

PEARSON NEW INTERNATIONAL EDITION

Dimensions of Social Welfare Policy

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Eighth Edition



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Table 2 2011–2012 Department of Health and Human Services (HHS) Poverty Guidelines

Persons in Family or Household	Forty-Eight Contiguous States and D.C. (\$)	Alaska (\$)	Hawaii (\$)
1	10,890	13,600	12,540
2	14,710	18,380	16,930
3	18,530	23,160	21,320
4	22,350	27,940	25,710
5	26,170	32,720	30,100
6	29,990	37,500	34,490
7	33,810	42,280	38,880
8	37,630	47,060	43,270

Source: U.S. Department of Health and Human Services, 2011.

considerably by location, chiefly due to variations in the cost of housing and childcare. In San Francisco, a typical high cost urban area, the basic needs figure was \$56,124 for a single parent family with two children. In a rural area like Curry County, NM, the figure was \$30,170.⁴⁵

The value of adequacy is expressed rather faintly in public assistance policy honored more in the breach than in reality. Nevertheless, its presence is reflected in the fact that grant levels are not set arbitrarily, but are based on state estimates of the costs of basic needs (even though the grants rarely approach the levels of these estimates).

Overall, as a benefit-allocation mechanism, public assistance is more responsive to concerns for equity than for adequacy and equality. This emphasis stems, at least in part, from the broader societal context in which the program operates. In a capitalist society, the value of equity is generally accentuated: those who work hard deserve to be rewarded by reaping the just fruits of their labor. Social democratic societies theoretically place greater stress on the value of equality. As Marx wrote, “The secret of the expression of value, namely that all kinds of labor are equal and equivalent, because, and so far as they are human, labor in general cannot be deciphered, until the notion of human equality has already acquired the fixity of a popular prejudice.”⁴⁶ Once the notion of human equality has achieved the status of a “popular prejudice,” differential treatment of dissimilar people is significantly reduced if not completely abolished because, judged by the most important of characteristics—their humanness—everybody is the same.

From this somewhat lofty perspective, the “why” of policy design may be analyzed in terms of the quest for social justice as it is manifest in the differential realization of adequacy, equity, and equality.⁴⁷ Although a policy may emphasize any one of these values, the emphasis is often tempered by the demands of the other two values as efforts are made to approximate social justice.

Human Rights and Justice

Practice Behavior Example: Social workers engage in practices that advance social and economic justice.

Critical Thinking Question: Which reflects your conception of social justice to a greater extent, the value of equality, equity, or adequacy? Why?



CONSERVATIVE AND PROGRESSIVE VALUES IN PUBLIC ASSISTANCE

Moving down a rung, a much larger range of social values enters into the consideration of choice. For instance, the values of privacy, dignity, work, and independence may influence the criteria of eligibility, the forms of social provision, and the design of delivery and finance arrangements. To illustrate, Table 3 lists the four dimensions of choice and some of the competing values that influence them. These four value dichotomies are suggestive and hardly exhaust the range of possibilities. They were selected because the range of values represents variations on central issues of policy choice differentiating conservatives from progressives. These issues concern the ways and extent to which expressions of individual interests are given free rein or are harnessed in the service of the common good. As Marshall explains,

The claim of the individual to welfare is sacred and irrefutable and partakes of the character of a natural right . . . but the citizen of the Welfare State does not merely have the right to pursue welfare; he has the right to receive it, even if the pursuit has not been particularly hot. . . . But if we put individualism first, we must put collectivism second. The Welfare State is the responsible promoter and guardian of the welfare of the whole community, which is something more complex than the sum total of the welfare of its individual members, arrived at by simple addition. The claims of the individual must always be defined and limited so as to fit into the complex and balanced pattern of the welfare of the community, and that is why the right to welfare can never have the full stature of a natural right. The harmonizing of individual rights with the common good is a problem which faces all human societies.⁴⁸

Cost effectiveness may be applied to each dimension of choice. When applied to the basis of social allocations, it is measured by the extent to which each dollar of benefit is allocated to those most in need—that is, those least able to purchase what they need in the open marketplace. The guiding thought is that there be no waste of resources. With the cost-effectiveness criterion, individual treatment varies according to individual circumstances. Implementing this value requires a high degree of selectivity, of means testing, in determining those eligible for benefits. Applied in the extreme, this value can produce invidious distinctions among people, dividing the community into groups of the dependent and the independent, the incompetent and the self-sufficient.

