

Straightjacketing evaluation outcomes to conform with political agendas – an examination of the relationship between program evaluations and political imperatives in the context of the Trial of the Cashless Debit Card

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Abstract

This paper explores the interplay between government-commissioned evaluations of its own social policy programs – using the example of the Cashless Debit Card Trial (CDCT) in South Australia and Western Australia and the evaluations by ORIMA Research – and the various political agendas that inform such transactions.

It examines assumptions about the neutrality and objectivity of program evaluation exercises and highlights that they are conducted within a political context and are shaped by a number of critical factors and agendas.

Drawing on discourse analysis, an examination is undertaken of the ORIMA Research evaluation findings; Government's conclusions and statements about these findings; and responses from community residents who have been subjected to the Trial.

It is argued that the Trial of the Cashless Debit Card and its evaluation is imbued with a particular end-game in mind and manifests a number of the critical factors and agendas, as set out in the critique of program evaluation exercises.

The locus of control has primarily rested with the commissioning party – the Department of Social Services – from the planning and design of the program, through to its commissioned evaluation by ORIMA Research, and the subsequent selection and use of evaluation findings in order to justify a particular ideological imperative – irrespective of the limitations, caveats and qualifications set out in the evaluation findings.

The paper highlights the continuity of the colonial project and its manifestations in the current neoliberal 'welfare reform' agenda.

The net effect is that the disjointed and coercive social policy programs and ideologically-driven use of evaluation outcomes has resulted in negligible positive change for people experiencing socio-economic and structural challenges, and has instead caused a deterioration of their circumstances.

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Acronyms

CDC	Cashless Debit Card
CDCT	Cashless Debit Card Trial
DSS	Department of Social Services
DHS	Department of Human Services
ORIMA	ORIMA Research

1. Introduction

This paper explores the interplay between government-commissioned evaluations of its own social policy programs – using the example of the Trial of the Cashless Debit Card (CDCT) in South Australia and Western Australia and the evaluations by ORIMA Research – and the various factors that inform such transactions.

It examines assumptions about the neutrality and objectivity of program evaluation exercises and highlights that they are conducted within a political context and are shaped by a number of critical implicit and/or explicit factors and agendas, including the following:

- the program being evaluated is itself a product of political negotiation and decision-making
- the selection of the evaluating agency, is usually based on the congruence of the norms and values of the evaluator with those of the commissioning party
- the framing of value-laden terms-of-reference and funding arrangements invariably include a set of explicit and implicit conditionalities
- the subjectivity of the evaluator, whose own norms and values are consciously or unconsciously brought to bear on the subject of the evaluation
- the evaluation criteria are negotiated between the evaluator and the commissioning agency; this process does not usually seek out or include criteria from program participants
- the evaluation findings are communicated to the commissioning agency and not the participants in the program, and
- the ways in which evaluation outcomes are framed and selectively emphasised.

Against the backdrop of these critical factors that are inherent in social policy program evaluations, and drawing on discourse analysis, an examination is undertaken of the ORIMA Research evaluation findings; Government's conclusions and statements about these findings; and community responses to the Trial and its outcomes.

It is argued that the CDCT and its evaluation is imbued with a particular end-game in mind and manifests a number of the critical factors and influences as set out above. The imperative to arrive at a particular set of decisions about the CDCT and its evaluation has been driven by the commissioning party – the Department of Social Services – from the planning and design of the program, through to its commissioned evaluation by ORIMA Research, and the selective use of the evaluation findings, in order to justify a particular ideological perspective.

Having analysed the evaluation findings, the Government's uptake of these, and community responses to the Trial, the paper examines central tenets of the current attitude to those needing

income support and highlights the continuity of the colonial project and its manifestations in the current neoliberal 'welfare reform' agenda.

The net effect is that disjointed and coercive social policy programs, such as the CDCT, and the ideologically-driven use of evaluation outcomes have resulted in negligible positive change for people experiencing significant socio-economic and structural challenges, and have instead caused a deterioration in their circumstances.

2. Overview of the Trial of the Cashless Debit Card

According to the Federal Government, the trial of the Cashless Debit Card (CDCT) was introduced in order to 'reduce the social harm caused by welfare-fuelled alcohol and drug abuse and gambling' by reducing the amount of cash available to people.¹

Under the CDC, 80 per cent of people's income support payments are paid into a debit card account that cannot be used for alcohol, drugs or gambling. People on the Card can only access 20 per cent of their income benefits in the form of cash.

Participation in the Trial is mandatory for all working age income support recipients in the two Trial sites, with the exception of Age Pensioners and Veterans' Affairs Pensioners.

The Cashless Debit Card is part of Government's income management strategy and was introduced in the Ceduna area in March 2016 and in Western Australia in April 2016. The trial was scheduled to run for 12 months.

Evaluation of the Trial has been provided in the form of the Australian Government's Department of Social Services' *Cashless Debit Card Trial Progress Report* of October 2016, and three reports produced by ORIMA Research – the *Evaluation of the cashless debit card trial: Initial conditions report*, which was scheduled to be submitted in July 2016 but was provided to the Department of Social Services in March 2017; the *Cashless Debit Card Trial Evaluation Wave 1 Interim Evaluation Report* of February 2017; and the *Final Evaluation Wave 2 Report* provided to Government in August 2017 and made public in September 2017.

3. Methodology used in this study

This study draws on the key principles of discourse analysis² to analyse commentary made by the Australian Government during the pre-evaluation phase of the CDCT and in response to the key

¹ Government of Australia, Department of Social Services, Cashless Debit Card Trial Progress Report, October 2016, p1.

² Following Hoy (1999), discourse analysis is a qualitative methodology in which meanings of texts are interpreted in relation to the ideological and power relations that inform them. Drawing on Foucault (1970); Hardey, Harley, and Phillips (2004), it is an interpretive research methodology that explores how ideas and objects constitute social reality within historical relationships of power.

evaluation findings of the three ORIMA Research reports on the CDCT. It provides an analysis of the manner and extent to which government Ministers and officials have made reference to these findings in parliamentary speeches and media commentary, and explores whether any trends in the Government's treatment of the evaluation findings are discernible. The analysis is complemented by selected comments from interviews conducted by Uniting Communities with Ceduna and Far West Coast residents who are on the CDC.

This paper's timeframe for the analysis of the CDCT and its evaluation focuses on the period from the announcement of the CDCT in August 2015 through to the release of the final ORIMA Research report in September 2017. It provides a preliminary scan of Commonwealth Parliamentary speeches and Government media releases, and commentary provided in online and mainstream print media during this specified period.

The scan of media articles citing commentary on the CDCT is chronicled in a matrix and is available in Appendix One – *Discourse Analysis Matrix*. A total of 100 Parliamentary speeches were considered. Three formal Government media releases were analysed (each in response to the release of the three evaluation reports), and a total of 41 online and print media articles which included commentary on the CDCT were considered.

The discourse analysis matrix sets out the key findings of each of the ORIMA evaluation reports, which are categorised into two broad groups – those that, according to the evaluator, meet the key performance indicators and factors for success (listed in the matrix under 'positive' outcome) and those that do not meet the evaluation criteria (listed in the matrix under 'negative' outcome). An analysis is undertaken of the extent to which Government representatives make reference to both the 'positive' and 'negative' evaluation outcomes.

This analysis aims to explore whether there is a selective referencing of the evaluation findings by Government proponents of the Card in order to validate or perpetuate a particular perspective and, in doing so, whether a link between ideological imperatives and the implementation of social welfare policy is evident.

This study does not include an analysis of the significant number of detailed submissions made to the Senate Community Affairs Legislation Committee inquiry into the *Social Services Legislation Amendment (Cashless Debit Card) Bill 2017*, established on 17 August 2017. Many of these submissions highlighted concerns about the nature of the Trial and the inherent dangers of the social welfare policy that is being promoted through the use of the Cashless Debit Card. While not analysed in this study, it would be of interest to ascertain whether and the extent to which the Department of Social Services engaged with these perspectives in shaping its policy agenda.

