CHAPTER 3

Welfare in the South: In 20 Years and Now

Abstract  This chapter contains the results of the interviews we conducted in Australia about the future of welfare state. We briefly describe the Australian welfare system and present, in descending order of frequency, the elements of welfare mentioned by the Australian respondents. Again, healthcare was mentioned most often, followed by income support and aged care (as care for elderly is called in Australia). The chapter ends by comparing Australian and Canadian responses: While the main issues mentioned were similar, less attention was paid to education, and almost none to basic income.

Keywords  Australia • activation-for-work • National Disability Insurance Scheme • healthcare • income support • aged care • housing • education • social problems

The Australian welfare state stands firmly in our consciousness as a symbol of common-sense benevolence, practical economics and consensus politics. (Watts 1980: 175)

Has it remained so 40 years later?
The Australian study was the second in this three-country, trans disciplinary research program. As in the Canadian study, the purpose was to collect information from a small set of Australian citizens on how Australia’s welfare state should look and actually will look 20 years from now, and to probe whether or not their answers would have been different ten years earlier.

A total of 16 extensive interviews were conducted in Australia in November–December 2017. The interviewees were one woman and one man from the age groups: 20–30, 30–40, 40–50, 50–60, 60–70, and 70–80. Additionally, two municipal administrators and two municipal politicians representing opposite parties were interviewed.¹

The questions asked in the interviews followed the pattern of those asked in the Canadian study:

1. If you could decide, how would the welfare state in Australia be organized 20 years from now? Please understand the term welfare literally: what should be done so that all or most Australian citizens fared well? What should be done, who should do it, and who should pay for it?²

2. I/We asked you how the welfare state should look 20 years from now. My/our next question is: How do you think the welfare state will actually look 20 years from now?

3. Had I/we asked you the same questions ten years ago, would you have given me/us the same answers?³

Each interview lasted 20–40 minutes and was subsequently transcribed. The names of the interviewees used in this text are fictitious and are inspired by popular baby names in Australia in 2017. Not all the interviewees wished to give their correct age, other than within the decade, and we accommodated their wish,⁴ and presented the interviewees in Canada and Sweden in the same way.

¹ The interviews were conducted by Rolf Solli, Peter Demediuk, and Brodie Lamont.
² Also, in Australia, “welfare” is often understood as “dole”.
³ Again, in the case of the first age group (20–30), the question had to be modified by adding “if you thought about such things at the time”.
⁴ Here is one possible explanation, given in a context of an interview: “I think it is a bit unfortunate that people have to tell you how old they are (...) because there [are] a lot of people who are discriminating without meaning to” (Amelia, 50+).
The Australian Welfare System in Brief

Australia’s welfare system is a complex mix of services, payments, and government and non-government providers. The system is a lot like the Force in the Star Wars franchise; as suggested in the McLure Review of Social Welfare (DSS 2015), it is pervasive and powerful, and has a light side and a dark side.

Government spending in Australia as a proportion of the GDP is relatively low; at 36 percent it rates 27th out of the advanced OECD countries. Social expenditure is the biggest among these expenses, however, as it comprises just under 20 percent of the GDP. Australia has kept the cost of its social support system below the costs of some other advanced OECD countries through robust, needs-based assessments of welfare recipients and a means-tested approach that makes exclusion for wealth attached to assets outside the family home (DSS 2015).

With a population of around 24.6 million (compared to Canada’s 36.6 million), Australia has seen welfare spending increase by an average of 2.6 percent a year in recent times to over 137 billion AUD (84.4 billion EUR), with 68 percent going to cash payments such as age and disability pensions, 26 percent to welfare services, and 6 percent to unemployment benefits (AIHW 2015).

In 2017, the 5.1 percent unemployment rate in Australia was below the OECD average of 8.1 percent, yet youth unemployment remained nearly three times higher than that for people over 25. Although Australia has the fourth highest median income in the OECD, poverty rates at 13 percent are slightly higher than the OECD average of 11 percent. However, welfare benefits are relatively effective at lifting people above the poverty line (OECD 2016).

