



22 October 2020

Committee Secretary  
Senate Standing Committees on Community Affairs

By email to: [community.affairs.sen@aph.gov.au](mailto:community.affairs.sen@aph.gov.au)

Dear Committee Secretary

**Re: Social Security (Administration) Amendment (Continuation of Cashless Welfare) Bill 2020**

The Royal Australian and New Zealand College of Psychiatrists (RANZCP) welcomes the opportunity to provide input into the Senate Community Affairs Legislation Committee's inquiry into the Social Security (Administration) Amendment (Continuation of Cashless Welfare) Bill 2020.

The RANZCP is the principal organisation representing the medical specialty of psychiatry in Australia and New Zealand and is responsible for training, educating and representing psychiatrists on policy issues. The RANZCP has more than 6900 members, including over 5100 qualified psychiatrists and more than 1800 trainee members. We are guided on policy matters by a range of expert committees, including the Faculty of Addiction Psychiatry and the Aboriginal and Torres Strait Islander Mental Health Committee.

The RANZCP is writing to express its concerns regarding the Social Security (Administration) Amendment (Continuation of Cashless Welfare) Bill 2020 which will remove the trial parameters to establish the Cashless Debit Card (CDC) as an ongoing program and transition Income Management in the Northern Territory and the Cape York region to the CDC. Given that the stated purpose of the CDC program is to stop individuals accessing alcohol and other drugs, and gambling products, we are concerned at the continued pursuit of this policy against the advice of addiction specialists.

Psychiatrists are experienced in providing care and working with people who have complex needs relating to addiction, mental health and employment difficulties. Substance use disorder and problem gambling are classified mental health conditions and are a core concern for psychiatrists considering the complex interrelationship between addictive behaviours, mental health conditions and physical health comorbidities. The RANZCP has consistently advocated against the trials and proposed programs on three principal grounds:

1. They are not properly designed to support people with concurrent addiction and employment issues. More than 50 years of psychological research shows that positive reinforcement strategies are more effective than punitive strategies in bringing about behavioural change.



2. They risk doing further damage by contributing to entrenched feelings of disempowerment, hopelessness and injustice, while encouraging financial elder abuse.[1] Furthermore, their disproportionate application to Aboriginal and Torres Strait Islander communities is highly discriminative as well as exacerbating community grievances and presenting risks for re-traumatisation on a communal scale.[2]
3. They have not been developed through comprehensive consultation and collaboration with affected communities. In particular, although the importance of self-determination for Aboriginal and Torres Strait Islander peoples is well-recognised both in medical and social sciences, and international human rights law, the trials were not designed and delivered in collaboration with Aboriginal and Torres Strait Islander communities.[2]

Rather than establishing the trials as an ongoing program, the RANZCP strongly urges the Government to scale up its investment in evidence-based and culturally safe public rehabilitation and addiction services to ensure that people with addiction issues are able to access the help they need, when they need it. For more information on our concerns, please refer to the [RANZCP submission on the Social Security \(Administration\) Amendment \(Income Management and Cashless Welfare\) Bill 2019](#).

To discuss any of the issues raised in this letter, please contact Rosie Forster, Executive Manager, Practice, Policy and Partnerships

Yours sincerely

Associate Professor John Allan  
**President**

Ref: 1957

**References**

1. Mavromaras K, Moskos M, Isherwood L, Mahuteau S. Cashless debit card baseline data collection in the Goldfields region: qualitative findings. Adelaide (SA): The University of Adelaide. 2019 Feb.
2. Klein E, Razi S. The cashless debit card trial in the East Kimberley. Canberra, ACT: Centre for Aboriginal Economic Policy Research (CAEPR), The Australian National University; 2018 Sep 24.