Study Limitations

This study is by no means comprehensive or exhaustive and its discourse analysis cannot be generalized to all media and parliamentary commentary. It simply serves to illustrate the key views expressed in some of the available commentary and explores the extent to which this commentary responds to the full suite of evaluation findings as presented in the ORIMA Research reports or reflects a process of selection or ‘cherry-picking’.

4. The nature and purpose of program evaluation – the myth of neutrality

Prior to analysing the ORIMA Research evaluation findings of the CDCT and the Australian Government’s response to these, this section of the paper provides a theoretical framework and consideration of the nature and purpose of program evaluation and its role in policy formulation and its justification.

In theory, evaluation exercises are rational and objective undertakings that examine the effects of an initiative on a specified cohort in relation to a set of measurable objectives. Using established research methods, an evaluation is required to assess the extent to which the espoused objectives have been realised, and indicate findings that point to degrees of success or failure in relation to these. The purpose of an evaluation process is usually to inform decision-makers about whether their initiative is having the desired effect and, based on unbiased data, should serve to improve program development and provision or lead to a revision or termination of the program.

However, program development and evaluation research take place in a *political* environment and are not clinical, neutral or ahistorical undertakings but are inherently political. The political context impacts on evaluation processes in a number of ways.

Initial program development

In the first instance, the policies and programs that may later become the focus of an evaluation are themselves borne out of political processes and decisions; they are the product of the cut and thrust and pressures of competing political interests, debates, funding allocations and trade-offs.

The commissioning of evaluation processes

Given that evaluation processes are usually undertaken to inform decision-making, their commissioning and reporting invariably feed into the political domain that comes with its own arena of contestations. The choice of an evaluation research agency to conduct a program evaluation is not an objective or value-neutral activity; it is automatically informed by the outcomes which the commissioning agent wishes to see, and by the track record of the research agency and its relationship with the commissioning agent.

According to Weiss³, evaluation research is most likely to affect decisions when the evaluator accepts the values, assumptions and objectives of the policy-maker, and that policy-makers heed and use evaluation results that confirm their own perspective and intentions. Those who value the underlying evaluation assumptions and criteria and who are concerned with the achievement of official program goals, will be more likely to heed the evaluation outcomes. Weiss sets out a range of overt and covert purposes for conducting program evaluations. An example is one she describes as ‘window dressing’:

There are cases in which administrators know what the decision will be even before they call in the evaluators, but they want to cloak it in the trappings of research. They use evaluation to provide legitimacy (p. 22).

The adoption of shared perspectives

The process of evaluation assumes the adoption of a shared set of perspectives that implicitly or explicitly characterises the social issues and program under review – this could be viewed, for example, in terms of preconceived judgements about whether the issues to be addressed are themselves problematic and worthy of attention (e.g. the level of alcohol consumption, drug use or gambling in a given community) and whether the program goals and strategies are legitimate (e.g. the introduction of quarantined income support payments). The framing, methodology and findings of evaluation processes do themselves manifest an ideological perspective.

Declamatory goals inform evaluation criteria

During the political process of negotiating and justifying funding for a government program, the stated goals of the program are invariably idealised and declamatory. Given that the design and key performance indicators of an evaluation process are largely defined by the program goals these, sometimes overblown, claims can then become the central criteria for evaluating the efficacy of a program. For example, the Australian Government claimed that the Cashless Debit Card was introduced in order to ‘reduce the social harm caused by welfare-fuelled alcohol and drug abuse and gambling’ by reducing the amount of cash available to people.⁴ The claims made and the goals of the trial of the Cashless Debit Card are set out in inflated terms and as having significant potential to impact on the social fabric of affected communities. It is against these claims and goals that the program is to be evaluated and measured – determining and evaluating whether ‘social harm’ has been reduced is a complex and ambitious undertaking and requires the nuanced establishment and assessment of baseline values – most of which are not ascertainable, standardised or readily

³ Weiss, C. 1998 (2nd Ed.) Evaluation – methods for studying programs and policies. Harvard University. Prentice-Hall Inc. p. 22.

⁴ Government of Australia, Department of Social Services, Cashless Debit Card Trial Progress Report, October 2016, p. 1.

measurable, and all of which are impacted on by a multitude of variables; thereby making it impossible to attribute any identified impact to the Card in and of itself.

Following Warren,⁵ the danger exists that claims that are attributed to a policy program alone and to its own narrow experimental criteria and which exclude the potential impact of other social factors and variables, can result in a failure to observe the impact of significant other factors on the outcome and the efficacy of the program, thereby distorting the validity of the program's success. With reference to the trial of the Cashless Debit Card, this approach is evident in the claims made regarding the reduction in, for example, gambling activities or alcohol consumption, at the exclusion of other impacting variables such as the introduction of alcohol restrictions or the generalised downward trend in gambling. In the main, the proponents of the Card have attributed perceived positive changes to the Card itself, in isolation from other factors or influences.

In addition, Warren argues that, 'most evaluations – by accepting a program emphasis on services – tend to ignore the social and institutional structures within which the problems of the target groups are generated and sustained (p.100)'.

Exclusion of program participants

Evaluation is usually commissioned by the government agency which is responsible for implementing and managing the policy program, and not by those community members who are affected by the program. It is the *agency's* evaluation criteria, echoed by those of the evaluator, that determine the premise of the evaluation research and its indicators. Invariably, evaluation criteria are not sought from the affected communities or program recipients. The impact measures which recipients might propose and which might provide a more direct and useful assessment of program efficacy are seldom invited or considered.

Invariably, the evaluation findings are reported to the commissioning agency and not to the community respondents or program recipients; in the event that they are shared with program recipients, this usually occurs after the commissioning agency has publicly released the report or key findings. Any involvement of program recipients is invariably an extractive and unidirectional process, rather than an interactive process of engagement in a bid to inform and optimise evaluation outcomes. Such an interactive process would expose the neat confines of the evaluation and its desired outcomes to too many unpredictable challenges and risks.

The exclusion and lack of engagement experienced by many on the Cashless Debit Card, is captured in these words of a Ceduna resident who is on the Card:

⁵ Warren, R. 1973. The social context of program evaluation research. Paper presented at the Ohio State University Symposium on Evaluation in Human Services Programs, June. P. 100.

About the evaluation. I told ORIMA that they need to measure the impact of the process and the anxiety placed on community, and that it's not just about handing out a pamphlet. People's lives are complicated and this card has made it worse. The evaluation questions they asked were just 'Yes' or 'No' answers with no real input or interest in what people actually think. No real consultation, no real evaluation (Ceduna resident, August 2017).

The extent to which evaluation findings are heeded

The political perspective and imperatives of the government body that has commissioned a program evaluation can determine whether the evaluation findings are viewed as being conclusive and/or require full, partial or no implementation. Even in cases where sound and unbiased evidence is provided by the evaluator, these findings may be overridden by other political considerations and interests. Conversely, the ideological underpinnings of government program implementation, evaluation and political survival may result in significant credence being given to the evaluative evidence as provided, irrespective of how deficient or biased it may be. Rossi⁶ points out that, 'devastating evidence of program failure has left some policies and programs unscathed, and positive evidence has not shielded others from dissolution. Clearly, other factors weigh heavily in the politics of the decision process'.

In summary, the following perspective offered by Weiss⁷, while writing in the context of evaluation research in the United States of America, is illustrative of the policy system that is prevalent in Australia and that has shaped evaluation studies of programs such as the Trial of the Cashless Debit Card:

Policy makers are members of a policy-making system that has its own values and its own rules. Their model of the system, its boundaries and pivotal components, goes far beyond concern with program effectiveness. Their decisions are rooted in all the complexities of the democratic decision-making process: the allocation of power and authority, the development of coalitions, and the trade-offs with interest groups, professional guilds, and salient publics. How well a program is doing may be less important than the position of the congressional committee chairman, the political clout of its supporters, or other demands on the budget. A considerable amount of ineffectiveness may be tolerated if a program fits well with prevailing values, if it satisfies voters, or if it pays off political debts ... As a matter of record, relatively few evaluation studies have had a noticeable effect on the making and remaking of public policy.