Government in Australia consists of three levels: federal, state or territory, and local. The Federal Government is the main revenue raiser through taxation and is the direct funder and administrator of major welfare tranches. These are aged pensions, unemployment benefits, disability support (such as the National Disability Insurance Scheme, NDIS), and the Medicare universal healthcare payment system, which offers free public hospital care and subsidized or no-cost local doctor care to all. The Federal Government largely funds the hospital, aged care, public housing, and education systems, but passes responsibility for the design and running of these to the state (or territory) governments. Unlike in Sweden, local governments in Australia have a relatively restricted role often
referred to as “roads, rates, & rubbish”. The fact that individual state governments act as a postbox for federal welfare-related money and have significant autonomy in deciding how this money is applied, means that the way welfare is produced can depend on where one lives. For example, on the health front: Safe (supervised) injecting rooms for drug users are only available in two of the seven states and territories, assisted dying (euthanasia) is legal and is supported in only one state (Victoria), and abortion is essentially illegal in the largest state (New South Wales). Similarly, the supply of public housing and the criteria to qualify for access to same varies markedly across Australia.

The McLure Review (DSS 2015) cautions that substantial demands for increases in social expenditure can be expected in the future as the population ages and lives longer—particularly in relation to the provision of health services, age-related income support payments, and aged care. Indeed, the aging of the population is a main trend in the context of Australia’s welfare, with 3.5 million (or 15 percent of the population) aged over 65 in 2014, compared to an estimated 8.4 million (or 21 percent of the population) in 2054. Although the proportion of people with a disability has held steady, it is very significant at around one in five, or 20 percent of the population (AIHW 2015). The ability of governments to fund such demands faces obstacles because of an uncertain world economic outlook and fluctuating tax revenues flowing from the highly volatile commodity sector, where prices are at the mercy of many factors, including trade tensions with China and Brexit uncertainties. These cost and revenue challenges mean there are huge long-term pressures that require continual action to ensure that the social welfare system is well targeted, fiscally sustainable, and provides value for money.

One view put forward in the McLure Review (DSS 2015), and echoed in the Federal Budget of 2017 (DSS 2017), is that there is an urgent need for reform to social welfare as changes to the system over time have led to unintended complexities, inconsistencies, and incoherencies. Certain changes have made the system more wasteful and costly to administer than it ought to be, and have created disincentives for some people to work. Complexity abounds, as there are currently around 75 income support and supplementary payment types, resulting in a system that is difficult for recipients to understand and navigate—especially for those with mental health or other debilitating conditions—and difficult for public officials to administer. Existing financial-means testing arrangements, based on income or assets, add to this complexity and result in a system that is
confusing for income support recipients. This complexity leaves recipients unsure about the potential rewards from work and, as such, demotivates them and undermines community confidence in the fairness and utility of the social welfare system.

The Australian welfare system is a product of changing political priorities and ad hoc policy responses, and as a result has become a patchwork of policies and procedures that lacks coherence and is inequitable. To quote an example of this hotchpotch: Those seeking work may fall into one of three income support schemes, each of which is governed by different payment amounts, and differing indexation or qualification measures. As a consequence, people with similar basic living costs and similar capacities to work may receive very different levels of financial support and have different participation requirements.

As of 2017, when the interviews were conducted, the government’s view was that the system is out of step with community expectations and labor market realities, and that long-term income support dependence ought to be reduced through intervention strategies that support and transition people who are able bodied to work and become self-reliant. It has been argued that a new and less complex social support system is needed to improve employment and social outcomes, and a variety of mechanisms are being introduced that range from raising the retirement age, to introducing a new, more coherent (but controversial) set of mutual obligation requirements for job seekers (such as cumulative demerit-point-based penalties for not applying for jobs or failing random drug tests), and for parents who receive working age income support. Also, a cashless debit card has been introduced for payments to welfare recipients deemed to be vulnerable or at risk, which limits what items they can purchase to “desirable” things such as rent, food, health and the like. While the government has moderated its explicit rhetoric of supporting “lifters” (those purportedly adding value to society) but discouraging “leaners” (those purportedly being propped up by society), it has continued to pursue a number of arguably draconian or stigmatizing proposals for welfare recipients—despite past “failures to launch” caused by a lack of political capital. Such proposals included raising the age at which one can receive unemployment benefits, creating a waiting period before unemployed young people can receive benefits, and widening the categories subjected to mandatory drug testing and payment via restricted debit cards.

