

ARTICLE

# An intersectional feminist analysis of compulsory income management in Australia

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## Abstract

Globally, women experience poverty at disproportionate rates to men, with the situation being worse for Indigenous women and women of colour. Social security systems are one avenue for income redistribution that can alleviate poverty. However, such systems are themselves embedded within and produced by unequal social relations, meaning they can also serve to perpetuate and exacerbate social inequalities. This is exemplified under neoliberal welfare reforms, which have disproportionate negative impacts for women across the world (e.g. increased poverty and stigma, reduced health/wellbeing, and more). Again, this is particularly the case for Indigenous women and women of colour.

In this article, we offer an intersectional feminist analysis of an intensive form of neoliberal welfare conditionality, Australia's 'compulsory income management' program (CIM). CIM quarantines social security incomes onto cashless bank cards to restrict expenditure to 'approved' items. Drawing on interviews and surveys with 170 individuals who have personally experienced CIM, we show that it has myriad negative impacts that are especially borne by (Indigenous) women. These are not, we argue, *unintended* policy impacts, but are instead symptomatic of the gendered and racialised violence that is woven into patriarchal capitalism more broadly. Thus, the experience of CIM holds lessons for welfare states internationally.

**Keywords:** neoliberal welfare reform; women; Indigenous women; compulsory income management

## Introduction

Globally, women experience poverty at disproportionate rates to men, with the situation being worse for Indigenous women and women of colour (UN Women, 2022; Richard, 2014). Social security systems are one avenue for income redistribution that can serve to alleviate poverty. However, such systems are

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themselves embedded within and produced by unequal social relations, meaning they can also serve to perpetuate and exacerbate social inequalities. Australia's social security system was described by Castles (1985), for example, as a 'wage earner's welfare state'; one that best supports the wage earner, particularly the *white, male* wage earner (Bryson, 1992). Indeed, Australia's system was not only originally designed to primarily assist men into the workforce while supporting women to stay at home (Orloff, 2006), but also to deny any social protections at all to Aboriginal and Torres Strait Islander (from herein, 'Indigenous') peoples for much of the twentieth century (Marston & Staines 2021). Just as the impacts of these historical social policies have been felt unevenly at the different intersections of gender, class, and race, so too have the impacts of more recent 'neoliberal' welfare reforms.

In this article, we use the term 'neoliberalism' to refer to an ideology that involves the ideal of a small state, operationalised through the pursuit of free-market capitalism, the marketisation of formerly state-provided social protections, and hyper-individualism (Goldblatt, 2014, 2016; Wacquant, 2009). Under what Soss *et al.* (2011) call 'neoliberal paternalism', however, the state has not simply retreated but has strengthened its paternalism in efforts to pursue and enforce free-market capitalism. This aligns with what Dean (2002) described as 'authoritarian liberalism', with its dual principles of strong state and free economy, which is applied to citizens who are deemed incapable of self-governing. Neoliberal welfare reforms represent a manifestation of these modes of governing, intensifying conditions attached to social security to push those who are unemployed away from state supports and into waged employment. The result is an uneven distribution of the burdens and benefits of social security.

Worldwide, neoliberal welfare reforms tend to disproportionately impact women (Björnberg, 2002; Fraser, 1994). This has been the case, for instance, under the UK's Universal Credit System (Watts *et al.*, 2014; Wickham *et al.*, 2020; Carey & Bell, 2022; Andersen, 2020), and in the US since the Clinton Government's sweeping 1996 reforms (for more details, see: Sheared, 1998; Kornbluch & Mink, 2019; Ahn, 2014). In Australia, increasingly strict welfare conditionalities have also produced particularly negative impacts for Indigenous women, including increased poverty and stigma, reduced health/wellbeing, and reduced self-determination (e.g. Klein, 2021a, 2021b; Goldblatt, 2022; Staines, 2018). However, while existing scholarship considers the gendered and racialised effects of *some* of Australia's neoliberal welfare policies (e.g. Klein, 2021a, 2021b; Bielefeld & Beaupert, 2019), others have received less attention. For example, relatively little focused attention has been paid to the experiences of women, including Indigenous women, under compulsory income management (CIM) – a comparatively recent and arguably extreme form of Australian welfare conditionality (Marston *et al.* 2022).

Under CIM, a proportion (often 50–80%) of an individual's social security income payments is quarantined onto a cashless bank card, for use only on approved items (i.e. excluding alcohol, illicit drugs, gambling products, and pornography). Available data demonstrate that both Indigenous peoples and women are most likely to be placed on CIM (e.g. Bray, *et al.*, 2014; Hefren-Webb, 2022), which corresponds with the over-representation of both groups in those receiving social security payments eligible for CIM (see Appendix 1). Moreover, CIM was introduced to Australia in 2007, first into Indigenous communities, and with the partial aim of *improving*

women and children's wellbeing (Tudge, 2015; Marston et al. 2022). This discursive justification makes it particularly important to consider the policy's effects from an intersectional feminist standpoint (Crenshaw, 1989).

