Perspectives on the ongoing impact of compulsory income management in the Northern Territory

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Perspectives on the ongoing impact of compulsory income management in the Northern Territory

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Abstract

Since 2007, income support recipients in the Northern Territory (NT) have been subjected to compulsory income management (CIM), a form of welfare conditionality which continues, despite the withdrawal of CIM from other locations in Australia and research that identifies negligible benefits. Implemented with the goal of improving social well-being and health outcomes, CIM quarantines a proportion of income support payments which cannot be used to purchase alcohol, gambling, pornography and in some cases tobacco, to direct payments to priority needs of recipients and encourage socially responsible behaviour. This article presents the perspectives of welfare sector stakeholders in the NT on the ongoing impact of CIM on income support recipients and their communities. It draws on semi-structured interviews with 26 participants with expertise across non-government service delivery, government, legal and advocacy sectors. The findings detail that CIM is considered ineffective in reducing social harms such as substance misuse, can contribute to situations of family violence, and exacerbates challenges for recipients living in regional and remote areas. It also highlights the poor compatibility of community income management in regional and remote contexts, its top-down design, and views that CIM is a form of social control and disempowerment.

KEYWORDS

BasicsCard, Cashless Debit Card, CIM, conditional welfare, Northern Territory

1 | INTRODUCTION

The establishment of Compulsory income management (CIM) in 2007 in the Northern Territory (NT) represented a major change in the approach to social policy administration and poverty governance in Australia. CIM comprising the quarantining of between 50 and 90 per cent of a participant's income support payment for use on food, rent and other essential items with the objective of reducing social harms, has now become a long-standing part of welfare recipients' lives in the NT. Yet, research into its impact and effectiveness have produced mixed results, with questions raised over whether CIM meets its objectives or even exacerbates existing inequalities, leading to poorer outcomes for welfare recipients and their communities. In 2021 another form of CIM, the Cashless Debit Card was rolled out alongside existing CIM arrangements (the BasicsCard) in the NT, before subsequently being withdrawn in 2022 following a change in federal government. To date, the BasicsCard remains in place in the NT alongside the new Enhanced Income Management programme which launched in March 2023 and includes a new Visa debit card called a "SmartCard" (Rishworth & Shorten, 2023). The government introduced the Social Security (Administration) Amendment (Income Management Reform) Bill 2023 which seeks to "expand access to the enhanced income management regime; enable people subject to the existing income management regime to move to the enhanced income management regime, thereby allowing them access to the BasicsCard bank account and superior Smartcard; and direct new entrants to the enhanced income management regime, ensuring no new participant is issued the BasicsCard" (Rishworth, 2023).

The context of CIM in the NT is distinct from other jurisdictions in Australia with higher levels of Aboriginal and Torres Strait Islander welfare recipients. Additionally, many welfare recipients live in regional and remote locations which creates unique cultural, geographical, social and financial challenges for individuals and communities. As such, this research explores with welfare sector stakeholders the ongoing policy impact of CIM in the NT, including perceptions and impacts of the long-standing BasicsCard and the more recently implemented Cashless Debit Card.

2 | WELFARE CONDITIONALITY AND CIM

In Australia, a range of conditional welfare measures have been implemented aimed at creating behavioural change in welfare recipients, with the conditional design of these welfare policies implying that recipients access welfare due to their dysfunctional behaviour and poor choices rather than due to structural causes of poverty and disadvantage (Klein, 2016; Mendes, Roche, Conway, & Castan, 2023; Mendes, Roche, Marston, et al., 2023). CIM, whereby a welfare recipient's cash payment is quarantined to a restricted account, is arguably the most paternalistic form of conditional welfare (Roche et al., 2021). Its objective is to encourage socially responsible behaviour and reduce social harm through the quarantining of income support payments that cannot be spent on excluded items in order to reduce harmful substance use and gambling, while enhancing financial management and promoting child welfare (Brough, 2007b; Mendes et al., 2021). To date, independent research and evaluation (Greenacre et al., 2023; Klein & Razi, 2018; Marston et al., 2020), and government-funded evaluations (Mavromaras et al., 2021; Orima., 2017), have found limited evidence of CIM reducing social harms in its various sites across Australia. Critics of CIM have argued that it is paternalistic, ignorant of social contexts and dismissive of the complexity of the lives of welfare recipients subjected to it, including their socioeconomic reality and the impacts of colonisation (Klein, 2016).

2.1 | Compulsory income management in the Northern Territory

CIM in the NT is shaped by unique factors, including a proportionally larger Aboriginal and Torres Strait Islander population, the presence of rural and remote communities, including Aboriginal communities and homelands, and the legal status of the NT as a territory that ultimately falls under federal government authority. The NT is culturally distinct, with 26.3 per cent of its population identifying as Aboriginal or Torres Strait Islander, with over half using a First Nations language at home (Australian Bureau of Statistics [ABS], 2022). Accounting for 17.5 per cent of Australia's land area with less than 1 per cent of the total population (ABS, 2023b; Geoscience Australia, 2023), the NT's population experiences high rates of remote living, although different geographic areas are diverse in their population composition and remoteness. The NT is regarded as having very high rates of alcohol-related harm compared with other jurisdictions in Australia and even globally (Chikritzhs & Weeramanthri, 2010; Smith et al., 2019), with alcohol consumption per capita around twice the national average (ACIC, 2023). Women in the NT experience the highest rates of violence in the country, with an estimated 46 per cent having experienced violence since the age of 15 (ABS, 2023a). These factors within the NT highlight the importance of evaluating welfare policy approaches specifically within this context.

The relationship between CIM and the NT is also distinct within Australia as Aboriginal communities and town camps in the NT were first subjected to CIM in Australia in 2007 as part of the NT Emergency Response (NTER) launched by the Liberal-National Coalition federal government. The response included a range of interventions, including alcohol restrictions, increased policing, compulsory health checks for children, enforcing school attendance and the introduction of CIM for all welfare recipients in Aboriginal communities and town camps (Brough, 2007a, 2007b). However, the NTER was imposed on a top-down basis without meaningful community consultation and is considered by many to be a prejudiced and heavy-handed government action (Bray, 2020). The objectives of CIM in this context were to improve outcomes for individuals, families and communities by ensuring welfare payments were being used to meet basic needs, such as housing, food and education, while controlling the amount of money spent on alcohol and illicit drugs, thus limiting their negative effects (Bray, 2020). Under the CIM measure of the NTER, 50 per cent of welfare recipient's payments were quarantined, with recipients required to meet with a Centrelink[1] worker to agree how their benefit would be allocated to "best meet the needs of the household" (FaHCSIA, 2008). Quarantined funds would then be directly paid to suppliers or credited to local stores for food and other basic goods. Table 1 shows the majority of welfare recipients remain subject to CIM via the BasicsCard scheme.

