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Adults Only: Disability, Social Policy and the Life Course

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ABSTRACT

This article examines the relationship between disability, generation and social policy. The moral and legislative framework for the post-war welfare settlement was grounded in a long-standing cultural construction of 'normal' life course progression. Disability and age (along with gender) were the key components in this construction, defining broad categories of welfare dependency and labour force exemption. However, social changes and the emergence of new policy discourses have brought into question the way in which we think about dependency and welfare at the end of the twentieth century. The article suggests that, as policy-makers pursue their millennial settlement with mothers, children and older people, they also may be forced to reconstruct the relationship between disabled people and the welfare state.

In Britain (perhaps more so than in North America) the development of disability studies has been driven by a focused application to specific social policy issues (Barnes, 1991; Morris, 1993; Oliver and Barnes, 1998). Using a social model perspective, disabled people and their allies have increasingly challenged the normative framework that underpins disability policy-making in Britain. In its place they have promoted new policy alternatives and envisioned a more enabling society (Swain *et al.*, 1993; Zarb, 1995; Hales, 1996; Priestley, 1999). At the turn of the century, disability is very much on the social policy agenda and, not surprisingly, social policy issues remain at the top of the political agenda for disabled people's organisations too.

During the past few years, there have been a number of significant developments in British disability policy-making. We have seen the enact-

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ment of anti-discriminatory legislation (albeit in a restricted form) and the emergence of a Disability Rights Commission. We have seen the introduction of direct payments for community support services and tentative moves towards a more inclusive education system. These developments, largely in response to demands from the disabled people's movement, have challenged many of our traditional assumptions about the relationship between disabled people and the welfare state. However, there have also been significant challenges to the legitimacy of disabled people's claims upon that welfare state, including the perceived validity of disability benefit claims. Balanced against this is the expectation that disabled people will be encouraged to work. In the language of New Labour, new rights bring new responsibilities.

A NEW WELFARE SETTLEMENT?

There is little doubt that the apparent welfare consensus of the post-war period has come under increasing strain. The combined pressures of fiscal crisis, technological advance and demographic change have fuelled new debates about the future of social policy in Britain, and about the moral framework on which a new welfare consensus might be built (Williams, 1992; 1997). In the era of Beveridge and Titmuss, social policy was seen to offer a kind of social glue that would bind together a welfare society for all (although the definition of 'all' was always highly gendered and ethnocentric). After the economic crises of the 1970s, and throughout the 1980s, there were increasing pressures to 'roll back the frontiers' of the welfare state in the face of seemingly inexorable welfare expansionism (Gamble, 1988). By the end of the Thatcherite era, the consensual legitimacy of redistributive welfare was crumbling, and the welfare state was increasingly perceived as a minimal safety net for the failures of the market.

The breakdown of the post-war welfare settlement, and the increasing contradictions of a contemporary society in flux, have engendered many new welfare debates. At the start of the twenty-first century, politicians and pundits are engaged in a major public reappraisal of the nature of social exclusion and the most appropriate responses to it. This attempt at a new welfare settlement involves not only the management of new economic risks but also the development of a new normative framework for the future of social policy (Williams 1997; Cox, 1998). The search for a moral re-ordering, or re-embedding, of social policy-making has opened up new discursive spaces, in which new political narratives and new interpretations of welfare are competing for cultural currency.

Within these debates there has been an increasing tendency to draw on sociological constructions of the life course as justification or explana-

tion of policy trends and goals. For Brückner (1995), social policy has become life course policy, dealing as it does with the negotiation and management of risk over a lifetime. Thus, Walker and Leisering (1998) draw on the work of Beck (1992) and Giddens (1991) in order to develop a dynamic account of social policy within a life course approach (see also, Falkingham and Hills, 1995). The recognition that social policy is life course policy, they argue, poses many new challenges to government. Taken in this context, the central task of contemporary welfare debate is to develop new constructions of the 'normal' life course for a changing society. However, traditional normative frameworks remain deeply rooted, continuing to shape our cultural perceptions of normality and life course progression.