In Australia, there is a significant preoccupation with the concept of “activation for work” in social welfare policy and its instruments (Whiteford
The objective of an activation policy is to increase the work-search efforts of working-age people who are receiving social security payments. The rationale is based on the idea that unemployment is primarily an issue of deficient labor supply, rather than insufficient demand, thus, the greater a person’s efforts in actually seeking work, the greater the likelihood of finding employment. Specific tactics of activation via the social welfare system include strict requirements for people on unemployment payments to look for work actively (as measured by job applications submitted per fortnight), penalties for failing to satisfy the “work test”, and a “work-for-the-dole scheme” according to which some people receiving unemployment payments are required to work 15 hours a week to remain eligible for benefits.

An emblematic innovation in the welfare system was the National Disability Insurance Scheme (NDIS), which represents the new way of providing support for Australians with disability, for their families, and for others hired or volunteering to provide care. The NDIS is expected to provide about 460,000 Australians, who are under the age of 65 and have a permanent and significant disability, with the reasonable and necessary support they need to live an ordinary life. The NDIS takes a lifetime approach, investing early in people with disability to improve their outcomes later in life, and is designed to give people peace of mind that if their child or loved one is born with or acquires a permanent and significant disability, they will get the support they need—including programs to build skills and capability so the disabled can participate in the community and employment.

The NDIS has been designed to help people with disabilities gain access to mainstream services and supports (like physicians or teachers), through the health and education systems, as well as to access public housing and the justice and aged-care systems. It should also facilitate access to community services and supports, such as sports clubs, community groups, libraries, or charities. The NDIS has been also charged with facilitating the maintenance of informal support arrangements, like help people get from their family and friends. This is the type of support that people don’t pay for, but which is usually part of most people’s lives. The NDIS is designed so that people with disabilities receive reasonable funded supports that are related to their disability and are necessary for them to live an ordinary life and achieve their goals.

Unlike other welfare supports, assistance from the NDIS is not subject to financial-means testing, based on income or assets, and has no impact
on income supports, such as the Disability Support Pension and Carer Allowance. The ideal is that people with disabilities can choose the supports that suit them. The NDIS is being rolled out progressively, and interest groups, such as Every Australian Counts, have been established to pressure politicians and administrators to make sure the initiative is fully funded, delivered as promised, and is the best it can be. In 2017, the government proposed to fund the program—which the Productivity Commission has concluded would cover over 400,000 Australians at an annual cost of about 22 billion AUD—via an additional tax on income earners (Sloan 2017).

People volunteering their time and expertise can help alleviate social welfare issues and government dependencies. Australians have a tradition of volunteering in many areas of community life such as education, sport, safety and emergency services, and welfare services—as exemplified by in excess of six million people doing some voluntary work for the Australian Institute of Health and Welfare each year (AIHW 2015). In addition, informal carers of people with disabilities or the aged could reduce the load on government welfare payments and services. In 2012, about 2.7 million Australians were informal carers, providing help, support or supervision to family members, friends, or neighbors with a range of physical and mental health conditions and disabilities. Informal care can include personal care (such as showering and support with eating), in-home supervision, transport, and help with shopping and medical needs. Most carers (71 percent) lived with the person receiving care. The person responsible for the majority of informal caring is called the primary carer, and nearly two-thirds (65 percent) of primary carers found it hard to meet everyday living costs because of their caring role (AIHW 2015). “Teething problems” are to be expected in the roll-out of any major welfare reform (Palmer 2017), but early experiences of recipients indicate that as benefits are tied to the acceptance by the government of an approved plan submitted for each individual, it is the ability of the client or their agents to shape and drive that plan that determines welfare outcomes. Additionally, the plan hinges on things like varying levels of comprehension, education, articulateness, and insistence and persistence of recipients and their supporters.

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5 A plan detailing needs such as carer or cleaner hiring, mobility devices, or installation of infrastructure to keep one at home.
Especially reliant on government payments is Australia’s Indigenous population. For 50 percent of this segment of the population aged 18–64, government payments are the main source of income, versus 16 percent for non-Indigenous Australians (AIHW 2015). Indigenous Australians are the least well-off sub-population in terms of health status and life expectancy. Although some statistics continue to improve slowly, there is wide acknowledgment that the rate of improvement must accelerate—but the political rhetoric has typically and historically not been matched by action and outcomes (Russell 2016). For example, in the introduction to the Prime Minister’s 2016 report on Closing the Gap on Indigenous disadvantage, the then incoming Prime Minister, Malcolm Turnbull stated “[b]ut it is not until Aboriginal and Torres Strait Islander people have the same opportunities for health, education, and employment that we can truly say we are a country of equal opportunity”. Yet, in contrast to such grand words, the following federal budget did not list Indigenous disadvantage as a priority issue (Russell 2016). Indeed, the 2017 Closing the Gap Report acknowledged that improvements have not met the majority of the outcomes set by the Council of Australian Governments.

