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Committee Secretary
Senate Standing Committee on Community Affairs

By email: community.affairs.sen@aph.gov.au

Dear Chair

The extent and nature of poverty in Australia

Relationships Australia National Office welcomes the opportunity to make a submission to the Committee's inquiry into the extent and nature of poverty in Australia.

The work of Relationships Australia

We are an Australian federation of community-based, not-for-profit organisations with no religious affiliations. Our services are for all members of the community, regardless of religious belief, age, gender, sexual orientation, lifestyle choices, cultural background or economic circumstances. Relationships Australia provides a range of services, including counselling, dispute resolution, children's services, services for victims and perpetrators of family violence, and relationship and professional education. We aim to support all people in Australia to live with positive and respectful relationships, and believe that people have the capacity to change how they relate to others. Through our programs, we work with people to enhance within families, whether or not the family is together, with friends and colleagues, and across communities. Relationships Australia believes that violence, coercion, control and inequality are unacceptable. We respect the rights of all people, in all their diversity, to live life fully within their families and communities with dignity and safety, and to enjoy healthy relationships.

Relationships Australia is committed to:

- ensuring that social and financial disadvantage is not a barrier to accessing services
- working in rural and remote areas, recognising that there are fewer resources available to people in these areas, and that they live with pressures, complexities and uncertainties not experienced by those living in cities and regional centres
- collaborating with other local and peak body organisations to deliver a spectrum of prevention, early and tertiary intervention programs with older people, men, women, young people and children. We recognise that a complex suite of supports (for example, drug and alcohol services, family support programs, mental health services, gambling services, and public housing) is often needed by people engaging with our services, and
- contributing our practice insights and skills to better inform research, policy development, and service provision.

Framing principles of this submission

Principle 1 - Commitment to human rights

Relationships Australia contextualises its services, research and advocacy within imperatives to strengthen connections between people, scaffolded by a robust commitment to human rights.

Relationships Australia recognises the indivisibility and universality of human rights and the inherent and equal freedom and dignity of all. We note that the United Nations considers that

No social phenomenon is as comprehensive in its assault on human rights as poverty. Poverty erodes economic and social rights such as the right to health, adequate housing, food and safe water, and the right to education. The same is true of civil and political rights, such as the right to a fair trial, political participation and security of the person.¹

Australia has obligations to reduce poverty, defined by the Sustainable Development Goals.²

Relationships Australia agrees that poverty functions as a powerful barrier to enjoyment and assertion of human rights; this is a key reason for our commitment to universally accessible services. Our clients and our staff face escalating hardship and precarity, severe rent and mortgage stress, and financial barriers to accessing other goods and services that are necessary to flourish. These include basic health care (including dental and mental health care and preventive health measures), physical, social and cultural activities, educational and employment opportunities, and good quality fresh food. Since the onset of the pandemic, many people have experienced these kinds of difficulties for the first time. But there are many others for whom the pandemic has merely exacerbated longstanding structural inequalities, barriers and scarcities. For them, the situation is exponentially worse.

Our commitment to human rights necessarily includes a commitment to respecting epistemologies beyond conventional Western ways of being, thinking and doing. Of acute importance is a commitment to respecting epistemologies and experiences of Aboriginal and Torres Strait Islander people as foundational to, *inter alia*, policy and programme development and service delivery.

Principle 2 – An expanded understanding of the nature, experiences and implications of poverty

Aboriginal and Torres Strait Islander people have different ways of knowing the dimensions of poverty; indeed, the drivers of poverty and the mechanisms and conditions for escaping from poverty are different from those applying to other groups in the community. The connection to Country, and the context-specific experiences of kinship, for example, do not countenance the hyper-individualism that pervades Western assumptions about distribution of resources and obligations between the Western nation-state and individual taxpayers and among individual taxpayers. Centring the epistemologies and experiences of Aboriginal and Torres Strait Islander people is a necessary (although not sufficient) step in achieving the targets in the National Agreement on Closing the Gap, as well as preventing entry into poverty, ameliorating its effects, and hastening transitions out of poverty.

¹ See <https://www.ohchr.org/en/poverty> [accessed 12 January 2023]

² See <https://un.org/sustainabledevelopment/poverty/>. We note Australian Government reporting on progress against these goals at <https://www.sdgdata.gov.au/goals/no-poverty> [accessed 12 January 2023].

Further, the experience of poverty intensifies the effects of structural inequalities which disrupt connections to Country and culture and obstruct access to cultural and social determinants of health.

Principle 3 – An expanded understanding of valued and valuable work

...a major and enduring flaw in Australian social security [is] its inability to recognise various productive activities people undertake – including unpaid care work, which is largely undertaken by women (Blaxland, 2010). People receiving social security payments are accused of being dependent on welfare, but actually, the economy and society are dependent on their unpaid labour, yet these same people are denied an economic floor upon which they can survive.³

Our society should re-frame how caring roles – paid and unpaid – are recognised and valued in our social, economic and political infrastructure. The historic devaluation of caring work derives from, and persists by virtue of, devaluation of women and their contributions to society.⁴ Disturbingly, despite recent advances in how women are treated in society, the value placed on caring roles has in real terms diminished.⁵ However, our economic, social and political institutions now have the opportunity to build on experience and insights, about the true value of caring, which emerged from the pandemic.⁶

Principle 4 – Poverty is a cause, consequence and characteristic of a range of experiences, circumstances and positionalities

In our experience, poverty co-occurs with a range of experiences, circumstances and positionalities, including longstanding health restrictions, intimate partner violence, abuse or neglect of older people, poor mental health, housing insecurity and instability, employment precarity, misuse of alcohol and other drugs, and harmful gambling. Causation is often multi-factorial and multi-directional and, once individuals, families and communities are caught by it, our social, economic, political and legal systems operate in concert not only to actively hinder escape, but also to exacerbate it.

Principle 5 – The critical importance of preventing entry into poverty

Governments should prioritise measures to ensure that current experiences of episodic poverty do not deteriorate into entrenched, and potentially intergenerational, poverty that will not only harm the individuals experiencing it, but will hinder full economic, social and cultural recovery for Australian society in its entirety.

³ Klein et al, 2021, p 63.

⁴ Caring roles remain predominantly gendered; see, eg, ABS, 2020.

⁵ See Evaluate, 2022, p 6.

⁶ See eg Klein et al, 2021, pp 59, 63-64. The ABS has found that 'The most common reason women were unavailable start a job or work more hours within four weeks was 'Caring for children', while for men it was 'Long-term sickness or disability': ABS, 2020-2021.