Following the initial implementation period, in September 2008, a debit-style card (the BasicsCard) was introduced which participants could use themselves to spend the quarantined portion of their payment at approved merchants (Doyle et al., 2022). Funds on the BasicsCard are

TABLE 1 Welfare recipients on income management in the Northern Territory.

No. of Northern Territory welfare recipients on income management programmes by type			
Type of income management	**Prior to CDC policy discontinuation announcement (as of 5 August 2022)**	**Prior to cessation of CDC (as of 3 March 2023)**	**At 29 September 2023**
BasicsCard (compulsory)	20,622	20,550[a]	20,255[a]
Cashless Debit Card	4398	3793	withdrawn
BasicsCard (Voluntary)	1964	1948	1855
Enhanced IM/SmartCard	–	–	4330

Source: DSS (2022, 2023a).

[a]Data is ±5 due to DSS data rounding protocols.

only able to be spent at stores that have signed agreements with the card provider, specifically excluding sales of alcohol, tobacco, pornography, gambling, gift cards and vouchers (Macklin, 2008). The BasicsCard continues to be the main method of managing quarantined funds today by the majority of welfare recipients on CIM in the NT (Department of Social Services [DSS], 2023a).

2.2 | Expansion of CIM in the Northern Territory

Following its introduction in the NT in specific Aboriginal communities, CIM was expanded under both Labor and Liberal-National coalition federal governments. This included the initiative of New Income Management in 2010, which included CIM programmes for specific groups of welfare recipients in the NT beyond Aboriginal communities; these programmes targeted disengaged youth, long-term welfare recipients, recipients referred by child protection authorities and those identified as vulnerable young people (Taylor et al., 2016). CIM was also extended to several other sites in Australia via additional policy measures, including through Place Based Income Management in 2012 (Deloitte, 2015) and through the Cashless Debit Card, which was established at its first trial sites across Australia in 2016 (Bielefeld, 2021b).

The Cashless Debit Card was similar to the BasicsCard in that it also quarantined a portion of the recipient's welfare payment, and the card was unable to be used to withdraw cash or be spent on alcohol or gambling. Differences include that the amount quarantined may be raised under the Cashless Debit Card (up to 80 per cent of the total payment), and that the Cashless Debit Card was able to be used more widely, including for online shopping and tobacco (Fletcher, 2019). A further key difference was that while the BasicsCard is administered by the government through Services Australia, a third-party company, Indue Limited, administered the Cashless Debit Card (Australian National Audit Office, 2018), which required recipients to liaise with Indue rather than Services Australia for support. The Cashless Debit Card was discontinued by the newly elected Labor-led federal government in September 2022 (Rishworth et al., 2022), and a new programme called enhanced income management (EIM), which includes a SmartCard commenced in March 2023. With this change, most Cashless Debit Card participants outside the NT could choose to opt-out of CIM altogether; however, those in the NT were not provided with this choice and were directly transitioned onto EIM. The new EIM programme combines elements of both the BasicsCard and CDC. In keeping with the BasicsCard, EIM excludes the purchasing of tobacco or pornography. It also offers the improved functionality of the CDC, including the ability to be used for online shopping and bill payments. Welfare recipients on EIM in the NT have the option of their SmartCard being provided by either Services Australia or the Traditional Credit Union (TCU). As of September 2023, new CIM participants will be on EIM, with existing BasicsCard participants also able to opt-in to EIM from this time (DSS, 2023b).

3 | RESEARCH ON CIM IN THE NORTHERN TERRITORY

Some research has examined the specific impacts and outcomes of CIM in the NT. Early evaluations suggested some success in creating positive change in spending habits and financial management (AIHW, 2010; FaHCSIA, 2011). However, these evaluations have been heavily criticised for their methodologies, which relied heavily on recipient self-reporting and did not consider other programmes which may impact outcomes (Bray et al., 2015; Hunt, 2020). In their evaluation commissioned by the Department of Social Services, Bray et al. (2014) found no evidence that CIM was impacting changes in recipient spending, financial well-being or general well-being within the community in the NT. In interviews with "intermediaries", made up of Commonwealth and NT Government staff, financial support services and some

agencies providing social services, Bray et al. (2014) found that views on the effectiveness of income management were mixed. Findings identified that for many people on income management, it was unneeded and made their lives more difficult, and that the social harms that income management was attempting to address, such as the misuse of alcohol and drugs, were continuing. Later expanding on this work, Bray (2020) explored community outcomes that CIM seeks to impact, including infant mortality rates, school attendance, alcohol consumption and violent crime/behaviour, with Bray finding that CIM "has failed to achieve any systematic community level improvements in outcomes for the Indigenous population of the Northern Territory" (p. 2).

Recent research has suggested that CIM may have in fact had negative effects on health outcomes for some participants. Evaluating child health outcomes during the NTER via analysis of maternal health data, Doyle et al.'s (2022) findings identified that CIM reduced infant birth weights. The study suggests that this was likely influenced by the administrative conditions that CIM imposed, including that recipients initially meet with a Centrelink worker to access and allocate quarantined funds, as well as the act of suspending payments entirely when administrative hurdles were not met, typically for not contacting Centrelink within a 13-week period after being transferred to CIM, with one-third of all recipients having at least one payment suspended (Doyle et al., 2022). These mechanisms reduced income and overall consumption likely leading to income shock for some welfare recipients, with negative effects on individual and family well-being (Doyle et al., 2022). Our study builds on this existing research into CIM in the NT through the in-depth accounts and perspectives of key stakeholders on the impact of CIM on welfare recipients and communities, and their insights into the extent in which CIM has achieved its policy objectives.