For both Indigenous and non-Indigenous Australians, a lack of affordable housing—either through rental or ownership—is an ever-increasing impediment to social welfare. This problem is exacerbated by high levels of migration, purchases of property by foreign absentee landlords, and limited expenditure on public housing by state governments. Two surveys of affordability and housing (Troy and Martin 2017), give a dire picture for low-income households wanting to rent a house in capital cities and in many regional areas. When low-income households have to over-spend on housing, they are under “housing stress”, whereby they start to go without or reduce other necessities that are good for the body and soul—such as meals, health care, and outings. Housing stress is increasingly impacting on moderate income earners as well. Low-income families priced out of capital cities and major regional centers may find more affordable housing in more isolated areas where homes might be affordable, but that is not where the jobs and better education, health, and other support services are located.

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6 https://www.niaa.gov.au/sites/default/files/reports/closing-the-gap-2016/introduction.html, accessed 2019-11-05.
7 https://www.niaa.gov.au/sites/default/files/reports/closing-the-gap-2017/index.html, accessed 2019-11-05.
In *Star Wars* Yoda opined “Do or do not”, indicating that if one is not fully committed one will fail. While a good number of previous Prime Ministers and Treasurers have been rather explicit in stating their view that too many people have been “bouncing on the welfare safety net for too long”, perhaps one reason that governments in Australia have had a patchy record in efficiently and effectively refreshing the welfare system is that many of the official reviews undertaken have been vague and are not strategically formulated. As a consequence, there have only been a few occasions where reviews have been followed by comprehensive welfare reforms. Most of the changes to welfare programs have occurred on an incremental and ad-hoc basis, a situation that has magnified complexity and inconsistencies in the system (Regan 2014). Yoda would not be pleased.

**Elements of Welfare**

What was understood as welfare by the Australian interviewees? In what follows, we present them in order of frequency of mention—from the most often to the least often mentioned element of welfare.

*Healthcare (10 Persons)*

Most interviewees mentioned healthcare, and some even opted for free medical care and free dental care in the future. Five persons mentioned Medicare, one of them suggesting that its growing costs should be covered by higher taxes for the rich (a solution mentioned many a time in various contexts).

> We know that Australia is one of the best supporters of the public health system in the world, and yet there’s such an issue these days with the private health insurances. It seems to me that if you are completely reliant on the public purse, in many ways you are better off than someone that is subsidizing on their own the healthcare. (Ava, 40+)

Six persons were convinced that what is truly important is prevention, rather than building new big hospitals:

> It is easy to measure buildings, but you cannot measure how many people are not going to go into the buildings, because you are giving them the tools to be able to *not* go into those buildings. And we all know that
preventative measures are better... you know, “a stich in time saves nine”.  
(Chloe, 50+)

This means teaching people how to live a healthy life, and addressing communities rather than individuals, for example, teaching health literacy to immigrants (Lucas, 40+). Ella (70+) emphasized the need of teaching young people how to live healthy lives. According to Chloe (50+), there is a need for local educational programs “outside the square, like the Healthy Together Council program has been”. That requires long-term thinking from the politicians (Isla, 30+).

Another problem that needs tackling is mental health and disabilities, especially of Indigenous people. Now the costs are much too high.

Two issues that were mentioned equally often were income support and aged care.

**Income Support (8 Persons)**

Mia (60+) counted “food on the table and clean clothes to wear” as one of the three basic needs. Federal government should stand for it, but donations and volunteers can help. Amelia (50+) thought that the unemployed should commit to “re-learning stuff if they need to”, or doing volunteer work, or “whatever it takes to get them into the workforce”. In contrast, mothers with young children (in spite of the equality demands) should have a better opportunity to stay at home or work part-time for longer periods.