Giddens (1991), for example, emphasises changing forms and levels of consumption in late modernity as indicative of a perceived shift from life course to life style. In this sense, he suggests that our cultural narratives of identity have become more malleable. At a societal level, Beck *et al.* (1994) highlight the concept of reflexive modernisation, as distinct from earlier forms of modernity. Beck in particular seeks to show how modernising processes also act upon themselves within this context. In this scenario, the emerging new social movements (in this case the disabled people's movement) may be regarded as central actors in the renegotiation of traditional identities and politics. As I will seek to show in this article, the disabled people's movement has been a prime mover in influencing social policy discourse towards a redefinition of both disability and the normal life course.

Thus, the article highlights the relationship between disability, generation and social policy in contemporary Western societies. The argument presented rests on an assertion that policy constructions of disability and age have been historically interdependent – part of a common policy agenda. The disabling assumptions of past social policies have been contingent upon a particular construction of the normal life course, which arose in order to legitimise the social relations of production and reproduction in a capitalist society. Within the social upheaval of late modernity, these social relations, and the life course assumptions attached to them, have become increasingly contested.

CONSTRUCTING THE LIFE COURSE

For the purposes of this article, I will focus on the social construction of the life course in a fairly broad conceptual way, using examples to illustrate specific points relevant to disability and the future of social policy. Conceptually, the notion of life course is often employed to indicate some-

thing about the way in which our lives are divided into significant stages or phases (such as childhood, adulthood or old age). However, the life course is also a dynamic concept, which can be employed to explain how our lives flow through and around such stages. Although we often perceive a clear relationship between chronological age and life course development, the construction of the life course is culturally embedded and socially contingent. That is to say, the key stages in life course transition are more socially created than biologically determined. Moreover, the range, cultural currency and social significance of particular life course phases vary over time and between cultures.

Thus, we can look to particular periods of European history where new life course categories emerged or acquired particular social significance. For example, there are numerous historical accounts of the way in which 'childhood' has been invented, reinvented, exploited, denied and rediscovered (e.g., deMause, 1976; Walvin, 1982; Cunningham, 1995; Hendrick, 1997; James and Prout, 1997). Similarly, the social construction of old age has assumed different characteristics at different moments of social and economic development (e.g., Phillipson, 1982; Phillipson *et al.*, 1986; Phillipson, 1998).

In more recent years there has been a greater and greater diversification of life course labelling, with the emergence of new terms and categories like 'neonate', 'toddler', 'pre-school', 'pre-teen', 'third-age', 'old old' and so on. Such developments are frequently associated with post-structural analyses of social change, suggesting an increasing need for the negotiation of new identities and life course risks (Giddens, 1991; Beck, 1992). However, it is also significant that these perceptions of risk, and the consequent proliferation of new life course labels, have been concentrated around the contested areas of youth and old age (Phillipson, 1998). To be more specific, there has been rather less room for the negotiation of new labels in the central, and relatively uncontested, domain of independent adulthood.

This is partly a consequence of technological advance, resulting in massively decreased infant mortality and increased longevity in Western industrial societies. These demographic changes, coupled with equally dramatic developments in education, employment and welfare, have heightened the social significance of population sub-groups outside the traditional realms of adulthood. The increasingly contested territory at the margins highlights the centrality of adulthood as a pivotal concept in the construction of a 'normal' life course. In order to understand the relationship between disability and the life course in British social policy-making it is important to look more closely at the association between adulthood, independence and individualism.

INDIVIDUALISM AND THE INDEPENDENT ADULT

The concept of the life course is often subsumed within a contemporary sociology that assumes a high degree of diversity, fluidity and individual choice. Consequently, life course studies are frequently related to individual decisions, trajectories and outcomes. However, Meyer (1988, p. 49) argues that this emphasis on individualism may have less to do with economic individuation, or the efforts and choices of individuals *per se*, than with the collective 'cultural assumptions of an individualist society'. Thus, he argues:

the modern institutionalized life course structured around the rights and development of the individual may be less a consequence of political and economic changes than a deliberate and grounded reflection of the collective cultural authority given the perspective of the individual. That is, in individualist societies, the elaboration of the structured life course may reflect the culture of individualism more than the efforts of natural individuals or the functioning of an individuating social organization.

