of this policy trial**. Second, and in more academic terms, this research serves to **denaturalise the category of 'welfare recipient,'** which defines people by that which they do **not** currently do: waged work. In-depth narrative interviewing, or recording people's stories, brings to light the role of unpaid care work, for example. I have spoken to people who detail the time spent raising their own biological children, 'growing up' the biological children of kin, caring for sick relatives, and looking after younger siblings when they were growing up. This is not properly counted as work in our society. I have also spoken to people about: loading or lumping wheat, sewing wheat bags, working in a cannery, working in mines, driving trucks, cooking, housekeeping, aged care, disability care,

child care, the old CDEP building gang, selling artefacts and serving sandwiches at the old Yalata roadhouse; labouring; salvaging waste; nursing; teaching; working on fishing boats; cleaning; dressing up as the Easter Bunny in an Adelaide department store... and much more.

This second research objective explains why I have spent my time talking at length with small numbers of people, with whom I have built relationships of trust.

However, in this report I confine myself to findings about the card itself.

As indicated above I have been conducting both fieldwork and interviews. I explain these methods in more detail below.

Fieldwork: Anthropologists conduct 'fieldwork', which allows them to participate in the everyday lives of the people whose experiences they are trying to understand. When I am in Ceduna I endeavor to spend my time with people affected by the CDC trial in some way. This has seen me: volunteer with the Red Cross as part of the Driver Mentor Program; help with the breakfast shift at the Stepping Stones Day Centre throughout 2017; go to footy matches, the gym and tennis practice; hang out and wash tea cups in the Red Cross community lounge; visit people at home (when invited to do so). I have also visited Yalata Aboriginal Community to talk to people about the CDC on three occasions, with the permission of Yalata chairperson Mr Russell Bryant.

In-depth interviews: In addition to the fieldwork, I have conducted in-depth interviews with 22 people who have participated in the CDC trial. By 'in-depth' I mean that these interviews involve people telling me the story of their life, before we focus in on their perspective on the CDC. A couple of these interviews did not take more than 30 minutes, even when people shared short stories of their childhood, their working lives and their current predicament. However, some of these in-depth interviews involved numerous conversations, spread out over months, and I have now recorded around 4 hours' worth of material with select



individuals. While it is hard to generalise, in-depth interviews generally last an hour. I have met with all of these 22 participants on multiple occasions.

Out of these 22 in-depth interviews, 11 were with Indigenous people and 11 with non-Indigenous people. These numbers should be treated with caution: they don't illuminate much about the way these kinds of identities are experienced in this place. For example, one of my interviewees told me proudly that they had 'Aboriginal blood' but I am aware that they do not socialise with any other Aboriginal people in the community. Another one of my interviewees was non-Indigenous. This person had partnered with an Indigenous person with whom they had children: their daily life was closely enmeshed with the lives of their Indigenous relations by marriage.

Focused exchanges: As well as conducting in-depth interviews, I have had a series of shorter conversations that are much more specifically about the CDC. I have spoken to some 64 individuals about the card. I do not count these interviews as 'in-depth' as these exchanges were dedicated solely to the topic of life on the card. I have termed these 'focused exchanges'. Focused exchanges were up to 30 minutes in length. These conversations sometimes involved talking with more than one person at once; they were sometimes recorded, but sometimes involved someone directing me to take notes by hand rather than recording their voice; they sometimes arose quite incidentally as I was telling people why I was in Ceduna and they took the opportunity to quickly "put their yarn in" or "have their say".

In the case of focused exchanges, 54 out of 64 of the respondents were Indigenous. Of these 64 respondents, 42 were currently on the CDC when I spoke to them. Others sought to speak to me about the experience of having close family members on the card (including their children and grandchild) or friends on the card. Or, they had been part of the trial at some stage, or had maneuvered to ensure they were not subject to the card (i.e. by changing their address prior to the



card's introduction). In a few cases, they were locals taking a keen interest in the CDC trial, and had relevant experience that they wished to share.

Organisational interviews: Finally, I have also sought to interview community figures working in organisations involved in the trial's design, implementation and evaluation, or working in organisations involved in some way with trial participants' lives. I have conducted seven in-depth interviews with organisational figures. These interviews greatly aided my understanding of the CDC trial, and will inform future work on this topic, but they are not the main focus of this report.

The themes emerging from my research so far are outlined below. I have identified these themes after close analysis of my exchanges with Ceduna residents affected by the CDC trial, using qualitative data analysis software NVivo.

It is methodologically unsound to turn deeply qualitative research of this kind into statistics. My focus is on people's individual stories, experiences and voices. In this report, I present anonymous excerpts from these exchanges, which serve to illustrate consistent themes in the research and give voice to my research participants' lived experiences.

What happens next?

I am very happy to receive feedback on this report from Ceduna community members. I can be reached via email on eve.vincent@mq.edu.au.

Many of my research participants expressed a hope that in speaking to me a "different side" to the CDC story would be heard by the public. To this end, I will write and publish an online article that draws together this research. I hope to finalise this article in March, 2019. Other of my research participants urged me to "put it through" to "the government". To this end, I will share this report and/or a more targeted submission on the topic of the CDC with members of parliament.

4.1 "No one was told about it." The consultation process

Background:

I interviewed someone who was closely involved in the design of the CDC: they emphasised that the original federal government proposal for a CDC trial was "quite broad" and "non-descriptive": in effect the federal government was saying "this is what we're thinking of doing, but we need to know how to do it". At that stage, the general idea had been embraced by community "leaders", but from here on in, according to this interviewee, the details were "co-designed" with community members.