Three persons thought that more systemic solutions are needed. “Safety net for those people who fall between the cracks”, as the majority is well-off (Jack, 50+). A fair and equitable tax system would help: “If people see that there’s a fair and equitable tax system, they may well want to pay more” (Jack, 50+). Ella (70+) was of the same opinion and explained it further:

...the question that crops up from time to time now is the unfairness of multinationals not paying tax in Australia where they make their money, and then they repatriate it to another country (...) to the Virgin Islands or wherever else, and they pay zero tax in the country where they are resident.
Henry (60+) pointed out the importance of fair wages, but it was only Olivier (20+) who thought that, in the face of aging population and automation, a universal minimum income will be needed.

“Persons who fall between the cracks” and “multinationals not paying tax in Australia” were topics that returned.

_Aged Care (8 Persons)_

When William (40+) said that “Aged care is one of the biggest growing industries here in Australia”, he probably meant it both literally and metaphorically. Aging and automation, in his view, makes it cheaper to keep people at home, and provide them with services, which will also create more employment. At present, aged care facilities are too expensive—”right now, half a million dollars for one parent”.

The issues mentioned were at least several: adequate pensions, aged care facilities, and services at home. As Jack (50+) pointed out, “aged care” must be understood both financially and medically. At present, though, only New Zealand can afford a “blanket pension”. In Australia, the government pension should be “a safety net for the minority of people, not for the majority”. In fact, the Australian government “is slowly trying to educate those within the workforce to provide for their own retirement”. This is the superannuation system, recommended also by Isla (30+).

The government should see to it that people retire with “dignity, providing a level of support that gives old people dignity, and subsistence, or something better than subsistence” (Noah, 50+). To be able to realize it, the government should save, and encourage people to save as well. But the politicians act in a very short-term way, and these are very long-term, but easily predictable problems. One must get rid of old and ridiculous solutions like “family trust” and “negative gearing” that favor wealthier citizens. What is needed is a fight against polarization of society, and an

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8 Superannuation in Australia are the arrangements put in place by the government to encourage people to accumulate funds to provide them with an income when they retire. It is partly compulsory, and is further encouraged by tax benefits.

9 An entity established by a family member for the benefit of members of the family group where assets are held by the trust and income derived can be directed to particular individuals who are subject to the lowest tax rates—thus minimizing total tax payable.

10 A policy whereby losses from owning and renting out an investment property (usually driven by investment loan interest) can be deducted from other income to reduce tax payable.
opposition to the capitalist model based on growth. All this requires a change in the political system to the one favoring long-term thinking.

As to aged care facilities, or “geriatric communities” (Olivier, 20+), the nursing services and hospices should be better financed by higher corporate taxes. Special attention should be paid to the needs of Indigenous people (Zoe, 30+).

The Home and Community Care Program assumes that people above 65 stay at home, and uses My Aged Care system to assess who would need special care. Then there is NDIS and so on, but, according to Chloe (50+), this should be done by a single agency situated at local council, “who can make sure that a person doesn’t fall through the cracks. Because [they] are at the coalface”: “So in twenty years’ time, there should be a service that has continued to be delivered by councils, funded, obviously, from the federal government”.

At present, according to William (40+):

…half a nation is pretty much looking [after] their parents. People take time off work, so there’s productivity loss there (…) A lot of people are taking enormous amount of time off just to look after their elderly parents, because they’re all living longer.

Chloe (50+) thought that community activities and robots at home might help.

Affordable Housing (6 Persons)

As to accommodation needs, or, as Mia (60+) who considered it one of the three basic needs, put it, “roof over their heads”, there are several dimensions. One is shelters for the homeless, as homelessness is a major cause of mental illnesses (Zoe, 30+). According to Ava (40+), homelessness has now spread among younger people and women—with even women and their young children living in cars. There are already food vans and mobile showers and laundries, but it needs to be more clearly and robustly established who requires support and how to connect them with it. That should be done by “a private enterprise that is audited by some sort of regulated authority”.

Henry (60+) had a more drastic solution: higher taxes for the wealthy, all around the world:
I think one country acting alone just shoots themselves in the foot, because the companies would just go. (...) and that’s really what’s already happening, the companies gravitating to where there’s favorable tax treatment at the moment.

And then there is the issue of affordable housing:

...you have to be able to afford your basics like water and heating and so on. I think it was a stupid idea to change it so that the basic necessities like electricity and heat and gas and water became market systems, and even telephones, like, telephones are a basic necessity. (Ava, 40+)

The costs of housing changes depending on place. Henry (60+) noticed that, as housing is cheaper outside big cities, one should “make the regional places more attractive to the people and actually proactively engage in getting them to go, in the way they have with the refugees, which has been quite successful”.