4 | METHODS

The research question guiding this study is: "What are the perspectives of welfare sector stakeholders regarding the ongoing impacts of CIM in the Northern Territory?". A specific focus on the perspectives of participants who have direct professional experiences and insights into CIM was taken in order to gain an in-depth and contextualised understanding of the impact of CIM from a policy and organisational perspective, typical of qualitative research in the field (Flynn & McDermott, 2016; Levitt et al., 2018; Roche et al., 2022). The study included 26 participants drawn from 14 non-government organisations and one NT government agency. Participants were Aboriginal or non-Indigenous experts in social welfare programmes or policy, or highly experienced in providing direct support to welfare recipients and holding an in-depth understanding of the impact and role of CIM in the lives of welfare recipients.

Of the non-government organisations represented by participants, nine were non-government welfare service providers, three were legal services, while others included a peak body and a research institute. Five organisations were Aboriginal community-controlled organisations with a total of 10 participants drawn from these organisations. It is important to note that some Aboriginal participants occupied dual positions of social welfare programme or policy expert as well as a leadership role within their communities. The professional positions of participants included government and non-government programme director or manager, chief executive officer, policy officer, solicitor, child and family welfare practitioner, outreach worker, case manager, financial counsellor, financial capability worker and researcher. Of the participants, six participants identified as Aboriginal, while 19 were in regional or remote areas of the NT while seven participants were based in Darwin.

4.1 | Recruitment and interviews

The study was conducted between September 2021 and October 2022. Participants were recruited initially by a purposive sampling strategy. Potential participants were identified via submissions to the *Social Security* (*Administration*) *Amendment* (*Income Management to Cashless Debit Card Transition*) *Bill 2019* Senate Standing Committee on Community Affairs inquiry into the Cashless Debit Card, allowing researchers to target stakeholders with known direct knowledge and experience of CIM in the NT. Further participants were then recruited via direct contact with non-government and government organisations with known service delivery to welfare recipients and provided with details of the study. Additionally, a snowball sampling approach was utilised with participants to recruit from their relevant networks.

All interviews were conducted either face-to-face, via telephone or online using video conferencing software, were digitally recorded, and lasted between 30 and 90 min. A semi-structured interview guide was utilised with a set of pre-conceived topic areas and questions. Their overall objective was to explore the interviewee's understandings and experiences in relation to CIM in the NT. Participants were first asked questions about their professional and organisational background and any broader context or involvement with CIM in the NT. Questions were then asked seeking participant's perceptions and understandings of the long-term role and impact of CIM in the NT. Topics included are as follows: the impact of CIM on welfare recipients and any observed benefits or problems; understandings of individual and community perceptions of CIM in the NT; the extent that CIM has met its policy objectives in the NT in improving child and family welfare and reducing social harms across domains of health and well-being, crime, substance use and family violence; observations of the consultation and implementation of CIM policies in the NT; perceptions of the implications of CIM for Aboriginal welfare recipients and communities; and ideas around practice and policy alternatives to CIM. While the interview guide was semi-structured by design, participants were also encouraged to provide additional views and ideas about CIM in the NT. For example, at the end of interviews, participants were asked whether they would like to make any other comments or expand on anything already discussed. The majority of interviews were conducted individually, although in some cases group interviews were conducted for some participants from the same organisation. Multiple researchers attended most interviews. All interviews were audio recorded and subsequently transcribed with the participant's consent.

4.2 | Ethics

This research was reviewed and approved by the Monash University Human Research Ethics Committee. Participants received detailed information about the study to ensure informed consent was achieved and they understood their right to decline to participate and to withdraw at any time. Emphasis was placed on participant's choices around their participation, particularly with reference to the time and medium of the interview. Participation was anonymous with any identifying information removed from transcripts.

4.3 | Data analysis

All interview audios were recorded and professionally transcribed. Utilising qualitative data analysis software program NVivo, analysis took an inductive and reflexive data-driven approach (Braun & Clarke, 2021), allowing codes to develop throughout analysis without the

use of a predetermined coding framework. A reflexive approach to analysis was taken, first involving familiarisation with the data via reading through transcripts and then generating initial themes which were then reviewed via in-depth discussions among the research team (Braun & Clarke, 2021). Subsequently, themes were further developed and refined, generated based on participants' accounts and perspectives to create in-depth themes that correspond to the study's overarching research question.

4.4 | Study limitations

Given its broad sample and qualitative approach, this study does not offer any causal explanations of the direct impact of CIM on the lives of welfare recipients, rather it aims to apprehend the complexity of CIM policies. It is important to note that while a broad sample of participants was achieved for this study, it is likely that not all views on CIM in the NT are represented in the data. While expert Aboriginal voices were sought from professionals across the social services sector, Aboriginal community leaders independent of this sector were not included in this study. We acknowledge this is a limitation of the study given the important insights community leaders would provide on the impact of CIM. Additionally, this study did not engage CIM participants and as such, the direct impact and lived experience of CIM is not reflected in its findings, which is an important area of future research. While a number of participants were either located in, or had professional insights into CIM in remote communities, the majority were located in regional centres of Darwin, Alice Springs and Katherine. This may mean that some understandings of the impact of CIM in remote Aboriginal communities is not reflected in the data. Finally, as the data were collected across 2021 and 2022, the study does not reflect the changes to CIM introduced in 2023.

5 | FINDINGS

5.1 | Impact of CIM on social harms

Discussing the impact of CIM, participants viewed it as largely ineffective in reducing social harms with participants highlighting the incapacity of CIM to prevent or reduce levels of family violence and substance abuse. Participants highlighted the ways that recipients "workaround" CIM's conditions, the lack of additional services available to support behaviour change and the failure of CIM to address structural causes of poverty and addiction. Participants also emphasised the top-down nature of CIM design and implementation and its subsequent ineffectiveness.