A document was tabled to the 2015 Senate inquiry into the *Social Security Legislation Amendment (Debit Card Trial) Bill 2015*, which outlined Consultation in Ceduna. The majority of consultations are listed under the category of "Indigenous leaders (including Aboriginal corporations)"; these were essentially consultations undertaken with incorporated bodies. The document also lists face-to-face consultations undertaken in homelands (small Indigenous communities located outside the confines of Ceduna). According to this document, face-to-face consultations were undertaken in: Yarilena Homeland (1); Betts Corner Homeland (2); Munda and Wanna Mar Homeland (2); Munda Munda Watujinna Homeland (2); Warevilla Homeland (2); Dinahline Homeland (2). Under the category of 'General public', the document lists two community meetings in Yalata Aboriginal Community, 3 community meetings in Oak Valley Aboriginal Community; and 1 community meeting in Koonibba Aboriginal Community. The document also lists 4 meetings with Scotdesco Aboriginal Corporation, designating these as 'Community meeting; One-on-one meeting w affected individuals'.

It would appear then that no community meeting, available to the general public to attend, was held in Ceduna itself prior to the card's introduction. Unsurprisingly, many of my interviewees were highly critical of the consultation process. However, it is important to note that concerned Ceduna community members were

extremely proactive about organising meetings to find out more about the CDC after learning about it from media sources, such as a *West Coast Sentinel* story on August 12, 2015.¹⁰ This story followed the signing of a Memorandum of Understanding between the Federal Government, the District Council of Ceduna and five Indigenous organisations on August 5 2015.

A small group of locals then arranged for a public meeting to take place September 20 2015 at the Foreshore Hotel. This was attended by about 30 people, Indigenous and non-Indigenous, old and young, “the biggest variety of people” according to one of my interviewees. I was told, “*We tried to get the mayor to come. We give them all invitations to come. ‘This is your community people here: we want answers. We want a consultation, that we were never given.’ But no, we were on our own.*” That first meeting was described to me as follows: “*Basically the feeling was: how could this go on without us... knowing. Without talking to people about it?*”

A second meeting followed one week later, again at the pub. Then, on October 2 2015, a meeting took place with two cross-bench senators, Jacqui Lambie and Nick Xenophon, both of whom went on to vote in support of the CDC trial.

It was only after the legislation passed on October 15 2015 that a public meeting was held at the Ceduna Blues Sports Club. This meeting, which took place on November 7 2015, was also attended by Xenophon, as well as then federal minister for the Department of Human Services, Alan Tudge. On Saturday 21 November, a protest took place in Ceduna, organised by card opponents: “*We marched on the main street!*”

Research participants share their views on the consultation process below:

- *“Nick Xenophon ... said he wouldn't vote on it until they'd had a proper public consultation. When he went back, they voted on it. No proper public consultation and even the second time around where Tudge came and a bunch of others, there was no consultation. It was 'this is it, this is how it's going to work, you've already got it'. It wasn't... The people at that meeting all thought they had a vote. They didn't have a vote. It was signed, sealed and delivered the day that Xenophon put his stamp on it.”*
- *“I heard about it from the people in the community who were saying it was gonna happen. And then before I knew it, I met Alan Tudge here with the cards.”*
- *“None of those government officials ever spoken to the community. It's like they was all cherry picked. The mayor, he picked the people that favoured the card, so the government officials spoke to the people that favoured the card. They've never spoken to the whole community about it.”*
- *“Even though there [was] no communication they're still making their mind saying, 'Oh, we've spoken to the community.' No one has spoken to the community! The council, he just sits on his ass. He doesn't even come up and talk to people, you know.”*
- *“I don't get around drinking heaps of alcohol. I don't get around using ice and all that stuff. I don't do that stuff. I'm just me. I'm a healthy person. I feel that my rights, seriously, my rights have been taken away from me and I was not asked.”*
- *... [They pulled the blanket over everyone, and just secretly said that everyone is on the card, without informin the community about it.*

- I asked an Aboriginal interviewee about whether they had been involved in any consultations: *"No. That was all done by a group of people that were with government officials, and then I'm talking about the government officials from Canberra and all that. No. No. No, as far as the card, I think ... It was never discussed. It wasn't presented properly to community."*
- Another Aboriginal interviewee commented: *"... you've got young blacks ... who are making the decision. They're sitting on the panel saying, 'Yeah, we want the grey card.' I said, 'Live some life, live a life first, before you start making decisions for us.' And sadly these are blackfellas who is making decisions as well. Because they had a job. They didn't care, they don't care. That's the sad part about it."*
- *"I don't like it. It's taken responsibility away from me. ... [T]hese people shouldn't have signed these things!"*
- *"Apparently there was marches, there was rallies, there was everything, I didn't go to one of them. I was that out of touch at the time. That's what happens with poor people and I guarantee there's probably a thousand more that were like me. They didn't attend those, but it doesn't matter because I've had an overwhelming response in the negatives about this card. I don't found many people who says that it's a great idea, though I don't know if the government's where they get their information. I'd like to see it on paper, but I don't think that there are a lot of people.. I don't think it's a bad thing. It's the forcement of it. The blanketing and the forcement..."*
- In response to a question about when they first heard about it, a research participant told me: *"Oh, not very long before it was in. It was only a matter of weeks. It wasn't very long at all before all of a sudden, it was here. No one was told about it. It was all very under-handed and sneaky. There was a meeting called just before it came in. I think [name redacted] and them*

organised that and I went to that. Because I thought, 'How can they do this?' That first meeting was just total disbelief. How could they do this and how come we didn't hear anything about it before now?