Principle 6 - Commitment to promoting social connection and addressing loneliness as a serious public health risk

Policy, regulatory and service interventions that strengthen connections and reduce isolation are the most promising and feasible avenues for reducing the risk of abuse and exploitation of people who face structural and systemic barriers to their full participation in society. For example:

Social support has emerged as one of the strongest protective factors identified in elder abuse studies....Social support in response to social isolation and poor quality relationships has also been identified as a promising focus of intervention because, unlike some other risk factors (eg disability, cognitive impairment), there is greater potential to improve the negative effects of social isolation.⁷

Loneliness is a complex social problem and a public health concern. Like poverty, it should be considered to be a social determinant of health in its own right. It stems from dissatisfaction with our relationships, a lack of positive and respectful relationships, or both of these. It is often caused by experiences of exclusion due to structural and systemic social realities that form obstacles to participation in social, economic, cultural and political life. As a public health concern (Heinrich & Gullone, 2006; Holt-Lunstad et al, 2015; Mance, 2018; AIHW, 2019), loneliness has been linked to physical health risks such as being equivalent to smoking 15 cigarettes a day and an increased risk of heart disease (Valtorta, 2016). Loneliness is a precursor to poorer mental health outcomes, including increased suicidality (Calati et al, 2019; McClelland et al, 2020; Mushtaq, 2014).⁸

Relationships Australia serves many cohorts who are disproportionately more likely to experience systemic and structural barriers to participation in Australian social, cultural, political and economic life and, as a result, are at heightened risk of loneliness which both compounds, and is compounded by, socio-economic disadvantage and poor physical and mental health.

These cohorts, membership of which includes a high degree of intersection, include:

- First Nations people⁹
- people with disability
- people who come from culturally and linguistically diverse backgrounds (including people who have chosen to migrate and people who have sought refuge)
- people affected by complex grief and trauma, intersecting disadvantage and polyvictimisation
- people living with intergenerational trauma
- survivors of all forms of abuse, including institutional abuse
- people experiencing mental ill-health
- people experiencing homelessness or housing precarity

⁷ See Dean, CFCA 51, 20, Box 7, citing the United States of America population study described in Acierno et al, (2017); citing also Hamby et al (2016); Pillemer et al (2016).

⁸ The campaign Ending Loneliness Together has released a guide that explains how community organisations can use validated scales to measure loneliness: https://endingloneliness.com.au/wp-content/uploads/2021/08/AGuideto-Measuring-Loneliness-for-Community-Organisations_Ending-Loneliness-Together.pdf

⁹ See, eg, Hunter, 2012; Markham & Biddle, 2018;

- people who identify as members of the LGBTIQ+ communities, and
- younger and older people.

None of these circumstances, experiences and positionalities exist at the level of an individual or family. They become barriers to full enjoyment of human rights and full participation in economic, cultural, and social life through the operation of broader systemic and structural factors including:

- legal, political and bureaucratic frameworks
- beliefs and expectations that are reflected in decision-making structures (such as legislatures, courts and tribunals)
- policy settings that inform programme administration, and
- biases or prejudices that persist across society and that are reflected in media and entertainment.

Relationships Australia has a particular interest in isolation and loneliness. We are invested in supporting respectful and sustainable relationships not only within families, but within and across communities. Relationships Australia is uniquely positioned to speak on isolation and loneliness as we have clinical experience supporting clients who experience loneliness. We have conducted pioneering research into who experiences loneliness (eg Mance, 2018), and manage a social connection campaign, Neighbours Every Day,¹⁰ which supports people to create connections which combat loneliness. Relationships Australia is a founding member organisation in the Ending Loneliness Together network.¹¹ In our clinical practice and our advocacy, we apply a social model of loneliness which recognises systemic and structural barriers that inhibit people from making fulfilling social connections and from participating as fully as they would wish in all facets of our community.

Relationships Australia has, since 2013, been the custodian of Neighbours Every Day, the primary purpose of which is to equip and empower individuals to build sustainable, respectful relationships with those around them. Research conducted by the Australian National University over a number of years has demonstrated the value of this campaign. The campaign fosters connection and belonging increasing individuals' mental well-being and reducing feelings of loneliness for those who participate.

Relationships Australia's Neighbours Every Day is an evidence-based campaign aimed at reducing loneliness by raising awareness and, importantly, providing tools to combat social isolation. With adequate resourcing, we are confident that Neighbours Every Day could be scaled to reach a greater number of Australians, in all communities and at all stages of the life course.

¹⁰ Neighbours Every Day is a celebration of community, encouraging people to connect with their neighbours. Neighbours matter (whether near, far, or online); see <https://neighbourseveryday.org/>

¹¹ For more information, see <https://endingloneliness.com.au/>

Recommendations

Responding to poverty, and risks of poverty, through a human rights lens

1. That Australian governments recognise the human rights implications of poverty, and that it is caused by the interplay of systemic and environmental factors.
2. That the Australia Government repeal the *Social Security Act 1991* (Cth), and associated legislation, and replace it with new legislation that centres human rights, including by expressly incorporating into domestic law the rights articulated in the International Covenant on Economic, Social and Cultural Rights. New legislation should come into operation no later than 1 January 2025.
3. That the Australian Government:
 - a. express its support for and commit to working towards the adoption of a United Nations Convention on the Human Rights of Older Persons
 - b. ensure the involvement of civil society organisations in the drafting, designing and negotiation of the instrument, particularly organisations that represent older persons and diverse communities of older persons
 - c. engage with the Human Rights Council, the Open-ended Working Group and other relevant bodies to urgently move forward the agenda for drafting and adoption of a new treaty on the human rights of older persons, and
 - d. support the Australian Human Rights Commission's involvement in the discussion concerning a future convention on the rights of the older persons, both at the international and at the domestic level.¹²
4. That Australian governments prioritise universal access to services for co-morbidities, including low cost high impact interventions to facilitate social connection, address loneliness, and overcome economic barriers to acquiring social capital; accordingly, we urge the Australian Government to implement the recommendations made in our pre-Budget submission for the 2023-2024 financial year, which can be accessed at <https://relationships.org.au/what-we-do/#advocacy> .

Implementing the recommendations from the 2020 Newstart inquiry

5. That the recommendations made in this Committee's 2020 Report on the adequacy of Newstart and related matters ought to be fully implemented, to the extent that this has not occurred, noting also and in particular that:
 - a. Australia does not yet have a clear and consistent definition of poverty (see Recommendation 1 of the 2020 Report)
 - b. while there have been recent and welcomed initiatives to support people on low income to find stable, secure and safe housing, there is increased urgency to

¹² This recommendation reflects the call to action made by Rights of Older Persons Australia (ROPA), of which Relationships Australia is a member. ROPA is comprised of those civil society organisations, individual supporters and advocates who publicly endorse a new UN Convention on the Human Rights of Older Persons. See <http://www.rightsofolderspersons.org.au/> .