Social effectiveness may take different forms. One way it is measured in allocative decisions is by the extent to which all individuals are treated as equal members of the social body. Here, the notion of effectiveness is related to the

Table 3 Dimensions of Choice and Competing Value Perspectives

Conservative Perspective	Dimensions of Choice	Progressive Perspective
Cost effectiveness	Allocation	Social effectiveness
Freedom of choice	Provision	Social control
Freedom of dissent	Delivery	Efficiency
Local autonomy	Finance	Centralization

fact that nobody who is potentially eligible will feel inhibited about applying for benefits because of shame, stigma, or the organizational rigamarole that is often required to implement selective procedures. Allocations are universal: An individual's special need or defect need not be exposed for scrutiny in order to become eligible for benefits. The "badge of citizenship" is sufficient basis for entitlement. In what was once AFDC and is now TANF, for example, the basis of social allocations—a thorough and probing means test of every applicant—is clearly influenced more by concerns for cost effectiveness than social effectiveness.⁴⁹

Titmuss has observed that the apparent strain between cost effectiveness and social effectiveness may be a function of the short-range perspective of using cost-effectiveness calculations, especially for medical benefits, where policy objectives include prevention as well as treatment. For example, if access to medical care entails a means-test investigation that is demeaning, time-consuming, or otherwise inconvenient, clients may procrastinate about seeking aid until the symptoms are so advanced that they can no longer be ignored. At this stage, the cost of treatment is usually more expensive. In the long run, cost effectiveness and social effectiveness can be brought into harmony when the universal allocation of medical care saves more through prevention than selective allocations save by limiting treatment only to those in dire need.⁵⁰

Freedom of choice is reflected in provisions that offer recipients considerable latitude to exercise their individual preferences. Thus, for example, when social provisions are in the form of cash, a high degree of consumer sovereignty is preserved. Social control, on the other hand, is reflected in provisions that limit individual choice. With in-kind provisions, recipients are restricted to the specific benefits (housing, medical care, counseling, therapy, advice, information, etc.) offered. Of course, they have the freedom to take it or leave it, but that is where the choice ends. In some social welfare programs, social provisions are linked so that freedom of choice in one area of provision is bought at the price of social control in another. This is the case in public assistance. In the original AFDC program, recipients were given cash grants so they could exercise a degree of choice in meeting their daily requirements. Under the Family Support Act of 1988, AFDC benefits were linked to participation in work training programs, and, in some states, to educational programs as well.⁵¹ By 1996, when AFDC was supplanted by the TANF, cash benefits were tied to a variety of behavioral and labor market expectations such as going to school, living at home (for unwed teenage mothers), identifying the child's father, and, of course, getting a job. These behavioral incentives were strongly advocated and supported by conservatives, despite their traditional disavowal of the collectivists' conviction that government might improve the human condition through social engineering.

Freedom of dissent and efficiency are values that influence whether the delivery system is designed primarily along democratic or bureaucratic lines. Blau states the choice succinctly:

Bureaucratic and democratic structures can be distinguished . . . on the basis of the dominant organizing principle: efficiency or freedom of dissent. Each of these principles is suited for one purpose and not for another. When people set themselves the task of determining the social objectives that represent the interests of most of them, the crucial problem is to provide an opportunity for all conflicting viewpoints to be heard. In contrast, when the task is the achievement of given social objectives, the essential problem to be solved is to discover the efficient, not the popular, means for doing so.⁵²

In TANF, the delivery system is organized primarily along bureaucratic lines. Clients do not vote to establish the level of their grants or eligibility criteria. In other social welfare programs, however, social provision is so loosely formulated that the local delivery system is charged with the dual purpose of deciding on specific objectives and then carrying out those decisions. For instance, the War on Poverty and Model Cities programs of the 1960s required substantial citizen participation in program planning and implementation. These systems thus incorporated democratic as well as bureaucratic elements in their structure. The problem in these systems, it often turned out, is that neither value was served very well.⁵³