No excuse for lack of rigour or bias

In light of these factors that impact on evaluation processes, every effort should still be made to apply rigorous and unbiased evaluation research methodologies. The factors set out above should in no way excuse poorly designed evaluation methodologies or careless reporting. However, when the efficacy of evaluation outcomes is being considered, it is useful to bear in mind the influence that

⁶ Rossi, P. (1969). Practice, method and theory in evaluating social-acting programs. In J. L. Sundquist (Ed.), *On fighting Poverty: Perspectives from Experience*. New York, Basic books, 217 – 234.

⁷ Weiss, C. H. 1993. *Where politics and evaluation research meet*, Evaluation Practice, Vol. 14, No 1, 1993, pp.93 – 106, p.98.

political imperatives have on how and what is presented. Having an understanding of the politics of evaluation research enables us to better understand the nature and content of the evaluation process, its outcomes, and the ways in which these are used.

5. Findings and discourse analysis of evaluations and media commentary

Informed by the theoretical framework and a consideration of the nature and purpose of program evaluation and its role in policy formulation, as set out above, this section of the paper focuses on the findings of the Department of Social Services' *Cashless Debit Card Trial Progress Report* and the three ORIMA Research evaluation reports, and analyses commentary on these findings.

CASHLESS DEBIT CARD TRIAL PROGRESS REPORT

In October 2016, the Australian Government's Department of Social Services produced the *Cashless Debit Card Trial Progress Report*. This report indicated that:

The trial would run for 12 months and would be subject to a full, independent evaluation conducted by ORIMA Research. The evaluation will measure the impact of the trial on social harm directly associated with alcohol and drug use, and gambling. The evaluation will also measure factors (although not trial performance indicators) such as school attendance rates, child protection substantiations and incidents of disruptive behaviour⁸ (page 4).

The discourse analysis of a preliminary scan of Commonwealth Parliamentary speeches and Government media releases, as well as commentary provided in online and mainstream print media at the time of the *Progress Report*, revealed that Government commentary only focused on those findings which reported a positive trend or improvement in accordance with the Government's stated objectives.

While the Report noted 'mixed trends in crime statistics for Ceduna since the trial began (page 11)' and that 'due to privacy concerns, domestic violence, sexual assault and homicide data is not available for Ceduna (page 11)', the Government commentary only emphasised the Report's finding that 'Since trial commencement in March 2016, Ceduna has seen a decrease in robberies and driving under the influence of drugs, to the point that there have been no reported robberies since April 2016 and no reports of drug driving since May 2016 (page 11)'. However, significant segments of negative data were not included in the *Progress Report*. For example, at the time of compiling the report, the Department of Social Services had police data showing a 71 per cent increase in

⁸ It is noted that school attendance rates and child protection substantiations were not given significant treatment in the evaluation reports.

aggravated robbery for the area in the period from October 2015 to October 2016 compared with the same period the previous year. Non-aggravated robbery increased 200 per cent in the same period.⁹

Greens Senator, Rachel Siewert stated, 'It is odd how this did not make it on to the minister's top lines when he was spruiking the card to media. When it comes to the cashless debit card trial progress report, we knew that the government was cherry-picking data to shine the card in the best possible light, but to ignore SA police statistics that show an increase in aggravated and non-aggravated robbery is worrisome'.¹⁰

Where negative or qualified evaluation findings had been included in the *First Progress Report*, these were not commented on by Government Ministers. Where negative outcomes were reported on – such as drink driving having increased slightly since the trial began; other offences against the person (e.g. harassment, threatening behaviour or dangerous or negligent acts) rising sharply in August 2016; despite an initial sharp decrease in April 2016, following the trial implementation, sexual assault in the Eyre LSA has returned to levels seen earlier in the year; and after a decline in May 2016, the number of apprehensions under the Public Intoxication Act had been increasing – these received no Government commentary in the media.

In instances where journalists had actively questioned Government representatives about negative outcome reports, these were invariably glossed over and/or the positive outcomes were simply re-stated.

Following requests for the data that was used to inform the *First Progress Report* and which was not initially provided, Greens Senator, Rachel Siewert, stated that 'the public and the Senate deserve to see how this report was put together. The report is brazenly biased, written to favour the card and shine the trials in a positive light. The evidence in the report was premature and with a large amount of anecdotal 'evidence' and should not be taken seriously'.¹¹

The raw data that was then provided to the Senate, following a request that it be made available, was subsequently forwarded to a leading health economist, Professor Philip Clarke, at the University of Melbourne, who indicated that he could not see how the data from it could be used to determine if the trial should be continued or rolled out elsewhere. 'Surprisingly there is no use of statistical methods to test the significance of any observed trends, so it's hard to know what can be concluded

⁹ The Guardian. Melissa Davey. 14 Mar 2017. *Cashless Welfare Card Made Life Worse, say half of trial participants*, as accessed at <https://www.theguardian.com/australia-news/2017/mar/14/cashless-welfare-card-made-life-worse-say-half-of-trial-participants>

¹⁰ The Guardian. Melissa Davey. 13 January 2017. *Coalition 'cherry picking' data to support cashless welfare card*.

¹¹ The Guardian. Melissa Davey. 9 January 2017. *Ration days again: cashless welfare card ignites shame*.

even on a descriptive level. Given the issues with the design, it is hard to see how they will have evidence of the program's impact on which to base an informed policy decision'.¹²

INITIAL CONDITIONS REPORT

The Federal Government's Department of Human Services contracted ORIMA Research to design and conduct the subsequent evaluations of the CDC trial. Prior to its Interim and Final Reports, ORIMA Research prepared an *Initial Conditions Report*, which was originally scheduled to be submitted in July 2016 but was provided to the Department of Social Services in March 2017.

The *Initial Conditions Report* focused on identifying initial conditions prevailing in the trial sites before the implementation of the CDCT. According to ORIMA, this report is primarily based on the findings of qualitative research (interviews and focus groups) with key stakeholders in each of the trial sites. A total of 37 stakeholders (members of regional leadership groups as well as government and non-government service providers) participated in the qualitative research, which was conducted between 21 April and 26 May 2016.¹³ It is noted that this 'stakeholder' group included very few community participants or those who would be subjected to the Trial, and was primarily constituted by regional leadership groups; and government and non-government service providers.¹⁴

In addition to some general coverage of administrative quantitative data that was available at the time of writing, the *Initial Conditions Report* presents stakeholders' *observations* and *perceptions* about alcohol consumption, illicit drug, and gambling. At best, much of the information provided in the *Initial Conditions Report* is generic demographic data and the qualitative data is impressionistic and based on subjective anecdotal evidence from a selected sample group of stakeholders, very few of whom were Trial participants. The time lag between the interview data being collected and the publication of the Report almost ten months later may have resulted in a distorted record of the respondents' attitudes or potential changes in their views about the efficacy of the Card and their experiences of it.

¹² The Guardian. Melissa Davey. 9 January 2017. *Ration days again: cashless welfare card ignites shame*.

¹³ ORIMA Research. March 2017. *Initial Conditions Report*, Appendix A, page A1.

¹⁴ The following organisations participated in the ORIMA qualitative research interviews and focus groups in Ceduna (with only the first four listed being organisations involving community members who would have been eligible to be on the CDC, and the remainder being either government agencies or service providers): Ceduna Aboriginal Corporation, Scotdesco, Koonibba Aboriginal Community Council Inc., Yalata Community Inc., Aboriginal Family Support Services, Ceduna District Health Service, Save the Children, SA Police, Ngura Yadurirn Children and Family Centre, Department of Prime Minister and Cabinet, Centacare Catholic Family Services, Yalata Outback Store.

According to the ORIMA *Initial Conditions Report*, the number of organisations that participated in the evaluation does not equal the number of participants interviewed because in some cases multiple people from the same organisation were interviewed and n=6 organisations from Ceduna did not consent to being identified (p.173).

WAVE 1 INTERIM EVALUATION REPORT

The next ORIMA Research report, *Cashless Debit Card Trial Evaluation: Wave 1 Interim Evaluation Report*, was provided to the Department in February 2017.

Prior to the evaluation commencing, a Program Logic for the CDCT was developed. From this, a series of Key Performance Indicators (KPIs) and targets were established against which the Program's performance was to be evaluated. A number of broader evaluation questions were also identified as themes to provide further context and an understanding of the impact of the CDCT.