5.1.1 | Alcohol and substance use

CIM aims to reduce alcohol and other drug (AOD) use by reducing the amount of cash available to welfare recipients to purchase these substances. Participants questioned the effectiveness of this approach and shared various ways that welfare recipients bypass CIM, including trading their BasicsCard directly for overpriced prohibited items, and overpaying taxi drivers using the BasicsCard and receiving some cash in return. Welfare recipients can also purchase accepted items and trade these, with one participant citing an example of drug dealers accepting mobile phone recharge cards as currency. The BasicsCard can be turned into currency in a range of ways as one participant explained:

> people become creative and then they develop loopholes […] People would gamble with the BasicsCard and people would […] know what their balance is on there and then they put that in and then they get so many card hands dealt to them based on the credit that's inside there and if someone wins it, then they can take it and then they spend it.
>
> (P26—Aboriginal, NT government)

Using these loopholes to support substance dependence sometimes comes at an exorbitant price, exacerbating financial stress and poverty for individuals and their families:

> somebody who wants alcohol will ask somebody else to buy a bottle of spirits, and the person will hand over their entire BasicsCard in exchange for that bottle of grog […] anybody who's not on the BasicsCard would've spent maybe $60 or so on a bottle of alcohol, but this person on the BasicsCard might be spending their entire fortnightly pay on this bottle of alcohol. And so it contributes to that financial insecurity and that kind of vulnerability to exploitation.
>
> (P21—Solicitor, ACCO)

Participants expressed various concerns over current approaches to address AOD dependence and associated harms. Participants with recent experience working directly with CIM users expressed that there was community concern over the recent lessening of alcohol restrictions, while others disputed the value of programmes like CIM which employ a punitive approach rather than addressing the underlying causes of harm:

> for people that have substance abuse issues, stopping someone from being able to use a card to purchase alcohol inevitably actually doesn't solve the problem. People will find another way to buy alcohol because it's an addiction and because it's not something that is in a person's control. I think that it's just a paternalistic way of basically making people suffer further than what is necessary.
>
> (P5—Solicitor ACCO, regional)

The lack of support services available to support positive behaviour change around substance use across the NT was raised by participants, with appropriate programmes with availability viewed as necessary for sustainable improvement:

> [The only] drug and alcohol program [is run by] a religious organisation […] instead of, like, "You have an addiction and medication could probably help this. And some significant counselling to look at those underlying traumas that have led you to substance abuse" […] It's just all about, "You should not smoke marijuana" and "You should go to church on Sundays", so there's really no support systems. And when people identify that they want to go […] that waiting list is huge. And by then they're like, "Nah, I don't want to do that anymore." So, their response time to access genuine services is huge. And it's a huge barrier to [managing] that alcohol and substance abuse.
>
> (P12—Family violence program, remote)

5.1.2 | Family violence

One of the objectives of CIM is to reduce family violence; however, participants expressed concern over CIM's impact on violence against women in family contexts, noting that CIM does

not address the causes of violence and provides perpetrators with additional opportunities to further control their victims. The role of CIM in increasing financial stress was raised by participants, with participants explaining that the relationship between intersecting disadvantages can increase the risk of family violence in these circumstances:

> When you've got less access to cash, that creates financial stress and we know that financial stress is a key risk factor for violence. In most experience or perpetration of violence, we find that overwhelmingly associated with […] homelessness or overcrowding, alcohol or substance misuse, or financial stress […] When there's less cash and you do have someone, who does have problematic drinking behaviours, for example, that can also trigger violence, because they're less able to access that [alcohol] and simultaneously we don't have the services to support those people.
>
> (P2—Researcher, regional)

Participants also shared ways in which they have seen the BasicsCard weaponised by men who use violence, increasing their level of power and control over their victims:

> I work with quite a few clients who are in relationships with incredibly abusive men, and who very frequently sexually assault them. I've had a couple of clients say to me, 'Well, he hadn't raped me yet because he always said not unless I said yes [to giving them the BasicsCard]. […] it's happened to quite a few clients where it's this, like sexually coercive behaviour that's involved, holding the BasicsCard ransom.
>
> (P13—Aboriginal, family violence program, remote)

Participants described coercion and control relating to the BasicsCard as highly prevalent in the families they were working with, with this abuse impacting food security and leading to faltering growth among children in some cases. Having reduced access to cash also creates barriers for those experiencing violence seeking to leave their situation to protect themselves or their children:

> partners that are perpetrating financial abuse will steal the Basics Card on payday and kind of coerce the PIN number from their partner and then spend everything. And then send it back. And so it really leaves the victim-survivor with no money […] it really limits their ability to hide money from their partners […] they can't have secret bank accounts, secret cards. It's kind of all on the Basics Card, and it's all very vulnerable to being pinched by their partner.
>
> (P21—Solicitor, ACCO)

CIM was described by participants as unable to prevent or reduce family violence, with participants voicing a need for additional services and alternative approaches that address the structural causes of violence. Participants strongly argued that CIM had very little role in changing social harms:

> [CIM is] so selective, so esoteric and detached, and so insisting that it's right and that it's the only way of seeing things. [CIM has] not helped with alcohol issues or violence in communities, hasn't helped with lateral violence, hasn't lifted people out of economic disadvantage. It hasn't increased jobs, hasn't increased economic participation. There's no improvement in the ladder of opportunity as a result of any of this.
>
> (P4—Solicitor, ACCO)

5.1.3 | Top-down nature of CIM design and implementation

Participants explained that insufficient community consultation had taken place prior to the implementation of both the BasicsCard and the more recent CDC rollout, which resulted in limited consideration of how CIM would impact welfare recipients and their communities as well as poor policy design. They argued that CIM policies were "top-down" in their design and imposed on communities, resulting in limited effort to work with communities to identify genuine and shared solutions and approaches to address social harms among welfare recipients:

> I just would reiterate that I think that there needs to be more consultation with the people with cultural authority, with the elders, with the actual community organisations like Julalikari [Council Aboriginal Organisation], like Larrakia Nation, like the Tiwi mob that where you actually get to talk to them to find out – and to find what they want, because they will have different views of what will work and what won't work, depending on where they – who they are and where their country is and how their laws and their kinship systems have continued. All of those kinds of things, how their ceremonies have remained strong. All of them will have a different view. There is no one shoe fits all to the situation. And if the government wants to get it right, they need to take the right approach to the consultations.
>
> (P23—Aboriginal, NT government)