Numerous research participants shared their impressions of the community meeting held at the sports club:

- *"I was actually surprised, it was a really good mix of community people."*
- *"By the time people found out, it was like a day or two later. It was too late."*
- *"The one down at the footy club, I was sitting right up in the front row and [name redacted] ... Aboriginal lady from up at Yalata got up and said she didn't know what it was she was signing, 'it's not what you told us'. And Mr Tudge was so rude. He was so rude to that lady and she's an Aboriginal elder, she's really high up in their hierarchy. I had never seen anybody... He just totally ignored her. It was just awful. Apparently, they left Nick Xenophon in the car park that day, while they all went up to Mozzies [the MoGas service station] and got their lunch. Poor Nick! [Sarcastically/cheekly] Couldn't happen to a nicer person!"*
- Another interviewee also raised the question of disrespect at the community meeting held at the sports club: *"And one of the things ... on the one hand there was a really powerful community meeting but, yeah, bureaucrats. There was Tudge's assistants who were all quite young, young guys who appeared in their 20s or something who pretty much stood up the back with their arms crossed laughing, snickering at community voices. Some people [were] not particularly eloquent, or really nervous or rambling on or being ... presenting themselves in a way that's not standard for a public forum but*



trying to express themselves and them being really, really, really patronising.”

4.2 "They were mainly targeting Indigenous people." Race and the CDC

As earlier noted, as of September 2016, there were 752 people participating in the Ceduna trial, 565 of whom were Indigenous. That is to say, approximately 75 per cent of CDC trial participants are Indigenous. Many research participants expressed their understanding that the CDC trial involves racial discrimination:

- *"In my point of view, it's racial discrimination and a human rights breach ... because this card was really aimed at Indigenous people. ... The card was designed to control the alcohol, but it hasn't. And the people that are doing good by it, we are getting the full punishment. It's just racist and violates our human rights and it's not fair."*
- *But yeah, they picked on the Indigenous communities first.*
- For one Aboriginal interviewee, not only was the card discriminatory but so remained the local labour market: *"You know, it's hard for Aboriginal people to actually get a job in this town."*
- *I think the government did this to make Aboriginal people suffer. That's what the government wants to do. They want to make Aboriginal people, Indigenous people to suffer. Not only Indigenous people but a lot of whitefellas too. And the whitefellas think the same thing, this is wrong. ... It's all about the alcohol and drugs. That's what they want to do. It's ended up with everybody. Not many of us, who take that drugs. ... But they make people suffer. Bring the attention to everybody, you know. I think this is wrong, what the government done. They very racist people. In the Senate. In the Chamber. Council Chamber. ..."*

- Non-Indigenous people sometimes also raised the issue of racial discrimination: *“Because in a way, I think it’s racist. Because it’s for the Aboriginal people to stop them from drinking, and booze, and gambling and things like that. I think, in a way, it is racist. I really do. I can’t think of any other reason why they would do it. It’s not a good thing. It was only supposed to be a six-month trial in the first place. Now, it’s stayin.”*

Further, both Aboriginal and non-Aboriginal research participants expressed their frustration that the trial was designed in ways that were intended to obscure its racial dimensions. They believed that the card was targeting a small, core group of Aboriginal heavy drinkers but it had a wider remit so as not to **seem** racist.

- *“We don’t want to be sitting back in the 1960s where you have to get permission to go from the reserve into town, written permission. We don’t want to go back into days where you’re given tea bags and flour and stuff like that. ... Well to me it’s just like going back to the old 60s, you know, getting, you know, bread, or whatever you’re given, tickets and stuff. Just like taking our rights off us. ... I know myself it was targeted to Aboriginal people. But for the government to... sort of, keep their nose clean, they involved everybody else, so it didn’t have to be, didn’t look like it was pointed directly at Indigenous people. But we know, as Indigenous people, that’s what it was. So to make it a non-discriminatory thing, they involved the community as well. And a lot of whitefellas around here is not really happy with the grey card as well as blackfellas.”*
- *“And they know who the people are who are causing the behaviour on the streets. You know, the K9 Unit did. And they should be going to these agencies like the Day Centre, the Sobering Up Unit, the courthouse, police, domestic violence, you know, these little health hub groups and target these people’s crappy behaviour. You know, instead of scooping us all up. And if anybody sort of says anything, ‘Oh, well, we didn’t want to be racist.’ But it’s*

not racist to target people's crappy behaviour. Why didn't they get those names and address the alcohol problem, and place those people on the card, rather than placin the majority, you know? But like I said, it looks as though we are being punished for somebody else's bad behaviour, you know? But with that there, that would be direct discrimination, like, to target people."

- *"And they bring this grey card out, for some unknown reason... because like I said to you yesterday, they were mainly targeting Indigenous people. But because the government's saying, 'Oh no, we can't target these guys, we have to actually target some other people as well, so ...' It just takes the rights away from us."*

The introduction of the CDC can also be seen to have affected complex local race relations. Many of my interviewees made a distinction between Indigenous people they sometimes termed "transient people", "tribal people", or in very respectful terms as "traditional people", and other Indigenous people sometimes termed "urban people", "township people" or "local people". While this is a sensitive issue, it is important to include mention of the fact that a number of research participants spoke very passionately about the relationship between the two:

- *"It's as if we are being punished for somebody else's bad behaviour, because they went by statistics. So those statistics are, were used against, like, the township people — when it was transient people."*
- *"But when you think about it, all of these statistics that's gathered on to support this card, we're basically getting punished for out-of-towners. Like the locals, we don't use the Day Centre, we are not in the Sobering Up Centre 24/7 or the hospitals or Town Camp, and those statistics are gathered up to support this card. The people that are doing good by it, we was suckered into believing it was a trial. Now that those statistics are all*

gathered up, it's kept the trial going, and it's not fair on us locals because we were getting punished for bloody out-of-towners, the people that's got no residential in this area."