Overview of Findings against KPIs

The key findings in relation to the KPIs are set out in the Discourse Analysis Matrix (Appendix One) and are highlighted below:

Community and leaders' support

ORIMA Wave 1 Report: Output KPIs – performance rated fully effective/ KPI target achieved: *All community leaders (members of regional leadership groups) who participated in the Wave 1 qualitative research were supportive of the CDCT (p. 3).*

Government representatives have insisted that the design of the Cashless Debit Card included the involvement of community leaders in the existing Trial sites through a process of consultation and co-design. However, a number of community members and leaders dispute the extent of the consultation and/or the inclusion of community views, more particularly those views which raised questions or concerns about the approach being taken.

Dissenting views were not considered in the design of the Card, during its implementation or in the subsequent evaluation reports. Uniting Communities has received reports from community leaders and those on the Card. In the words of community members from Ceduna the Far West Coast about the level of consultation and community support:

- *It's really just like the NT Intervention. Government just rolled it out with no real consultation.*
- *The process of initial consultations was very badly run. Lots of frustration because people's questions weren't answered. They were promised answers at the next meeting but that didn't happen.*
- *There were no language interpreters used by government at meetings and not everyone understood what government was talking about. Some people understood the basic issues but not the details. This caused confusion for community.*
- *If people asked too many questions in the initial meetings, then they weren't invited back or told about the next meetings. They were left out.*
- *It was so terrible in the meeting early on. Tudge's team looked uncomfortable and stayed at the back and laughed and giggled when community people were asking questions. They shamed us.*

- *It wasn't a free and open consultation. It was a deal. Some communities knew that if they didn't agree to having the Card then they wouldn't get funding from government – maybe it was MUNS money or maybe IAS funding, I'm not sure – but the funding was held back by government until we agreed to do the trial.*
- *There was a meeting with the Mayor of Ceduna and some community people but the Minister said he would come back and visit Yalata community to talk more but he didn't. He told lies to us.*
- *In Ceduna, the Government went to the language centre and the art centre to talk to the people who happened to be there; it wasn't a proper consultation. Community concerns weren't addressed in the meeting and people were told, 'We'll get back to you with answers to your questions' but they didn't.*
- *They didn't tell us it would be blanket approach. They said it was for people on grog and drugs. But then they turned around and it was for all of us. We don't like that. They haven't been true with us.*

Memorandum of Understanding

On 4 August 2015, a Memorandum of Understanding (MOU) was entered into by the District Council of Ceduna, the Commonwealth Government and key representatives from Aboriginal communities across the Far West Region of South Australia. The objective of the MOU was to obtain agreement 'to trial an approach to reduce levels of community harm related to drug and alcohol abuse and gambling through the implementation of a Cashless Debit Card Trial for a period of twelve months'. After entering into the MOU in good faith, albeit based on the provision of limited and, in retrospect, misleading information, a number of community leaders and people on the Card then registered their opposition to the MOU and the Trial when they found that the nature and scope of the Trial were different to what they had been led to believe.

Community leaders withdraw support

In February/March 2016, the Community Chairs of Yalata and Maralinga Oak Valley communities signed withdrawals of their support for the MOU and the Trial. Both these community leaders told Minister Tudge in a public meeting that they no longer wanted the Card but wanted targeted support services to be made available in their communities. Given the public and formal rejection of the Card by at least two significant community leaders, it begs the question as to how and why DSS and the proponents of the Card continue to assert that the Card has the support of all leaders.

Government shows disregard for Memorandum of Understanding

The MOU was to 'expire on six months after the date that the proposed trial ends'. Even though the 12-month Trial timeframe was scheduled to expire on 15 March 2017, with the MOU therefore due to expire in mid-September 2017, the MOU was not revisited when the Department of Human Services announced that it was extending the Trial. On 14 March 2017 (one day before the 12-month Trial was due to expire but still during the timeframe of the MOU), the Government announced the

extension of the use of the Cashless Debit Card in Ceduna. The communities who were parties to the MOU were not consulted about the extension. The Government thereby demonstrated no respect for the MOU or the community leaders who were parties to it; this does not reflect genuine consultation or the support of community leaders, as claimed by Government.

In the words of community members who are on the Card:

- *Government came and said we would try it out for just one year. We agreed to try it out but there was no follow-up consultation about making it longer – they just went ahead and made it go for longer. We don't even know if it's permanent or when it'll end.*
- *Government came and said one year to try it out. We agreed to try it but when the trying time was up, there was no follow-up consultation about making it go for longer.*
- *They said it was 12 months trial and then suddenly we find out it's going on for longer, maybe even permanent, with no consultation with community.*
- *What government is saying is very different to what happened and is happening on the ground.*
- *I'm not a fan of the card. After the 12 months of trial were up, I waited for more community consultation to talk about it and what would happen next ... but nothing ... that didn't happen. They've just gone ahead ... just decided.*

Community petition and dissatisfaction

In addition, in April/May 2016, over a two-day period, a petition document was signed by 220 Card recipients in the Ceduna area which called for the MOU to be dissolved. These signatories constitute approximately 27 per cent of people on the Card in the West Coast trial site. This 27 per cent actively expressed their objection to the Card, however, it is probable that there were also others who had not been canvassed during the two-day snap call for signatures. This is a clear expression from communities that many do not support the Trial. This action and the evidence it provides, flies in the face of government's insistence that there is overwhelming support for the Card on the part of communities and their leaders.

Community panels and review of quarantined amount

ORIMA Wave 1 Report Output KPIs – performance rated partially effective/ KPI target not achieved:

Most community leaders in both Trial sites considered that community panels had not been established in a timely manner (in Ceduna the panel was established shortly after trial commencement but not at commencement; and in EK the panel had not been established by the time of the Wave 1 fieldwork). These panels were developed at the local community level (p. 3).

Communities were told that it would be easy to change the quarantined amount, and that they could opt out of the Card. They were directed to Community Panels. However, comments from Far West Coast community members highlight the challenges with this:

- *No-one really knows who the panel members are and people don't know how the panel works.*
- *There are some people on the panel that we don't trust and so we don't want to sit in front of them and tell them about our money problems or personal stories and have to ask them for a favour. We just stay away. The panel doesn't work for what we need.*

- *For most people it's not possible because it's a shame job to have to go and ask for more money, for cash, and so people just avoid going to ask. Anyway, it's not clear who we have to ask or what the process is.*
- *We're locked into the Card and we can't get out. No escape.*
- *Unless you know what to do and who to ask ... unless you can have your card reviewed by the anonymous panel, you're stuck with the card and the amount.*
- *No one knows how long they'll be on the Card. People still think they can just get off the Card. It's confusing for people.*
- *Yalata mob thought they could get off the card. Some moved to Adelaide to sign up for new welfare and then they can't, they're stuck on the card, and so they're drinking badly and being sent home in a box.*
- *When you live far out, like in Oak Valley or Yalata, it's hard to fix any problems with the Card. You have to wait 'til you can get to town, but then when you get there it's also too hard.*

Effects of the CDCT on Program participants and social return on investment

ORIMA Wave 1 Report: What have been the effects of the CDCT on program participants, their families and the broader community?

*Overall, perceptions of the impact of the Trial varied between those involved in it and those in the general community. **More participants said the CDCT had made their lives worse than made it better (49% compared to 22%).** Family members of trial participants gave a similar pattern of answers (37% and 27%). However, non-participants had the reverse perception, with 46% saying the Trial had made life in their community better, and only 18% that it had made life worse (p.5).*

Despite 49 per cent of respondents indicating that they were worse off on the Card – as stated by ORIMA in its Interim Report – the Government insisted that the findings of this Report provided a 'proof of concept' and that the Card was having the desired effect.

Social return on investment and expenditure on those outside the scope of the Trial

Referring to the ORIMA evaluation data for the Ceduna and East Kimberley trials, as found in Figure 1 below¹⁵, 34 per cent of CDC participants 'did not drink alcohol, gamble or take illegal drugs before or after the Trial' (2017, p. 22) i.e. one-third of the participants who were mandatorily included in the scope of the CDC Trial had no issues or addictions that the Card was ostensibly set up to address. This 34 per cent equates to 617 of the 1,850¹⁶ people in the Wave 1 Trial being outside the scope of the objectives of the Trial.