5.2 | Impact of CIM in regional and remote areas

A key theme identified among participants was the challenges that CIM could create for welfare recipients residing in regional and remote areas. These could include issues relating to a lack of financial infrastructure that accepts the use of CIM, the reduction in consumer choice forcing higher payments for goods and services, and poor or nonexistent network coverage limiting participants' communication with CIM and welfare administration agencies. CIM was viewed by participants as exacerbating the existing cost of living pressures, particularly in remote areas where consumer choice is limited and travel is expensive. Participants, despite residing in various areas in the NT, expressed similar views on challenges associated with travel for those on CIM, including high fuel costs and expensive taxis (including the deliberate overcharging of BasicsCard users). Participants connected the challenges around travel with welfare recipients in remote communities having a lack of choice when purchasing basic goods, noting that recipients can feel forced to purchase from local stores despite having to pay much higher prices, with participants explaining that "food, in some places, is three times the rate it is in Alice Springs" (P3—Housing programme coordinator, ACCO, regional). One participant noted that some welfare recipients were interested in transferring to the Cashless Debit Card from the BasicsCard as that would enable them to have groceries delivered for $10 rather than spending $110 on taxis to complete their grocery shopping. In other instances, those in remote communities may not have a local store where they can purchase groceries:

> …if their card is rejected from one store, there isn't another store to go to […] if the store is selling things which might be blocked and therefore that card can't be registered by the BasicsCard, you can't go to the shop down the road because there isn't a shop down the road.
>
> (P5—Solicitor, ACCO, regional)

These issues led participants to argue that CIM and its restrictions are incongruent with people's expenses in remote communities with one participant expressing:

> the understanding of how money is spent in remote context in remote communities, how the stores operate and travel distance, petrol, was not taken into consideration when we looked at income management. And the apportionment of 'the money can be put on schoolbooks and this money can be put on food and this money -' It did not have a real-world application by real-world remote dwellers who have lived there a long period of time, who spend money very differently to the eastern seaboard or southern states or the regional and urban contexts.
>
> (P25—NT Government)

In remote locations, welfare recipients also face additional challenges in communicating with Services Australia and Indue as well as accessing government online platforms. While there appears to be an expectation that welfare recipients will have access to communication technology (smartphone or computer), internet access and network coverage, participants explained this is not realistic. They explained how remote network coverage issues are not taken into account and how this can create additional challenges and stress for welfare recipients attempting to report their income to Services Australia, for example:

> We went to report early because the next day we would be driving. There's no phone reception out there, so we couldn't do it the next day. We were told repeatedly by Centrelink that it wasn't possible to report early, even though this man has been permanently disabled from polio… [We said] we can't report back tomorrow. We're in remote locations. We've got no phone service. [They said] Well, then you're just going to be cut off from your payment.
>
> (P2—Researcher, regional)

5.3 | Administrative burden for individuals and organisations

Participants explained how CIM places a high administrative burden on welfare recipients and in turn, community organisations, due to Services Australia and Indue lacking presence in many communities, and with systems that are difficult to navigate. Administrative burden can be described as requiring individuals to complete onerous additional costs or actions in order to access or use bureaucratic systems; its impact can include reductions in people's dignity, autonomy, time and resources (Bielefeld, 2021a). Participants identified additional administrative burdens for those welfare recipients on CIM, as CIM and its technology does not account for cultural or geographical diversity, particularly where Aboriginal and Torres Strait Islanders and remote living are concerned. In cases where individuals experienced challenges managing and administering their welfare payments, many sought assistance from non-government service providers such as family violence and homelessness services to access, manage and liaise with Indue and Services Australia.

There are also limitations on welfare recipients attending Services Australia in person in some areas. In addition to the expensive nature of travel in remote locations, Services Australia offices in some locations have minimal or inconsistent opening hours:

> You can call the number or you can look on Google and it says it's open from nine till 12 three weekdays per week, but it's a total crapshoot as to whether anyone's going to be there. And I think that level of ambiguity spreads […] and then people just don't feel like they can ever rock up.
>
> (P7—Solicitor, ACCO, regional)

A lack of support for cultural needs within CIM administrative systems was apparent with Services Australia frequently unable to cater to the language needs of welfare recipients for whom many English may be a second or third language. Language stigma was also raised as a reason why some individuals do not apply for income support, with their level of English leading them to "feel shame to go and face the Centrelink agent" (P15—Aboriginal, ACCO). With the implementation of the Cashless Debit Card, this issue extended to contacting Indue;

> the idea that you have to call up this company, that's not necessarily informed or culturally responsive or sensitive or anything like that, that's really hard.
>
> (P2—Researcher, regional)

In addition, participants shared examples of how CIM imposes an administrative burden on welfare recipients which then creates additional demands on community organisations. Participants expressed that "All of the responsibility of education and support around using the BasicsCard has been put on individual services […] instead of being with Services Australia" (P12—Family violence programme manager, remote). One example was when over 200 recipients' BasicsCards were destroyed during a period of community unrest in a remote community and a non-government organisation organised access to replacement cards for those affected despite it being outside their remit:

> It was not really the job of any NGO here to be the middle person for delivering cards, or getting people to Centrelink, or doing all of that, but that was the only option to get people their BasicsCards.
>
> (P13—Aboriginal, family violence practitioner, remote)

5.4 | The problematic dominance of CIM as a logic of welfare provision in the Northern Territory

Participants expressed frustration that CIM continues as a dominant logic of social welfare in the NT despite the limited evidence that underpins CIM across Australia, consistent opposition to CIM by welfare rights groups and advocates, and recent legislative reform which has abolished the CDC. Participants commented that welfare recipients and the organisations that support them felt stripped of agency and control and highlighted how their organisations, and at times clients, viewed CIM as something "that they're forced to go along with" (P11—Financial counsellor, regional) and "in place for so long it's just something that they're trying to deal with" (P4—Solicitor, ACCO). The entrenched relationship between welfare systems and approaches to financial arrangements may have created a dependence and conceptualisation of CIM as status quo for many recipients:

> [For many welfare recipients] they haven't known anything else and there's not been any structured or progressive way… out of income management. It's that whole cycle of, we've reinforced this way of working for [over a] decade, and then we want to turn around and blame the victim as to why they have welfare dependency.
>
> (P24—NT Government)

Aboriginal participants explained that the individualistic and punitive logic of CIM is incongruent with the skills, capacities and needs of Aboriginal welfare recipients and that the maintenance of CIM as an ongoing logic of welfare provision continues to be problematic:

