

Risk and Disability: Towards a Reflexive Theory

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ABSTRACT

This paper analyses the concept of 'risk', which both as a theoretical tool and dimension of modern society, is slowly being developed within the humanistic and social sciences (Belz 1999). Notwithstanding this, the concept of risk and the meaning and implications associated with it, have not been fully explored in relation to disability. Risk is shrouded in historical and contemporary political debate about whose 'role' and 'responsibility' is it for 'disability' in society – does it reside with the state or the individual?

Keywords: Risk; Disability; Theory; Policy

1. INTRODUCTION

The article begins by examining some of the arguments put forward by Ulrich Beck (1992) and the relevance of these in understanding how changes in modern society have shaped the welfare identities of disabled people. To illustrate this, the article reviews the historical rise and consolidation of welfare in the United Kingdom. The article assesses how risk has impinged on changing forms and modern practices of the 'welfare state'. From this, the article traces the welfare transformations to what can be defined as the 'risk society' (Beck 1992) and the impact of this on identity in disability formations and key areas such as the relationship of disabled people to the state (Cartmel and Furlong, 1997; Epstein, 1998).

The article then moves to assessing neo-liberalism as a key feature of the 'risk society' and the re-positioning of disabled people as 'consumers' and welfare agents as 'managers'. The article then evaluates the implications of neo-liberal social policy for disabled people and professional practice by using the 'risk' framework derived from the work of Ulrich Beck (1992).

2. TRANSFORMING AGE

As a starting point we should note the dramatic change in the institutional structure that has underpinned definitions of age identities. In this context it is important to highlight the way in which ageing identities were transformed in the two decades following the ending of the second world war (Phillipson 1998). The key development here concerned the way in which, in advanced capitalist societies, disability was transformed by the social and economic institutions associated with the welfare state, such as education, training and work (Fornas

and Bolin, 1995). These became crucial in shaping the dominant discourse around which disability was framed, and the identities associated within and across the lifecourse (Epstein, 1998). A supporting theme was the re-ordering of the lifecourse into distinctive stages associated with education, work and retirement, with transition to retirement becoming an important element in the development of a new identity separate from that associated with disability, work and paid employment (Best 1980).

On this last element, the debate in the 1940s and 1950s focused on the need to escape the injustice and deprivation endured in the economic depression of the 1930s (Frith, 1984). Hence, what has been described by one historian of social policy (Rodney Lowe) as the role of the welfare state in moving society to a higher ethical ground. Lowe (1993: 21) suggests in fact that the welfare state was seen as being able to: ‘...elevate society by institutionalising a deeper sense of community and mutual care’.

Disabled people were integral to this theme of a more inclusive society, one seeking to erase the link between disability and images of poverty (Hall et al. 1978). The possibility of transforming age, through more secure provision of education and training was a significant component of the post-war social contract. Education for disabled people was viewed, first, as a fair exchange for work and income. Second, in rhetorical terms, as a measure of the way in which disabled people were now protected from the hazards of social inequality. Third, as part of the intergenerational contract and indicative of the close ties maintained between family groups, disabled and older (Arber and Attias-Fonfut 2000).

If the welfare state created -or set out to create- a new identity for disability, it was the transformation in welfare from the 1980s onwards which posed a new challenge to the status and identity of disabled people. The crisis in disability that took hold from this period reflected, to a significant degree, the loosening of the institutional supports underpinning the life course. Disabled people were themselves the creation of modernity, reflecting the achievements of industrialism, improved public education and the growth of social welfare (Powell and Edwards, 2002). The steady growth in the proportion of disabled people in the UK population was, up until the beginning of the 1980s, largely contained within the dual institutions of education and work.

These, along with the ties maintained between generations, created a social, economic and moral space within which growing numbers of disabled people could be channelled and contained. In this regard, education and work was predominantly a state of affairs for disabled people may be seen as accurate in at least two senses: first, in terms of the way that resources were distributed; second, in relation to the identities and forms of surveillance created. For a period of 20 years or more, moving disabled people into the zone of work from education, held as by the underlying issue of securing a place and identity for aging within the framework of an advanced capitalist society. The meaning of disability was, temporarily at least, constructed out of a modernist vision where education and work were viewed as “natural” points in the human life cycle.