The introduction of the CDC also affected some race relations more positively. A non-Indigenous opponent of the CDC told me:

- *"I'd heard about the Northern Territory card and always thought that was a horrible thing to do to people. But um, somebody [an Aboriginal person] said to me once, 'You're only feeling like this because finally they do it to white people as well.' I said, 'No, I've always felt it was the wrong thing to do.' ... I think for a start, yes, it did bring the Aboriginals and the whites closer because we were working together with a single aim. But everybody's just so tired and exhausted from fighting and it just doesn't make sense that we're not getting listened to."*

4.3 "The government con us in, I reckon." Perspectives on the trial's extensions

The CDC trial was initially 12 months long. It was extended for at least another 12 months in March 2017, prior to the release of the controversial final evaluation report in August 2017, but after the release of an initial 'Wave One' evaluation report in February 2017. In February 2018, legislation was passed which extended the Ceduna and East Kimberley trials until mid-2019.

Research participants were both cynical about, and frequently confused by, the process by which this policy had twice been extended. The following comments were made by Aboriginal research participants:

- *"When Aboriginal people hear the word 'trial', we know that it's being introduced, it's permanent."*
- [How did you first hear about it?] *"It was a letter. And this grey card, going to be for a year trial. ... Which the government con us in, I reckon. ... Nah, we have had it for one year now, going on two years, like I say. ... We've got no money. Got to depend on the grey card."*
- *"The trial is meant to end! ... I don't believe politicians or politics on the matter because they're supposed to be helping out the public. They've made everyone's lives more harder."*
- *"I... always thought it was a trial. Twelve months. And it's still going!" [I explained the extension to mid-2019, which had just been legislated at the time of our conversation.] "Rubbish. I reckon that's rubbish. He was here, the prime minister, he was here. He said, 'it is a 12-month trial'. But it went over 12 months. 2019, it's going to finish? I reckon it's taking away people's rights."*

- *"Because I was a bit disappointed in the card, I just didn't want to go to any meeting. But from what I heard, it was just a trial. You know? And I think the trial was, they wanted it... I don't think they wanted the feedback from us, I think they wanted the feedback from the council maybe, or the local Aboriginal corporations like CAC [Ceduna Aboriginal Corporation], Koonibba. ... I want all my people here to stand up and just rally against this grey card, and saying, 'No, we don't want it'. Because they told us it was just a trial for so long. And it's just ... I think it's going to be continuous. We don't want that."*
- *"Nah, I don't agree with the card. I did agree in the first place when Alan Tudge told me it was a 12-month trial, but after that they went behind our backs and just continued it."*
- *As soon as I got the card, I saw the expiration date: 2019, I was thinking, "Oh my God, everyone got suckered in to sign up for this card." Just, you look at the expiration date ... it's 2019 it will expire. Nah. This card is not fair. It's basically controlling .. to the people that was on the rations back in the day, it's a insult.*
- *How did you hear about the trial being extended? "That was through the media, I heard about that. I thought, We've all been had. We've all been had. We've all known for a while back, I think, how long was it supposed to go for? Originally? ... So when the first six months came around, it just always felt like a let-down. You know ... it's only gonna go for six months, we'll come through this, and then it's like, no, we'll tack on another six months, yeah. Another twelve months, yeah."*
- *What did you think about the trial being extended? "I wasn't too happy about that, because, like, I thought it would have worked out in that way,*

where they just said it was a trial and prolonged it, just to keep us on there longer. ... Because I thought it was coming to an end, and I thought, yes, no worries, everything will go back to normal, you know."

Non-Indigenous research participants commented:

- *"So the first we heard about it was in the local paper, but they were only talking about Basics Cards. Never heard about cashless welfare cards restricting anybody else, sort of thing. It was basically for the people that had alcohol problems. They were supposed to be voluntary and targeted. This trial is completely different to what the people that were interested in, it seems. Everything about it has been dirty and has been tricky. ... everything leading up to it was not anything like what [we've] got."*
- *"Because they said at that meeting at the [sports] club that it'll only be a six-month trial, and then all the sudden it was rolled over to the 12 months. After that, it was rolled over again. It felt like there wasn't much evidence for it to continue. It took that long before— even after six months, people still hadn't received their card. How could they go on figures that not the whole community was on it already? Of course, it looked like it was a success because not all the people were on it. So you weren't seeing results to its fullest. ... The people that are saying it's all good and all awesome and that, aren't the people that are on it. They don't know what it's like"*
- *"Because I said to someone at that stage, 'This isn't only going to be a year.' Why is it, why doesn't it [the card] expire until March 2019? It was just something else they never thought about: we could actually **read**."*

4.4. "It's an insult." The question of shame and stigma

Background:

The ORIMA final evaluation report states "in the quantitative survey, only 4 % of all participants on average across the two sites explicitly raised 'stigma' or 'shame' associated with the card as an issue at Wave 1 (6 % did so at Wave 2)".¹¹ However, the issue of shame and stigma is extremely complex, and a short survey is an inadequate instrument for capturing experiences of this kind.

Anthropologists have long noted that the meaning of shame or 'shame job' in Aboriginal Australian communities is quite different to how the notion is used in the broader community. In Aboriginal English, 'shame' (*kunta* in Pitjantjatjara) might refer to an experience of being distinguished as an individual, for good or bad reasons. For example, I talked with a young person who collected a NAIDOC Week award on behalf a relative. The experience of accepting the award on stage was described as 'shame', even though it was a happy moment. Anthropologists argue that this can be partly explained by the cultural value placed on egalitarianism—on everyone being treating the same. Because the CDC was issued to so many fellow relatives and community members, when I asked about the issue of shame in Yalata, most of my research participants shook their heads—there was no shame involved; everyone was on the card. For example, it was explained to me: *"Just usual, I suppose. Like the Medicare card and everybody uses that. Like that to me, you know, you're not shame."*

In Ceduna, the issue was quite different and many research participants shared their perspective on finding the card an "insult", of feeling "targeted", of involvement in the trial being "degrading", of being regarded as lesser by those implementing the card trial ("they think we're rubbish").