In this article, we thus offer an intersectional feminist analysis of CIM, focusing on its impacts for women, including Indigenous women. To do so, we draw on qualitative survey and interview data collected from 170 individuals across Australia with personal experience of CIM. First, we review existing scholarship on gender, race, and work, before also discussing social security under neoliberalism. We then describe the methodology for this study, before presenting study findings and conclusions.

### Gender, race, and work

A primary contributor to the disproportionate social disadvantage experienced by women across the globe, including women of colour and Indigenous women, is the ongoing structural exclusion of women under patriarchal forms of capitalism (from herein, 'patriarchal capitalism') (see Pateman, 1988; Johnson, 1996). This occurs not only by denying equal entry to the workforce, but also through the concomitant devaluing and invisibility of unwaged reproductive labour, upon which capitalism 'free rides' (Weeks, 2011; Fraser, 2016). Experiences of racism, exploitation, and intergenerational traumas arising from indentured labour schemes as well as other violent colonial policies create further layered impacts for Indigenous women and women of colour, further deepening socioeconomic disadvantage (hooks, 1982; Cook et al., 2017; Folbre, 2013).

From the ~1960s–70s, second-wave feminists made demands for women to enter the labour market and be treated equally as employees, spurring mass feminisation of the workforce across most developed countries, though unequally across and within geographies, professions, and social groups (ILO, 2018b; Rubery, 2015). Concomitantly, increased claims were also made on the welfare state, critiquing sexism ingrained in welfare provision, including assumptions that women were primarily homemakers and thus financially dependent on men (Williams, 2002). Orloff (2006: 230) describes subsequent decades as representing a move away from a "maternalist" policy model that treated women as domestic servants, and towards policies that increasingly supported women into the workforce. Although this increased women's labour force participation, these policies have borne other negative impacts. This is at least in part because women still tend to undertake disproportionately high rates of unpaid reproductive labour *regardless* of whether they also undertake waged work.

As Hochschild (1989) argued, employed women tend to do a first shift for their employer, and then a 'second shift' of domestic/reproductive labour at home. Indeed, according to the International Labour Organization (ILO, 2018a: 37), women worldwide performed ~76.2% of the total hours of unpaid care work in 2018, and 'In no country in the world do men and women provide an equal share of unpaid care work'. This excludes forms of reproductive labour that are not counted in official statistics, and thus possibly underestimates its overall volume. These statistics also miss racial differences in how reproductive labour is shared, as well as anchored in and inflected by histories of racial oppression (Duffy, 2007; Klein et al. 2024). For most women, however, juggling waged employment and reproductive

labour presents significant difficulties and, in a recent ILO (2017) survey, was identified as the biggest challenge faced by women worldwide.

To accommodate these varied roles and demands, women remain far more likely to either exit the labour market or reduce their hours of waged work. The ILO reported that globally in 2018, labour market participation was 26.5% higher for men (at 75%) than women (at 48.5%) (ILO, 2018b: 7), while in Australia in February 2022, 62.1% of Australian women were participating in the labour force versus 70.9% of men (Australian Government, 2022). The situation is worse overall for Indigenous peoples in Australia, with 56% of men and only 52% of women participating in the labour force at the 2021 Census (ABS, 2021). Australian women are also more likely to be working part-time, and Australian men are twice as likely to be in highly paid jobs (ABS, 2021; Australian Government, 2021). At November 2022, Australian women earned 87 cents for every dollar earned by men (Australian Government, 2023).

These persistent inequalities have led many to argue that ‘lean-in’ or ‘neoliberal feminist’ efforts to subsume women into capitalism by conforming to rather than challenging gender norms fails to address the patriarchal oppressions that are *built into* capitalism (Aschoff, 2015, 2020; Hooks, 1982). For Aschoff (2015), ‘capitalism is the problem, and . . . a feminism rooted in democratic, egalitarian, anticapitalist principles is the solution’. For others (Johnson, 1996), it is at least necessary to allay the deep patriarchal tendencies of current forms of capitalism if we are to achieve greater equality.

Overall, this situation means that women are more likely to live with lower incomes, draw on social security as a form of income for labour that is not remunerated elsewhere, and experience reduced earning power that is typically cumulative and irreversible over the life course (Australian Government, n.d.). This is again compounded at the intersection of gender and race, with women of colour and Indigenous women typically also experiencing the layered, intergenerational effects of wealth loss arising from racist historical and contemporary social policies (e.g. stolen wages, stolen lands) (Bhabha *et al.*, 2021). Consequently, these women are more likely to feel the impacts of neoliberal welfare reforms.

### Social security under neoliberal welfare reforms

Social security is recognised as a human right under international human rights instruments,<sup>1</sup> and is a key means of protecting economic security and freedom through redistribution that alleviates poverty. Nevertheless, under neoliberal welfare reforms in states like Australia, the UK, and the US, social security has been (re)framed as a form of residual state support rather than a core human right (Esping-Andersen, 1990). Moreover, under ‘neoliberal paternalism’ (Soss *et al.*, 2011), the state has not simply retreated but also strengthened its paternalism in efforts to enforce free-market capitalism. For example, across most (neo)liberal welfare states (Esping-Andersen, 1991; Cavadino & Dignan, 2006), conditions attached to social security receipt have intensified in ways that require recipients to submit to the norms of capitalism, for instance, by engaging in waged work and/or mandatory employment training and preparation regimes to maintain eligibility

(Wacquant, 2009). As discussed above, women – particularly women of colour and Indigenous women – are disproportionately affected by these schemes. In some cases, these women are prime targets of such reforms.