- implement Recommendations 3 and 4 from the 2020 Report, given that housing scarcity continues to worsen since the 2020 Report
- c. health inequalities, including lack of access to preventive and otherwise timely health care interventions, heightened risks of:
 - i. poverty for individuals and families
 - ii. reduced education, employment and community participation, and
 - iii. increased calls on social security and other taxpayer-funded services (see 2020 Report, especially Recommendation 6)
 - d. despite extensive international evidence linking dental health to poor health, employment and social outcomes, dental care continues to be arbitrarily excluded from Medicare, putting it out of reach for many people¹³ (see Recommendation 7 of the 2020 Report)
 - e. while there have been recent and welcomed initiatives to improve supports available to people experiencing domestic and family violence, further work needs to be done to ensure that:
 - i. supports *and* compliance activities are trauma-informed *and* domestic and family violence informed,¹⁴ and
 - ii. victim-survivors (including children) can stay in place, by removing barriers to perpetrators moving out (see 2020 Report, especially Recommendation 8)
 - f. contracts with employment services focus on genuine and enduring outcomes for clients and discourage tokenistic, ‘tick a box’ and volume-based remuneration outputs (see 2020 Report, especially Recommendation 14)
 - g. the Australian Government works with employer groups to reduce the social, economic and budget costs of disability, as well as age, discrimination (see recommendations 17 and 18 of the 2020 Report; see also the AHRC Willing to Work Report, 2015)
 - h. further policy and programme work needs to be done to ensure that older people are not at heightened risk of poverty before they are eligible for the Age Pension (see 2020 Report, especially Recommendation 19)
 - i. digital exclusion of school children can have lifelong impact on social, educational, employment and health outcomes (see 2020 Report, especially Recommendation 20), and
 - j. any social security system expert group include people with lived experience (see 2020 Report, especially Recommendation 25).

¹³ See World Health Organization, 2022; AIHW, 2022, Oral health and dental care in Australia.

¹⁴ For how compliance activities can re-traumatise people who have experienced domestic and family violence, see Klein et al, 2021, especially p 57.

Additional recommendations for specific cohorts and communities

6. That Australian governments collect data on the prevalence, drivers and characteristics of poverty, as well as mechanisms and conditions for its alleviation, among Aboriginal and Torres Strait Islander people, and in remote communities.
7. That the Australian Government legislate to pay the superannuation guarantee contribution for carers, in recognition of the costs that carers save the taxpayer.¹⁵
8. That this Committee undertake an inquiry into how best to support care leavers at all ages.
9. That the Australian Government recognise the long-term financial effects of domestic and family violence by allowing victim survivors of domestic and family violence offences to:
 - a. be awarded an amount from their perpetrator's 'additional' contributions for the purposes of satisfying unpaid compensation orders, as proposed in relation to victim survivors of child sexual abuse in Treasury's 2023 paper,¹⁶ and
 - b. submit a superannuation information request to the appropriate court which could then request that the ATO disclose specific information regarding the offender's or their spouse's superannuation accounts.

Term of Reference (a) the rates and drivers of poverty in Australia

Data from Relationships Australia South Australia, from the 2021 and 2022 financial years, offers an illustration of the proportion of our clients who face financial and economic challenges. In 2018, Relationships Australia South Australia made a submission to the South Australian Parliamentary Select Committee Inquiry into Poverty. That submission can be found at https://www.rasa.org.au/resources/publications_papers_old/submissions/ [accessed 2 February 2023]

Perspective from Relationships Australia South Australia (RASA)

Income data are collected at intake and may change over the timeframes in which RASA engages with clients. The data reflect the presenting financial profile of clients who were seen in the year, regardless of when they first presented. For these purposes,

- the poverty line for South Australia is defined as income less than \$392 per week for a single adult (or \$20,384 per annum)
- the national poverty line is defined as income less than \$426.30 per week (or \$22,152).

RASA data indicate that:

- 1-in-5 RASA clients (20%) have an income below the South Australian poverty line
- 2-in-5 Aboriginal and/or Torres Strait Islander clients (40%) have an income below the SA poverty line

¹⁵ See also Evaluate, 2022.

¹⁶ Treasury, 2023, *Access to offenders' superannuation for victims and survivors of child sexual abuse*, available at <https://treasury.gov.au/consultation/c2022-353970> [accessed 27 January 2023]

- A higher percentage of females (23%) live below the poverty line compared with male clients (15%).

Table 1. The proportion of clients at or below the Poverty line for FYs 2022 & 2021

FY22	FY21
All clients	
20.6% of our clients were at or below the SA poverty line (n = 847)	24% (n = 1011)
25.5% of our clients were at or below the National poverty line (n= 974)	29% (n = 1153)
Aboriginal and Torres Strait Islander Clients	
40.0% of our Aboriginal and/or Torres Strait Islander Clients were at or below the SA poverty line	47% -
45.1% of our Aboriginal and/or Torres Strait Islander Clients were at or below the National poverty line	55% -
CALD	
20.8% of our CALD Clients were at or below the SA poverty line	26%
23.1% of our CALD Clients were at or below the National poverty line	29%
Gender	
23.3% of our Female Clients and 15.3% of our Male clients were at or below the SA poverty line	25%
25.3% of our Female Clients and 18.1% of our Male clients were at or below the National poverty line	31%

Drivers of poverty - inadequate social security payments and punitive, ‘tick a box’ compliance requirements

Social security payments that leave recipients living under the poverty line breach obligations imposed by the International Covenant on Economic, Social and Cultural Rights.¹⁷ Further, the current reliance on punitive conditionality, manifested in ‘mutual obligation’ compliance

¹⁷ See Attorney-General’s Department (Cth) public sector guidance sheet.

requirements, is unnecessarily shaming and stigmatising and, contrary to stated parliamentary intention, acts as barrier to employment. For example, people's efforts to seek and maintain employment are limited if they cannot afford:

- safe, stable housing
- transport to and from work, and to and from interviews and other activities necessary to secure and maintain employment
- clothes suitable for work, including but not limited to uniforms
- quality food and physical activities to maintain health and fitness to work
- health care, including medicines and access to health care interventions
- child care and care for other household members, including older adults and adults living with disability
- utilities such as power and water
- menstrual products, and
- access to digital products and services including phones, and reliable and secure internet services – especially for 'bring your own device' employment.

