Public Health Association of Australia submission on Social Services Legislation Amendment (Cashless Debit Card Trial Expansion) Bill 2018

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Preamble

The Public Health Association of Australia

The Public Health Association of Australia (PHAA) is recognised as the principal non-government organisation for public health in Australia working to promote the health and well-being of all Australians. It is the pre-eminent voice for the public’s health in Australia.

The PHAA works to ensure that the public’s health is improved through sustained and determined efforts of the Board, the National Office, the State and Territory Branches, the Special Interest Groups and members.

The efforts of the PHAA are enhanced by our vision for a healthy Australia and by engaging with like-minded stakeholders in order to build coalitions of interest that influence public opinion, the media, political parties and governments.

Health is a human right, a vital resource for everyday life, and key factor in sustainability. Health equity and inequity do not exist in isolation from the conditions that underpin people’s health. The health status of all people is impacted by the social, cultural, political, environmental and economic determinants of health. Specific focus on these determinants is necessary to reduce the unfair and unjust effects of conditions of living that cause poor health and disease. These determinants underpin the strategic direction of the Association.

All members of the Association are committed to better health outcomes based on these principles.

Vision for a healthy population

A healthy region, a healthy nation, healthy people: living in an equitable society underpinned by a well-functioning ecosystem and a healthy environment, improving and promoting health for all.

The reduction of social and health inequities should be an over-arching goal of national policy and recognised as a key measure of our progress as a society. All public health activities and related government policy should be directed towards reducing social and health inequity nationally and, where possible, internationally.

Mission for the Public Health Association of Australia

As the leading national peak body for public health representation and advocacy, to drive better health outcomes through increased knowledge, better access and equity, evidence informed policy and effective population-based practice in public health.
The Bill

This Bill expands the cashless debit card arrangements to a further trial site - the Bundaberg and Hervey Bay area - to run until 30 June 2020, specifies the class of trial participants for the area, and increases the total number of trial participants overall to 15,000.

The Bill also introduces an exception from Part IV of the Competition and Consumer Act 2010 for merchants that introduces product level blocking, where systems would automatically identify that a cashless debit card is being used for payment and, if any restricted products are being purchased, decline the transaction.

The Bill also introduces a limitation upon the use of the restricted portion of a payment to a participant, to prevent the portion being used to obtain cash-like products which could be used to obtain alcohol or gambling.

PHAA Response to the Bill

PHAA welcomes the opportunity to provide input to the Inquiry into the Social Services Legislation Amendment (Cashless Debit Card Trial Expansion) Bill 2018.

In September 2017, the PHAA made a submission to the previous Inquiry of this Committee, into the 2017 Bill, and remains concerned about the program and legislation.

Similar to the 2017 Bill, this 2018 Bill relies upon the evaluation report from Orima Research, into the cashless debit card trial. The Orima report found many negative outcomes, and has been shown to be flawed - it should not be used as the basis for a further extension of the program.

The Orima report also predates additional evidence recently published (July 2018) by the Australian National Audit Office that “key activities were not undertaken or fully effective, and the level of unrestricted cash available in the community was not effectively monitored” and that “[t]here was a lack of robustness in data collection and the department’s evaluation did not make use of all available administrative data to measure the impact of the trial including any change in social harm”.

Community concerns about the Cashless Debit Card system are so widespread, a Cashless Debit Card Symposium was held at the University of Melbourne and Alfred Deakin Institute on Thursday 1st February 2018. The system has been the subject of ongoing partisan political controversy, and has been opposed by community organisations representing a range of issues and members from health and social services to Aboriginal and Torres Strait Islander people.

Rather than recognising and addressing the concerns raised, this Bill increases the number of people subject to the scheme by 50% and increases the controls implemented by the system.

Addressing the social problems in Aboriginal and Torres Strait Islander communities is complex and requires evidence-based and strengths based approaches developed in collaboration with local communities. The cashless debit card system satisfies none of these criteria.
Conclusion

PHAA remains opposed to the cashless debit card system, and refer the Committee to our submission to the 2017 Bill [https://www.phaa.net.au/documents/item/2434](https://www.phaa.net.au/documents/item/2434).

The PHAA appreciates the opportunity to make this submission. Please do not hesitate to contact me should you require additional information or have any queries in relation to this submission.

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20 July 2018

References