Internationally, welfare reforms have been accompanied and enabled by discourses that represent those receiving social security as parasitically ‘dependent’ upon the state (Cassiman, 2008; O’Connor, 2001). At worst, social security recipients are stigmatised as lazy, substance-addicted, and morally corrupt: ‘deadbeat dads’, ‘welfare queens’ (Cassiman, 2008; Cammett, 2014), ‘dole bludgers’ (Archer, 2009), and ‘welfare cheats’ (Devereux & Power, 2019). Frequently, these discourses disproportionately demonise women, with a particular emphasis on (single) mothers who are black and/or Indigenous (Cassiman, 2008; Cammett, 2014; Sabbioni, 1996; Sheared, 1998). In addition to misrecognition and stigma arising from these discourses (Fraser, 1997), the economic impacts of the reforms have also had devastating effects.

In the US, neoliberal welfare reforms that began in the mid-1990s resulted in widespread retrenchment of support for all welfare recipients, but in ways that particularly affected those in greatest need, including single mothers. As Kornbluh and Mink (2019: 130) explain, changes in federal policy widened flexibility for the expenditure of welfare block grants to the states, meaning that ‘By 2016, states spent only 25 percent of their block grants on basic assistance, down from 70 percent in 1997. . . . [and by 2017] many states had decided to spend their block grants largely on services rather than on cash assistance, on regulating people rather than assuring them a lifeline’. Kornbluh and Mink (2019: 132) argue that the US welfare state limits and constrains the ‘self-sovereignty’ of mothers living in poverty ‘through various sexual, reproductive, and familial interventions’. Ahn (2014) similarly shows that since the Clinton Government’s sweeping 1996 welfare reforms, lone mothers have worked more but had *less* disposable income than prior to the reforms. The reforms have thus *exacerbated* poverty for impacted women, while reducing their ability to spend time with their children. These effects have been greatest for women of colour (Sheared, 1998).

In the UK, the introduction in 2013 of the Universal Credit system (Andersen, 2020) has also seen intensified conditionalities attached to many benefits, and conditionalities extended to groups that were previously exempt, such as lone mothers (Andersen, 2020; Watts et al., 2014). This has had broad and negative impacts on health, wellbeing, and other outcomes, particularly for young single mothers and their dependent children (Wickham et al., 2020; Carey & Bell, 2022; Andersen, 2020).

In Australia, welfare reforms from the early 2000s have also ushered in increasingly intensive conditionalities, which have had similarly harmful effects for women (Blaxland, 2010; Walters, 2002). Jovanovski and Cook (2020), for example, show that both low incomes and the demands imposed by mutual obligations in Australia (e.g. completing job searches, attending employment service appointments) compromise the ability of single mothers on social security benefits to provide nutritional food to their children. Grahame & Marston’s (2012) study of single mothers exposed to workfare policies likewise shows that these women routinely feel stigmatised and disrespected, ‘embarrassed’ and like ‘second-class citizens’ as the work of caring for children is devalued relative to the celebrated ‘worker-parent’ identity (Weeks, 2011; Holdsworth, 2017). In a recent study on ParentsNext – an Australian program targeted at ‘activating’ primary caregivers

(around 96% of whom are women) into waged labour – Klein (2021a, 2021b) argues that the policy expropriates single and Indigenous women’s reproductive labour, continuing both patriarchal capitalist and settler colonial projects of oppression.

When compared, however, with recent welfare reforms both within Australia and across other international jurisdictions, CIM might aptly be regarded as a ‘radical experiment in poverty governance, conditional welfare and social policy administration’ (Marston *et al.* 2022, p.3). Indeed, in countries such as the UK, US, and across Western Europe, conditional social security payments tend to operate in terms of applying penalties and sanctions for non-compliance with activation requirements, many of which take the form of job-search or training (Andersen, 2020; Kornbluh & Mink, 2019). Conversely, CIM involves a form of welfare quarantining not seen beyond Australia and Aotearoa/New Zealand, which has involved not only hard paternalism over how social security payments can be spent, but also digital surveillance by both government and private companies that administer CIM (Indue Pty Ltd) (Marston *et al.* 2022).

Existing research into CIM has shown considerable deleterious effects, such as reduced birthweights for Indigenous infants (Doyle *et al.*, 2022), reduced food security (Spencer, 2018; Watson, 2011), and experiences of having expenditure on approved items such as rent and food being complicated and/or prevented (e.g. Bray *et al.*, 2014; Marston *et al.* 2022). Vincent’s (2023) recent study also demonstrates how CIM and ParentsNext combine to disproportionately affect those undertaking care – predominantly women – though the research focuses on the smaller township of Ceduna (South Australia). Despite this, and some other smaller studies using secondary data or analysing policy (e.g., Bielefeld and Beaupert, 2019), comparatively less attention has been paid to the gendered, classed, and racialised impacts of CIM – something this article seeks to remedy.