These factors are, in varying degrees, instrumental in obtaining and maintaining an income through employment, and escaping the poverty trap. Keeping social security payments below an amount that allows reliable acquisition of these goods and services is, from a long term national perspective, a false economy which precludes people from engaging in precisely the activities that will allow them to become taxpayers, as well as contributors across all social, economic, political and cultural dimensions. Further, 'mutual obligation', with its reliance on high volume 'busywork', distracts and depletes the physical, mental and emotional resources of individuals, hindering them from participating in genuine employment and education opportunities and maintaining family and other relationships.¹⁸ The effect of early socio-economic measures responding to COVID-19 compellingly demonstrated the lack of benefit, and the considerable harm, derived from keeping people poor and burdening them with process-oriented policing. First, the COVID-19 Supplement had a dramatic effect in reducing poverty rates, particularly among children.¹⁹ Klein et al, 2021, Davidson et al, 2022, and Naidoo et al, 2022, observed that among people who had been receiving income support before the pandemic measures, the Supplement was used mainly to obtain essential goods and services (including food, medicines, school uniforms and equipment, and utilities), and strategic purchases to improve employability and financial security.²⁰

Klein et al²¹ also explored the effect of suspension of the 'mutual obligation' requirements, which meant that as well as extra money, people had more control over how they spent their time. People used the breathing space to engage in pro-social activities, including upskilling, health

¹⁸ See, eg, Klein et al, 2022.

¹⁹ Davidson et al, 2022, pp 17, 23-25. Noting, however, that the Coronavirus Supplement was calculated without reference to dependent children (see, eg, p 27). The authors note that, 'For the same budget outlay, poverty could have been reduced more if the Supplement was better tailored to the needs of different-sized families' (at p 28). See also Naidoo et al, 2022, p 8.

²⁰ See Klein et al, 2021, at pp 56-58; Naidoo et al, 2022, pp 27, 52.

²¹ Klein et al, 2022.

care for themselves and family, food that is healthy and within date, pay off debt, engage in social and community activities.

Davidson et al, 2022, unsurprisingly concluded that:

[Poverty] can be eliminated by lifting the lowest incomes (including social security payments, paid working hours and minimum wages) to at least half the median level.²²

Accordingly, Relationships Australia supports implementation of Recommendation 2, and the establishment of inquiries along the lines of Recommendations 13 and 14, of this Committee's 2020 Report.

Drivers of poverty - circumstances and positionalities existing in multi-directional relationships with poverty

The following circumstances drive and exacerbate poverty, and can also be a result of, or exacerbated by, poverty (and financial stress that falls short of definitions of poverty):

- intimate partner violence, and abuse and neglect of older people²³
- other domestic and family violence
- family separation
- mental illness
- disability
- homelessness and housing precarity
- ageing
- living with disability
- being an adult caring for a child or other adult, or a young person caring for a child or an adult
- alcohol and other drug addiction
- unemployment, under-employment and precarious employment
- ineligibility for any social support, especially when combined with limits on eligibility to undertake paid work (for example, people living in Australia on Partner Visas, and who have left the relationship because of domestic and family violence), and
- harmful gambling.

The key driver of poverty for Aboriginal and Torres Strait Islander people is colonisation, in all its forms, facets and implications. These include, for example, labour market disadvantage and

²² Davidson et al, 2022, p 29.

²³ See, eg, Naidoo et al, 2022, p 50.

the interplay between labour market disadvantage and dynamics within households and families.²⁴ Research literature observes that

Indigenous people have higher entry rates [into poverty] than non-Indigenous people regardless of the definition of poverty used, while exit rates are generally significantly lower...²⁵

Venn & Hunter (2018) note that the poverty entry risk for Aboriginal and Torres Strait Islander people is 'typically around twice that for non-Indigenous people'.²⁶ They identify factors to explain this, which include:

- more dynamic households, with the 'incidence and effect of changes to household size' contributing more to poverty entry rates than any other factor, with increases to household sizes being linked to higher risks of entry into poverty²⁷
- that incomes for Aboriginal and Torres Strait Islander people are typically lower than for other groups, meaning that they are more vulnerable to be pushed into poverty by a reduction in income, and
- inequalities of opportunities for participation in employment and education, which are generally regarded as being protective against the risk of entry into poverty.

There are significant gaps in research and data about how and why Aboriginal and Torres Strait Islander people experience and escape poverty, as well as the barriers to escape and the mechanisms and preconditions for doing so. For example, the HILDA Survey excludes those living in very remote areas, who are disproportionately Indigenous. Similarly, the ABS Survey of Income and Housing does not collect data in very remote areas or in Indigenous communities. Robust data is needed to better inform measurement of Closing the Gap targets, as well as to ensure that progress on achievement of these targets is sustained. (see Recommendation 6)

Term of Reference (b) the relationship between economic conditions (including fiscal policy, rising inflation and cost of living pressures) and poverty

Housing

Long-term secure affordable housing is another key policy response that is a foundational requirement for people living without a minimally adequate income as a pathway out of poverty.²⁸

Our practitioners increasingly find, across all service streams, that people feel forced to remain in unsafe accommodation, for lack of alternatives.²⁹ Relationships Australia welcomes recent initiatives to increase the accessibility of safe accommodation for people escaping these circumstances, but there is still substantial unmet need, and certain groups continue to face

²⁴ See, eg, Markham & Biddle, 2018; Ross & Mikalauskas, 1996; Venn & Hunter, 2018.

²⁵ Venn & Hunter, 2018, p 31.

²⁶ Venn & Hunter, 2018, p 35.

²⁷ Venn & Hunter, 2018, pp 36, 40.

²⁸ Naidoo et al, 2022, p 58.

²⁹ See also the *Inquiry into homelessness in Australia: Final Report, 2021, Parliament of Australia.*

multiple barriers (for example, family groups which include adolescent males, perpetrators of violence, and people from LGBTIQ+ communities). Relationships Australia is also concerned about the precarious housing situations in which older women can find themselves after, for example, the breakdown of a partner relationship, and following the breakdown of 'assets for care' arrangements.³⁰ Our practitioners have also encountered instances where a perpetrator of intimate partner violence complies with a court order by leaving a residence and moves in with their parents, only to engage in violent behaviour there. Perpetrators of intimate partner violence are often affected by poor mental health, addiction to alcohol or other drugs, or engaging in harmful gambling.³¹ Unless and until these factors are addressed, then the perpetrator may well take violence with them and use violence against their parents.

The co-occurrence of intimate partner violence with other social, economic and health challenges has long been visible in Relationships Australia's practice experiences, including through use by several of our organisations of the Detection of Overall Risk Screen (DOORS).³² From the beginning of the pandemic, our practitioners have reported increases both in the number of co-morbidities and the intensity with which they are being experienced. Despite the end of the most stringent public health measures, we expect the impact on people's health and wellbeing to be felt for several years. Just one example is the complex grief that people who were bereaved during the pandemic may experience around the circumstances of the death of loved ones, especially if key religious, spiritual or cultural rituals and observances were omitted or attenuated.

