

Reluctant Welfare State

Engaging History to Advance Social Work Practice in Contemporary Society

NINTH EDITION

BRUCE S. JANSSON





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Council on Social Work Education's Educational Policy and Accreditation Standards by Chapter



The Council on Social Work Education's *Educational Policy and Accreditation Standards* requires all social work students to develop the nine competencies listed below. The Council also identifies 31 related component behaviors that help operationalize the nine competencies. The competencies and component behaviors are listed below, along with the book chapters that address them in whole or part. In addition to the information shown below, multicolor icons throughout chapters and "Competency Notes" at the end of each chapter help identify these connections.

	Competencies and Component Behaviors	Chapter(s) Where
	The 9 Competencies and 31 Component Behaviors (EPAS, 2015):	Referenced:
Competency 1	Demonstrate Ethical and Professional Behavior:	
a.	Make ethical decisions by applying the standards of the NASW <i>Code of Ethics</i> , relevant laws and regulations, models for ethical decision making, ethical conduct of research, and additional codes of ethics as appropriate to context	1, 2, 3, 4, 5, 6, 7, 8, 9, 11, 12, 13
b.	Use reflection and self-regulation to manage personal values and maintain professionalism in practice situations	2, 4, 6, 10, 13
c.	Demonstrate professional demeanor in behavior; appearance; and oral, written, and electronic communication	1, 3, 4, 5, 7, 8, 9, 10, 11, 12, 13
d.	Use technology ethically and appropriately to facilitate practice outcomes	
e.	Use supervision and consultation to guide professional judgment and behavior	1, 7
Competency 2	Engage Diversity and Difference in Practice:	
a.	Apply and communicate understanding of the importance of diversity and difference in shaping life experiences in practice at the micro, mezzo, and macro levels	1, 3, 4, 5, 6, 7, 8, 9, 10, 12, 14
b.	Present themselves as learners and engage clients and constituencies as experts of their own experiences	
c.	Apply self-awareness and self-regulation to manage the influence of personal biases and values in working with diverse clients and constituencies	2, 6, 8, 10, 11, 12
Competency 3	Advance Human Rights and Social, Economic, and Environmental Justice:	
a.	Apply their understanding of social, economic, and environmental justice to advocate for human rights at the individual and system levels	1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 12, 14
b.	Engage in practices that advance social, economic, and environmental justice	1, 2, 5, 6, 9, 10, 12, 13, 14
Competency 4	Engage in Practice-informed Research and Research-informed Practice:	
a.	Use practice experience and theory to inform scientific inquiry and research	6, 8
b.	Apply critical thinking to engage in analysis of quantitative and qualitative research methods and research findings	2, 14
c.	Use and translate research evidence to inform and improve practice, policy, and service delivery	5, 9, 14

	Competencies and Component Behaviors The 9 Competencies and 31 Component Behaviors (EPAS, 2015):	Chapter(s) Where Referenced:
Competency 5	Engage in Policy Practice:	
a.	Identify social policy at the local, state, and federal level that impacts well-being, service delivery, and access to social services	1, 2, 4, 5, 6, 8, 9, 10, 11, 12, 14
b.	Assess how social welfare and economic policies impact the delivery of and access to social services	1, 2, 4, 5, 6, 8, 9, 12
c.	Apply critical thinking to analyze, formulate, and advocate for policies that advance human rights and social, economic, and environmental justice	2, 3, 5, 6, 9, 10, 11, 12, 13, 14
Competency 6	Engage with Individuals, Families, Groups, Organizations, and Communities:	
a.	Apply knowledge of human behavior and the social environment, person-in- environment, and other multidisciplinary theoretical frameworks to engage with clients and constituencies	3, 6, 7
b.	Use empathy, reflection, and interpersonal skills to effectively engage diverse clients and constituencies	
Competency 7	Assess Individuals, Families, Groups, Organizations, and Communities:	
a.	Collect and organize data, and apply critical thinking to interpret information from clients and constituencies	4, 6, 10
b.	Apply knowledge of human behavior and the social environment, person-in- environment, and other multidisciplinary theoretical frameworks in the analysis of assessment data from clients and constituencies	4, 6
c.	Develop mutually agreed-on intervention goals and objectives based on the critical assessment of strengths, needs, and challenges within clients and constituencies	6
d.	Select appropriate intervention strategies based on the assessment, research knowledge, and values and preferences of clients and constituencies	6
Competency 8	Intervene with Individuals, Families, Groups, Organizations, and Communities:	
a.	Critically choose and implement interventions to achieve practice goals and enhance capacities of clients and constituencies	2,7
b.	Apply knowledge of human behavior and the social environment, person- in-environment, and other multidisciplinary theoretical frameworks in interventions with clients and constituencies	12
c.	Use inter-professional collaboration as appropriate to achieve beneficial practice outcomes	
d.	Negotiate, mediate, and advocate with and on behalf of diverse clients and constituencies	10, 11, 12, 14
e.	Facilitate effective transitions and endings that advance mutually agreed-on goals	
Competency 9	Evaluate Practice with Individuals, Families, Groups, Organizations, and Communities:	
a.	Select and use appropriate methods for evaluation of outcomes	
b.	Apply knowledge of human behavior and the social environment, person- in-environment, and other multidisciplinary theoretical frameworks in the evaluation of outcomes	7, 8
c.	Critically analyze, monitor, and evaluate intervention and program processes and outcomes	
d.	Apply evaluation findings to improve practice effectiveness at the micro, mezzo, and macro levels	