## Methods

This paper arises from a 2018–2021 study of CIM across Australia and New Zealand. Here, we draw only on our Australian data, including semi-structured interviews ( $n = 76$ ) and a mixed-methods online survey ( $n = 94$ ) of individuals who had personally experienced CIM (overall  $N = 170$ ). The survey included several closed questions, though for this paper we draw only on open-text survey items, which asked individuals to describe their personal experiences with and overall feelings *about* CIM. We combined qualitative data arising from these open-text survey items with our qualitative interview data to provide a fuller dataset for the sub-study we describe here. These data were collected between 2019–2020, with participants recruited via the distribution of flyers to key stakeholders in areas where CIM was operating, as well as via local television, radio, and print media in these locations.

Interviewees were located across several sites, including Ceduna and Playford (South Australia), Hervey Bay and Bundaberg (Queensland), and Shepparton (Victoria). Survey respondents were located across these *and* the additional sites of Cape York and Logan (Queensland), the Goldfields and Kimberley regions (Western Australia), the Ngaanyatjarra Lands (South Australia), and the Northern Territory. Demographic details for interviewees and survey respondents are

**Table 1.** Demographic characteristics of interview and survey samples (N = 170)

| Demographic characteristics    | Interview sample – number (proportion) | Survey sample – number (proportion) | Total sample (proportion) |
|--------------------------------|--|-------------------------------------|---------------------------|
| <b>Gender</b>                  |  |                                     |                           |
| Female                         | 40 (53%)                               | 56 (60%)                            | 96 (56%)                  |
| Male                           | 26 (34%)                               | 19 (20%)                            | 45 (26%)                  |
| Other/non-binary               | 1 (1%)                                 | 0 (0%)                              | 1 (0.5%)                  |
| Prefer not to say              | 9 (12%)                                | 19 (20%)                            | 28 (16%)                  |
| <b>Total</b>                   | <b>76 (100%)</b>                       | <b>94 (100%)</b>                    | <b>170 (100%)</b>         |
| <b>Identify as Indigenous?</b> |  |                                     |                           |
| Yes                            | 24 (32%)                               | 23 (24%)                            | 47 (28%)                  |
| No                             | 52 (68%)                               | 71 (76%)                            | 123 (72%)                 |
| Prefer not to say              | 0 (0%)                                 | 0 (0%)                              | 0 (0%)                    |
| <b>Total</b>                   | <b>76 (100%)</b>                       | <b>94 (100%)</b>                    | <b>170 (100%)</b>         |

Note: Some columns may not add to 100% due to rounding.

summarised in Table 1. The average age of participants was 39.4 years for interviewees and 37.3 years for survey respondents. We included data from all genders in our analysis for this sub-study, though the overrepresentation of women and Indigenous peoples in our sample aligns with their general overrepresentation under CIM, as discussed earlier.

Interviews were audio recorded and transcribed, before being inductively thematically analysed using NVivo 12 software. We also undertook inductive thematic analysis for qualitative survey responses. In doing so, we adopted a reflexive thematic analysis approach, which, rather than seeing meaning as being ‘fixed’ in the data, sees it instead as being co-constructed through the researcher/s interpretations of participants’ views and experiences (Braun & Clarke, 2023). In keeping with approval received from The University of Queensland Human Research Ethics Committee (#2018001271), participants were advised that they would remain anonymous throughout this research. Thus, we use pseudonyms when reporting our findings below.

Although we attempted to recruit a range of study participants who could share diverse perspectives and experiences, it is nevertheless the case that our sample is not representative of all CIM participants. Future research should seek to engage with a larger (and ideally, random) sample of participants if possible.

## Findings

### *False assumptions, stigma, and the invisibility of women’s reproductive labour*

Many of our research participants described the acute stigma they felt being forced onto CIM. Similar to ‘dole bludger’ tropes that have long accompanied welfare

reform discourses (Archer, 2009), respondents of all genders described being unfairly labelled as lazy, heavy gamblers, and/or problematic users of alcohol and drugs. For many female respondents, however, this was also heavily tied to their identities as (often) primary caregivers for children, reflecting longer-standing discursive frames that see mothers, and especially single mothers, as lazy and exploitative ‘welfare queens’ (Cassiman, 2008; Cammett, 2014; Sabbioni, 1996). For instance, Sharnell (thirty-five years) explained that CIM participants were viewed as ‘dole bludgers and addicts . . . [who] aren’t capable of looking after our own children’. Charlene (sixty-two years) pointed out the contrast between her identity as a competent and capable mother, versus how she was being treated under CIM: ‘I raised two beautiful girls as a widow but now I am told I cannot manage my money’. Similarly, Kathleen (thirty-two years) explained:

I am a single mum, though I have never had any drama paying my bills. I’m not one to drink/get drunk . . . I shouldn’t be labelled into a category to be made to look bad. I give my kids everything I have. Always will.