Townsend (1981) argues that we should not marginalise the influence of socioeconomic factors. Discussing the notion of structured dependency, Townsend explains the role of individualism in the development of social policy for older people as arising from a tendency to ignore the role of economy, state and structural inequality in industrialised Western societies. This 'individualistic approach', he argues, was encouraged by the development of neo-classical economic theory, functionalist sociology and the empirical traditions of social administration (p. 6).

This is a familiar argument in disability studies, where numerous authors have identified a link between individualising models of disability and the development of social policy for disabled people (e.g., Ryan and Thomas, 1980; Oliver and Barnes, 1998). Thus, it is the individual, rather than the collective needs of disabled people, which has been at issue in social policy-making. As Dalley (1991, p. 3) points out, social policy-making for disabled people in Britain has involved a process ...

whereby the experience of disability is fragmented into a series of individualised episodes devoid of sociological significance. Accordingly, disability becomes unique for each individual; the disabled person must make his/her own adjustment to the circumstances of disablement and negotiate a means of 'coping' as best s/he can.

The definitions of disability employed in British welfare policy have been framed almost exclusively within this individual model, rather than within a social model approach. For example, the 1948 National Assistance Act took sickness and impairment as a combined category, an association later reinforced in the 1970 Chronically Sick and Disabled Persons' Act and the 1972 Local Government Act. Such definitions continue to permeate more

recent legislation, such as the 1989 Children Act, the 1990 NHS and Community Care Act and the 1995 Disability Discrimination Act. This emphasis on medical or functional definition is consistent with the broad flow of policy-making, which confuses disability with impairment and with illness (Barnes and Mercer 1996; Chadwick, 1996). For Abberley:

Functional definitions are essentially state definitions, in that they relate to the major concerns of the state ... production, capacity to work ... welfare, demands that have to be met from revenue if they cannot be offloaded on some other party ... (Abberley 1993, p. 141)

For this reason, the individualism of the medical model and the individualism of contemporary life course construction are not unconnected. The social construction of age in Western industrial societies pivots upon an idealised notion of independent adulthood (Hockey and James, 1993). This normative construction is not only disabling, but highly gendered and ethnocentric. It is the image of the non-disabled, white, heterosexual, male adult that has been central to the idealised life course constructions inherent in British social policy. Indeed, the construction of an idealised life course trajectory, pivoting around the notion of independent adulthood, has been a critical factor in defining the boundaries of legitimate welfare claims.

Thus, Meyer (1988) points out that the life course is a central and purposive cultural construct in modern societies, and that it is highly organised at the collective level. Enormous collective social investments have been made to ensure that we make 'proper' life course transitions (e.g., from adolescence to adulthood). Similarly, major social institutions have emerged to manage the problems arising from 'improper' transitions (i.e., perceived failure to achieve the transition to independent adulthood). For Meyer then, 'the cultural rules of the life course' are a central factor in the development of our social policies and institutions (p. 58). As a consequence, our supposed 'choices' about individual life course trajectories are heavily influenced by shared cultural scripts and by objective social positioning. As I have suggested briefly here, we may be able to learn a great deal about the relationship between age, disability and social policy by deconstructing some of these cultural rules.

DISABILITY AND THE LIFE COURSE

The historical foundations of public welfare provision in Britain rest upon a particular construction of generation and disability, and their implications for labour force participation in the emerging wage economy of pre-industrial England (Priestley, 1997). Age and disability continue to serve as mutually supportive administrative categories in the discourse of

contemporary British social policy. From an economic perspective, such categories have been important factors in the control of labour supply (Stone, 1984; Foner, 1988). In cultural terms, their primary impact has been to police the boundaries of normalcy in an idealised version of the normal life course (Abberley, 1993; Davis, 1995).