and macro levels



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Engaging History to Advance Social Work Practice in Contemporary Society

Bruce S. Jansson

University of Southern California



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Preface

published the first edition of *The Reluctant Welfare State* in 1988. It was the first analysis of the evolution of the American welfare state that placed social welfare policy in the broader context of the nation's politics, culture, and economics. It discussed the pivotal role of presidents. It brought history up to the present. I asked moral and ethical questions in each chapter, such as whether Americans were sufficiently attentive to the needs and aspirations of members of specific at-risk populations and whether the nation sufficiently protected the rights of at-risk populations. More recently, I've criticized the extreme income inequality in the United States that exceeds levels of 20 other industrialized nations.

Every social worker should be versed in social welfare history. It grounds us in the strengths and weaknesses of the American welfare state. It showcases the work of policy advocates including many social workers. It gives us insights into specific at-risk populations, not only how they have been marginalized, but how they have empowered themselves. Social welfare history informs us of many programs and policies in the American welfare state so that we can inform our clients about their benefits, opportunities, and rights. It helps us apply ethical principles to guide professional practice by applying standards from the National Association of Social Workers (NASW) Social Workers' Code of Ethics.

This book contains many inserts that facilitate these skills by posing specific issues drawn from the history of specific eras. These include one titled **Ethical Analysis of Key Issues and Policies** and **Critical Analysis**. It provides a **Policy Scoreboard** at the ends of most chapters to summarize the major social policies that constitute the American welfare state. It discusses how contemporary Americans can draw on

meritorious policies of prior eras while not repeating errors of the past.

I've used a **diversity perspective** in this and prior editions. I discuss in this edition how members of many populations have been marginalized in specific historical eras including women; African Americans; Asian Americans; older persons; Native Americans; Latinos; children and adolescents; persons with physical and mental challenges; persons with substance abuse and mental health issues; lesbian, gay, bisexual, and transgender persons; persons accused of violating laws and residing in, or released from, correctional institutions; immigrants; low-income persons; homeless people; and white blue-collar people. I also discuss how members of these groups have successfully advocated for themselves and with members of other at-risk populations.

I discuss political, economic, and cultural *constraints* that American policy advocates have confronted when they seek policy reforms. I also discuss political, economic, and cultural *opportunities* that policy advocates encounter. The thousands of policy achievements in local, state, and federal jurisdictions in American history came from tens of thousands of committed policy advocates who helped build a more humane nation.

I present a **multi-level advocacy model** in Chapter 2 that includes micro policy advocacy at the level of individuals, mezzo policy advocacy at the level of communities and agencies, and macro policy advocacy at the level of local, state, and federal governments. I refer to advocacy at these three levels throughout the book. I've augmented my discussion of the presidency of Barack Obama in his second term, such as discussing his role in advancing the rights of LGBT people.

I discuss in considerable detail the life, candidacy, and presidency of Donald Trump in Chapter 13.