The following comments were made by Aboriginal research participants:

- *“When I pull the Indue card out ... [sighs]. I tell them ... It makes me shamed I come to the shop. There are a lot of people standing back looking: they got money in their pockets, you know. Then I thought, ‘I wonder what they’re thinking, you know?’” [A relative interjects, saying, in effect—you don’t smoke, don’t drink, hardly ever go to the pokies.] “Yeah. I’m still hit with a Indue card. They’re taking the responsibility away from me. From my life I reckon. ...” [The relative interjects again, asking about ‘pride’.] “Yeah and my pride and ... I was very respectable woman and always there for my children. Tell them, I’ll be there for my kids and tell them ... I’ve always been there for my kids. If anybody messes with my kids. ... I don’t like [the Indue card] because I’ve been working all my life.”*
- *Yeah, first time it came out, made me shame. But then big mob got it! [Laughs.]*
- *“So I do me shopping. And I’ve got money in there, I checked.” [Another person in the conversation says, “And then you haven’t got enough to pay for the shoppin, and you ring back up and the amount’s supposed to be in there?”] “Nothing! I gotta put everything back. It’s shame, I’ve got to go right down to the ... [back of Foodlands, to put all the food back].”*
- *“The shame was that, at first. Now, it’s become acceptable and people don’t even look at it as shame anymore. [Did you feel that shame?] Yeah, I did. I felt like I was, what do you call...? A stigma was attached. You were being segregated. You know, you were looked down upon, but now things are just sort of changing and it’s become acceptable, and I mean, 18 months later, it sort of has.”*

- We were talking about a situation where a research participant was having trouble knowing how much remained in their Indue account. They described having to put items back after the card was rejected due to insufficient funds. *"It just made me feel shame. I had to put some things back, you know, like, yes. ... I find that it causes embarrassment for me, you know? ... My son's on the Indue Card. He finds that shame, embarrassing."*
- *"Yeah, I felt like that. Shame job. When I first, because I haven't been on it for that long, you think, 'Oh, you know, druggie.'"*
- *"[[W]e all just got categorised like that. It's a different thing if [you] got reported to DCP [Department of Child Protection] or you had so many whatever reports about you, not looking after your kids and stuff. But as for the other mothers who do know how to do things like that there. We just got chucked on the Indue card and that's it."*
- *"I just feel like I'm another person to blokes that's got regular job, and me, pulling the grey card out in front of them, that's embarrassing. 'Oh, he's on the Indue card,' you know. So anyway ... Yeah, you get your little smirks and stuff like that around the place, you know. Fellas thinking, 'What are you on the Indue card for?' Ask the government that! You know. They've given us Indue cards because they've taken away our rights, simple as that."*
- I was in a conversation with two cousins about the card, *"Make you feel kunta?"* one asked the other. The other replied slowly, thinking about it: *"Well, some people it might make them feel like that there, you know, because... I just, I have got no choice but to use it, I just use it. ... Like a lot of people, when they first was on the card, it was kind of degrading and shame. They actually felt embarrassed going into the shops, to pull out the card. But like I said, me, I'm not. But there's a lot of fella that would be, feel like that there, they would feel that, and hesitate, probably look around*

before they pulled the card out. It's just after a while, you sort of get used to it, and you think, well, the card is there for bills."

A non-Indigenous research participant relayed to me that on seeing the flash of silver-grey, they automatically thought, in a judgmental way, "Oh, you're on the card." And then they reflected to me: "And, **I'm** on it!" Other non-Indigenous research participants commented:

- *["Is there some stigma around being on the card or some shame?"] "Yeah. Especially if you're going to like a op shop [(second hand shop)] and you go to use it there. I really feel it there. ["I wonder why you feel it there?"] I don't know, because they're elder people and they're very well respected in the community. They've got all these different views on the card, like a lot similar to the mayor. It makes me feel like I'm a drug user or something like that because I'm on the card, where it's not the case at all. So that's why I think that it's sort of stereotyped there that if you're on the card you're ... When you could just be a simple Centrelink recipient."*
- *"Since I've entered the mental health system, I've had to deal with a huge amount of humiliation. Welfare card's nothing."*
- *["Is shame or stigma an issue?"] "Not anymore. It was. But like I said, the shopkeepers and that around Ceduna and around the area where's it been used the most have gotten used to see it. For a start, it was awful... ."*
- *An interviewee told me about a worker in a local business: "When you produced your Indue card, she'd give you a filthy look, but ... until I rang head office in Adelaide and told them about this lady and she accepts it now. I knew her name and everything. I rang head office in Adelaide and said, 'Listen, there's a woman up here in [name of local business], doesn't like people using their Indue card ... she just gives you the filthiest look.' ..."*



I'm still payin for it! I'm not walking out of the shop, taking the milk! I just couldn't understand the point of view. I had to talk to my job network people and they said, 'Well you can only ring the company that she works for and let them know that she is giving you such a filthy look.' And I wasn't the only one. I know other people were saying, 'One woman gives you such a dirty look.' Cause you're on the dole, I suppose, you're nothing better."