Local autonomy and centralization are values that find expression in the financing and administration of programs. Strains between these values are most likely to emerge when program costs are shared intergovernmentally or, in the private sector, between nationwide and local voluntary organizations. Cost-sharing arrangements are implemented through federal grants-in-aid that vary along a continuum from broad purpose block grants to special-purpose categorical grants. The block grant is a lump-sum national contribution for local programs. It carries few specifications or requirements on how the money should be spent beyond requirements that it be applied to a general program realm such as health, community development, or education. This ensures a high degree of local autonomy. At the other end of the continuum is the special-purpose grant with detailed standards. Here, local discretion regarding the use of funds is restricted according to precise federal criteria. In most cost-sharing arrangements, the methods of finance fall somewhere midway on the continuum, reflecting the mutual desirability of local autonomy and national planning.

For example, although based on categorical principles, the AFDC program contained elements of both values. The federal funders attached various conditions to these categorical grants concerning citizenship, “statewideness,” and the provision of services. Yet local autonomy prevailed in at least two crucial aspects of the program. States were free to exercise broad discretion in defining the criteria of need and the amount of financial assistance that is provided to recipients. The centralist thrust of the program was mitigated in part because, as Burns explains, “to prescribe in the federal act both the standards of need which determine eligibility and the minimum level of living to be assured all eligible applicants raises major issues regarding federal interference in an area which traditionally has been thought of as peculiarly a matter for local determination.”⁵⁴ When AFDC was supplanted by TANF in 1996, the funding arrangement changed from a categorical to a block grant, giving states much greater latitude to determine how funds are spent. Various conditions, nevertheless, were attached to the block grants concerning citizenship, time limits, and work requirements.

THEORIES, ASSUMPTIONS, AND SOCIAL CHOICE

The subtle and complex relationships between value preferences and social welfare policies offer one level of insight into the “why” of social choice. Another dimension of analysis that has a bearing on this question involves theories and assumptions about how clients, service delivery systems, methods of finance, and types of social provisions function, both independently and in concert. Much of this kind of theory-derived knowledge is fragmented and

only partially verified. This is not to deny the effect of social science knowledge on choice, but rather than overestimate what is known, we use the term *theory* to cover the influence and support that social science insights render to policy choices. We classify as assumptions those suppositions for which there has been little systematic effort to obtain and codify evidence. In the general sense, the term *assumptions* is used to designate theories “writ small.”

To illustrate, let us continue to examine public assistance. At least three assumptions underpinning major policy choices in the program were seriously challenged by subsequent evidence. First, the 1962 “service” amendments were supported by the belief that the clinical model of casework service would reduce economic dependency. Implicit is the theory that poverty is mainly a function of individual deficiencies, deficiencies that can be transformed and alleviated through the casework process. This theory was relatively new at the time. Until the 1950s, assistance recipients were generally considered “victims of external circumstances, such as unemployment, disability, or the death of the family’s breadwinner,” who “needed to be ‘relieved’—not treated or changed.”⁵⁵

In 1971, after reviewing studies of casework efforts to treat and rehabilitate those on public assistance, Carter concluded,

It becomes clear that it is time to reassess the purposes of casework services offered welfare recipients and other low income groups for whom problems identified for alleviation are complex and interrelated with other personal, family, and community or societal problems . . . there are serious questions as to what behavioral changes can be set in motion without provision first being made for a decent level of living and access being provided to a range of social resources within the agency and the community.⁵⁶

Second, the separation of income maintenance from the administration of social services in the late 1960s was predicated on the assumption that services would be improved because the caseworker–client relationship would no longer be tinged by the coercive undertones emanating from the worker’s discretionary authority over the client’s budget. Clients, presumably, would be free to accept or reject services as needed, and caseworkers, released from the task of administering grants, would have more time to engage in a voluntary service enterprise. This is a plausible line of reasoning, but one open to critical examination. Neither the strength of the caseworker’s coercive powers, and their effects on relationships with clients, nor the extent of client initiative to seek services when routine caseworker visits were terminated was clearly discernible. It is quite possible, as Handler and Hollingsworth suggest, that the coercion argument was exaggerated and, more important, that in the absence of routine home visits welfare clients would be reluctant to seek help from an unknown official. Thus, “requiring welfare clients to take the initiative may have the effect of cutting off a reasonably valuable service that most clients, in their own words, seem to like.”⁵⁷ Indeed, research findings on this issue reveal that AFDC recipients made higher demands for services and expressed greater satisfaction when service and income maintenance were combined.⁵⁸