The previous public housing can be changed into incentives for private developers: You should be able to go to the government and say “I have land in prima [good location] area that would suit young families, perhaps people that aren’t going to be able to afford much. Can you agree to give me some sort of financial support so that I can build something appropriate to create equality?” (Ava 40+)

Isla (30+) was of an opinion that affordable housing was not a matter for charities, but for the federal government to better fund public housing.

**Education (5 Persons)**

Free access to education, especially for children, was one of the three basic needs Mia (60+) mentioned. Free schools for all, according to Amelia (50+).

The contents of early education were important to James (70+) and Ella (70+), both of whom thought that children should be taught how to live a healthy life.

According to Isla (30+), more schools are needed in certain regions, and there is need for a transparent quality model to decide funding.
**Social Problems (5 Persons)**

In addition, five interviewees (all women) mentioned social problems. Criminality and drug abuse should be dealt with through rehabilitation rather than enforcement (Charlotte, 20+). Isla (30+) emphasized the need to establish reasons for criminal behavior. Two pleaded for focus on domestic violence, establishing female-centered services, with special attention to women immigrants (Zoe, 30+) and child support (Ava, 40+). Better child protection and safety standards are needed, as well as closing the gap of literacy and numeracy in Aboriginal children (Charlotte, 20+).

**Other**

Two persons suggested that providing help for the young who are early in their careers would be good (Jack, 50+; Ella, 70+). The same two interviewees spoke of better work opportunities for the immigrants.

Isla (30+) was the only person who mentioned public transport and an energy system built on renewables.

**The Future and the Past**

**The Actual Future**

As to the Australian welfare in 2037—twenty years from the time interviews were conducted—two of the interviewees were optimistic, six pessimistic, and six had mixed predictions.

The optimists were young. According to Olivier (20+), young people have a “social consciousness”, and will soon have power. In Zoe’s (30+) view, things will be better or unchanged. Private initiative will not move in, because it won’t be needed. Charities will continue their work, though, even as the government will take the major part of financial responsibility.

The pessimists see Australia “going the way of America, with (...) an increasing number of the working poor” (Henry, 60+). William (40+) agreed, claiming that there will also be an erosion of medical care, which is already happening. No political party is brave enough to raise taxes on the rich, so middle class, which was the heart of Australia, will be declining, while the poor and the very rich will be expanding (Henry, 60+). Jack (50+) thought that “a lack of maturity across the electorate” prevents
introducing higher taxes for consumption. According to Mia (60+), everything will be worse—increasing polarization and automation. “People are married to their phones and therefore are very unobservant of what goes on around them”.

Six interviewees considered both negative and positive developments. Noah (50+) predicted a much tougher world, much polarization, and climate refugees. “I wouldn’t say it in front of my children, but it’s too late”. But the Millennials “may well effect change”.

The idea of a tipping point (Gladwell 2000) returned. According to Charlotte (20+), it will get worse before it gets better—something dramatic must happen to provoke a public outrage. The NDIS will continue, and there will be more private funding.

I think the progress doesn’t go a linear way, and so I feel there’s got to be some kind of a tipping point, where action on climate changes take stock, and fundamentally transforms us. But I’m still waiting for it, and we might have lost a lot before that happens. (Isla, 30+)

Some interviewees conditioned their predictions on changes that may happen or not: Chloe (50+) predicted that community health issues will get worse if appropriate measures are not taken, and there will be an increase in domestic violence if gambling is still permitted (at present, the government is earning money from taxes on poker machines and Australia has the world’s highest per capita saturation of gambling machines and the highest per head losses that are especially concentrated in poorer areas). Amelia (50+) said that “[u]nless we find more opportunities for the people who need to work, then you are going to have people poorer and poorer—and then you are going to end up with more crimes, because people will be tempted to steal, and then it becomes a violent society, and then everybody is unhappy”. One solution would be to allow and facilitate older people to work, without forcing them to work (although by 2023 the government will increase the age at which one can apply for the publicly-funded aged pension from 65 to 67).

Another answer combines changes for the better with changes for the worse. Something will be done about homelessness and domestic violence, but the aged care will get worse. The future retirees are deep in debt, and count on selling their houses, but “there is an affordability crisis” (Ava, 40+). According to her, a death tax will be introduced: “Because, let’s face it, death isn’t really going out of business”.