I discuss the ethical challenges that his presidency poses for the social work profession. Many of his policies, as well as his Tweets and speeches, must be viewed through the lens of the Ethical Code of the National Association of Social Workers (NASW) that guides the work of members of the social work profession. I discuss ethical issues that are posed by his presidency. I present a framework for engaging these issues in a civil way while not conceding ground when flagrant violations of this Ethical Code take place. I discuss the adverse impact of his policy choices on members of vulnerable populations. I ask whether he betrayed the white blue-collar people who he championed during his presidential campaign.

I place historical materials for many of the book's chapters on the MindTap, where students can delve into specific topics that enrich their understanding of specific eras. They can, for example, read about medieval society to better understand the first colonists that came to the United States. They can read in greater detail about the plight of emancipated slaves in the wake of the Civil War. They can better understand the budget conflicts that took place during the presidency of Barack Obama. I've placed these materials in the MindTap for the 9th edition. Instructors can decide which of these materials to assign to students.

I discuss how to write policy background papers, letters to the editor, Op-Ed essays, and policy briefs in the 9th edition MindTap. These can be used to develop policies and points of view that can be transmitted to the mass media as assignments at the end of the course. I provide samples of each of them.

To facilitate classroom and offsite learning, I've included links to innovative, easily accessible Web materials throughout the book. This technology enables students to interact with history through an array of visual, audio, and graphic materials. Students can see homeless people riding trains during the Great Depression, listen to audio interviews with former slaves, view maps and interactive diagrams, listen to presidential debates, and take a virtual tour of a tenement building of the 1880s. They can use these online aids within their classrooms or offsite to develop specific assignments.

End-of-chapter materials include:

 Discussion of unmet, persistent needs and policy issues in specific historical periods and the contemporary period as a means of alerting students to the need for policy advocacy.

- Analysis of one or more policy failures in specific historical eras to review the need to be alert to illconsidered policies in contemporary society.
- Analysis of policy innovations in specific historical eras that could be revived or expanded in the contemporary period.
- A policy scoreboard that identifies specific policies enacted in specific historical eras that have been transmitted to the contemporary era. A master policy scoreboard in Chapter 14 contains an overall list of social policies that social workers often engage in their work as they engage in micro, mezzo, and macro policy advocacy.

MindTap-Only Content

I have included additional readings for chapters 3, 4, 7, 8, 9, 10, 11, and 14 in the MindTap for the 9th edition. Content includes discussion of the Civil War and Reconstruction, social policy developments in the 1950's, the Congressional budget battle during Bill Clinton's presidency, and President Bush's response to Hurricane Katrina. Information and examples on how to write policy advocacy background documents, oped articles, and policy briefs is also in the MindTap (see Chapter 11). Prompts to access these materials can be found in each relevant chapter.

Ancillaries

To help faculty teach social policy history that links to EPAS standards, I have enlarged and revised the Instructor's Manual *Creative Ways to Teach Social Policy History and Link It to Contemporary Society and the Profession*. PowerPoint lecture slides and Test Bank questions are provided free of charge to faculty who adopt the 9th edition.

I hope that this edition enhances social workers' practice in contemporary society. I hope that it motivates many students not just to learn about how the American welfare state has evolved, but to engage in micro, mezzo, and macro policy advocacy to make it more humane in the future.

An Invitation to Students Using This Text

ou may enter this course with trepidation, believing that it will focus primarily on memorizing distant events and myriad policies with scant relevance to contemporary social work practice. View this course, instead, as an opportunity to interact with events, issues, beliefs, and past policies to improve your practice in contemporary society. Realize that this course takes you right up to the present at the time of the writing of the 9th edition, including the recent presidencies of George W. Bush, Barack Obama, and the first 11 months of the presidency of Donald Trump. You can better understand contemporary issues when you view them in the prism of prior periods of time.

This course allows you to hone your ethical skills in many ways. You can evaluate whether we even need a welfare state in the first place by examining how the United States fared when it had only a primitive one—without the Supplemental Nutrition Assistance Program (SNAP or Food Stamps), Social Security, Medicare, Medicaid, and the Affordable Care Act (ACA). You can ask how Americans fared during recessions and the Great Depression without unemployment insurance.