Some people are trapped in accommodation that is unsafe for other reasons; for example, rental accommodation that is in disrepair to the point of being dangerous, and which lessors refuse to repair. Current market conditions mean that tenants have little or no leverage to insist on even emergency 'make safe' measures. Tenants who suffer injury or illness from such conditions can be faced with limitations on their ability to secure and maintain employment, especially if they occupy positionalities that impose further barriers, including age or disability.

We expect that, in the immediate future, our clients will be increasingly stressed by housing costs. Some may be pushed into poverty by increasing interest rates,³³ combined with the expiry of low fixed rate mortgages and reversion to higher variable rates. In addition, housing stock available for buyers and renters is diminished in certain locations by natural disasters of increasing frequency and intensity (and, connected to natural disasters, financial stress caused by limitations on obtaining insurance for the largest asset that many people will ever own).³⁴

³⁰ See also ALRC Report 131, especially Chapter 6, for discussion about such arrangements, and their association with circumstances of abuse or neglect of older people.

³¹ See, eg, the interim and final reports of the Family Law Council on families with complex needs: <https://www.ag.gov.au/families-and-marriage/family-law-council/family-law-council-published-reports> .

³² See Lee et al, 2021; Wells et al, 2018; McIntosh, 2011.

³³ See, eg, Michael Janda, 'Higher interest rates for struggling borrowers set to compound mortgage woes', <https://www.abc.net.au/news/2023-01-13/higher-interest-rates-for-struggling-borrowers/101845492> [accessed 13 January 2023]

³⁴ See, eg, Moss & Burkett, 2020. According to the website of the National Emergency Management Agency, 2022 saw 46 disasters declared, affecting 316 Local Government Areas, and resulting in 524 disaster support declarations, and Australian Government disaster support payments of \$3.5 billion. See <https://nema.gov.au/#/map> [accessed 13 January 2023].

Some regional areas, which have previously offered lower barriers to entry into home ownership, or affordable rentals, have housing stock standing empty for lengthy periods as owners make it available for more lucrative 'homestays'.

Relationships Australia supports implementation of Recommendations 3 and 4 of the Committee's 2020 Report.

Financial stress and family relationships

Relationships Australia is committed to ensuring that financial circumstances are not a barrier for people seeking our help, by providing universally accessible services. We have always been conscious of the adverse effect that financial stresses can have on family relationships, including as a precipitating factor and a co-occurring factor with intimate partner violence. This experience accords with the research literature. Morgan & Boxall refer to several studies associating economic hardship with intimate partner violence.³⁵ They draw particular attention to the following economic and financial circumstances which, in themselves and in combination with other factors, heighten risks of intimate partner violence:

- changes in economic security
- economic disparity between partners, especially where there are perceived violations of gender norms
- being female and Aboriginal and Torres Strait Islander
- being female and living with a long-term restrictive health condition
- being female and having been pregnant in the last 12 months, and
- being female and living with children.

The effects of financial stress are felt by families in other ways that do not amount to domestic and family violence. Naidoo et al, 2022, reported that participants in a study emerging from the pandemic 'described the experience of chronic stress and conflict in the household related to poverty.'³⁶ Further, public health measures taken in response to COVID-19 meant that previously opportunities and resources to maintain living standards were no longer available:

...COVID-19 resulted in an escalation of needs, including for fundamental provisions such as food and accommodation, which compounded difficulties for people in poverty at a time when many if not most people were also experiencing social isolation, fear, and uncertainty. Some groups were especially vulnerable to longstanding and novel risks of harm.³⁷

Goods and services - general

Cost of living pressures weigh heavily on our clients and our staff. While production, supply and transportation services have largely resumed, domestic events such as natural disasters, and

³⁵ For key findings, see Morgan & Boxall, 2022, especially pp 14-15, 46-52.

³⁶ At p 12.

³⁷ Naidoo et al, 2022, p 49.

overseas events, such as the resurgence of COVID-19 in China and the Russian illegal invasion of Ukraine can be expected to cause ongoing, if intermittent, disruption and uncertainty.

The rising cost of fuel, too, is increasingly a barrier to many activities, including seeking and maintaining paid employment, participating in social, recreational and cultural activities, and providing services. For example, the capacity of social services to maintain and enhance outreach activities in regional areas depends on affordable fuel. In some areas, our practitioners travel hundreds of kilometres to provide services; families are also forced to travel like distances to access services. Fuel costs are not factored into service funding.

Goods and services – poverty, digital exclusion and loneliness

Lily's vignette:

...she's starting to think of relationships, especially with her friends as a luxury, something she wants but does not need.³⁸

Today, digital inclusion is a critical enabler of social inclusion, and can be preventive against loneliness. Poverty is a barrier to digital inclusion. Relationships Australia has expressed its disquiet about digital exclusion in other consultation processes.³⁹

Currently, opportunities for digital inclusion are heavily weighted towards those who can afford access to safe, private, reliable and high speed internet services, and the digital literacy to confidently and securely engage with the online environment. Research indicates that digital exclusion is strongly affected by a range of demographic and other factors which erect barriers to social inclusion more broadly (see, eg, Park, 2017). Thus, digital and social exclusion (which can lead to loneliness) are associated. In Naidoo et al (2020), those most vulnerable to digital exclusion were identified as low income families, families from non-English speaking backgrounds, children and young people who experienced out of home care, and people with disability.⁴⁰

Those experiencing digital exclusion during the pandemic were denied access to measures, resources and respite that mitigated the social and emotional impacts of lockdown for others.⁴¹ This included services that supported online family and social gatherings, and streamed access to entertainment, fitness and spiritual services. Children in digitally excluded (or marginalised) families suffered more profoundly, left behind as school and socialising moved online. It is too early to predict the long-term effects of this exclusion.

³⁸ Naidoo et al, 2022, p 19; see also at p 45 for discussion of poverty and social isolation.

³⁹ See, for example, the 2021 submission from the Relationships Australia National Office to the Australian Communications and Media Authority, available on our website at <https://relationships.org.au/what-we-do/#advocacy> [

⁴⁰ Naidoo et al, 2022, p 56. See also the 2021 Digital Inclusion Index: Thomas et al, 2021.

⁴¹ See eg Naidoo et al, 2022.