Given that, as at May 2017, the estimated cost of administering the Trial was \$18.9 million¹⁷ with an average cost per person of \$10,000, the imposition of the Card on 34% or 617 participants (in Wave 1) who fell outside the scope of the Trial's objectives and for whom the Trial has had no benefit, the Government has unnecessarily expended \$6.2 million. This expenditure equates to approximately

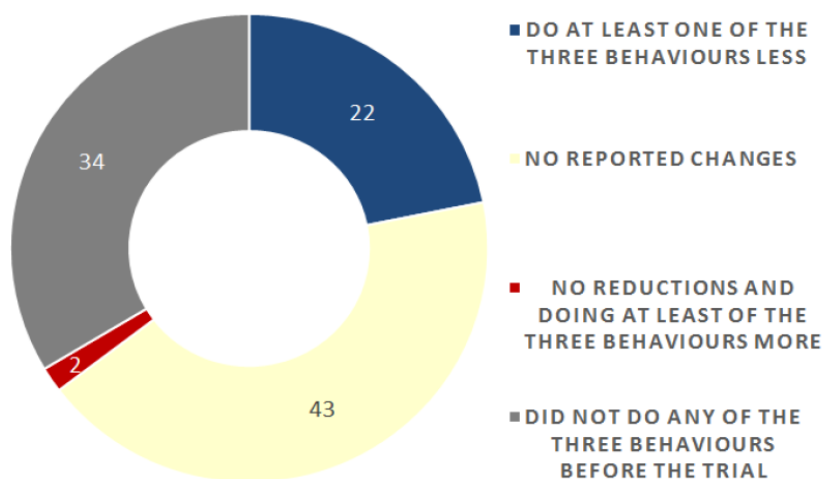
¹⁵ As found on page 20 of the 'Cashless Debit Card Trial Evaluation: Wave 1 Interim Evaluation Report' by ORIMA Research

¹⁶ Note that data sourced from Aboriginal and Torres Strait Islander Social Justice Commissioner, 'Social Justice and Native Title Report 2016' (Australian Human Rights Commission, 2016) p. 91-92, indicates that the number of participants in the Trial is 1,951. However, the ORIMA data is used here.

¹⁷ Details released under Freedom of Information and sourced from Conifer D (2017). *Centrelink cashless welfare card trial costing taxpayers \$10,000 per participant*. ABC News, 2 May, [www.abc.net.au/news/2017-05-02/cashless-welfare-trial-costing-taxpayers-\\$10kper-participant/8488268](http://www.abc.net.au/news/2017-05-02/cashless-welfare-trial-costing-taxpayers-$10kper-participant/8488268)

one third of the total cost of administering the Trial, and could have been better spent on providing support services to those who need them. Besides the administrative cost incurred and the Card being of no benefit to one-third of the participants, the mandatory imposition of the Card on this cohort has caused them a great deal of inconvenience and shame.

Figure 1: Self-reported changes in alcohol consumption, gambling or illegal drug use
 Base: Participants currently on the Trial – average across the two Trial sites.
 Excludes those who say 'Refused' or 'Can't Say' across all three measures (n=2).



Extent of benefit to those within the scope of the Trial's objectives

An analysis of the remaining cohort of participants who fell within the scope of the objectives of the Trial (i.e. those who had reported drinking alcohol, gambling or taking drugs) indicates that 43 per cent reported no changes in their behaviour and 2 per cent reported no reduction or doing at least one of the three habits more.

This leaves 22 per cent of the Wave 1 respondents¹⁸ who indicated that they 'do at least one of the three behaviours less'. This equates to just under one quarter of all participants indicating a change in their behaviour and thereby demonstrating a 'positive' Trial indicator. In numerical terms, 407 participants (or 22%) of the total 1,850 participants have reported a positive indicator in terms of the Trial's objectives. In terms of any positive demonstrable indicators, the cost of administering the Card for these 407 participants equates to just over \$4 million (407 participants x \$10,000 per participant to administer the Card). Effectively, the \$18.9 million that has been spent to administer the Trial has only received a positive indicator for 407 participants.

The limited benefits of the implementation of the Card and the small percentage (22%) of people who have reportedly demonstrated a positive outcome from participating in the Trial, points to a

¹⁸ In the Wave 2 evaluation, this had increased marginally to 25%.

negligible social return on investment and does not reflect sound financial management or accountability. Given the extremely limited social and economic benefits of trialling the Card, aside from the negative impacts on the self-esteem and wellbeing of participants, the Government's intention to roll-out the Card to additional trial sites appears reckless and points to the ideological imperative that is driving this punitive welfare 'experiment' at any cost.

FINAL EVALUATION REPORT

The final evaluation was conducted in May/June 2017, with the final evaluation report provided to Government in August 2017 and released publicly on 1 September 2017.

The Prime Minister and the Minister for Human services released a media statement¹⁹ on the day that the Final Report was made public, stating:

The Cashless Debit Card is a world-first in the way welfare payments are delivered. The final independent evaluation of the trials of the card showed that it had 'considerable positive impact' in the communities in which it operated, in particular in reducing alcohol, drug use and gambling...

This was echoed in 'The Australian' on the same day, with a quote from Minister Tudge stating that:

The report concluded that there had been few previous initiatives that had produced such a positive impact for health and community outcomes, with the improvements increasing over time. The card has led to a fundamental improvement in these communities. A large part of the success has been the close working relationship with local leaders, who have co-designed and implemented the trial with us. They have demonstrated true leadership.²⁰

ORIMA's acknowledgement of evaluation limitations

These claims and others made by both the Prime Minister and the Minister for Human Services are not stated as boldly in ORIMA's Final Report. By its own admission, the Report outlines significant limitations regarding its own data (pp. 25-28), and states that, in particular, the following limitations should be considered in interpreting the findings of the surveys and the qualitative research:

- *The first limitation of the administrative data was that it was collected for purposes other than the CDCT evaluation. This meant that there was imperfect alignment between the CDCT key performance indicators and the available administrative data. Therefore, the data available generally serve as imperfect proxy measures for problematic alcohol consumption, illegal drug use, gambling and anti-social and disruptive behaviours. For example, measures such as sobering up unit admissions and alcohol-related pick-ups by community patrol services are used as proxy measures for problematic alcohol consumption, whilst the only proxy measure for illegal drug use that was available was drug driving in Ceduna. The other implication of the*

¹⁹ Prime Minister of Australia. Media Release. *Prime Minister, Minister for Human Services, Member for O'Connor*. 1 September 2017.

²⁰ The Australian. Simon Benson. *Grog abuse drops under welfare card*. 1 September 2017.

abovementioned limitation was that data was not always available at the required locality, for example poke machine revenue data covers an area larger than the trial site of Ceduna, extending to Streaky Bay, Le Hunte, Elliston and Lower Eyre Peninsula (ORIMA Final Report, pp. 25-6).

- *The evaluation did not use a statistically representative random sampling of the population (p. 28), thereby leaving the findings open to considerable distortion. The evaluation does not include a longitudinal study of respondents from the interim Wave 1 evaluation through to the Wave 2 evaluation, hence no time series comparisons or behaviour changes can be tracked and trends cannot be discerned.*
- *Low numbers of cases (as a result of small population numbers in the Trial sites) led to considerable volatility over time in the measures and made it difficult to detect trends.*
- *Comparison site data were only available for a limited number of measures.*
- *Recording and collection issues with administrative data sets which reduced their reliability.*
- *As most of the research fieldwork was conducted 6-12 months after the commencement of the CDCT, recall error is likely to be present in the reports of conditions prior to the commencement of the CDCT.*
- *Response bias, self-reporting and observation bias: The ORIMA report acknowledges the limitations caused by response bias whereby respondents seek to agree or report in ways that they consider would be socially acceptable to those asking the questions. When reporting on their own behaviours, survey respondents may be prone to social desirability effects and hence respond in a socially acceptable way (p. 27).*

ORIMA acknowledges that it is not possible to accurately measure actual behaviours such as changes in alcohol consumption or drug use. For example, respondents were asked during face-to-face surveys whether they were alcoholic or had a drug problem. It would be very surprising to find respondents who were prepared to answer these questions honestly when asked by a government-contracted interviewee. This is compounded by the fact that respondents were enlisted with promises of \$30 or \$50 gift cards on completion of an interview. 'Paying respondents affects relationships' and can lead to contaminated results'.²¹ As respondents were asked for identification for what was an official Government supported survey, coercive effects and the perception by respondents that they need to give the answers sought by interviewers cannot be ruled out.