Male respondents were less likely to position themselves as caregivers for children, though some noted that false assumptions animating CIM tended to focus on the imagined risks men posed *to* children:

We are all classed as . . . child abusing . . . this is the picture painted of us by this government . . . (Ron, forty-three years)

CIM discourses also regularly position social security recipients of all genders as poor financial managers, though for women this was again regularly tied to care for children. Contrary to such discourses, however, the women in our study indicated that they were excellent at budgeting and managed to survive on drastically low incomes. Moreover, they were often selfless in how they distributed these incomes, regularly prioritising children’s needs over their own. As Pearl (age unknown), a single mother of multiple children stated, ‘All I’m doing is providing for my children, and giving my kids everything that I can . . .’ As a single mum with an annual total income of between \$15–30k per annum, budgeting is also crucial for Meg (twenty-six years):

I have been a single mum on Centrelink for almost ten years . . . I have always budgeted well and done whatever I can to make our money stretch to meet our needs for food, etc., such as shop at [discount supermarket], buy second hand, etc., and have never had any issues budgeting and paying bills.

Rachel (thirty years) described how being on CIM made her:

. . . feel like less of a person. Instantly, people think I’m a dole bludger, alcoholic, druggie, and the list goes on. Never do they know I never seen myself becoming a single mother of two young children, but I am trying my hardest through university to obtain a degree so I can get off welfare and support my family as a one income family . . .

Rachel implicitly identifies her single mother status as being almost synonymous with that of the negative tropes of 'dole bludger, alcoholic, druggy'; social identities that arise externally and are then internalised as a source of shame and blame. Rachel juxtaposes these identities against the possibility of future waged labour, which is presented as an *escape* from the multiple stigmas of welfare receipt combined with single motherhood. This aligns with the general objectives of neoliberal welfare reform: to 'activate' and 'hassle' people into waged labour while delegitimising other forms of work, including unpaid care of children. The implicit assumption here is, of course, that mothers and other unpaid caregivers receiving social security are in fact *not working*. Annie's (thirty or so years) reflection starkly demonstrates how this assumption is internalised:

I haven't worked in six years. Yeah, just been a mum.

The framing of mothering as 'non-work' reinforces the devaluing of women's reproductive labour under patriarchal capitalism. As a counternarrative to this, however, and reflecting other studies (e.g. Grahame & Marston, 2012; Holdsworth, 2017), our participants' stories demonstrated just how much work they really *do* undertake, and that this often involves juggling multiple roles and responsibilities. For example:

... there are a lot of people like me [on CIM] who are on income support due to having small children, being a single parent, studying and working part time. (Tjanara, twenty-six years)

It's really hard when you're a mum and they say, oh well. You can work as well. But I'm doing a full-time study course and working and then doing all sport and school and homework. Yeah, it's too much for one person, for me to do. (Annie, thirty years)

Where children have high needs, the workload becomes even more demanding. For instance, Pearl (age unknown) explained:

If I could work I would, but I have a child, like I said, who's leaning towards being autistic and he needs a lot of work... [*Name of child*] doesn't say any words at all, he'll make noises and he hits his head against the wall, and he does little head movements... Yeah, just thinking about being put on that [CIM] card, how I was going to pay for everything that I needed from my son, that really did stress me out.

The same was true of caregivers for adults with disability, such as Richard (forty-three years) who cares for his heavily disabled brother, or Lenore (thirty-five years) who cohabits with three other adults who have various disabilities. The 'free-riding' feature of capitalism (Fraser, 2016) not only keeps primary caregivers – overwhelmingly women – poorer, but also puts them at higher risk of exposure to *further* punishment via neoliberal welfare policies, like CIM. Our respondents spoke about how these 'hassling' policies then create *more* unpaid work, as they

demand the navigation of complex bureaucracies, which must be done atop peoples' innumerable other duties. For example, Ashleigh (twenty-five years) found that managing household finances was more difficult under CIM, thereby eating up time that would otherwise be dedicated to the crucial work of parenting:

I rang Indue [CIM administrator] and she said, sweetheart, you need to call this number, this number is the people that are going to be allowed to extend your [payment] limit. So I had to wait another hour for that place to open. Meanwhile I've got stuff to do, I've got kids to take to school. I just want to pay my rent very quickly, two seconds, in, out, done, off my phone and able to do the things I do . . . So I eventually got on the phone to this woman and I explained what had happened. I was on the phone to her for fifty-four minutes, for the end of the phone call for her to go, oh well, yeah, I'll just extend the limit to \$200. I just went, that's exactly what I asked you to do when I picked up the phone. (Ashleigh, twenty-five years)

For some of our participants, the burden of navigating CIM is further amplified when layered upon other neoliberal welfare policies. For instance, Ashleigh is not only subject to CIM but also to ParentsNext, another welfare-to-work program (described earlier) that makes the receipt of Parenting Payments conditional on primary caregivers of children under six years undertaking job-search and reporting obligations. As Ashleigh described it, being subject to both policies effectively created a web within which she was forced to manoeuvre and survive, living within the constraints of manifold sets of rules and regulations, for no personal benefit. She explained:

They put me through ParentsNext, which is almost a bigger pain in the bum as this [CIM] card . . . I was like, you know, 'what can you do for me?' She's [the caseworker] like, we can give you confidence to get back in the workforce. I was like, I already have all of that . . . (Ashleigh, twenty-five years)

Nevertheless, falling foul of the complex program rules meant that Ashleigh's social security income was at times suspended, making parenting even more difficult:

[On one occasion] My eldest son had a paediatrician appointment that I had booked . . . and I had no spare money to pay for the appointment. (Ashleigh, twenty-five years)

Ashleigh was not the only participant who described how these policies adversely affected her ability to care for her children, as we turn to below.