The framework for British social policy has evolved over a period of at least 400 years, and there have been many social upheavals during that time. However, it is interesting to note that the primary administrative categories for welfare entitlement have remained largely unaltered – motherhood, childhood, old age and disability. As Stone (1984) points out, such categories are very flexible. Each has been continually defined and redefined, in response to changing social and economic circumstances, but the general themes have remained the same. Throughout the history of modernity, mothers, children, elders and disabled people have been largely exempt from labour force participation in Britain. Their respective claims on the welfare state have been perceived as broadly legitimate, although hotly contested at the margins.

Of these broad categories, motherhood stands out because it is the only basis for labour force exemption not grounded in assumptions of pathological dependency. Mothers have certainly been constructed as dependent upon private patriarchy. However, their entitlement to redistributive welfare from the public purse (in the absence of a reliably solvent man) has been based on perceptions of a contribution to society, through unpaid caring labour in the private domain. By contrast, the legitimacy of welfare claims by children, elders and disabled people has been based on perceptions of their inherent dependency. In this sense, mothers give while others take.

There has been a great deal written about the relationship between motherhood, welfare policy and patriarchy (e.g., Land, 1976; Thorne and Yalom, 1982; Gordon, 1989; Glendinning and Millar, 1992; Pascall, 1997). Indeed, single motherhood has occupied the centre ground of recent welfare debate in both Britain and the USA. However, as I have indicated, it is not the primary focus for this article. Within a gendered construction of the 'normal' life course, the dual concepts of age and disability have defined who should be cared for (Priestley, 1997) while concepts of motherhood have defined who should do most of the caring. For the purposes of this article, I will focus on the former rather than the latter in relation to life course construction.

It is in the construction of dependency that age and disability are most closely intertwined. However, it is clear that the social construction of a normal life course through social policy associates dependency only with

certain stages of life course development, specifically with childhood and old age. Phillipson *et al.* (1986) identify the mutual construction of dependency and ageing in modern societies, as do Arber and Evandrou (1993). Kaufmann and Leisering (1984) argue for a connection in the way that children and older people became marked out by social policies as the first 'welfare classes'. Similarly, Hockey and James (1993) describe their experience of finding unexpected commonalities in the experience of young children and older people.

In particular, Hockey and James note parallel regimes of control, in which both children and older people may be denied choice and self-determination over their daily lives. In this way, both are 'made dependent' through the controlling strategies of more powerful independent adults (such as parents or staff). In both cases, Hockey and James argue that the creation of enforced dependency is simultaneously 'masked by loving care'. They also identify common forms of corporeal resistance on the part of young children and older people in such situations (such as feigning deafness or refusing to eat the kind of food provided within the regime). Hockey and James conclude that both sets of experiences betray a common process of 'infantilisation' (see Gresham, 1976). They then employ this concept in order to explain the social significance of life course construction.

Through overt and hidden social practices, whether of caring control or controlling care, both elderly people and young children were being denied full personhood for, if personhood in Western society is symbolized through ideas of autonomy, self-determination and choice, then these were the very options being edited out by those caring for the very young and the very old. (Hockey and James, 1993, p. 3)

It does not take a huge leap of imagination to see that such images could just as easily have come from the experiences of disabled people (of all ages). Indeed, Hockey and James make this association explicit in their work, drawing on some significant disability texts in the process (e.g., Barnes, 1990). The important point here is that the juxtaposition of disabled lives with independent adulthood has nothing ostensibly to do with age, yet the similarities are striking. The following section highlights some examples from British social policy in order to illustrate the relevance of this argument.