> Other options are better than CIM because it is punitive. And I think when our mob are given the ability and the authority, whatever that might look like, to affect change, they do. […] When it comes to people that are on welfare, I'm certain that people know how to make the right decision and I know that my people are very clever at managing their other obligations. […] We have a technique and the skill within us that knows how to navigate our lives….
>
> (P26—Aboriginal, NT Government)

5.5 | CIM as a method of social control

Links were made by participants between CIM and social control, with CIM perceived as a social policy attempting to regulate the social and economic lives of welfare recipients in the NT. Participants expressed views around the intent underlying CIM policy, including disempowering and limiting the self-determination of Aboriginal and Torres Strait Islander peoples specifically and those reliant on welfare more generally. The perceived intent of the government to control Aboriginal and Torres Strait Islander communities was shared by participants and connected to Australia's history of colonisation:

> …the control over the people has been disgusting and taking away their self-determination and their self-empowerment. Similar to having to wear dog tags of the past to move out of specific areas or to even be able to marry […] it reminds me very much of when I was little, and my parents and my grandparents were working, and the government kept the bulk of their money, and it went to trust funds that all of a sudden disappeared. And Aboriginal people were and are in poverty because of that. Because the government can't repay the money. They don't even know what happened to that money. And it's got – it is no different, in my mind, to what they did in the past, and it's just a continuation of colonisation and control and disempowerment.
>
> (P23—Aboriginal, NT Government)

CIM's continuation in the NT despite a lack of evidence that it was achieving its objectives was also questioned, with one participant stating:

> The lack of evidence in general and the evaluations that have been done have been completely undercooked […] income management is another form of the measures that have been taken against vulnerable people to impose government's view or government's agenda that's continued to disempower, and then we turn around and question, why are people still used to this form of welfare management.
>
> (P24—NT Government)

6 | DISCUSSION

The findings draw attention to the limitations of CIM in achieving its policy objectives in the NT. They detail CIM negligible impact on behaviour change around social harms and suggest that CIM can exacerbate issues such as family violence, where CIM is weaponised by men who

use violence in situations of family violence. The findings outline the limitations of CIM in addressing AOD harms and supporting child well-being while noting the inadequate or unavailable services to support welfare recipients across these domains. The limitations of CIM are also explained by the top-down nature of its design and implementation that, importantly, has not involved adequate policy consultation with Aboriginal leaders and communities. The restrictions imposed by CIM, combined with this absence of co-design and support, create a situation where the needs of individuals and communities are not responded to, with the outcome instead being a removal of cash, control and autonomy from welfare recipients in the NT, including a large proportion of Aboriginal and Torres Strait Islander people.

The findings also identify poor compatibility of CIM functionality with the provision of welfare payments to recipients in remote and regional locations in the NT. Consistent with previous research which explored the significant administrative burden imposed on recipients by the CDC (Bielefeld, 2021a, 2021b), participants provided examples of circumstances where welfare recipients were unable to access payments or communicate effectively with Services Australia or Indue to assist their management of welfare payments. It was identified that insufficient government service availability and accessibility in regional and remote locations led to an administrative burden for non-government service providers. These organisations were, despite core roles and funding in relation to homelessness and family violence, supporting welfare recipients in communities in lieu of available and adequate support from Services Australia and Indue to maintain welfare support.

Participants emphasised the continuing impact of colonisation and objectives of social control within Australia's welfare system, characterised by the use of conditionalities and overemphasis on individual responsibilities. Our findings show at a broader level how CIM in the NT draws attention away from structural factors that influence the lives of welfare recipients rather than promoting their social rights due to an individualistic, obstructive and punitive income support system. These findings align with research conducted in Ceduna, where the CIM was experienced as punitive, stigmatising and creating further challenges for individuals already experiencing significant hardship (Vincent, 2019). Participants explained how this logic of welfare provision was incongruent with the skills, capacities and needs of Aboriginal welfare recipients. The findings also outline the limited contextual and socio-cultural relevance of CIM to the lives of many welfare recipients in the NT, its limited capacity to achieve its stated goals, and how in many cases it makes achieving welfare support more difficult. This highlights the inadequacies of CIM administration, infrastructure and support across the NT which negatively impacts the social rights and dignity of welfare recipients and indicates ongoing misunderstanding of the contexts of welfare recipient's lives.

Participants also provided insights into the disempowering elements of CIM in the NT and its role in limiting self-determination for Aboriginal and Torres Strait Islander peoples in welfare policy decision making, with both current and historical approaches to CIM considered to be disempowering and controlling. Significant and intersecting structural factors to consider here include the legacy of problematic and traumatic government interventions and historical traumas that have impacted the lives of Aboriginal people and their communities (Newton, 2019). These are important to consider given the extensive evidence that highlights major health and socioeconomic inequities that Aboriginal and Torres Strait Islander people experience compared with non-Indigenous Australians (Calma et al., 2017).

7 | CONCLUSION

We argue that this study contributes a range of new and important details into the impact of CIM in the NT including insights into the large extent in which CIM is integrated into the everyday lives of welfare recipients without in any way addressing the structural barriers

to well-being, and that CIM policies in the NT continue, from 2007 onward, to be applied without adequate consultation and implementation. Details of the problematic relationship between CIM and family violence, the wide-ranging functionality and compatibility issues of CIM in regional and remote areas of the NT, and the administrative burden for NGOs in supporting welfare recipients in these contexts to navigate income support provide further evidence of the deep issues around this social policy approach.

Despite recent policy changes to CIM involving the abandonment of the Cashless Debit Card across trial sites (including the NT), there has been little substantive change to CIM in the NT other than BasicsCard users given the option to transfer to the new "Enhanced Income Management" scheme with some enhanced features. This leaves a problematic continuation of CIM in the NT and its key issues left unaddressed, including the capacity of Services Australia and Indue to administer CIM adequately, particularly in regional and remote NT; the detrimental impact of CIMs individualistic and punitive characteristics; the reduction in autonomy, control and self-determination for welfare recipients and their communities; and the negligible capacity of conditionalities in achieving policy outcomes. Notably, submissions from Aboriginal community-controlled organisations in the NT to recent Senate inquiries detail that CIM policy processes to date have involved top-down and paternalistic approaches without appropriate consultation or shared decision making, are of limited benefit, and should be redirected to positive, rather than punitive, social policy initiatives or made to be voluntary (Mendes, Roche, Conway, & Castan, 2023; Mendes, Roche, Marston, et al., 2023). In response, a policy reform agenda involving genuine community consultation is desperately needed to better understand the complexities of CIM in the NT that holds principles of community-based policy development at its heart.