### **Complicating care for children**

Many participants spoke about CIM undermining efforts to take care of children. For example, Pearl (age unknown) described how activities and goods for children, including for school, frequently demanded access to cash, which was less available under CIM. Without cash, children regularly missed out:

My friend went to use her card at the school tuckshop to buy uniforms, and it wouldn't work. So, then she had to turn around and use her cash portion, to buy uniforms for her kids. Now please tell me how that's not impacting on children? ... Because a lot of these places want cash. (Pearl, age unknown)

Similarly, Indigenous woman, August (forty-eight years), lamented, 'We want to spend money on our children', but CIM did not leave sufficient cash to do so. Even small treats become impossible under CIM:

... going to the markets and being able to buy your kid a Snow Cone with some coins and trying to manage what small amount of cash you have available, doesn't spread to all of those things. (Mary, age unknown)

Another single mother of three, Jacynta (approximately thirty years), wished to take her children to the movies but could not do so because the CIM card was not accepted there. She talked about this as *increasing* the stress of parenting, as she would constantly need to tell her kids 'no' to things they wished to do – including socialising with their friends. In this regard, Sharnell (thirty-five years) lamented that 'My children now feel we are poor as we can no longer take them to local fun fairs etc. as a small treat'. Not only could participants no longer treat their children, they were also prevented from paying them pocket money as a means of teaching them to budget and save. For instance, Fiona (age unknown) said:

... they like to be able to spend their own [pocket money] like go up to the thing and pay for it themselves and things like that. [Before CIM] I was trying to teach them that too, like how to count the change – how much change and stuff they're going to have ...

Overall, these issues and complications were regularly related to participants reporting feeling like they were 'failing' their children (Fiona, age unknown). The socio-emotional impacts of this were significant. For instance, mother of four, Dawn (thirty years) explained: 'My kids have seen me cry more since I've been on this stupid goddam card than what they've probably ever seen me cry in their whole lives'. Dawn went on to explain how CIM had dramatically undermined her mental health:

I've seriously considered going back on anti-depressants since being on this card because I went off them when I was pregnant with [my daughter] ... and I was doing really well ... But I have seriously been considering – just fill in the script ... I'm stressed. My partner is stressed and it's probably not the healthiest of relationships when it comes to stress.

Dawn has multiple children, including an elder daughter who has high needs, and a partner who is self-employed with an unsteady income. She reflected that these layers of stress affect her ability to parent:

... Then when one of the kids mucks up, because we're already stressed, we overreact to the situation even though we're trying not to. But it's just like, how much pressure can we take before we explode?

The additional stress caused by CIM was also reported by others as triggering increased fighting and arguing in couple relationships. For others, CIM made them feel as if they had entered (and for some, re-entered) a domestic violence relationship with the state itself.

### **CIM and violence**

CIM is framed as being able to reduce violence, including domestic violence. However, our findings suggest that CIM may instead worsen violence. For instance, Indigenous woman, Cecilia (forty years) explained that 'There is a little more domestic violence since introduction of the Indue [CIM] card'; an assertion that is supported by a recent CIM evaluation (Mavromaras *et al.*, 2021). Similarly, Pearl (age unknown), who has a history of domestic violence, explained:

I don't see it [CIM] breaking the cycle of domestic violence at all. I don't see how it helps. It makes it worse.

Fiona (age unknown), when reflecting on whether CIM may have assisted in a violent relationship that she was previously in, stated:

... if the partner is a drug abuser, like my ex was, they can still take the card whenever they want and go and buy that [items like cigarettes] and maybe swap the smokes with somebody else that they know for drugs or alcohol or anything...

Similarly, Ashleigh (twenty-five years) who had a history of domestic violence explained:

I can't imagine me being on this card in the relationship I was in... because he was an alcoholic and would constantly steal my money... he [former partner] probably would have possessed the card the whole time.

Pearl (age unknown) explained that her partner *did* take possession of her CIM card, and she had to cancel the card and request a new one. Arguing over the use of CIM cards, as well as experiencing difficulties with using the cards to access sufficient funds, can also have the effect of worsening pre-existing relationship tensions, as well as creating new ones:

Me and my partner fought constantly about it... just the fact that there was only so much that the BasicsCard could cover and the little bit that was left had to cover all these bills and it wasn't stretching. (Celine, age unknown)

Some respondents also remarked that CIM can make leaving violent relationships more difficult. As Cath (thirty years) asked, ‘how do those people [suffering domestic violence] put money away to get out?’ This aligns with CIM participants’ reflections reported elsewhere (e.g. Caro, 2021). For instance, CIM can make booking alternative accommodation difficult, because places of accommodation are also often licensed premises and thus, are declined as eligible payments under CIM (Caro, 2021). Pearl (age unknown) went on to explain:

[those experiencing domestic violence while on CIM] . . . are finding it hard to get out . . . I’ve been into a shelter with my son, you’ve got to pay your way there, DV Connect [support service] won’t pay for fuel to get you there. They’ll put you on a bus or a train. But if you want to take your worldly possessions in your car, you have to have the money to do that, and go wherever they want to send you . . . I think even trying to escape domestic violence, the card hinders that too.