SOME POLICY EXAMPLES

By most popular measures the life course begins at birth. However, it is important to think about the way in which social policy shapes life course trajectories before birth too. For disabled children and their parents this is

particularly important, due to the increasing options presented by medical knowledge and genetic research. The development of new technologies and policies for genetic screening has added pressure on parents to use biomedical knowledge in planning their families (Shakespeare, 1995; 1998). In many areas, pre-natal screening for significant foetal impairments is offered only subject to discussion or acceptance of termination in the event of a positive result (Farrant, 1985; Hubbard, 1997). More generally, the 1969 Abortion Act allows for termination of pregnancy up to full term only where the foetus is known to be at risk of severe impairment. In this sense, the existing policy framework can make it difficult to 'get started' on life course progression at all. Once born, children with significant impairments may be denied life-saving treatments, as in the case of hole-in-the-heart operations for children with Down's Syndrome (Silverman, 1981). The cumulative effect of the current policy framework is then to devalue the potential of disabled lives and to short-circuit the disabled life course from birth directly to death (without a life in between).

Disabling cultural representations have often portrayed adults with perceived impairments as occupying an 'everlasting childhood' (Thomas, 1978). Such perceptions have been bolstered by welfare policies and institutional practices that create relationships of enforced dependency. Traditionally, this assumed dependency was enacted through the provision of segregated residential accommodation. However, the ideology of 'care', which dominates social welfare policy for disabled adults in Britain, is equally evident in policies for community care. Despite a rhetoric of independence, implementation of policies for 'care management' and 'continuing care' in the health and social services frequently undermine the personhood of disabled adults, and infantilise them through controlling discourses of professional and informal care (Morris, 1993; Priestley, 1998b, 1999).

Vulnerability and risk are recurrent themes in the social construction of non-disabled childhoods too (James *et al.*, 1998; Scott *et al.*, 1998) and social policy plays an important role in the reproduction of these themes. However, there has been a tendency for social policy to construct disabled children as particularly vulnerable. This kind of imagery is a recurrent feature of disabling cultural representations (Haffter, 1968; Davidson *et al.*, 1994) and charity campaigns, such as Telethon and Children in Need in the UK (Morris, 1991). Such assumptions are reproduced in the form and content of child policy. For example, Section 17(10) of the 1989 Children Act in England defines disabled children *de facto* as 'children in need' and the provision for registers of those children so defined has the

potential to add differential levels of administrative surveillance to their everyday lives (Middleton, 1996). Indeed, many disabled children inhabit a social world dominated by adult surveillance and control, denied access to the normal processes and experiences of childhood (Priestley, 1998a).

Disabled young people are less likely to have their needs met within the mainstream of educational and welfare provision. They are more likely to live in institutional settings and to have contact with statutory child protection services. They are considerably over-represented in the population of those who are 'in care' or 'looked after' (Morris, 1997). Although there is evidence that disabled young people hold similar life course ambitions to their non-disabled peers (e.g., Anderson and Clarke, 1982; Norwich, 1997), they are frequently subject to low adult expectations and partial information in planning for their future. Thus, for example, the Warnock Report envisaged services that would support a life of 'meaningful activity without work' for many disabled young people.

Indeed, there is a sense in which disability has been constructed as a liminal, yet enduring, 'adolescence' (Thomas, 1978) and this imagery has been reproduced in a variety of social policy areas. Past policies for further education, day centres and employment training have consigned many people (often with learning difficulties) to a nether world of unresolved transitions in which true adult status is neither envisaged nor attained (Barnes, 1990). Thus, Tisdall (1997) highlights the life course significance of training opportunities for people with learning difficulties by asking the question 'training for what?' She concludes: 'Both theoretically and practically, young disabled people are at risk of being marginalised for at least three reasons: because they are disabled, because they are young and because they are in "transition".'

For those disabled people who do seek to operate as independent 'adults', two issues seem central – work and parenting. Idealised constructions of adulthood emphasise parenting and partnering as a signifier of adult status. The freedom to enter into, and sustain, such relationships is one of the cornerstones of adulthood (although this representation has been highly gendered in social policy terms). There are many barriers to disabled people in this regard. Like older people and children, disabled adults have been desexualised or perceived as a sexual threat (Shakespeare *et al.*, 1996; Hawkes, 1996). Disabled people continue to be constructed as 'incompetent' or unusual family members – particularly as potential parents. Such assumptions have been conveyed in policies and practices for adoption, fostering, genetic counselling, sterilisation and so on.