In its 2023 summary report against the Aboriginal and Torres Strait Islander Health Performance Framework, the AIHW observed that

The impact of lockdowns was particularly acute for Indigenous Australians who are deeply interconnected with family and community members, and where caring responsibilities may have been disrupted. There were heightened effects on those in, or with connections to, remote communities, where isolation was greater and freedom of movement more restricted; those who cannot access waterways, songlines and country; and those who cannot attend to cultural and sorry business. Research on the impacts of COVID-19 and the associated restrictions on Stolen Generations survivors found they had an increased and heightened sense of isolation and loneliness, significant disconnection from family, community, culture and country, and declines in their mental health and wellbeing (Aboriginal and Torres Strait Islander Healing Foundation 2021).⁴²

Term of Reference (c) the impact of poverty on individuals in relationship to:

- (i) **employment outcomes** – see response to Term of Reference (a)
- (ii) **housing security** – see response to Term of Reference (b). Further, housing insecurity and instability can erect further barriers to avoiding or escaping poverty, by limiting access to and progress in education and training, as well as employment. Housing insecurity and instability can also lead to social isolation and loneliness, with the attendant consequences described previously.
- (iii) **health outcomes** – Relationships Australia supports the implementation of Recommendations 5, 6 and 7 of this Committee’s 2020 Report. The impact of poverty on health outcomes is profound, pervasive, and the subject of extensive research.⁴³ See also the response to Term of Reference (b). Adverse impacts could be mitigated, noting that:
 - a. some recipients of the COVID-19 Supplement reported that it enabled them, for the first time, to seek health care, and obtain medications and treatment, for themselves and family members;⁴⁴ termination of the Supplement has removed that capacity
 - b. the number of people who cannot access GPs will continue to increase as more GPs withdraw from bulk billing, because it is financially unsustainable for them; inability to access good quality primary care in a timely manner is an extremely poor outcome not only for the individuals whose health is affected, but also imposes far higher costs for taxpayers when health issues escalate to needing expensive tertiary care, or residential care including aged care

⁴² AIHW, 2023, p 30.

⁴³ Including, for example, the work of Sir Michael Marmot on the social gradient of health, as well as the extensive literature on financial toxicity in the context of cancer treatment, including the 2014 inquiry conducted by this Committee into out-of-pocket costs in Australian health care, Gordon et al, 2017; McLean et al, 2021.

⁴⁴ See Naidoo et al, 2022.

- c. increasing numbers of people are unable to access so-called 'elective' surgeries,⁴⁵ or to access it in a timely manner,⁴⁶ even when those surgeries would enable people to live healthy lives and participate in our economic, social and cultural life (eg cataract removal, surgery for endometriosis and hip replacements, and dental care); this was an issue before the pandemic, and has been exacerbated by the freezes on elective surgery required in response to the pandemic,⁴⁷ and
- d. there is evidence of association between poverty and loneliness (which itself has a negative effect on health⁴⁸); for example, unaffordable public transport and digital exclusion can hamper creating and maintaining social relationships, such as friendships and membership of groups which engage in social activities, and

- (iv) **education outcomes** – as for health outcomes, there is extensive and well-established international literature linking poverty and educational outcomes; conversely, education is recognised as providing a pathway out of poverty. Relationships Australia supports implementation of Recommendations 9, 10, 23 and 24 of the 2020 Report.

Term of Reference (d) the impacts of poverty amongst different demographics and communities

People experiencing certain circumstances, who occupy particular positionalities, and people who are otherwise marginalised or excluded are especially vulnerable to experiencing poverty. Financial shocks that affect the economy as a whole – such as the COVID-19 pandemic – are likely to have a disproportionate impact on these groups and individuals, both at the time and as a 'long tail' risk to their health, financial position, and family and social relationships. For example, separated parents face the cost of maintaining separate households. This can be a financial shock with enduring impact; evidence over many years indicates that the impact is gendered, with women in particularly perilous situations.⁴⁹ Relationships Australia supports implementation of Recommendation 20 of the 2020 Report.

Older people also face heightened risks of poverty. The Age Pension Age has increased progressively since 1 July 2017.⁵⁰ Yet employment discrimination against older people (and people with disability) persists as an ongoing brake on the economy and on opportunities for people to flourish.⁵¹ Despite well-publicised labour shortages, ageist and ableist attitudes are

⁴⁵ For data on elective surgeries, including activity and waiting lists, see <https://www.aihw.gov.au/reports-data/myhospitals/sectors/elective-surgery> [accessed 13 January 2023]

⁴⁶ That is, they are waiting for a longer period than clinically recommended timeframes.

⁴⁷ AMA, 2023. The AMA Report indicates that while freezes for the pandemic are a causative factor, elective surgery waiting times were clinically unacceptable before the pandemic.

⁴⁸ An extensive research base demonstrates risks, arising from loneliness to health and longevity. See, eg, Heinrich & Gullone, 2006; Holt-Lunstad et al, 2015; Mance, 2018; AIHW, 2019; Valtorta, 2016; Calati et al, 2019; McClelland et al, 2020; Mushtaq, 2014; Hawkey et al, 2020.

⁴⁹ See, for example, Broadway et al, 2022; de Vaus et al, 2007; de Vaus et al 2015; Eastaer et al, 2018; Fehlberg & Millward, 2014; Gray et al, 2010, Smyth & Weston, 2000.

⁵⁰ See <https://www.dss.gov.au/seniors/benefits-payments/age-pension> [accessed 12 January 2023] See also ABS, 2020.

⁵¹ ABS, 2020; ABS 2020-2021.

pervasive.⁵² As a result, older people can fall through a chasm between employment and access to social security payment supports. An obvious response to this issue would be for Australian governments to implement recommendations from the *Willing to Work* report, and to take decisive action against ageism and ableism, including by:

- all governments working with employer groups to address aged and disability discrimination
- the Australian Government ensuring that older people are not at heightened risk of poverty before they are eligible for the Age Pension (see 2020 Report, especially Recommendations 17-19), and
- the Australian Government noting that older persons are one cohort which does not have the benefit of a specialised treaty articulating their rights, and:
 - expressing its support for and commit to working towards the adoption of a United Nations Convention on the Human Rights of Older Persons
 - ensuring the involvement of civil society organisations in the drafting, designing and negotiation of the instrument, particularly organisations that represent older persons and diverse communities of older persons
 - engaging with the Human Rights Council, and the Open-ended Working Group on Ageing and other relevant bodies, to urgently move forward the agenda for drafting and adoption of a new treaty on the human rights of older persons, and
 - supporting the Australian Human Rights Commission's involvement in the discussion concerning a future convention on the rights of the older persons, both at the international and at the domestic level.⁵³

Ageism disvalues, others and segregates the older people of our community.⁵⁴ Ageism has licensed the continued failure, over many years, to implement recommendations for reform emerging from a succession of reviews and inquiries prompted by intermittent exposure of scandalous mistreatment of vulnerable older people.⁵⁵

The human rights of older people in Australia are rendered more precarious by the longstanding refusal of Australia Governments, across party political lines, to support an international covenant on the rights of older people. This does not appear to have a principled basis. Suggestions have been made that older people's rights receive adequate protection through:

- the International Covenant on Civil and Political Rights
- the International Covenant on Economic, Social and Cultural Rights
- the Convention on the Elimination of All Forms of Discrimination against Women
- the Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment

⁵² See AHRC, 2015.