The unravelling of these arrangements can be traced to at least three types of crisis affecting the management of disability in the last quarter of the twentieth century: economic, social and cultural. The economic dimension has been well-rehearsed, with successive crises from the mid-1970s onwards undermining, first, the goal of full employment (and hence destabilising retirement), and, second, the fiscal basis of the welfare state (accelerated with the onset of a privatisation from the 1980s onwards) (Powell and Edwards, 2002).

These aspects led to the development in the social sphere of what to paraphrase Carroll Estes *et al* (2001) refers to as the ‘crisis construction’ and ‘crisis management’ of disability, with disability now socially constructed as a “problem” for society (Cartmel and Furlong,

1997). At its most extreme, demographic change was itself now viewed as a source of the economic crisis, notably in respect of the apparent imbalance between 'productive' and 'non-productive' sectors in the economy (Longman 1987). Finally, at a cultural level, the modern life course itself came to be viewed as playing a contributory role in the alienation of disabled people in western society.

The sense of unease about the nature of demographic change itself chimed in with a wider discourse about wider developments accompanying the transition from a modern to a postmodern world (Conrad 1992). Uncertainties about the benefits of aging are certainly nothing new. Revisionist accounts of the place of disabled people in past societies have tended to emphasise the punitive character of economic relief, and the marginalisation of those lacking gainful employment (Hall et al. 1982). Both aspects may be found as significant elements in present-day society, for example in the undermining of education and the assault on minimum wage amidst fears of 'too few workers' over an 'excess' of pensioners (Vincent 1999). But these historical continuities are given added emphasis in a postmodern age.

Arguably, disabled people have the most to lose given the restructuring of relationships associated with postmodernity. The extension of individualization may, to take one example, be perceived as highly threatening to identity in the beginning phase of the life-course. As Giddens (1991) argues, modern life raises at least two possibilities: the promise of a multiplicity of identities on the one side, and the danger of ontological insecurity on the other. Similarly, Biggs (1993) suggests that in response to these circumstances, individual actors will attempt to find socially constructed spaces that lend some form of predictability to everyday relationships. Yet in a postmodern world such spaces may be increasingly difficult to locate.

3. FROM WELFARE STATE TO RISK SOCIETY

From the 1980s onwards, the crisis affecting youth illustrated the way that the problem of social marginality among the young had been contained rather than resolved in the post-war period. Moreover, that a post-modern setting did have to offer - namely the ideal of consumption replacing that of production - seemed only to further marginalise groups such as disabled people. Bauman, for example, writes of the accelerating emancipation of capital from labour producing a situation where: 'instead of engaging the rest of society in the role of producers, capital tends to engage them in the role of consumers' (Bauman 1992: 111). This transformation in fact reflects a more general shift from the public provision characteristic of what Lipset and Lary (1987) refer to as 'organized capitalism', to the more flexible arrangements running through the period of 'disorganised capitalism'.

This development has served to change once again the definition of what it means to be an disabled person. In the conditions of advanced modernity, growing up moves from being a collective to an individual experience and responsibility. The notion of an aging society (with social obligations) becomes secondary to the emphasis on the way in which families and disabled individuals handle the demands associated with population aging.

This new development may be seen as a characteristic of a society where the 'social production of risk' runs alongside that associated with the 'social production of wealth' (Beck 1992). As already argued, improved life expectancy may itself be viewed as a consequence of the social transformations associated with modernization. Beck (1992: 21) defines the nature of risk as a '*systematic way of dealing with hazards and insecurities induced and introduced by modernization itself*' (author's emphasis). Of course, disabled people have been ever-

present in human history. But to paraphrase Beck, in the past these could be seen as personal rather than societal tragedies (or achievements). The impact of disabled people was limited both by their lack of demographic presence compared to older people and, crucially, by the relatively superficial nature of the category of 'problem delinquent' or 'anti-social young person' (Jefferson, 2000). The changes consequent upon modernisation transformed both these elements, with disability becoming a new and socially recognised risk.