Examples such as the recent case between Bradford Social Services and Penny Roberts over custody of her first baby underline the point. Penny,

who had been in receipt of community care support services when she became pregnant, was told that her baby would be taken into foster care when she asked for additional staff to help her with parenting. Bradford Social Services argued that having a second carer would simply add further stress to the child's environment. Speaking on Radio 4 news (9 August 1998), Penny argued that she did not want someone to look after the baby for her but that she simply needed help with some of the physical tasks involved in parenting. At the time of Penny's appeal, Meg Henderson wrote in the *Independent on Sunday* that 'if this unfortunate child is cared for alongside its mother it stands no chance of a normal life' (16 August 1998). More generally, policies for the provision of housing, education, health, welfare and employment all raise barriers to family life for disabled adults.

The social construction of disability has also drawn heavily on cultural associations with advanced ageing and with death (Shakespeare, 1994). Kristeva (1982) argues that fear and avoidance of the Other serves as a mechanism for the affirmation of identity, and ultimately represents a fear of death. For Young (1990), ageing and impairment fit well with this explanation. Thus, 'The aversion and nervousness that old and disabled people evoke, the sense of their being ugly, arises from the cultural connection of these groups with death' (p. 147). However, there is a sense in which such associations have less to do with chronological age than with the construction of a 'social death' for older people and disabled adults (see Millar and Gwynn, 1972, or Barnes, 1990). The medicalisation of disability policy-making has reinforced such associations, and many local authority social services departments continue to regard 'disabled and elderly people' as a unitary category for service provision. From a social policy perspective, it is the assumed welfare dependency of these groups that underpins their conflation. However, there is also a paradox here for older disabled people.

The majority of people with impairments are over retirement age and a majority of those over the age of 75 are disabled in some way (Martin *et al.*, 1988). Disability is then a 'fact of life' for older people, if not a social norm. Despite this demographic truism, or perhaps because of it, older people with impairments are rarely regarded as 'disabled' in the way that children, young people and adults often are (Townsend, 1981, p. 11). Older people have also been under-represented in the written accounts arising from the disabled people's movement (save for those who have grown older within it). With one or two exceptions, transitions for older people have been left largely out of the equation (Zarb and Oliver, 1993).

Despite the demographic weighting of impairment towards the end of

the life course, disability policy-making has focused on issues affecting those of working age and below. Research on 'transitions' has emphasised early transitions from childhood (or adolescence) to independence, training, work and adulthood. In policy terms, older people have been excluded from many of the progressive developments that have occurred in services for 'younger disabled people'. For example, those under retirement age are treated separately by health authorities in relation to 'continuing care' and were initially ineligible to benefit directly from the provision of direct payments for community services under the 1996 Community Care (Direct Payments) Act. It is tempting to suggest that people with impairments over retirement age do not need to be defined as 'disabled' simply because they are already 'older', and can thereby make certain legitimised welfare claims on the state. In a cultural sense, they do not need to be 'othered' from their status as elders because of the conflation of disability with old age.

As these brief examples show, there is considerable mileage in using a life course approach to raise questions about the relationship between disability, age and social policy in the British context. Both disability and age have been employed as central constructs in the definition of welfare entitlement. Disabled people, like children and elders, have been infantilised by the development of social policies that rely on differential mechanisms of discipline and surveillance to maintain artificial states of dependency. Conversely, the medicalised association between disability and advanced ageing has legitimised policies for hastening the social, and in some cases the actual, death of disabled people. This analysis paints a rather bleak view of the relationship between disability and the life course in British social policy. However, the picture is not entirely negative and there have been a number of significant challenges, occurring on many fronts. The following section outlines some of these challenges in relation to the emerging disability policy of New Labour.

THE END OF LIFE AS WE KNOW IT?

