BOOK REVIEW


The book provides a critical, detailed description of the development of disability policy in the UK in the years since the Second World War until the time of the book’s publication. Disability policy is defined as a social policy directed at people with disabilities, and it is seen to be embedded in wider societal, economic and political developments. The account of the development of British disability policy describes a shift away from institutional and paternalist thinking towards greater choices and rights-based policy frameworks. At the same time, the authors emphasise that this process is by no means a linear one. It is this insight of the complexity of contemporary disability policy that in my opinion makes the book an extremely important and illuminating study.

Modern British disability policy is portrayed in the book as a jumble of different approaches, including both progressive and more conventional tones. The book attempts to balance between these two poles. The progressive approach, which was seen in an embryonic form in the closure of long-stay institutions in the mid-twentieth century, has in the recent years been characterised by the determination to embrace many of the principles of independent living, advocated by the organisations of disabled people. This approach is currently epitomised in such newly introduced schemes as direct payments, individual budgets, and self-directed support. The authors point out that these schemes involve a significant change in the philosophies of service provision and social relations by giving disabled individuals the freedom to make choices, enabling them take control over the support that is provided to them and offering them social citizenship.

While the authors take care in giving due credence to these policy achievements, they temper the exultance over them by acknowledging their limits. The reality with these policies is one of grander ambitions set alongside increasingly limited funding. This dilemma, has according to the authors, characterised disability policy in Britain for many decades, as successive governments have embraced neoliberal ideas of the need to limit the reach of the state, regardless of changes in their composition in terms of political parties. Consequently, important achievements in disability policy have been at the expense of a tightening of the criteria for who qualifies for publicly-funded support. Severe forms of prioritisation of those on the highest levels of assessed needs have been made, while some persons have been transferred to lower levels.

The mismatch between policy rhetoric and reality is in danger of growing even wider due to new budget cuts that have been planned by the current coalition government. The authors rightly warn against the uncritical use of terms such as ‘choice’, ‘control’, and ‘self-direction’ in a situation in which large numbers of people
are pushed beyond the remit of the eligibility of publicly-funded support, and have few possibilities to make choices. They also acknowledge a risk that these concepts become increasingly Orwellian in their meanings, becoming equated with self-reliance. This would represent a return to a Victorian thinking for the majority.

The astute observations about the limits of progressive disability policies connects in an interesting, but unexpanded way with the authors’ claim about the continuing presence of a paternalist heritage in policymaking. The way in which the authors use the term ‘paternalism’ is a source of a slight confusion here. The term is defined in the book as non-disabled professionals knowing best what disabled people want. At the same time, it is used to describe all the conventional elements of current policymaking. In doing so, they risk losing sight of wider ideological traditions that are at play. For example, the Victorian distinction between the ‘deserving’ and ‘undeserving’ poor, which the authors show to still be viable, seems to me to also involve other kinds of motivations than just paternalism as defined in the book, such as moralising and punishing workless people deemed capable to work as well as limiting the collective provision of support. It is rooted in the tradition of (economic) liberalism, which was the dominant ideology in the nineteenth century, and was revived in the latter part of the twentieth century in the form of neoliberalism. At the time of a revival of liberal economics, the term paternalism is not necessarily able to describe accurately all the regressive elements of disability policy. The good thing is that these elements are documented in the book; the question is only about how to conceptualise them.

In any case, the book offers an intriguing possibility to interpret many of the regressive elements of current policymaking in the light of Victorian heritage, be they called paternalism or raw capitalism. It is startling to learn that the above mentioned distinction, set up in the 1834 Poor Law, continues to inform social policy in Britain, and is applied to disabled people as well. The authors claim that in Britain most disability benefits are based on the principle of less eligibility, except those aimed at people whose impairment is seen to be based on personal sacrifice, having been accrued it in war or in industry. They indicate that the benefits for disabled people who fall out of this group are less generous, and often involve stigma.

The authors’ observation of the trend of increasing conditionality of disability benefits is an important one, and can be linked to Victorian traditions as well. It refers to a process in which the eligibility criteria of disability benefits are tightened so as to differentiate between ‘genuinely’ disabled and those deemed more able to participate in the paid labour markets. This shift means a retrenchment of the benefits of the latter group. In addition, it warrants intrusive assessment practices and sanctions should the claimant fail to prove that he or she is willing to take up paid work. It is also worth noting that this trend, which was started by a conservative government, continued during the period in which the New Labour party was in power in the name of ‘activation.’