⁵³ See <http://www.rightsofolderpersons.org.au/>

⁵⁴ See Australian Human Rights Commission (2021). What's age got to do with it? A snapshot of ageism across the Australian lifespan, September 2021.

⁵⁵ For an overview of major reviews and inquiries into the Australian aged care system, see Background Paper 8, *A History of Aged Care Reviews*, published by the Royal Commission, October 2019. See also the testimony of Professor R Paterson to the Royal Commission, in which he expressed disappointment about the lack of implementation of recommendations made in the Carnell-Paterson Report.

- the Convention on the Rights of Persons with Disabilities, and
- the *Age Discrimination Act 2004* (Cth).

It is no longer plausible to contend that the rights of older people in Australia receive protection and vindication from these arrangements. They have not stopped the egregious and deplorable human rights violations exposed, for example, during the Royal Commission into Aged Care Quality and Safety.

Relationships Australia acknowledges that in recent years we have seen an increase in awareness and understanding of the scourge of elder abuse in our communities. The December 2021 release of the report by the Australian Institute of Family Studies into the nature and prevalence of elder abuse indicates the nature and prevalence of this issue within the Australian community.⁵⁶

In particular:

- that policy and programme focus must broaden from financial abuse of older persons to recognise, prevent and respond to the other sub-types of abuse: psychological, physical, sexual, and cultural abuse, as well as neglect; the AIFS Report identifies psychological abuse as likely to be the most prevalent form, followed by neglect, and psychological abuse and neglect as the most common concurrent sub-types
- the need for rigorous data collection to build the evidence base necessary to support effective policies and programmes
- that risk factors of experiencing (and perpetrating) abuse or neglect of older people share several features with the co-morbidities that commonly accompany intimate partner violence, and
- that social connection is a protective factor against experiencing or perpetrating abuse or neglect of older people.

Relationships Australia urges the Government to increase resourcing in this area such that the response adequately reflects the prevalence of abuse and neglect within Australia.

We urge the Commonwealth to support an international convention on the rights of older people. The current legislative arrangements at the federal and state/territory levels do not, in our view, provide either an adequate rights-based foundation for laws to prevent, deter, detect and remedy abuse of older people, or even to catalyse a robust conversation about pervasive ageism in our society and its institutions.

Our final observation in this regard is that we consider an international convention on the rights of older people also to be vitally important in publicly valuing those who provide unpaid care and paid services to older people. There is ample evidence demonstrating the links between the well-being of carers and the well-being of those for whom they care; we therefore consider that the caring dyad must be consistently front of mind. This might play out, for example, in

⁵⁶ Qu, L., Kaspiew, R., Carson, R., Roopani, D., De Maio, J., Harvey, J., Horsfall, B. (2021). National Elder Abuse Prevalence Study: Final Report. (Research Report). Melbourne: Australian Institute of Family Studies.

implementing the investment stream, proposed by the Royal Commission, by funding home modifications, assistive technology, respite care and social supports to support the capacity of the carer to stay at home and continue to care for their loved one while maintaining their own physical and mental health and well-being. We note that AIFS identified physical health problems as the most common issue experienced by perpetrators of neglect of older people.

Other cohorts at heightened risk both of poverty and of experiencing circumstances that can induce or entrench poverty include:

- people on low incomes⁵⁷
- people living with disability or restrictive long term health conditions⁵⁸
- carers⁵⁹
- people from culturally and linguistically diverse backgrounds⁶⁰
- people from Aboriginal and Torres Strait Islander communities; Venn & Hunter (2018) note that Aboriginal and Torres Strait Islander people 'generally have higher entry and lower exist rates than non-Indigenous people' and that 'Indigenous poverty is likely to be more persistent than non-Indigenous poverty'⁶¹
- people from LGBTIQ+ communities⁶²
- older people (especially older women)⁶³
- children and young people,⁶⁴ and
- child and adult care leavers.⁶⁵

Each of these cohorts has been the subject of government inquiries and research yielding a suite of policy options which Australian governments could usefully explore, taking into account the desirability of preventing poverty and of early intervention with individuals and families at

⁵⁷ See, eg, Naidoo et al, 2022, p 7.

⁵⁸ See, eg, AIHW, 2022; ACOSS, Rates of poverty among adults with disability, <https://povertyandinequality.acoss.org.au/poverty/rate-of-poverty-among-adults-with-disability/> [accessed 15 January 2023]; WHO & World Bank, 2012; ABS, 2020; ABS 2020-2021.

⁵⁹ See, eg, Hill et al, 2011; Evaluate, 2022; ABS, 2020.

⁶⁰ See, eg, Churchill & Smyth, 2020, where analysis of 12 waves of HILDA data enabled identification of a positive association between ethnic diversity and energy poverty. Relationships Australia has also supported initiatives to enable people in Australia on partner visas, but who are experiencing domestic and family violence, to easily seek spousal maintenance orders under the *Family Law Act 1975* (Cth). This is because people in such situations may be legally precluded from seeking paid employment while also being ineligible for social security payments, leaving them at high risk of poverty and associated co-morbidities.

⁶¹ At p 40. See also AIHW, 2021, and sources cited therein.

⁶² See, eg, Hill et al, 2020; especially pp 25-26.

⁶³ See Naidoo, et al, 2022, p 50, citing Mills et al, 2020 and Porto Valente et al, 2022. For the impact of poverty on thermal comfort (and, as a consequence, potential morbidity and mortality), see eg van Hoof et al, 2017. For the importance of thermal comfort as an enabler of quality of life among older adults, see eg Bennetts et al, 2020; Bills & Soebarto, 2015.

⁶⁴ See, eg, Davidson et al, 2022, p 16, noting that 'The poverty rate among children is much higher [than for adults] at one in six'; Naidoo et al, 2022, pp 49-50. Childhood poverty has an adverse effect on development: see eg Warren, 2017, heightening risk of poverty becoming intergenerational; Klein et al, 2021, p 64.

⁶⁵ See, eg, DSS, 2018, which describes the findings of various Commonwealth Parliamentary inquiries into the experiences of care leavers as children and adults. See also McNamara et al, 2019, which explores barriers to higher education for care leavers, and notes how these barriers can trap care leavers in long-term poverty; Royal Commission into Institutional Responses to Child Sexual Abuse, 2017, Final Report, Vol 3, especially pp 147-172; McNamara, 2015.

heightened risk of experiencing poverty. Relationships Australia supports implementation of Recommendations 2, 9-16, 21-23 and 27 of this Committee's 2020 Report. See also Recommendations 6-9 of this submission.