But in line with Beck's thesis about the nature of risk society are three main developments running through an understanding of disability. First, the globalisation of disability is increasingly recognised-all societies (poor as well as rich) are undergoing similar population transformations (albeit with notable exceptions such as those in countries devastated by the AIDS virus). Disability thus becomes simultaneously both a biographical event and one shared with different cultures and societies across the globe.

Second, disability experiences are themselves hugely (and increasingly) diverse. Under the guise of the welfare state, growing up was compressed into a fairly limited range of institutions and identities (notably in respect of income and lifestyles). Disability in the post-welfare society, however, has substantially expanded in respect of social opportunities as well as new inequalities and divisions (Cartmel and Furlong, 1997; Vincent 1995).

Third, disability is also being changed by what the late Ulrich Beck (1992) describes as the era of reflexive modernization. This may be conceived in terms of how individuals and the lay public exert control and influence on the shape and character of modernity. At its core, Beck's (1992: 10) approach suggests the thesis that '...the more societies are modernised, the more agents (subjects) acquire the ability to reflect upon the social conditions of their existence and to change them in that way'. For disabled people, this highlights the move from conditions of structured oppression towards the possibility of new, consumer-based lifestyles (Fornas and Bolin, 1995). On the other hand, this shift certainly goes hand-in-hand with the marginalisation of significant groups of disabled people, trapped in the contradiction between decreasing personal incomes (income and savings) and the steady withdrawal of support from the state for their future pension provision (Powell, 2001).

These developments confirm the seriousness of the challenge facing disabled people. In reality in terms of their social position, the young have moved into a new 'zone of indeterminacy' which is marginal to work and welfare (Epstein, 1998). Disabled people experience the world 'truly as though they were riding (as Giddens 1991,28 expresses it in his description of high modernity) a juggernaut': '...it is not just that more or less continuous and profound processes of change occur; rather, change does not consistently conform either to human expectation, or to human control'. This may seem a relatively abstract description of the crisis which disabled people may experience but it rather accurately conveys the reality of what may happen to disabled people in situations of rapid change.

4. RISK, SELF-AUTONOMIZATION AND MANAGING OLD AGE: A POST-WELFARE SOCIETY?

Disability is itself becoming a more social, reflexive and managed process, notably in the relationships between the individual, the state and a range of public as well as private services; this involves the 'political domain'. Coupled with this, processes and relationships in the management of disability are decided by political rationalities (neo-liberalism) that are bound up with ideological and philosophical questions of self-governance and autonomy. Neo-liberalism considers that a welfare society must reflect only the interplay of social and

political structures forged out of self-responsibility and consumerism (Leonard 1997; Powell 2001). In recent years, disabled people as *autonomous* consumers derive their 'education', individually and collectively, from a range of social policies, institutions and sites, so that the organisation of education involves market forces, schools, state and families.

The neo-liberal dominance in social policy has been successful because it has identified existential concepts such as self-responsibility, self-governance and self-care that are said to facilitate human action (Leonard 1997). The regulation of personal conduct has shifted from being presented as a responsibility of the state to the responsibility of micro-level social actors such as 'professional experts' and 'disabled people' as 'consumers' (Epstein, 1998). The implications are profound. As Nikolas Rose (1996: 59-60) has pointed out:

'... the disadvantaged individual has come to be seen as potentially and ideally an active agent in the fabrication of their own existence. Those 'excluded' from the benefits of a life of choice and self-fulfilment are no longer merely the passive support of a set of social determinations: they are people whose self-responsibility aspirations have been deformed by the dependency culture, whose efforts at self-advancement have been frustrated... they are to be assisted as active citizens [through] programmes of empowerment... enable them to assume their rightful place as the self-actualizing and demanding subjects of an 'advanced' liberal democracy'.

Here neo-liberalism attempts to define the social policy domain, interpret valid human needs. Under neo-liberalism, the state re-invents itself and its welfare subjects based upon minimal intervention and regulation via a rolling program of privatization, deregulation, and contraction of welfare services (Estes *et al.* 2001). Within the 'mixed economy of welfare', there has been the social construction of a market-oriented, consumer-based approach to the delivery of education and the role of disabled people as consumers. As Leonard (1997) claims the neo-liberal state is being reorganized to include retention of a strong centre to formulate policy but the dissemination of responsibility for policy implementation to managerial regimes. As Gordon (1997: 36) points out:

'The fulfilment of the liberal ideal... is a recasting of the interface between the state and society to one of market order... becomes the ambition of neo-liberalism to implicate individuals as players in the market game administered by actors'.