- *Yup. Yup. When we're in town and we show this grey card, we're really identified. We really are. Yeah, we really are.*

4.5. "Drunks gonna drink!" Getting around the card

I asked research participants if it was possible to get around the card. One person, living in a household of heavy drinkers, shook their head ruefully, saying, "Drunks gonna drink!" Other Aboriginal research participants told me:

- *"They're clever, Aboriginal ones are. Lie and sneak and know. They've been to Whyalla, they come back with lots of grog. 'Eh, where you mob get that, you're not allowed to...' 'Yes, but get it through our grey card.' So there is a way."*
- *"They're trying to stop people from drinking. When they made this stuff. [The speaker is pointing out that alcohol was introduced to Aboriginal people as part of colonisation]. They made the alcohol. And it never stops. You can't stop people from drinking."*
- *When you think about it, the people that ... Since this card has come out it's only made people smart. They know how to do the loopholes and it's not stopping the people that enjoy the alcohol every week. It's never stopped them.*
- *"Yeah, the card is no good. And it doesn't work, it just doesn't work because people, they find many ways of getting the money around and getting the cash in hand."*
- *"You reckon people can get around the card?" "Of course, they can! They think blackfellas is stupid. Blackfellas not stupid. ... They walk around like they don't know nothing, but they smart. They know to use their brain."*
- *"What they'll do is they'll go buy a laptop on the card and then flog the laptop." ["For cheap?"] "Yep. Cheaper, yeah. Well, they buy radio or they buy a telephone. What do ya call the...? An iPhone and then they'll flog the*

iPhone for less to get money to go to grog.” [“Have you seen people do that?”] “Yes, I have. And I don't ... You can't blame the people that are ... you know. It's against the rights, human rights, because they should be able to do what they like with their money. The government's saying they can't and they're making the decisions like they did years ago when they took the stolen generation away. They're making the decisions, which is not fair. Not fair.”

- *“And all come together, you know, and chuck in a little bit here, little bit there... But it's like 20 people to one carton of beer ... Say 15 people... And then they have only have two cans each, out of a carton of beer. So, they don't really get drunk anyway!”*
- *I was visiting a person, whose relative rested on a bed on the verandah, heavily intoxicated. The drunk person joked with me, “Chuck in, chuck in, chuck in!”*
- *“You go down the street, there, you got everybody, all looking around. [They are thinking:] ‘How I'm gonna get money, how am I'm going to try for this card? Who's card can I put it in?’ They're thinking down the street, those people that got paid today, ‘Who's got that money in the card?’ They're thinking really hard, ‘How am I going to get this money in my hand?’ Because I can't get anything with the card but, like what I really, really want...’.”*
- *“And the thing about it is people who are elderly and exempt from being on the card they're vulnerable targets of assaults. And, only recently, like a couple of months ago, a lady had her arm broken from her own son. ... To support their habit, like. It's ridiculous.”*

A sample of non-Indigenous research participants are quoted below:

- *"Of course they can [buy alcohol], yeah. Because they've got that extra bit of cash, see. People chuck in, drink their life away. ... What they needed to build here was a rehab centre for people to actually go in, not send em away to be away from their families. I know from my ex-partner: he was went away for rehab. He was missing his family, got out, and went back on heavy drugs. If there was a rehab center here, instead of a Hungry Jacks, he could have probably would have put his mind to it. Could have done daily visits or something. That's one thing they need to think about."*
- *"I've got a friend, who I used to work with, who, you know, [large] family ... are on the card. And it's particularly when money runs out. You know, the in-house theft, you know what I mean? Yeah, yeah. It's hocking things, yeah. I have noticed. "*
- *"I think there's ways around it if you're really serious about getting around it. You will. For the ordinary person, what's the point? What's the point in even trying? It doesn't work. I've tried so hard to work within their system and I'm still ... not happy."*
- *"Yeah, I won't delve too far, but I'm just trying to say that where there's a will, there's a way. Unfortunately there's more unscrupulous ways and people will end up selling themselves for sex, selling drugs..."*
- *"I guess it's like anything. There's always a way around it. Like, "Hey, I'll fill up your car and give [me] \$80 cash, and you know you use my card and put \$150 fuel on it."*
- *"I have bought large ticket items on my card, received the cash for it. I did it twice. ... And I think if you're in a position where you can saddle up with someone who's got some kind of ready income, and who's able to do little things like that, well and good."*

4.6. "It's the trepidation." Practical problems with the card

Problems with the card were frequently pointed out to me. In many cases these problems were practical, which sometimes exacerbated pre-existing anxieties. In other cases, interviewees talked of a more generalised sense of anxiety arising from learning how to use the card, and the associated online system, or from *anticipating* problems with it. "It's the trepidation," one person told me, who had experienced their Indue card as unreliable. A sample of comments from research participants are presented below:

- *"My biggest threat was I buy everything in my house, like my kids' beds, my bed, the fridge, the microwave, even clothing, everything just about that I own was purchased off of this Buy Exchange [a community Facebook site]. You find that with a lot of community members here. When you haven't got money to go splurge and buy, you know, \$800 telly, when you can buy the same telly for maybe 50 per cent. It was creating bigger financial problems again for people. Same with beds. I pick up a bed for 20 bucks, but I might have had to pay 300 in the shop. Mattresses. Even your cutlery or your plates or couches."*
- *"Like I can deal with my past problems, I can deal with just about every problem I ever went through. When the card popped up here: that was sort of a problem too. It sort of did bring on mental stressing and stress people out. A lot of people are stressed out to be on the card."*
- *"Some places I go, I always carry my other card with me, because I just don't have faith in it."*
- *"My childcare fees, I can't pay them with a card. I've got to ring up Indue every time to pay it." ["What's it like to ring Indue?"] "You've got certain times to do it in. And at other times it don't work. If I can't get them in my*

lunch break, I've got to take time off of work. I'm losing money just to make a phone call and try to get in contact with them. And then for me to get my bill paid, I've got to fax, send, or email my bill to them for them to be able to access my funds to pay for it."