AUTHOR CONTRIBUTIONS

Steven Roche: Conceptualization; investigation; writing – original draft; methodology; writing – review and editing; project administration. **Natalie Taylor-Zach:** Writing – original draft; writing – review and editing; formal analysis; methodology. **Robert Taylor:** Investigation; conceptualization; writing – original draft; writing – review and editing; methodology; formal analysis. **Philip Mendes:** Conceptualization; investigation; writing – original draft; methodology; writing – review and editing; supervision.

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CONFLICT OF INTEREST STATEMENT

The authors have no conflict of interest to declare.

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ENDNOTE

[1] Centrelink was the Australian government service agency responsible for administering welfare payments and was renamed as Services Australia in 2019.

REFERENCES

ABS. (2022) *Northern Territory: Aboriginal and Torres Strait Islander population summary*, Australian Government. Available from: https://www.abs.gov.au/articles/northern-territory-aboriginal-and-torres-strait-islander-population-summary [Accessed 23rd February 2023]

ABS. (2023a) *Personal Safety*. Australia: Australian Government. Available from: https://www.abs.gov.au/statistics/people/crime-and-justice/personal-safety-australia/2021-22 [Accessed 28th April 2023]

ABS. (2023b) *National, state and territory population*. Available from: https://www.abs.gov.au/statistics/people/population/national-state-and-territory-population/sep-2022 [Accessed 28th April 2023]

ACIC. (2023) *National Wastewater Drug Monitoring Program*. Canberra: Australian Criminal Intelligence Commission. Available from: https://www.acic.gov.au/publications/national-wastewater-drug-monitoring-program-reports [Accessed 4th May 2023]

AIHW. (2010) *Evaluation of Income Management in the Northern Territory*, Canberra, Commonwealth of Australia.

ANAO. (2018) *The Implementation and Performance of the Cashless Debit Card Trial*. Australian National Audit Office: Canberra. Available from: https://www.anao.gov.au/sites/default/files/Auditor-General_Report_2018-2019_1.pdf Accessed 3rd May 2023

Bielefeld, S. (2021a) Administrative burden and the Cashless Debit Card: Stripping time, autonomy, and dignity from social security recipients. *Australian Journal of Public Administration*, 80(4), 891–911.

Bielefeld, S. (2021b) Cashless welfare transfers and Australia's First Nations: redemptive or repressive violence? *Griffith Law Review*, 30(4), 597–620.

Braun, V. & Clarke, V. (2021) Can I use TA? Should I use TA? Should I not use TA? Comparing reflexive thematic analysis and other pattern-based qualitative analytic approaches. *Counselling and Psychotherapy Research*, 21(1), 37–47.

Bray, J.R. (2020) *Measuring the social impact of income management in the Northern Territory*: *An updated analysis*, *CAEPR Working Paper 136*, Centre for Aboriginal and Economic Policy Research, Australian National University. https://doi.org/10.25911/5ed0e50bd56dc

Bray, J.R., Gray, M., Hand, K. & Katz, I. (2014) *Evaluating New Income Management in the Northern Territory: Summary report*. UNSW: Social Policy Research Centre.

Bray, J.R., Gray, M., Hand, K. & Katz, I. (2015) Compulsory Income Management in the Northern Territory – evaluating its impact. *Australian Journal of Social Issues*, 50(4), 373–396.

Brough, M. (2007a) *National emergency response to protect Aboriginal children in the Northern Territory*, Media release, 21 June 2007, Minister for Families, Community Services and Indigenous Affairs, Canberra. Available from: https://formerministers.dss.gov.au/3581/emergency_21june07/ [Accessed 3rd May 2023]

Brough, M. (2007b) *Northern Territory National Emergency Response Bill 2007 – Second reading speech*, 7 August 2007, Minister for Families, Community Services and Indigenous Affairs, Canberra. Available from: https://formerministers.dss.gov.au/2929/northern-territory-national-emergency-response-bill-2007-second-reading-speech/ [Accessed 3rd May 2023]

Calma, T., Dudgeon, P. & Bray, A. (2017) Aboriginal and Torres Strait Islander social and emotional wellbeing and mental health. *Australian Psychologist*, 52(4), 255–260.

Chikritzhs, T. & Weeramanthri, S. (2010) The swinging pendulum of alcohol policy in the Northern Territory. *Anaesthesia and Intensive Care*, 49(1), 8–11.

Deloitte. (2015) *Consolidated Place Based Income Management Evaluation Report 2012–2015*, Sydney. Available from: https://www.dss.gov.au/sites/default/files/documents/11_2015/deloitte_access_economics_consolidated_evaluation_report_201115.pdf [Accessed 3rd May 2023]

Doyle, M.A., Schurer, S. & Silburn, S. (2022) Unintended consequences of welfare reform: Evidence from birthweight of aboriginal children in Australia. *Journal of Health Economics*, 84, 102618.

DSS. (2022) *Australian Government Cashless Debit Card Program*. Canberra: Australian Government. Available from: https://data.gov.au/data/dataset/australian-government-cashless-debit-card-program [Accessed 3rd May 2023]

DSS. (2023a) *Australian Government Income Management Program*. Canberra: Australian Government. Available from: https://data.gov.au/data/dataset/australian-government-income-management-program [Accessed 6th December 2023]

DSS. (2023b) *Enhanced Income Management*, Australian Government. Available from: https://www.dss.gov.au/families-and-children/programmes-services/welfare-conditionality/enhanced-income-management-overview [Accessed 6th December 2023]

FaHCSIA. (2008) *Northern Territory Emergency Response – One Year On*. Canberra: FaHCSIA. Available from: https://www.dss.gov.au/sites/default/files/documents/05_2012/nter_review.pdf [Accessed 3rd May 2023]

FaHCSIA. (2011) *Northern Territory Emergency Response Evaluation Report 2011*. Canberra: FaHCSIA. Available from: https://www.dss.gov.au/sites/default/files/documents/05_2012/nter_taskforce_report.pdf [Accessed 3rd May 2023]

Fletcher, P. (2019) *Morrison Government extends successful Cashless Debit Card*, Media release, 25 March, Minister for Families and Social Services, Canberra. Available from: https://parlinfo.aph.gov.au/parlInfo/download/media/pressrel/6579549/upload_binary/6579549.pdf;fileType=application%2Fpdf#search=%22media/pressrel/6579549%22 [Accessed 3rd May 2023]

Flynn, C. & McDermott, F. (2016) *Doing research in social work and social care: The journey from student to practitioner researcher*, 1st edition. London: SAGE.