This course will give you insights, as well, about the life experiences of many vulnerable populations as they contended with various kinds of adversity in the United States prior to the enactment of civil rights legislation and specific social programs. These groups include women; African Americans, Asian Americans; older persons; Native Americans; Latinos; children and adolescents; persons with chronic physical challenges; persons with substance abuse and mental health issues; lesbian, gay, bisexual, and transgender persons; persons accused of violating laws and residing in, or released from, correctional institutions; immigrants; low-income persons; and white blue-collar people. The course will discuss how members of these groups used empowerment strategies to contend with adversity.

This course allows you to grapple with controversial issues that are rampant in contemporary society, as any viewing of FOX News and MSNBC suggests—or with the responses of the Republican and Democratic Parties to many current issues. The roots of these controversies lie deep in the national experience; you will not only learn about their origins, but come to see their prevalence

throughout the national experience. You will need to ask yourself whether and how these contending views are relevant to the ethics code of the NASW, which asks social workers to advance social justice and meet important social needs with effective social policies.

This course will help you understand the components of the American welfare state as specific programs, policies, and rights were enacted in different eras—and how this process continues today. This course provides you with a Policy Scorecard of these policies and rights that will be indispensible to effective social work practice. Indeed, some of you may consider running for office if this book opens up this possibility for you.

This course will also help you augment your social work practice with three kinds of advocacy: micro policy advocacy (commonly called "patient advocacy" or case advocacy), where you help consumers obtain services, rights, and opportunities to which they are entitled; mezzo policy advocacy where you work with communities and agencies to improve services and to address community issues; and macro policy advocacy, where you seek to reform defective policies in local, state, and federal jurisdictions. You will learn about many social work leaders and practitioners who used these interventions in prior eras to help their clients and to make our society a better place. You will develop skills to analyze and develop policies, such as developing a policy advocacy background document that serves as a template for specific reforms in contemporary society. You may also write letters to the editor, Op-Ed essays, and policy briefs, discussed at length in the MindTap.

You will find websites that enable you to interact with history through documentaries, interactive diagrams and maps, audio materials, and debates. You will encounter ethical and other questions that will help you grapple with key social issues in the United States.

Consider this text to have a policy faculty of thousands of people who helped establish policies and rights to make our society a better place—whether in the past or the present. You will join their ranks as you engage in history to advance your practice in contemporary society.

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Becoming a Policy Advocate for Vulnerable Populations

he two chapters in Part I provide a gateway to social policy. They define "social policy" and give many examples of them. They describe the evolution of policies in the United States. They discuss values that shape social policies. They discuss empirical findings that are used to decide whether specific policies are meritorious. They

discuss micro policy advocacy, mezzo policy advocacy, and macro policy advocacy as ways social workers engage in policy practice to improve the lives of vulnerable populations. They argue that social welfare history provides skills, perspectives, values, and evidence-based findings that are integral to social workers' practice.

The Symbiotic and Uneasy Relationship

Clients, Social Workers, and the Welfare State

Students will learn in this chapter to:

- L0 1-1 Analyze the evolution of the American welfare stateL0 1-2 Discuss the need for an American welfare state
- **LO 1-3** Understand why vulnerable populations especially need a welfare state
- **LO 1-4** Move from our imaginary society to a welfare state
- LO 1-5 Learn the varieties of social policies
- **LO 1-6** Explore the purpose of social policies
- **LO 1-7** Understand the grouping or clustering of social policies and social problems
- **LO 1-8** Identify policies that shape implementation and funding systems

- LO 1-9 Enrich professional practice by placing it in a policy context
- LO 1-10 Understand policy-sensitive practice
- LO 1-11 Trace the gradual evolution of the American welfare state
- **L0 1-12** Recognize polarization and gridlock in the last 35 years
- LO 1-13 Develop personal and professional policy identities
- **LO 1-14** Seek common ground while honoring the ethical code of the National Association of Social Workers
- LO 1-15 Treat each other with civility

hroughout this nation's history, those who must bear the brunt of social problems—individuals contending with poverty, discrimination, disease, and other social problems—have depended in considerable measure not only on their personal and familial tenacity and on community supports but also on the policies of public and nonpublic agencies and of federal, state, and local governments. At various times, these policies, singly and in combination, have provided assistance to some, have left others with no assistance, and have worsened the plight of many others.