As a final example, we turn to the work-incentive program established under the 1967 social security amendments. The perversely accurate acronym for the Work Incentive Program, WIP, conveys the image of an instrument used to drive beasts of burden. Through some creative bureaucratese it was quickly transformed to WIN (Work INcentive). An objective of the 1967 amendments was to swing AFDC services away from traditional social casework toward more practical and concrete work-oriented provisions. This shift in emphasis from welfare to workfare

At least three assumptions underpinning major policy choices in public assistance have been seriously challenged by subsequent evidence.

then reflected, and continues to reflect, two assumptions: (1) jobs are available for anyone who really wants to work and (2) we know how to change deleterious patterns of behavior with voluntary incentives. The problem is primarily seen again as individual deficiency—the lack of skills and adverse attitudes toward work—although of a different nature than those amenable to psychiatric casework. The solution is to equip people for jobs and motivate them to seek employment.

Although facts about WIN are not decisive, what is known suggests that its assumptions were flawed. Levitan and Taggart indicated that of the 167,000 people who first enrolled in WIN, more than one-third dropped out of the program and, all told, only 25,000 got jobs. Those who moved on to work were “creamed” from the pool of applicants. Those moving into jobs, in other words, were those best prepared for jobs. This group included a high percentage of unemployed fathers receiving AFDC who probably would have found employment sooner or later without social assistance. In light of the program’s “conspicuously unspectacular performance,” the study observed, “the wisdom of expanding WIN is questionable, and the theoretical arguments for such a move are even more dubious.”⁵⁹

A subsequent analysis of the WIN experience suggests that the program’s shortcomings endured to the end. In 1982, only 3 percent of the AFDC clients registered for the WIN program in New York State were placed in a job; an additional 5 percent found employment through their own efforts. In a distinct echo of Levitan and Taggart’s findings, the 1982 study observed that “those who eventually are served generally represent the easiest to employ—those most likely to get jobs without the help of special services.”⁶⁰ Although findings on work programs in the five states that formed a model for the Family Support of 1988 were somewhat more encouraging, a substantial proportion (from 40 to 80 percent) of participants remained unemployed after six to fifteen months. The extent to which this type of voluntary program can ameliorate the circumstances of welfare recipients, therefore, remains uncertain.⁶¹

The two assumptions that have girded workfare policies since the mid-1960s continue to brace the TANF initiatives—a line of reforms aptly characterized by Gilbert Steiner as “tireless tinkering with dependent families.”⁶² Between 1993 and 2008, this “tinkering” produced unprecedented and significant results, as welfare caseloads declined by more than 50 percent. TANF’s demanding work-oriented reforms, facilitated by other factors, contributed powerfully to this reduction. Since the 2008 recession, however, many of the jobs secured by welfare moms during the prosperous years have evaporated.

In addition, as those recipients most willing and able to leave welfare were drawn out of the client pool, those remaining presented a tremendous challenge to the second workfare assumption—that we know how to address the variety of debilitating individual problems involving a lack of skill, ability, and motivation, to say nothing of substance abuse and domestic violence. For example, an analysis of the National Adult Literacy Survey, which tests the ability to apply math and reading skills to everyday situations, indicates that a quarter of all public assistance recipients score in the lowest of five levels of literacy—a level where people are unable to perform tasks such as locating an intersection on a street map, filling out a government benefits application, or totaling the costs on an order form.⁶³

Can public policy successfully address these problems? Increasing evidence suggests that various measures can effectively address the employment prospects of the difficult-to-serve *if* the economy is expanding. Public employment in protected settings for recipients who cannot function competitively in the normal labor market can be provided. Intense efforts at education and rehabilitation can prepare even the most difficult-to-employ for regular work. In