If you have a more optimistic, positive outlook and you can see huge growth, then maybe there needs to be welfare linked to profitability of organizations. (...) So, if you get the Apples and the Amazons of the world paying the appropriate company rate that... gives the government the ability to have money to go with where that money needs to flow. (Ava, 40+)

Ella (70+) predicted that the common pool will diminish, because the young will not want to work as much as the previous generation (“they want to live their life now”). As the resources will become thin, the systems will change. What is good for a mother and a baby will be an economic decision made by an accountant. There will be many vulnerable people, as many medical services will be too expensive for them. The quality of life will diminish; it is “a slippery slope”. Yet:

... the optimistic part of me thinks that, well, every generation has its problems, and every generation works out their workarounds, do they not? And we have never been better educated, smarter... access to technology is incredible, so everything can speed up. (...) young people today have a very highly developed social conscience. A very heightened sort of awareness of lack of privilege, and lack of access to things, so they get out and do stuff. (Ella, 70+)

The Past

Three persons claimed that they would have given the same answers ten years ago, one with different priorities (“more about the aged care, as I work in the superannuation sector and get older myself”, Ava, 40+), another with same attitude, but more attention paid to the disabled insurance scheme (“there seems to be more disabled children being born now than there used to be,” Amelia, 50+). But then Amelia admitted that some of her attitudes did change:

I did not use to think that families really ought to get paid for having kids. However, it does cost a lot, having kids. But it is well worth while, in my opinion.

All the others said that their answers would be different. Age was the main explanation—understood either as becoming more mature (the younger persons), or more in need (the older):
Zero comprehension then. (Olivier, 20+)

Less understanding, more belief in government’s responsibility. (Charlotte, 20+)

More naïve, as I didn’t have much exposure to people who have fallen through the cracks of the welfare system, especially the Indigenous ones. (Zoe, 30+)

I’ve probably shifted from the further on the right on the political spectrum toward the left. (…) Ten years ago, I wouldn’t have had the awareness of how people in this country are often forced to live, by circumstance. (Thomas, 30+)

I was more optimistic then. With age one is more vulnerable… (William, 40+)

More pessimistic. (Noah, 50+)

New things to pay attention to, as I near retirement. (Jack, 50+)

Only now I understood the issue of prevention. (Chloe, 50+)

I’m probably more conscious of these issues today than I was ten years ago. I was busy, still earning my own income. Welfare was not a particular issue. It is more an issue in some ways today because of the health side of it. I am beginning to rely more heavily on health services. (James, 70+)

I am more aware of problems than I would have been ten years ago. And it is probably because of personal experience. (Ella, 70+)

Some interviewees pointed also out that the world had changed. William (40+) stressed the issue of automation, and of raising costs of medical care. Thirty years ago, even education was free in Australia, and now there are fees (but state loans as well). Mia (60+) claimed that the needs were not that acute or visible ten years earlier. Now poverty has become much more visible. Also, there was less technology then, and people were paying more attention to one another.

Comparisons with Canada

Anecdotally, Canadians and Australians seem similar in certain ways—they “gel” (get on well), with both having somewhat of a reputation for being open, vocal, kind, and somewhat unruly. But differences appear when comparing perceptions of Australian and Canadian interviewees about welfare. In Australia education has a lower priority, whereas the care for the elderly has a higher one, and these concerns were expressed in an intense and palpable manner. Australia has one of the highest home ownership rates in the western world with relatively low emphasis on the rental
market or public housing—yet, like the Canadian interviewees, Australian respondents identified a need to make housing more affordable. In Australia there is a general opinion that people should work and save for the future; only one person mentioned the idea of basic income. The costs and burden of the welfare should be shared by the government, charities, and people themselves.

“People who have fallen between the cracks” were mentioned often, sometimes with the emphasis on the Indigenous people in that group. The view of the future was somewhat more pessimistic than in the Canadian responses (even as the latter were afraid of the developments in the USA). Young persons were more optimistic than older persons, and only women talked about social problems. The shortsightedness of the politicians has been mentioned, which partly explains why Watts (1980) statement quoted at the beginning of this chapter does not describe the present situation too well. It is perhaps appropriate to recall the quote from Beveridge cited by Watts (p. 175): “Social security is neither socialist nor capitalist. It is simply commonsense”.

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