Management as an administrative power (cf. Habermas 1992) has been presented as consolidating neo-liberalism by adding 'choice' and reducing 'risks' and 'problems' associated with disabled people in education system in UK: a move away from the state as education provider for schooling subjects" to a managerial one of "monitoring" and "assessment" in neo-liberal market economy (Fornas and Bolin, 1995).

The movement away from a traditional local authority role of implementing state education to an actual and privatised role of 'management' is a feature of the risk society – "teaching professions" have had their knowledge base transformed from philanthropic 'teacher' to 'manager' of budgets, audits and accounting systems ((Fornas and Bolin, 1995). In emerging neo-liberal managerial regimes, judgement is increasingly bound up with managerial imperatives concerning risk assessment, corporate objectives, purchasing and resource control ((Fornas and Bolin, 1995). The devolution of managerial responsibilities is intended to empower disabled individuals and to constrain professional autonomy by having such managers internalize budgetary disciplines and translate social policy imperatives (Leonard 1997).

These imperatives have had a major impact upon social policy and disability. Such neo-liberal reforms were about recasting disabled people as consumers in a market place to be managed by managerial regimes (Powell 2001; cf. Habermas 1987). Education management

as an administrative power are also 'risk-assessors' and 'enforcers' of the mixed education economy, a discourse that leaves disabled people who engage in 'education market', on the contradictory and "risky" ground of being simultaneously 'consumers' and potential 'problems' individuals (Biggs and Powell 2001; Powell and Biggs 2000).

Furlong and Cartmel (1997) argues that neo-liberalism consistently equates self-responsibility with freedom, with disabled people presented as active agents in a consumer market. However, divisions associated with class, gender and ethnic position may still leave many poorer disabled people highly vulnerable - despite the neo-liberal vision of the 'responsible consumer'. Gendered inequalities may be especially important in this scenario. As Nancy Fraser suggests:

'Participants in the 'masculine' subsystem are positioned as *right-bearing beneficiaries* and *purchasing consumers of services*. Participants in the 'feminine' subsystem, on the other hand, are positioned as *dependent clients*' (1987: 113).

5. CONCLUSION

By constituting risk as a centrally defining motif of "late modernity" this article contributes to new perspective for 'critical sociology of disability'. This article has raised questions about the historical and contemporary understanding of social forces that are an important qualification in understanding the shifting discourses associated with the transformation from the welfare state to the risk society. Disabled people it might be argued are affected by two major changes in respect of access to support on the one side, and the construction of identity on the other. On the one side, there is the creation of 'no care' zones where community supports may disintegrate in the face of inadequate services and benefits. On the other side, there may equally be the emergence of 'No Identity Zones', these reflecting the absence of spaces in which to construct a viable identity for disabled people (Phillipson and Biggs 1999).

The argument here is that marginality is now being experienced in a new and somewhat distinctive way by disabled people. Marginality, for much of the post-war period, could be reclaimed through identity constructed out of an emerging consensus regarding education and social welfare (Fornas and Bolin, 1995). The collapse of this consensus has exposed once again the vulnerable status of disabled people. But this vulnerability is not just about the material experience of deprivation, it also reaches into the texture of day-to-day living. For more affluent groups, a temporary solution seems to have been found in the the promotion of new lifestyles. The social and existential vacuum which this suggests reinforces the sense of uncertainty about the identity of disabled people (Epstein, 1998). The great advantage of the loosening of 'welfarist' notions of age lies in the *possibility* of an alternative social and political construction of disability beginning to emerge which might move beyond welfare structures based on assumptions of dependency. This new politics would present a challenge to the constraints placed upon lifecourse development for disabled people and opportunities for meaningful agency without losing sight of the social threats posed by new forms of risk and insecurity.

Biography

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