It is increasingly clear, too, that people with disability face significant challenges accessing mainstream services, and the need for appropriate, tailored and well-resourced services supporting people with disability is obvious. In our service delivery we have recognised that the service requirement extends beyond counselling and includes a more intensive case management and support service, the likes of which has never previously been, and is not otherwise, available.

Following the conclusion of the Royal Commission, funding for all dedicated support services, including those provided by Relationships Australia, will cease.

Without pre-empting any of the findings of the Royal Commission, Relationships Australia we consider it to be of critical importance that services such as those provided by Relationships Australia continue into the future and that this much-needed resource for the disability community does not disappear. Relationships Australia is gravely concerned about the impact for this vulnerable community if such services are allowed to cease, with no meaningful replacement.

Term of Reference (e) the relationship between income support payments and poverty

Income support payments should be sufficient to enable recipients and their families to avoid being forced into – and, because of the self-reinforcing characteristics of poverty, remaining trapped in – poverty. Davidson et al, 2022, and Naidoo et al, 2022, examined the effects of the COVID-19 Supplement, and found that it had been sufficient to enable recipients to pay for goods and services that enable fuller participation in community life. Relationships Australia supports ACOSS' 'Raise the Rate for Good' campaign (see <https://raisetherate.org.au/about/>), and implementation of Recommendations 2, 9-12, 19, 21, 23, and 25-27 of the 2020 Report.

Term of Reference (f) mechanisms to address and reduce poverty

This submission makes several recommendations to address and reduce poverty, acknowledging the ongoing salience of the recommendations made in this Committee's 2020 Report. Of central importance is the imperative to prevent poverty in the first place, and to provide universally accessible support services to mitigate, as early as possible, the co-morbidities of poverty traversed in this submission, which heighten risks of entrenched and intergenerational poverty.

As noted previously in this submission, the causes, characteristics and consequences of poverty are known and experienced in distinct ways for Aboriginal and Torres Strait Islander people, with root causes being colonisation and its implications. Accordingly, the key mechanism to alleviate poverty among Aboriginal and Torres Strait Islander people is to recognise this at all tiers of government and across all policy and programme domains. Enduring achievement of the Closing the Gap targets is critical.

There are at least three political prerequisites for effective prevention and early intervention. First, Australian governments must acknowledge that keeping social security payments below the poverty line and tolerating the increasing poverty gap has been perceived to be politically expedient, even attractive. This has the supposed merit of placating those who are disposed to stigmatise, isolate and punish groups occupying positionalities which are considered as deserving of opprobrium. There remain widespread assumptions that people will happily 'bludge' if:

- there are no incentives to work
- they are not harshly surveilled and policed, and
- there is no punishment, in the forms of financial penalty and shaming, for not working or for failing to comply with mutual obligation requirements.⁶⁶

The validity of these assumptions is contradicted by research into links between employment, volunteering, self-worth, and health and wellbeing.⁶⁷ Further, a presumption of criminality ignores the corrosive effect that shame, as a consequence of stigma, has on individuals' relationships with themselves and others, potentially also leading to disengagement and loneliness.⁶⁸ Such assumptions ignore the structural social, economic and other barriers to participation in paid work, and treats that participation simplistically as a matter of individual agency. Klein et al (2021) observed that those receiving the COVID-19 Supplement who had previously been living below the poverty line, and been subject to mutual obligation requirements, were one group whose physical and mental health actually improved while they received the Supplement, because they were able to:

- buy healthy food
- seek timely medical attention and act on medical advice
- pay for utilities
- participate in social/cultural activities (for themselves and their children)
- take time to engage in unpaid work, including care-giving of children and adults needing care – work that is vital to our society and our economy, and
- make strategic decisions to set themselves and their families up for greater financial security in the future.

When the Supplement was tapered and then terminated, those benefits were lost – to individuals, their families and broader society.

Research consistently confirms that keeping social security payments below the poverty line, and subjecting recipients to degrading 'tick a box' compliance activities neither encourages nor equips people to engage in formal employment.⁶⁹ Instead, these policy settings erect often insurmountable barriers on the pathway to secure employment.⁷⁰

⁶⁶ As Minister for Social Services, the Hon Scott Morrison MP was explicit in expressing his belief that it is necessary for the social security system to have a 'strong welfare cop on the beat': interview by Graham Richardson, Sky News, 21 January 2015 <https://formerministers.dss.gov.au/15996/sky-news-richo/> [accessed 19 January 2023]

⁶⁷ See, eg, Wood et al, 2019; Hergenrather et al, 2015 (focusing on employment trajectories and mental health)

⁶⁸ See, eg, Hawkey, Zheng and Song, 2020.

⁶⁹ See, eg, Klein et al, 2021, pp 61-62, and the population-level studies noted in section 4.1.

⁷⁰ As acknowledged by this Committee in its 2020 report on the adequacy of Newstart and related payments.

Second, governments must acknowledge and work to ameliorate the cumulative effect of broader social and environmental barriers to enjoyment of human rights and full participation. Our social, economic, legal and political environments can erect barriers or create opportunities for full enjoyment of human rights and full participation in our social, cultural, economic and political life. To thrive and flourish, Australia must do what it can to lower these barriers and promote such opportunities.

Third, Australian governments should transform the conceptual basis of our social support infrastructure, moving away from stigmatising and punitive first principles in favour of a prism of human rights and dignity. This would lead to service provision that is respectful of users and their agency, that is supportive not punitive, and which frees up capacity to plan for future and build on it.

Conclusion

Australia does not stigmatise people because that is the only way to get them to contribute to society. Nor do we do it because we do not have the money or other resources to keep people out of poverty. We do it because we make policy choices that are consciously intended to punish and shame people, if not into work, then certainly out of seeking help. The reality that this is a deliberate policy choice was demonstrated during the early phases of the pandemic, when

...the usual characterisations of welfare recipients as morally deficient and lazy were less visible.⁷¹

Relationships Australia suggests that this is the political reality driving inadequate social security and degrading compliance measures, rather than lack of money to provide individuals and families with adequate support to avoid poverty, or the need for fair and proportionate measures to prevent fraud on the taxpayer.

Thank you for the opportunity to make this submission. Should the Committee wish for further information, please do not hesitate to contact me at ntebbey@relationships.org.au, or our National Policy Officer, Dr Susan Cochrane, at scochrane@relationships.org.au. Alternatively, you can contact us by telephone at 02 6162 9300.

Kind regards



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⁷¹ Naidoo et al, 2022, 28, citing Burchardt, 2020, Shearer et al, 2021.

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