Your journey through America's social welfare history will help you sharpen many competencies. You will often engage in *critical thinking* as you ask why vulnerable populations became and remain a central feature of our nation—and why their members often are poorer, sicker, and more poorly educated

than other Americans. You will become acutely aware of the social, political, and economic context as it shapes the lives of your clientele positively and negatively. You will become aware of the importance of social policies in the context of your clients, as well as of the agencies and programs where you work. You will become more adept at ethical reasoning as you encounter many situations where you have to take ethical positions with respect to the services you give to specific persons, as well as the ethical merit of specific social policies that they encounter. Your journey through America's history will help you sharpen your motivation to engage in advocacy for specific clients (micro policy advocacy), to improve agency policies and to help communities improve policies that impact them (mezzo policy advocacy), and to improve government policies (macro policy advocacy) as you see unaddressed social problems. You will

see improvements in the context as specific social reforms are enacted in agency, community, and government settings. You will be a better and more complete professional by virtue of your journey through our national history.

You will see that members of the same vulnerable populations that you discussed in previous eras continue to confront adversity in the contemporary period. You will engage many ethical issues, such as deciding whether specific policies are meritorious from ethical and evidence-based viewpoints. You will see how vulnerable populations empower themselves. You will see how social activists obtain major policy gains.

You read this book during a period when the United States is deeply polarized by ideological divisions, such as between the Democratic and Republican parties. You will need to engage in ethical reasoning to determine which policies and positions to oppose or support. You will consider evidence when making your policy choices. You will learn how to engage in respectful discourse with persons with different views than your own. You will learn how to stand your ground when persons adhere to unethical positions or positions not supported by empirical evidence.

If you use this course to achieve these competencies, you will enhance your professional practice conceptually, ethically, and proactively. We will help you by identifying places in this book that discuss the competencies described in the Invitation to Students at the outset of this book. The book provides special inserts for ethical reasoning, critical thinking, and policy practice, as well as websites that allow you to interact with historical and contemporary events.

LO 1-1 Analyze the Evolution of the American Welfare State

Social welfare history is a laboratory where we analyze how Americans have responded to an array of social problems that have included homelessness, poverty, malnutrition, mental and physical illness, disrupted families, orphaned or abused children, violence, income inequality, and discrimination.

Americans have fashioned a reluctant welfare state during their history. If they made it more humane through thousands of social reforms and funding enhancements, they provided uncertain or harsh remedies for many residents who experience specific social problems—and particularly for vulnerable populations that we discuss throughout this book. We will ask you at many points in this book to ask whether Americans have advanced the ethical principle of social justice. We will ask you to analyze policies and approaches that might have created humane policies. We will also ask you to analyze whether and why some unmet needs of prior eras remain unaddressed in contemporary society.

We will ask you, then, to move beyond a mere bystander role as you engage the evolution of the American welfare state in succeeding chapters. We will ask you to take positions, make arguments, speculate,

and identify how we can learn from prior events as we engage in our professional work in contemporary society.

LO 1-2 Discuss the Need for an American Welfare State



EP 1a EP 3b

Imagine American society—or any society—with virtually no social programs, regulations, or civil rights. Let's make several assumptions about this imaginary society. Assume that its economy is organized in a capitalist fashion where its citizens work in corporate or other busi-

ness settings—and where people are expected to meet their needs through wages, investments, and savings. Also assume that all who live in this society are expected to purchase their medical care, their housing, their education, and their social services with personal assets. Assume, as well, that no civil rights laws exist to protect specific groups or persons who might be subject to violent acts, discrimination in places of work, or other forms of discrimination in schools, communities, medical services, commerce, or social services. Assume, as well, that persons purchase their own means of transportation (principally cars). Assume that they fund their retirement exclusively from their savings. Also assume that this imaginary society possesses no

regulations over businesses, landlords, drug companies, or medical providers. Nor does the society possess police, fire, and public health programs.

To say the least, life in such an imaginary society would be uncertain and difficult. Without a police force, persons would be subject to violent acts and theft. Without fire departments, their homes and businesses would be threatened with destruction, as small fires became conflagrations. Without public health departments that regulate restaurants and markets, sewage disposal, and refuse—as well as inoculate people against diseases—communities would encounter devastating epidemics.