Mother of three, Shaniah (thirty years) agreed, saying that ‘a lot of them [victims] seem to hide [cash] money away for their big break . . . And they just can’t do that . . .’ Even if escape was possible, Fiona (age unknown) talked about how poor access to cash under CIM would still make it difficult to start afresh. Indeed, access to the cash economy to purchase second-hand goods like refrigerators and furniture was necessary to keep things affordable, which Fiona explained, ‘You can’t just do [on CIM] – unless everyone on Gumtree [used goods site] is going to suddenly have an EFTPOS machine . . .’

In addition to being a poor mechanism for *addressing* violence, or indeed assisting people to *escape* violence, many of our participants also talked about the violence inherent in the CIM policy itself. Indeed, some talked about CIM as being *akin* to a domestic violence relationship, where autonomy is removed and individuals are forced to rely on a third-party to ‘approve’ and ‘manage’ their expenditure:

Ashleigh: I was in a domestic violence relationship for four years and it was extremely financially abusive . . . So it’s very frustrating that I now have to rethink psychologically how this [CIM] is . . .

Interviewer: You mentioned that your previous relationship had been financially abusive. Do you say that because you feel like this is a similar thing?

Ashleigh: Yeah. You’re second-guessing yourself that you’ve done the wrong thing to be put on this card.

In essence, CIM replaces the violent partner with what is experienced as a violent and paternalistic state system of intervention. This irony was palpably illustrated in Catriona’s (thirty years) recollection that:

. . . [at] the Indue [CIM] office . . . They had this hanging up on the wall behind the lady. It was all about domestic abuse, like freedom is everything and say no. I was like, that’s kind of hypocritical isn’t it? Because if my partner was

doing this to me, you'd be telling me to leave him. But because it's the government doing it they're completely fine . . .

These contradictions need to be surfaced so that the flawed logic of CIM can be interrogated. Australian politicians have repeatedly drawn on benevolent discourses to describe the supposed intended impacts of CIM. Repeatedly, these discourses have positioned women and children as primary beneficiaries of these policies (Marston *et al.* 2022; Peterie *et al.* 2022), though our findings demonstrate the opposite, as we discuss below.

## Discussion and conclusion

The findings of this study show that CIM is harmful for women, including Indigenous women, and their children. Indeed, the participants in our study repeatedly emphasised how CIM made them feel stigmatised as lazy and non-contributing members of society, perpetuating discourses under broader welfare reforms, and under patriarchal capitalism, which emphasise waged labour as the only legitimate means of socioeconomic contribution. In turn, this encourages women to internalise the belief that reproductive labour is not a legitimate and worthwhile form of work.

For Indigenous peoples, this builds on the longer-standing subversion of pre-colonial notions of work, productivity, and subsistence economic relations under the imposed norms of capitalism. Indigenous women are most severely impacted because they undertake unpaid care labour at higher rates than any other group in Australia (Klein *et al.*, 2024; Hunter *et al.*, 2016) and are also disproportionately likely to be subject to CIM (Bielefeld & Beaupert, 2019; Marston *et al.*, 2022). Many of our participants internalised the view that it was not only their labour that was unworthy or unimportant, but by extension, also *themselves*.

Not only does CIM perpetuate this false narrative, it also creates *further* unpaid work for participants – particularly in relation to understanding and navigating complex bureaucratic frameworks, making budgeting and bill payment more difficult, and complicating care for children. This is exacerbated when combined with other forms of welfare conditionality (e.g. ParentsNext). When laid atop the stigma that participants already felt from being subjected to CIM in the first place, the inability to demonstrate their love for their children in ways they had done previously, like purchasing small treats, made them feel like 'failed' parents. This led to the final major theme in our data; that simply being on CIM itself *felt* like a violent relationship. This is echoed across other forms of welfare conditionality (e.g. Klein, 2021a).

These findings sit within a broader literature concerning the harms of CIM, as well as its failure to achieve its stated aims (e.g. Bray *et al.*, 2014; Doyle *et al.*, 2022; Spencer, 2018; Vincent, 2023). CIM represents a significant opportunity cost,<sup>2</sup> and contradicts international best practice evidence about the efficacy of providing unconditional cash transfers to women to support greater economic empowerment (Bull *et al.*, 2020). However, the continued commitment to CIM by successive Australian Governments over the last fifteen years suggests that simply 'more

evidence' of CIM's many harms is insufficient to trigger significant policy change. Moreover, the harms endured under CIM and similar punitive reforms are not unexpected, since these policies perpetuate the multiple discriminations embedded within the broader thrust of patriarchal, neo-colonial capitalism.