Much of the administrative data relied upon by Government to validate its trials is based on data collected for purposes outside the parameters of the CDC trial evaluation. Government spokespeople reflect the findings in the Final Report in a definitive and categorical manner, rather than the more nuanced and qualified manner in which they are reported by the evaluator.

²¹ See Eva Cox analysis: https://www.theguardian.com/commentisfree/2017/sep/07/much-of-the-data-used-to-justify-the-welfare-card-is-flawed?CMP=share_btn_link

Key findings

An examination of key findings in the Final Report and associated commentaries are detailed below.

The consumption of alcohol and drug use

While the Government has argued that the aims of the Cashless Debit Card are being achieved, many on the Card dispute these outcomes and point to a number of challenges with the notion that the Card can, in and of itself, result in the intended reduction. According to people on the Card in the Ceduna trial:

- *People with problems need help but there are no services for them in community to help those people who do have drugs and grog and gambling problems. There are no services in community to deal with people's problems.*
- *When the Card came in, all support services in our community stopped. As if the Card was supposed to fix things with no services. If people wanted help they had to go into Ceduna and even then there were no extra services.*
- *Government hasn't addressed the real problems. There are no culturally sensitive counselling services in town. There's no culturally sensitive rehab and there's nothing for us back in community.*
- *Problem with the Sobering-up Unit is that you're only allowed in if you're drunk or affected by drugs. When people are homeless and hungry they just find a way to get drunk so that they can go into Sobering Up to get a bed and a feed. This isn't helping. People are worse on this Card.*
- *Instead of this Card, we need more programs to develop the community and for the youth to have opportunities and for older people to be looked after properly. If there's a community where everyone's working and has a job then there'll be fewer people who'll want to drink. If there aren't proper opportunities, people will just feel hopeless and wander off to find drugs and alcohol. People want to look after the community and each other and the environment.*

Gambling

The ORIMA Final Report states that, 'In the 12 months following the introduction of the CDCT (April 2016 to March 2017), electronic gaming (poker) machine revenue in the Ceduna and surrounding Local Government Areas (Streaky Bay, Le Hunte, Elliston, and Lower Eyre Peninsula) was 12% lower than in the previous 12 months (April 2015 to March 2016)²². However, the ORIMA evaluation provides no baseline for analysing changes in patterns of gambling. According to the South Australia Centre for Economic Studies at the University of Adelaide, gambling behaviour has been on the decline, particularly in SA, with a steady downward trend in gambling revenue since 2006/7 with the highest decrease this year (2016/17) in South Australia.²² It is not accurate to claim that the CDC trial has been the cause of such behaviour change in Ceduna or that it could even be viewed as a contributing factor. The Government is attributing any positive behavioural changes to the Card itself and ignores other socio-economic variables or changes in policy settings that could impact on people's gambling behaviours.

²² See research by SA Centre for Economic Studies at University of Adelaide <http://www.adelaide.edu.au/news/news94882.html>

Crime statistics, violence and perceptions of safety

The ORIMA final evaluation report states that:

*At the time of the Wave 1 data collection, there was only limited evidence to suggest that there was a reduction in crime, violence and harm related to alcohol consumption, illegal drug use and gambling since the Trial commenced. Overall, in Wave 2 there was some additional evidence of positive impacts in these domains. However, it is important to note that, with the exception of drug driving offences and apprehensions under the Public Intoxication Act in Ceduna, **crime statistics showed no improvement since the commencement of the Trial.**²³*

Both the Minister for Human Services and the Prime Minister have insisted that levels of crime have reduced as a result of the Cashless Debit Card. The lack of consideration of the evaluation data and the selective use of the available evidence is misleading.

Domestic/family violence: The lack of data or analysis on purported changes in levels of domestic/family violence is evident in the Final Report. Domestic violence was noted as an issue of concern in the First Evaluation Report (p.150) and as warranting further investigation. Addressing domestic violence was also expressly mentioned as part of the CDC 'Theory of Change' in the Final Evaluation Report (p. 129) and, on page 298 and 299, the report indicates that domestic violence incident reports were examined. However, there is no coherent reporting, analysis or commentary on family violence behaviours in the Final ORIMA report, neither is there an evidence base to suggest that such behaviours have decreased as a result of the CDC.

Community safety: The ORIMA Final Report states that, 'There was no statistically significant change between Wave 1 data collection (a few months post CDCT implementation) and Wave 2 (9 months later) in CDCT participant and non-participant perceptions of safety (as measured in the quantitative survey). In the qualitative research, community leaders, stakeholders and merchants' feedback indicated that, overall, they perceived that community safety had increased in their local community during the CDCT period and between Wave 1 and Wave 2.' Beside the anecdotal commentary provided in the 'qualitative research', there appears to be little foundation for the claim that people feel safer as a result of the Trial.

Wellbeing: Subjective wellbeing was also assessed in the quantitative survey by asking participants about the impact of the Trial on their lives. According to the ORIMA Final Report, 'On average across the two sites, at Wave 2 participants were more likely to indicate that it had made their lives worse than better'.

Commentary provided to Uniting Communities by community members highlights the profound effects that the Card is having on their sense of agency and self-esteem. They also talk about

²³ Australian Government Department of Social Services, Cashless Debit Card Trial Evaluation, Final Evaluation Report, August 2017, page 4.

increasing levels of hopelessness in their communities and the tensions the Card is causing in families and in relationships. Here are some examples:

- *Things in community are worse because this Card has made us a bit divided. A few says it's okay but others say no. This is causing tensions between people and even between families.*
- *It's created a wedge and a division in the community. It's also made things worse between Blacks and Whites and it's added more fuel to the tensions.*
- *The Card has made things harder. A lot of people in Ceduna have been through trauma, grief and loss – they've already been through a lot. Being on the Card just makes their lives that much harder.*
- *Crime rates have gone up and it's just shifted the problem. They're putting on a band-aid and not really addressing the issues in community. There's now more fighting and humbugging of the tourists.*
- *The Card's no good and it doesn't help. It's degrading us down and people have no hope. They feel hopeless. They're not happy. They're stressed because of the Card.*
- *Being on the Card makes me so angry because it's downgrading Aboriginal people and making us second-hand, making us second-class.*
- *Things in community are even more hopeless now than they were before the Card. Young people are moving away to town to drink because they feel so hopeless in community. Drinking doesn't fix anything but it shows how desperate people are.*
- *Some people have moved to Adelaide. They thought they could get away from the Card by moving, but they can't. So once they've moved away, they're just drinking more in town and surviving by selling their art.*
- *It's causing tensions in relationships. There's a young girl on the card and because she didn't give cash to her partner, he beat her up. The DV stats are up since the card.*

Negative impact on children

The Final ORIMA Evaluation report states that in Ceduna, 47 per cent of respondents report that they cannot better look after their children on the CDC, while 36 per cent report they can better look after their children (p. 79). The Report details (p. 72) that in the past 2 months:

- 52% of respondents have run out of money to buy food;
- 45% have run out of money to pay for things children needed for school like books
- 44% had run out of money to pay for essential non-food items for children such as nappies, clothes and medicine
- 55% had borrowed money from family or friends.

While this data does not necessarily point to failings of the Card alone, and could be attributable to other factors including the inadequacy in the amount of the income support payments, it does highlight that children are not any better off if their parents are on the Card and that the majority of people are not feeling better off on the Card and are not finding it any easier to make ends meet.