The analysis presented so far is based on a reading of the historical development of social policy-making and life course construction, and reflects much of the situation as we find it today. However, there is evidence of significant change in the cultural construction of both disability and the life course in industrialised Western societies. Interestingly, new challenges to the construction of disability have coincided with re-negotiations of the life course itself. For example, the new sociology of childhood (Qvortrup *et al.*, 1994; James and Prout, 1997) presents a view of children as social actors, rather than vulnerable dependants. The United Nations Convention on the

Rights of the Child and, in England, the 1989 Children Act, go some way to endorsing this view in social policy. In legal and policy terms, children have become more like the idealised adult of traditional life course constructions – more independent, more competent and, as a consequence, more responsible for their own actions (Scott *et al.*, 1998).

In parallel, we have seen considerable challenges to the assumed dependency of older people. Popular movements against ageism are beginning to find favour with policy-makers worried by the economic realities of a demographic time bomb in Europe (Hughes, 1995; Fennell *et al.*, 1988; Walker and Naegele, 1999). The focus of contemporary welfare debates on ageing is increasingly to promote a discourse of competence and responsibility amongst older people, suggesting that they should take more responsibility in negotiating the changing economic and social risks of advancing age (such as pensions and nursing care).

Unsurprisingly, the renegotiation of life course risks has been focused on the margins of adulthood. However, the economic pressures of globalisation, coupled with a gender revolution in work and family practices, have also begun to challenge the idealised notions of male adulthood, which underpinned the post-war settlement. The apparently certain life course trajectories of non-disabled men have been increasingly undermined by technological and social upheaval. In many ways this is the most significant development of all, because it challenges the previously non-negotiable apex of 'normal' life course construction in industrialised Western societies. The increasing contradictions of late modernity have engendered many new welfare debates about both identity and structural inequality (Taylor, 1998). Attempts to re-embed British social policy within a more appropriate normative framework have opened up new discursive spaces, in which new political narratives and new interpretations of welfare are competing for cultural currency.

Within this renegotiation, the disabled people's movement has emerged as a significant force for change (Hasler, 1993; Davis, 1993; Campbell and Oliver, 1996). Its rapid growth has been characterised by the promotion of social model thinking and the questioning of traditional policy assumptions (Barnes, 1991). These new narratives of self-empowerment seek to reinstate the worth and personhood of disabled lives at all stages of the life course, although it is fair to say that they have been targeted predominantly at those of working age. Campaigns for inclusive education and independent living have engendered new policy debates, resulting in important legislative developments. The enactment of the 1995 Disability Discrimination Act, the 1996 Community Care (Direct Payments) Act and the publication of a Green Paper on 'inclusive' educa-

tion have challenged old life course assumptions about social death, otherness and assumed dependency. Answering questions from an audience of disabled people in Hounslow, Tony Blair argued that:

The danger for politicians, but also for everyone, is that when talking about disability issues, that we approach this in a way of saying 'What can we give to disabled people?'. But actually this should not be like that. It should be about 'how do we fulfil the potential and give opportunities to people to make the most of what they have?' (BBC News, 30 October 1998)

The second Queen's speech of the New Labour government (24 November 1998) provided an indication of what such a policy might look like. Disability issues figured prominently and the content of the speech suggested that action would indeed be taken on the main manifesto commitments – to enforce anti-discriminatory legislation and to encourage more disabled people to work. As with so much of New Labour thinking, the emphasis was on creating a balance between rights and responsibilities (while seeking to reduce spending from the welfare budget).

In the wake of consultation on the 1998 white paper *Promoting Disabled People's Rights*, the government confirmed its commitment to 'introduce legislation to establish a Disability Rights Commission, which will assist disabled people in securing comprehensive civil rights and help employers meet their obligations' (text of second Queen's Speech). The wording here is significant when we reflect on the implementation priorities for the 1995 Disability Discrimination Act. In particular, it is important to note the central place being given to employment in the current policy discourse of 'disability rights'; despite the fact that the majority of disabled people are over statutory retirement age. Either by accident or by design, the continual references to 'work' and 'employers' in New Labour's disability rhetoric are rarely matched by any reference to rights in terms of goods, premises or services. Yet, these are clearly within the remit of the Disability Discrimination Act.