The perpetuation of the Victorian sentiments – one could perhaps even say revival – can also be seen in the intense political and media concern over benefit fraud and rising number of claimants. The book describes the serious consequences of these moral panics for disabled people. They have fuelled repeated, often stressful inspections of claimants, and have fed negative attitudes towards disabled people. In discussing these issues the authors rightly raise the alarm about the ways in which the structural causes for the rising need of benefits, such as ageing or lack of jobs,
have been ignored in policy and media debates. They remind us that due to these issues the need for disability benefits is likely to rise in the future.

Alongside the development of disability benefits, the book provides a description of the development of social care for adult disabled people. The book indicates that they share the same kind of ideological underpinnings. In the latter half of the twentieth century, the aim in the realm of social care has been to develop community-based solutions, yet the way this has been done has to a large extent been determined by a conservative emphasis on the family as the primary provider of care for its family members and a neoliberal commitment to rolling back the frontiers of the welfare state. As a result, the shift to community care coincided with the retraction of publicly-funded support, while the top-down approach on delivering services to disabled people persisted, as local authorities were still in a position to determine who was eligible for social goods and who should rely on family support. There were high expectations on women to provide unpaid care, while also facing the contradicting expectation to participate in labour markets. There was also an uncertainty over the extent in which family support was available. Some people with mental health problems released from hospitals were simply neglected, as the community which should have supported them turned out not to exist. Consequently, as the authors point out, community care reforms have involved both progressive and regressive tendencies. The experiences of the earlier decades described in the book are very important, since the ideological commitments of the time continue to inform policy, as the final chapter of the book, which provides an early evaluation of the plans of the current coalition government, shows. The authors point out that the Cameronian ‘Big Society’ agenda rests on the idea of unleashed community resources despite the lack of evidence of their existence.

The book is rich with facts and ideas to the point of being somewhat incoherent and repetitive. It offers many different kinds of perspectives to the development of British disability policy. It adopts a medium-length historical perspective that stretches back to the rise of the welfare state in the post-war years. Knowledge of the immediate historical background of current developments is undoubtedly crucial for understanding them. It also looks at the ways in which policies treat disabled people in different ages. The book shows, among other things, that support for disabled children has been more unconditional than for other age groups. Adding one more perspective still, it discusses the structural disadvantage of people with disabilities, especially their position in the labour markets, and the relationship between disability and poverty. The book shows that British disability policy has been of limited value in countering poverty and exclusion from labour markets. This is clearly an important contextualisation of policy analyses.

Despite the multitude of angles the level of description stays in the intricacies of policy development, while its wider contexts – political ideologies, industrialisation, capitalist economy, disability movement – are mentioned, but not explored in depth. This is understandable, since dealing with these issues properly would have required a lot more space. Still, the book left me wondering about the implications of these contexts.

Given that the focus of the book is exclusively on the UK, the title of the book leads us to question how much the book really helps to understand disability policies elsewhere. It is worth remembering that there are significant differences in the principles on which the social security systems are based between different ‘welfare regimes’ (Esping-Andersen 1990), and it is likely that this affects disability policies as
well. Scandinavian welfare regime, for example, has traditionally been characterised by the ethos of egalitarianism, which means active promotion of the well-being and life chances of all citizens, as well as the eradication of poverty. Furthermore, it is indicated in the principle of universalism: benefits and services are provided on the basis of citizenship rather than need or social status.

Yet in the broad outline the developments in all Western countries are likely to have also many similarities. Deinstitutionalisation process, for example, has swept through the Western world. Similarly, the turn to neoliberalism in political–economic practices and thinking, which the book shows to be crucial for the development of support system of disabled people in the UK, is global in nature, although its scope varies nationally (Harvey 2005; Saad-Filho and Johnston 2005). Consequently, the authors’ careful description of the multifaceted character and the impact of recent reforms should be of interest for readers in many other countries as well. At the same time, I think the value of the book consists not only in the facts it provides, but also of the whole approach it has adopted to the study of disability policies, which highlights their embeddedness, contingency, and ideological impurity.

References