While problems with methodology, data and findings are acknowledged in the Final ORIMA report, Government reportage and publicity about the evaluation findings is highly selective and, in many instances, taken out of context. This distortion, as a result of cherry-picking, has resulted in Government providing a misleading, simplistic and an overly positive view of the CDCT. It is evident

that proponents of the Card have selected data and those evaluation findings that serve to justify and validate their ideological position and the implementation and expansion of the Card.

6. Ideological expressions evident in the Trial and evaluation findings

The analysis of the CDCT, the associated evaluation process and the selective use of its findings reflects a particular world view that is premised on a set of understandings about the cause and place of poverty and unemployment in our society. It is argued that these understandings reflect a continuity from the time of the colonisation of Australia through to the current expressions of neoliberalism and its approach to those needing income support.

Understandings of poverty

The neoliberal extension of the colonial narrative views poverty as the result of a moral, behavioural and individualised deficiency, which therefore justifies the state's abdication of its responsibility for providing accessible social security; it advocates that 'the undeserving poor' must earn their income benefits and be grateful for them.

Connolly²⁴ describes 'neoliberalism' and draws on the views of Brown and Hall:

'Neoliberalism' is a term meant to mark the arrival of financialization in the 1970s and 1980s, and the start of an epoch when governments that once protected citizens took to defending corporations, at times even mimicking their structure. The political theorist Wendy Brown described neoliberalism as the 'economization' of political life and of other ... non-economic spheres and activities. The cultural theorist Stuart Hall marks neoliberalism by the elevation of the taxpayer and the consumer over the citizen. The old relationships of citizen/state or worker/capitalist, Hall explains, give way to 'the market' as the new, more individualized arbiter.

Blame transference and abdication

The individualisation of poverty and the treatment of citizens as consumers with 'mutual obligations', denies the structural nature of unemployment and inequality. This view negates the reality that the reasons for unemployment, particularly areas such as Ceduna and the Far West Coast communities of South Australia, are not behavioural deficiencies or because people are addicted to alcohol, drugs and gambling, but because of the negligible labour market in this region – there simply are very few job opportunities.

The 2011 census labour force statistics for South Australia's Eyre Peninsula and the South West (which includes Ceduna and the Far West Coast Aboriginal communities), indicate an unemployment

²⁴ Connolly, N.D.B. 22 January 2018. Dissent. *Debating the Uses and Abuses of "Neoliberalism": Forum -A White Story*. Published by the Foundation for the Study of Independent Social Ideas in cooperation with the University of Pennsylvania Press, as accessed on 26 January 2018 at <https://www.dissentmagazine.org/blog/neoliberalism-forum-ndb-connolly>

rate of 4.9 per cent.²⁵ In 2011, 46.2 per cent of Aboriginal Australians aged 15-64 in the Ceduna and Far West South Australia Region were employed. These rates are slightly lower than the comparable proportion for Aboriginal people across Australia (48.4 per cent).²⁶ An index of relative Aboriginal disadvantage across Australia shows that all areas in this region were in the most disadvantaged 30 per cent of Indigenous Areas in Australia in 2011. The greatest level of disadvantage is faced by Aboriginal people living in very remote areas.²⁷

The denial of the realities of structural unemployment and the lack of a labour market enables blame transference, away from the responsibility of the State and to the individual who is experiencing socio-economic hardship. This 'blame-game', enabled through the substitution in social security policy from 'structural to individualistic explanations of social disadvantage'²⁸, accompanied by the denial of the autonomy and sense of agency of income recipients, enables the State to view those needing income benefits as being incapable of managing money and in need of patronage and paternalism, primarily through limiting their access to cash payments. Reminiscent of colonial attitudes, income benefit recipients are treated as though their entitlement to manage their money is a privilege and not a right; they cannot be entrusted with the responsibility of managing money²⁹.

Infantilisation

In the process, the recipients – invariably viewed as passive and without a sense of agency – are infantilized in ways described by Frantz Fanon in his work on decolonisation and the colonial interaction³⁰. A key theme in Fanon's work is that of infantilisation, as described here by Hondius:³¹

The members of a subject group are thought of and treated as children. This can take many forms ... Well-meaning members of dominant groups assume that any subject group member needs help, is 'disadvantaged'. There is a tendency to assume that members of subject groups are 'victims'.

Comments made by Ceduna residents who are on the Card, highlight the extent to which people on income support payments feel that they are being treated like children:

²⁵ Australian Bureau of Statistics

http://stat.abs.gov.au/itt/r.jsp?RegionSummary®ion=406011134&dataset=ABS_REGIONAL_ASGS&geoconcept=REGION&datasetASGS=ABS_REGIONAL_ASGS&datasetLGA=ABS_NRP9_LGA®ionLGA=REGION®ionASGS=REGION as accessed on 27 January 2018.

²⁶ Department of Prime Minister and Cabinet. Prepared by Information and Evaluation Branch. Ceduna and the Far West South Australia Region Indigenous Regional Profile as accessed on 27 January 2018 at <file:///C:/Users/susan/Desktop/CDC/Ceduna-Far-West-SA-Regional-Profile.pdf> p. 5.

²⁷ Department of Prime Minister and Cabinet. Prepared by Information and Evaluation Branch. Ceduna and the Far West South Australia Region Indigenous Regional Profile as accessed on 27 January 2018 at <file:///C:/Users/susan/Desktop/CDC/Ceduna-Far-West-SA-Regional-Profile.pdf> p. 6.

²⁸ Mendes, P. 2013. Compulsory Income Management: A Critical Examination of the Emergence of Conditional Welfare in Australia. Australian Social Work Vol. 66, Issue 4, 2013.

²⁹ Bielefeld, S. Compulsory Income Management and Indigenous Peoples – Exploring Counter Narratives amidst Colonial Constructions of 'Vulnerability'. Sydney Law Review Vol 36:695, pages 695 – 726.

³⁰ Examples of Fanon's work on this topic include *Black Skin, White Masks* and *The Wretched of the Earth*.

³¹ Hondius, D. 2014. *Blackness in Western Europe: Racial Patterns of Paternalism and Exclusion*. Routledge.

We're starting to feel like we're back in the ration days when white people managed our lives and everything else and treated us like children. It's the same now. We're treated like children and so we can't make decisions for ourselves. We're moving backwards, not forwards. We want to make our own choices and not be treated like children (Ceduna resident, August 2017).

While colonialism is based on economic factors, it is also predicated upon the ideological and philosophical legitimisation of dehumanisation, which primarily plays itself out in forms of infantilization, feminisation and animalisation.³² While the ideology behind the Cashless Debit Card relegates welfare recipients to the infantilised status of children, Australia's recent history is also guilty of animalisation, as evidenced by First Australians not being considered citizens of Australia until the Referendum in 1967, and in some states and territories being 'classified' and regulated under 'Flora and Fauna Law'.

Homogenous treatment

By infantilising those on income support payments and characterising them as passive recipients who require paternalistic guidance and who cannot be entrusted to take responsibility for the managements of their finances, the CDCT has been imposed in a mandatory and uniform way across all those on income support. In enforcing this blanket approach and in treating welfare recipients as a one-size-fits-all homogenous group, it becomes nigh impossible for the State to hear any voices of difference or resistance.

Consequently, the State has presented the community response to the Cashless Debit Card as a homogenous and uniform one, and has glossed over and dismissed any vocalised opposition to the Card. As a result of its blinkered and preconceived attitude to 'welfare recipients', the State is unable (or refuses) to register the articulated responses of community members or leaders which contradict its own prescriptive narrative.

The media commentary repeatedly states the Government's view that communities and their leaders are supportive of the CDCT; that there has been a close working relationship with local leaders; and that 'The design and consultation process for the trials was done hand in glove with the community leaders'.³³ No differences in opinion, or voices that have broken away from the 'homogenous mould' have been registered or taken seriously.

Erosion of human rights

In the process of individualising poverty, infantilising those needing income support, and treating everyone as part of an artificially constructed homogenous grouping, people's human rights have been eroded. Alongside these obvious denials of people's rights, the lack of community consultation

³² Martin, B. 2008. *Ethical Marxism - The Categorical Imperative of Liberation*. Carus Publishing Co.