Perhaps the most dramatic parliamentary struggles came with the passage of the 1999 Welfare Reform and Pensions Reform Act. Massive backbench revolt greeted Government proposals for changes to the existing arrangements for people in receipt of disability benefits. New Labour's welfare policies have sought to target assistance towards those perceived as being in greatest need. Specifically, the Department of Social Security announced that such measures would 'provide more help for those disabled people with the greatest need, in particular severely disabled children, those disabled at birth or early in life who do not have the opportunity to work, and people with the highest care needs and the lowest incomes' (quoted on BBC News, 24 November 1998). Here, the discursive

emphasis continued to be placed on those of (or below) working age. It was this group that became the primary focus of policy debate, rather than the majority of disabled people above working age.

Incapacity Benefit was 'modernised' and more closely linked to work, targeting those who have recently been employed, and who have paid National Insurance contributions. The 'all work' test was abolished and replaced with a new employability test. In principle, the 'single-gateway' to Labour's New Deal programme applies to all claimants, irrespective of disability status. There is more money to help disabled people find work and, for those who do find it, there is the Disabled Person's Tax Credit. Like the Working Families Tax Credit, this has been based on the 'Government's determination to make work pay' (Queen's Speech, 24 November 1998). There were guarantees of a minimum disability income. Younger disabled people with 'little hope of work' were promised up to £26.40 per week extra, and the mobility component of Disability Living Allowance has been extended to three and four-year-olds.

Taken as a whole, the package of policy measures emerging from New Labour's first term in office provides both new themes and old. The primary discursive distinction between those who will work and those who will not remains at the centre of disability policy-making, as it has done since the statutes of Henry VIII (Priestley, 1997). Unsurprisingly, the perennial priority to legislate on gateways to work and welfare benefits remains. However, the boundaries of these distinctions have become more contested and more blurred. The assumption is that younger disabled people will work and, to judge from the report of the Disability Rights Task Force (1999), that they will exercise their rights as citizens – that they will in a sense become 'adults' after all. Thus, the traditional administrative segregation of disabled people from the domain of independent adulthood is coming under increasing strain. More than ever before, disability policy-making in Britain has begun to take on the language of rights and participation, as developed within the disabled people's movement. It may not be much, but it is a start.

CONCLUSIONS

I began this article by arguing that certain broad categories of welfare entitlement have remained fairly static in the development of British social policy during the era of modernity. These broad categories – motherhood, childhood, disability and old age – have set the agenda for social policy-making and shaped our cultural expectations about dependency within the 'normal' life course. Throughout this period, social policy has played a major part in maintaining the powerful association between

normalcy and the construction of an idealised, independent, male adulthood. By comparison with this culturally constructed ideal, the lives of children, elders and disabled people of all ages have been necessarily devalued. More recently, the economic and social contradictions of capitalism in late modernity have brought many old assumptions into question. The globalisation of markets, new technologies, post-Fordist production methods and the breakdown of hierarchical bureaucracies have redefined many of our gendered notions about male and female adulthood. In the face of new opportunities and new risks, the assumptions of 'normal' life course transition, upon which so much post-war social policy rests, have become more diverse, more blurred and more contested.

The same cultural categories that legitimised the welfare settlements of the past are reflected in the heated welfare debates of today. Indeed, it is precisely the contested legitimacy of claims within these categories that defines the territory for welfare re-settlement at the turn of the century. However, policy debates around disability have begun, increasingly, to reflect discourses of independent adulthood (rather than the assumed dependency of infancy or old age). It would be naive to predict the outcome of these debates in the longer term. However, recent developments indicate that New Labour's intended welfare settlement must engage directly with disability issues and claims. It seems likely that the inevitable renegotiation of generational and life course risk in British social policy will require a parallel renegotiation with disabled people of all ages. In this scenario, we might expect to see further policy gains for the disabled people's movement as they seek to redefine the rights, responsibilities and interdependencies of 'normal' life course progression in contemporary societies.

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