- *"Before this card come into place, it was very easy for me to order my parts from eBay online. As soon as the card came in, I've tried to order parts, it doesn't work. ["Like car parts, you mean?"] Yeah. eBay doesn't accept the Cashless Welfare Card, and my car's still off the road. Now, that's a big problem. There's only two or three car yards here that's always full and don't want to really wait on that — end of the year until we can put our vehicle in. That's a big problem."*
- *"Went to pay their school fees, and it didn't accept it. Went to a supermarket, and it took me an hour for the card to actually work. Didn't know what was going on with it."*
- *"It's hard to pay electricity bills and that, on that card. They don't accept them cards. Especially when you got them temporary ones, you know? They thinking, 'What's this card with no name?' Temporary card."*
- *"I don't think it's good, because we used the card on the weekend. And it went through and an hour later, it didn't even work. And was funds in there. So we were trying to ring the Indue, like the line, and they're not even open."*
- *"Not every place in town takes it. The tip. There's a sale yard out there. And of course you gotta take stuff out there: waste. Now, there's a panel beater that won't take it because he haven't got Eftpos."*
- *"When it hit, it hit everybody hard. I got 20 per cent cash to 80 per cent in the Indue card. The post office, right, at that time didn't take the Indue card credit, so we couldn't pay for regos for cars. Not many of us had enough"*

money and that to buy your phones, buy your laptops and computers with internet access, wifi, all that. If you hadn't have been set up earlier, well then you couldn't pay for your rego online or anything like that, not unless you've got someone to do it for you, which means that it leads into people, um, having access to your details."

- *"I get scared when I go out of town, because... I think it's been accepted now, but first off, it was seen to be as people couldn't use it in certain, fuelling up, and I would get really scared with that. I would always make sure, when I'm out of town, I'd make sure I have cash. I'd try the Indue Card first, but make sure I have the cash. Back up."*
- *I spoke to another research participant about an upcoming trip away: "I got money, but will it work? If it doesn't work, I'm stuck! ... I did ask if Indue will work. They said yeah, but they don't understand what Indue is. They don't have it up there. ... I did sell some things in my room so I can have a bit of spending. Some makeup and stuff. [These items were sold on a community Facebook site.] I sold it as cheap as it can go."*
- *"But I can be at the chemist and pay for my meds, I can go up to the post office, and it won't work. I can come back to the supermarket and it will work or vice versa and anywhere in between. It's just ridiculous."*

The interviewee continued, *"And then we had the power cuts. That was fun. Did you hear about the power cuts? ["Could you tell me about them?"] The power cuts: we had two lots of three and a half days about two and a half weeks apart. And the first time, I thought, 'Right-o, I'll be right, I can do this.' Because I'm all electric here, totally. And 'I can do this,' and I had some candles and I had a torch. I was right, got plenty of books to read ... Knitting doesn't take power, you know? And it was summer time so I had plenty of salad stuff in the fridge. I was okay. The second time it happened, I wasn't. I needed food and I couldn't get it because ATMs were out, the supermarket*

was only accepting cash, and all the shops around were only accepting cash. I ended up having to borrow money off a friend of mine just to get a bit of food. I was lucky I could do that."

Numerous research participants raised with me their concern that money was going missing from their accounts. It was difficult to fully understand the range of stories about this problem. One theme emerged clearly, and that was that many card-holders are reliant on using public computers to manage their Indue accounts. This involves a high risk of confidential details such as passwords being shared. While Indue cards are frequently shared willingly with kin, as a means of support, this scenario is different. Money can be transferred out of one person's Indue account and into another. One person who had formerly been employed in a local social service opined: *"Like you look at the card and in order to set up the account you have to have an active email address and if you think about the design of the card and who it's targeting, that group of people would ... do not have regular access to internet services or they don't regularly check emails, so it's kind of like, you know, like online banking's the new world and the vast majority of people are using it but the people that card were **targeting** ... are people that would have low levels of digital literacy / access to the internet / email addresses. [In the advent of a lost card] people have to activate a new card, they forget their email address, have to open up a new email account. You know, it's just all of that shit, like that's layers of crap, before you're even getting your card."*

4.7. "Some like it." Positive experiences of the card

All of my interviewees were careful to point out to me that they did not assume the right to speak for others. Many people I spoke with felt they had been "tarred with the same brush". By contrast, they avoided generalising about their fellow community members – respecting the fact that everybody has the right to speak for themselves. Interviewees frequently told me, "Some like it". I sought out conversations with those people who liked the card, as I was conscious that disaffected community members were more inclined to approach me to tell their story.

My conversations with people who feel positive about the card were often much shorter than with those people who perceived that their opposition to the card was not being heard. For example, I spoke with an Aboriginal person whom I had gotten to know quite well, and I had had numerous conversations with about art, bush foods, family and other topics. This person told me they liked organising all of their finances online via their Indue account. Even though I was keen to talk in more depth with them, the person who felt positive about the card thought they didn't have much to offer my research. This person then directed me to a relative of theirs who they thought would be a more interesting interviewee, a relative who was described as "very vocal" and who was locally well known for their opposition to the card.