³³ The Guardian. Melissa Davey. 9 September 2017. *Ration days again: cashless welfare card ignites shame*.

about the design and implementation of the Card is a breach of the right of Aboriginal peoples to self-determination and flies in the face of this right as guaranteed in Article One of the *International Covenants on Human Rights*, and the *United Nations Declaration of the Rights of Indigenous Peoples*, which require meaningful consultation with and the informed consent of Aboriginal peoples during the development and implementation of policies and laws that affect them. The violation of human rights through the racialized exclusion of Aboriginal peoples and the enforcement of income management, illustrates the extent to which colonial reasoning and practices are embedded in the State's current neoliberal agenda.

Structural violence

Neoliberalism and its fore-runner, colonialism, have defined the ground rules and the criteria against which welfare beneficiaries are to be measured and to which they are required to conform. This unidirectional and ultimatumist approach on the part of the State, in the absence of genuine consultation and a thorough-going dialogue, can be described as structural violence and, according to Barbara Major, as 'an abusive relationship'³⁴.

Following Galtung,³⁵ structural violence is 'violence that is inherent in the social order, which is created and maintained by social differential access to resources and life chances (social class), poverty and discrimination/racism'. Eckerman et al³⁶ remind us that 'Scientific racism was used to justify dispossession and led to institutional racism. These interacted with prejudice and discrimination to locate Aboriginal people at the bottom of the social ladder, crippled by dependency and poverty. Such poverty and dependency were and are reinforced by systemic bias. Today the se forces have led to a situation of structural violence (p. 74).

Rather than addressing structural inequality and poverty, the State has taken the mean and punitive route of using tools of structural violence; these have resulted in psycho-social and economic harm and potentially long-term damage to individuals and to future prospects of reconciliation.

The continuity of the colonial project

The 'modernised' and neoliberal welfare conditionalism through mechanisms such as the Cashless Debit Card, with its increased level of surveillance and supervision, along with its blanket application,

³⁴ Major, B. in Potapchuk, M; Leiderman, S. Bivens, D. & Major, B. *Flipping the Script: White Privilege and Community Building* as accessed at: <http://www.racialequitytools.org/resourcefiles/potapchuk1.pdf> on 26 January 2018.

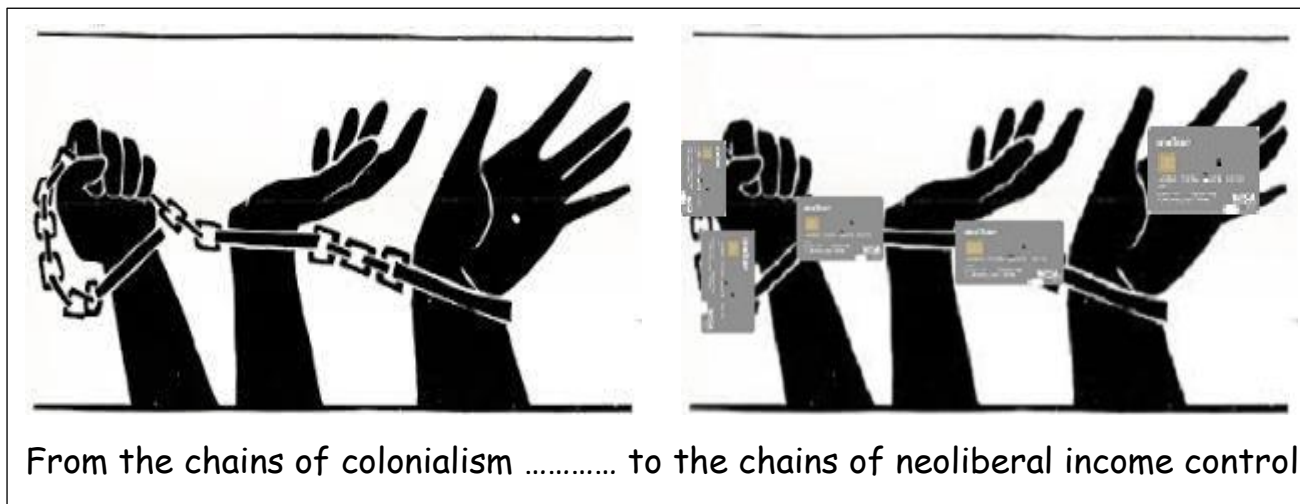
³⁵ Galtung as cited in Anne-Katrin Eckermann, Toni Dowd, Ena Chong, 2010, *Binan Gooj: Bridging Cultures in Aboriginal Health*. Elsevier Health Sciences.

³⁶ Eckermann, Dowd & Chong, 2010, *Binan Gooj: Bridging Cultures in Aboriginal Health*. Elsevier Health Sciences.

reinforces and echoes the old patterns and mechanisms of colonial control. Hondius argues that coloniality continues but that it is now dressed up in the clothes of neoliberalism.³⁷

The continuity of the colonial project is best described by Ms Susan Haseldine, a Ceduna resident and elder, in her response to the introduction of the trial of the Cashless Card:³⁸

What our mob just said was, "Why didn't you just put the chains on us again?" That's how they felt.



7. Conclusion

Despite the persistently negative feedback from communities, and the acknowledgement by ORIMA Research regarding the limitations of its own evaluation data, the Government continues to forge ahead with its plans to extend and expand the application of the Cashless Debit Card, while at the same time asserting that this will only be done in conjunction with communities.

The comments from community leaders and residents in the Trial locations highlight a generalised dissatisfaction and/or opposition to the Card. These comments controvert the Government's publicised view that communities and leaders support the Card, and put into question the Government's use of this view to justify an extension and expansion of the Trial.

Despite the widespread dissatisfaction with the Card by many who have been subjected to the experiment to date it is alarming that, in the context of the Government's repeated refrain of the need

³⁷ Leonardo Z., Singh M. (2017) Fanon, Education and the Fact of Coloniality. In: Parker S., Gulson K., Gale T. (eds) Policy and Inequality in Education. Education Policy & Social Inequality, Vol 1. Springer, Singapore

³⁸ Gage, Nicola. ABC News article. Ceduna's cashless welfare card a 'massive inconvenience' but council sees improvements. 12 September 2016.

for fiscal constraint and ‘belt-tightening’ it sees fit to implement a punitive program that is costing a great deal of money to administer, with a negligible social return on investment.

In the face of the seemingly intractable social challenge of structural poverty and unemployment, resulting in many citizens being reliant on income support, government policy-makers appear to lack the ability to introduce and implement comprehensive and systemic responses, and instead repeat more of the same. Instead of an integrated and comprehensive response to broad and complex social challenges, we see bureaucratic, narrow and punitive responses that serve to blame those who are experiencing socio-economic challenges and then control them by means of archaic behaviour modification strategies. In the words of Weiss (p. 104)³⁹:

There is apparently something wrong with many of our social policies and much social programming. We do not know how to solve some of the major problems facing the society. We mount limited-focus programs to cope with broad-gauge problems. We devote limited resources to long-standing and stubborn problems. Above all, we concentrate attention on changing the attitudes and behaviour of target groups without concomitant attention to the institutional structures and social arrangements that tend to keep them ‘target groups’.

Following the work of Bray et al,⁴⁰ the structural causes of inequality and poverty are not being addressed. Most people ‘are likely to remain on income management for a long period of time ... the program will effectively operate as a long-term management tool, not as an intervention that will build their capacity and change their behaviour’. The longevity of the income management project and its incarnation in the form of the Cashless Debit Card serves to continue the State’s level of intervention in the private lives of people and its attempt to control those on income support.

One is therefore left to conclude that the Government’s determination to justify, extend and expand the Card to further locations is driven, not by a sound evidence base or informed by genuine consultation, but by an ideological imperative and a particular view of citizens who require income support.

³⁹ Weiss, C. H. 1993. *Where politics and evaluation research meet*, Evaluation Practice, Vol. 14, No 1, 1993, pp.93 – 106

⁴⁰ Bray, J. R et al. 2012. Evaluating New Income Management in the Northern Territory: First Evaluation Report. Social Policy Research Centre, University of New South Wales p. 264.

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9. Appendices

Appendix One:

Discourse Analysis Matrix