Geoscience Australia. (2023) *Area of Australia – States and Territories*, Australian Government. Available from: https://www.ga.gov.au/scientific-topics/national-location-information/dimensions/area-of-australia-states-and-territories [Accessed 4th May 2023]

Greenacre, L., Akbar, S., Brimblecombe, J. & McMahon, E. (2023) Income management of government payments on welfare: the Australian Cashless Debit Card. *Australian Social Work*, 76(1), 5–18.

Hunt, J. (2020) The uses and abuses of evaluation: the Cashless Debit Card story. *Social Alternatives*, 39(1), 20–27.

Klein, E. (2016) Neoliberal subjectivities and the behavioural focus on income management. *Australian Journal of Social Issues*, 51(4), 503–523.

Klein, E. & Razi, S. (2018) Contemporary tools of dispossession: The Cashless Debit Card trial in the East Kimberley. *Journal of Australian Political Economy*, 82, 84–106.

Levitt, H.M., Bamberg, M., Creswell, J.W., Frost, D.M., Josselson, R. & Suárez-Orozco, C. (2018) Journal article reporting standards for qualitative primary, qualitative meta-analytic, and mixed methods research in psychology: The APA Publications and Communications Board task force report. *American Psychologist*, 73(1), 26–46.

Macklin, J. (2008) *Government unveils the Income Management BasicsCard*, Media Release, 22 July, Minister for Families, Community Services and Indigenous Affairs. Available from: https://formerministers.dss.gov.au/14983/government-unveils-the-income-management-basicscard/ [Accessed 28th April 2023]

Marston, G., Mendes, P., Bielefeld, S., Peterie, M., Staines, Z. & Roche, S. (2020) *Hidden costs: An independent study into income management in Australia*. The University of Queensland: Brisbane, Australia.

Mavromaras, K., Moskos, M., Mahuteau, S. & Isherwood, I. (2021) *Evaluation of the Cashless Debit Card in Ceduna, East Kimberley and the Goldfields region: consolidated report*, Future of Employment and Skills Research Centre, University of Adelaide. Available from: https://www.dss.gov.au/sites/default/files/documents/03_2023/fac_evaluation-cdc-ceduna-east-kimberley-and-goldfields-region-consolidated-report_012021.pdf

Mendes, P., Roche, S., Conway, L. & Castan, L. (2023) Co-design or top-down welfare conditionality? An analysis of the impact of Aboriginal and Torres Strait Islander submissions to six parliamentary inquiries into the Cashless Debit Card. *Australian Journal of Public Administration*, 82(2), 167–193.

Mendes, P., Roche, S., Marston, G., Bielefeld, S., Peterie, M., Staines, Z. et al. (2021) Is conditional welfare an effective means for reducing alcohol and drug abuse? An exploration of compulsory income management across four Australian trial sites. *Australian Journal of Political Science*, 56(2), 153–170.

Mendes, P., Roche, S., Marston, G., Peterie, M., Staines, Z. & Humpage, L. (2023) The social harms outweigh the benefits: A study of compulsory income management in greater Shepparton and Playford. *Australian Social Work*, 76(1), 19–33.

Newton, B.J. (2019) Understanding child neglect in Aboriginal families and communities in the context of trauma. *Child & Family Social Work*, 24, 218–226. Available from: https://doi.org/10.1111/cfs.12606

Orima. (2017) *Cashless Debit Card trial evaluation: Final evaluation report*, Department of Social Services. Available from: https://www.dss.gov.au/sites/default/files/documents/10_2018/cashless-debit-card-trial-final-evaluation-report_2.pdf

Rishworth, A. (2023) Speech to House of Representatives, Hansard, Social Security (Administration) Amendment (Income Management Reform) Bill 2023 Second Reading, 9 March. 18–19.

Rishworth, A. & Shorten, B. (2023) *Enhanced Income Management to provide financial choice*, Media Release, 10 February, Minister for Social Services and Minister for Government Services. Available from: https://ministers.dss.gov.au/media-releases/10241 [Accessed 28th April 2023]

Rishworth, A., Shorten, B. & Elliot, J. (2022) *Empowering communities with the abolition of the cashless debit card program*, Media release, 24 September, Ministers for the Department of Social Services. Available from: https://ministers.dss.gov.au/media-releases/9151 [Accessed 21st February 2023]

Roche, S., Mendes, P., Marston, G., Bielefeld, S., Peterie, M., Staines, Z. et al. (2022) Examining the consequences of welfare conditionality: A case study of compulsory income management in the regional community of Ceduna. *Australia. Social Policy and Society*, 21(3), 369–384.

Roche, S., Mendes, P., Marston, G., Peterie, M., Bielefeld, S., Staines, Z. et al. (2021) How effective is conditional welfare support for enhancing child wellbeing? An examination of compulsory income management (welfare payment quarantining) in Australia. *Children and Youth Services Review*, 131, 106254.

Smith, J., Whetton, S. & d'Abbs, P. (2019) *The social and economic costs and harms of alcohol consumption in the Northern Territory*, Darwin, Menzies School of Health Research.

Taylor, D., Gray, M. & Stanton, D. (2016) New conditionality in Australian social security policy. *Australian Journal of Social Issues*, 51(1), 3–26.

Vincent, E. (2019) *Lived Experiences of the Cashless Debit Card Trial*, Ceduna, South Australia, Working Paper 129/2019. Centre for Aboriginal Economic Policy Research, Australian National University, Canberra.

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