Broom et al. (2022: 17) urge social scientists to refrain from referring to *predictable policy harms* as 'unintended consequences', arguing instead 'that adverse outcomes are often far from unanticipated . . . and are in fact best understood as intended aspects of system design'. The focus here on intentionality aligns with what Hearn et al. (2022), drawing on earlier work around 'gendered regimes' (e.g. Walby, 2009), call 'violence regimes'. They use this term to describe how violence can itself be a central and intended regulating concept, which works across all domains of society (e.g. economy, polity) and at all levels (micro, meso, macro). In this conceptualisation, violence takes many forms:

Direct physical violence is not always necessary, especially following earlier violence or threat or existence of structural violence and power imbalance, as in slavery, colonialism, imperialism, capitalism, and patriarchy (Hearn et al., 2022: 699).

Hearn et al. (2022: 686) argue that using the concept of a 'regime' is a helpful way of avoiding the fragmentation of different modes of gendered violence that make up broader mutually reinforcing patterns. That is, considering CIM as one element within a broader regime of violence can help us see the 'forest' rather than just one or two 'trees' at a time. It also helps to 're-center violence in the analysis' of gendered and racialised inequalities under capitalism (Hearn et al., 2022). In this view, a capitalist system that fails to *see* and *value* reproductive labour, and then punishes those who undertake it by withdrawing economic security, while *further punishing* those who seek such security via the welfare system, *is* a central source of violence. It is also a form of 'symbolic violence' (Bourdieu, 1998) to the extent that these gendered power relations are naturalised as inevitable 'facts of life', rather than being seen as a socio-political problem of inequality produced by specific historical and contextual factors.

The broader regime within which CIM operates and perpetuates inequalities and disproportionate violence against women, particularly Indigenous women, is reinforced by a narrow definition of work as waged labour. As Weeks (2011) proposed, the 'problem' underlying and animating policies like CIM lies with how 'work' is defined and understood within the constraints of capitalist waged labour arrangements. To address the root cause of the issue, we must develop a fairer arrangement that recognises, values, and remunerates diverse forms of work, and decouples income from labour, especially in a world where paid work is becoming a far less reliable form of income, rights, and belonging (Frayne, 2015). Our research, in combination with a broader growing evidence base, indicates that if policymakers are genuinely interested in supporting healthier and happier communities, as well as protecting the rights of women and children, then compulsory cashless welfare is the wrong approach. This approach is not only a distraction from these other fundamental needs, it is also a regressive step that is financially punishing and harmful to the health and wellbeing of the very people it is supposed to protect.

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## Notes

1 These include the *Universal Declaration of Human Rights* (UDHR, Article 22), the *International Covenant on Economic, Social and Cultural Rights* (ICESCR, Articles 9, 10), and the *Convention on the Elimination of All Forms of Discrimination Against Women* (e.g., Articles 11, 12, 13).

2 For example, establishment and contract expenditure for the CDC (until 28 February 2022) has been reported as \$63,261,367.00 (Burford 2022: 10).

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## Appendix 1. Social security payment types eligible for CIM, versus total recipients by gender (at 24 June 2022)

| Payment types eligible for CIM           | Male recipients |                         | Female recipients |                         | Total – all genders |
|--|-----------------|-------------------------|-------------------|-------------------------|---------------------|
|  | Number          | Proportion of total (%) | Number            | Proportion of total (%) |                     |
| Parenting Payment Single                 | 10,595          | 5%                      | 221,404           | 95%                     | 231,999             |
| Parenting Payment Partnered              | 6,634           | 9%                      | 63,661            | 91%                     | 70,295              |
| Carer Payment                            | 87,927          | 29%                     | 213,290           | 71%                     | 301,217             |
| ABSTUDY (Living Allowance)               | 3,878           | 40%                     | 5,811             | 60%                     | 9,689               |
| Youth Allowance (student and apprentice) | 71,524          | 41%                     | 102,421           | 59%                     | 173,945             |
| Special Benefit                          | 4,549           | 42%                     | 6,305             | 58%                     | 10,854              |
| Austudy                                  | 15,710          | 44%                     | 19,854            | 56%                     | 35,564              |
| Age Pension                              | 1,139,612       | 45%                     | 1,414,441         | 55%                     | 2,554,053           |
| Youth Allowance (other)                  | 38,388          | 50%                     | 38,849            | 50%                     | 77,237              |
| JobSeeker Payment                        | 418,199         | 50%                     | 413,402           | 50%                     | 831,601             |
| Disability Support Pension               | 407,145         | 53%                     | 357,822           | 47%                     | 764,967             |
| <b>OVERALL MEAN PROPORTION:</b>          | -               | <b>37%</b>              | -                 | <b>63%</b>              | -                   |

*Notes:* Trigger payment types for IM in this table is derived from Australian Government (2022b); Data regarding number and gender of benefit recipients in this table is derived from Department of Social Security (2022); Those receiving some pensions under Part III of the *Veteran's Entitlements Act 1986 (Cth)*, including the Age Service Pension, Invalidation Service Pension, and Partner Service Pension, can also be placed on income management (Australian Government 2022b), but were excluded from the above table because data on recipient numbers for these payments is not publicly available. The DSS data include an option for those identifying as gender non-binary ('unknown' / 'other'), but since all values in this column were zero, the column is excluded from this table.

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