Research participants commented:

- *"In all fairness, it probably has curbed my habits. But then again, maybe I was better off with cash because I used to go down the pub, knowing that I wasn't gonna get any more income and I'd go and put a couple of bets on, on the horses. And I may just come out with a couple extra bucks, you know? I don't think that that's a bad thing, however, trying to do it with your last couple of dollars."*

- *"I've even said to my job network people: 'The Indue card is the greatest thing. I get paid Friday and I'm usually broke Saturday. At least with this thing, the money's still in the card.'"*
- *"Well, I like it, it's been good for me. I have money left over at the end of the fortnight."*
- *"I can save up on that Indue card. Keep saving. Saving up."*
- *"Sometimes they buy a car from that! From that credit card. They find out how much it costs, they transfer money from the card into the bank."*
- *"I like it! ["Why do you like it?" The speaker shrugs.] Just do. Got more money in the bank."*
- *"Personally, I think some of them can see, especially those with kids that struggle to keep a good control of that money, that it's good for ... the card. The card is good, they know they've got money there for keeps."*
- Numerous research participants also commented on their interactions with Indue in positive terms: *"They're nice. They help me through it."*

4.8 "Not the panel's business!" The Community Panel and Wellbeing Exemptions

As earlier noted, the Ceduna Region community panel ('the panel') is empowered to assess applications to vary the split of restricted and unrestricted monies from 80 per cent / 20 per cent, so that up to 50 per cent of the applicant's payments become available as cash (and 50 per cent remain available only on the CDC). The ORIMA evaluation concluded that at the time of data collection, community panels 'were still perceived to be not well understood or communicated to the wider community'.¹²

Research participants raised numerous concerns with the panel. Some research participants were convinced the panel was not being equally accessed by Aboriginal and non-Aboriginal trial participants. Another research participant described the panel's decision to grant them 40 per cent of their payments in cash, rather than the requested 50 per cent, as a "power trip". The full quote reads:

- *"Anyway and then somebody said to me, '... you won't have any trouble.' ... I was on eighty-twenty. Eighty per cent on the card and twenty per cent in my bank account. '... you should go for the fifty-fifty.' So I filled out all the paperwork and I took it into the local partners." ["Where do you take it in to?"] "There's a job network place. Behind the bakery in the mall, yeah, in there. It's not their fault, the girls there are wonderful. Any time I've been in there they've been just great and they've got the Indue number. They just dial it. They don't even have to look it up anymore, so that's how often they have to ring it. I had to take it in there, and they looked it through, and they said, 'Oh, you won't have any problems at all. Look at this.' Rah-rah-rah. Then I waited three months before I got a letter, in a second-hand envelope, that had stuff stuck over the previous ... What it had been used for. It said, 'You won't be getting your fifty-fifty, but we'll give you sixty-forty.' And to me, that's just a power trip."*



- Another participant also stated, *“Yeah. I applied to them for 50/50, but I still got 40/60. ... I just asked for 50/50, but they saying that the panel wasn't giving anybody 50/50. They were giving them 40/60, so 60 in your Indue, 40 in cash, 40 sent in cash.”*

The concerns about access are reflected to some degree in data obtained after a Freedom of Information request was lodged in September 2018. Applications approved by the panel, as at 31 August, 2018:

	Indigenous	Not identified as Indigenous / Non-Indigenous*	Total
Approved applications	81	59	140

* Includes participants who did not wish to respond.

As earlier stated, Indigenous people comprise 75 per cent of CDC trial participants. However, Indigenous people seemingly comprise 58 per cent of approved applications to the panel. Non-Indigenous people comprise 25 per cent of CDC trial participants, but seemingly comprise 42 per cent of approved applications to the panel.

Research participants’ perception that the panel is flaunting its decision-making power are strongly borne out by data obtained under the same Fol request:

Of the 140 approved applications as of 31 August, 2018:

- 8 applicants have had their restricted amount reduced to 50 per cent;
- 80 applicants have had their restricted amount reduced to 60 per cent;
- 52 applicants have had their restricted amount reduced to 70 per cent.



Other research participants raised concerns regarding the Wellbeing Exemption clause. As noted earlier, CDC holders might be exempted from the trial if participation in it would seriously risk that person's mental, physical or emotional wellbeing. One research participant believed that whitefellas were able to get off the card using the Wellbeing Exemptions, but Aboriginal people couldn't.

The same FoI request revealed:

	Indigenous	Not identified as Indigenous / Non-Indigenous*	Total
Exempted Ceduna participants	5	23	28

* Includes participants who did not wish to respond.

Thus, while Indigenous people comprise 75 per cent of CDC trial participants, Indigenous people seemingly comprise just 18 per cent of exemptions. Non-Indigenous people comprise 25 per cent of CDC trial participants, but seemingly comprise 82 per cent of exemptions.

Research participants also commented:

- *“There's a lot of people that won't go because there's personal problems is their personal problems. They do not have to tell a panel why they are stressed out! That is not the panel's or the government's business!”*
- *“The panel! The so-called panel that was actually, um... To access this panel, you had to pass a little survey. I don't have a copy of that, you might have seen it. It was about, yes and no, about have you been kicked out of*



town camp. If you've got a domestic violence order, that kind of shit. Yeah, pardon. I started to, but then I bumped in, I tried to, they connected me to somebody in Canberra, and we just weren't on the same wave length, and I tried twice, and both times told them they can go fuck themselves. Like just, that's not what I wanted to hear. Yeah, yeah, yeah, so I stopped. Yeah. And I thought it was just too hard at the time. I had lots of stuff going on, you know. That was just another burden. Yep. And then I always, I didn't think it was a fair panel, because somehow some of the names of the people on the panel were leaked, and it appears on a Facebook page. I... Yeah, I know some other people on that panel, and I'm a little bit, and I don't wanna front community members about what's going on in my life, particularly my financial situation. You know, I don't need that kind of scrutiny."

4.9 "Getting used to it." Ambivalence and acceptance

Many of my research participants expressed a range of perspectives on the card, neither condemning nor embracing it outright. Others accepted it on the grounds that it was now a familiar feature of everyday life. *"That's all it was. Getting used to it,"* an Aboriginal research participant explained to me. Still others commented that the Indue card was no longer an issue of concern, *"Nungas [Aboriginal people] are used to being told what to do. We just get on with it."* One non-Indigenous person concluded, *"Once you are on the Indue card ... you will be on it for life. So, not much you can do about it."*

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None of those persons listed above necessarily agree with the contents of this report: I take full responsibility for my findings and any errors contained here.

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