If government did not build and maintain roads, bridges, and airports, persons could not travel to work or other destinations. Without public transportation, the nation would experience gridlock on those roads that did exist. Persons lacking the resources to purchase cars would be mostly unable to work if there were no system of public transportation—or get to health facilities, grocery stores, drug stores, and other destinations essential to their well-being.

Even if we gave government some minimal police, fire, and public health functions—and allowed it to construct highways, bridges, and other physical amenities—life would still be brutish and uncertain for many people. With no minimum wage requirements, employers could pay employees whatever the market would bear, regardless of the impact on workers. Indeed, it is likely that many workers' wages would be comparable to wages in developing nations, such as \$2.50 per hour. If the United States currently possesses tens of millions of persons who subsist under or near official poverty lines because minimum-wage jobs pay them at such low levels, imagine how many more persons would face this economic crunch if government had no minimum wage requirements.

The plight of workers would be made even more harsh, moreover, because government—under our minimalist assumption—would not require or help fund some fringe benefits that many workers currently receive. Many American corporations currently fund their employees' health insurance partly because they receive huge tax incentives from the federal government to do so—incentives that do not exist in our imaginary society. Nor would employers provide workers' compensation to fund health care for workers who are injured at work. With no requirements for heeding work safety requirements currently established by the Occupational Safety and Health Administration (OSHA) or similar agencies in many

states, many employers would *not* purchase machines with safety features, *not* reduce pollution at the work site, and *not* curtail workers' exposure to toxic chemicals—omissions that would endanger the lives of many employees. With no regulations prohibiting the use of child labor, many employers would hire children even for physically taxing work. With no prohibitions on making employees work long hours, some employers would fire workers who were unwilling to work as much as 14 hours per day.

Imagine, too, how uncertain persons' lives would be if no safety net programs existed, such as those that currently provide food, health care, housing, preschool education, income, and other basic needs to tens of millions of Americans. Many Americans cannot currently purchase these necessities because they have lost their work due to downsizing or recessions, are injured or in poor health, are unable to find work, or receive extraordinarily low wages. We can surmise that hordes of people would have to resort to begging or theft to survive in our imaginary society if they encountered a recession as deep as the one that existed from 2007 to 2009 and beyond—or even during periods of economic growth when tens of millions of Americans use SNAP (food stamps), free or subsidized school lunches, Medicare and Medicaid, and rent subsidies.

Residents of our imaginary society would be harmed, as well, if Americans lacked policies to address global issues. Absent any policies that dealt with such issues as immigration, the spread of diseases across national boundaries, global environmental issues such as carbon dioxide emissions that threaten global warming, and efforts to address an array of social problems in developing nations, residents would experience many uncertainties. They might be unprotected against a flu epidemic such as the one that killed 20 million to 50 million persons worldwide in 1918. Lacking protections, immigrants might be attacked by xenophobic citizens without any legal protections. American workers would find their work safety and wages deteriorating if international trade treaties allowed American corporations to victimize workers in the developing nations where they had moved their operations. Such places as Florida, the Gulf Coast, New York City, and portions of San Francisco might be inundated by the ocean if international treaties failed to avert or slow global warming stemming from the emission of carbon dioxide and other pollutants.

Nor would many persons belonging to vulnerable populations fare well. Individuals harboring prejudice could prey on persons of color without any restrictions, whether by denying them jobs and promotions, forcing them to attend segregated schools, not allowing them to live in their neighborhoods, denying them access to public places like restaurants, or (even) physically harming or killing them, such as when tens of thousands of African Americans were lynched in the South prior to the Civil Rights Acts of 1964 and 1965. Persons with physical and mental challenges would receive few of the work, housing, and transportation accommodations currently required by federal legislation. With no civil rights legislation to protect them, women would suffer discrimination at work with no fear of legal repercussions by employers or fellow employees—and would lack legal protections against sexual harassment at work, in their homes, and in schools.

Life would be difficult, too, for tens of millions of retirees. Roughly half of persons who reach age 65 do not currently own their own homes and lack significant savings—and a significant percentage of them are significantly in debt. With no government-funded pensions and no subsidized health programs, many of them would be in desperate straits when confronted with poor health or chronic health conditions. Unless physicians and hospitals agreed to serve them on a charitable basis, they would lack health care. They would be unable to purchase medications. Unable to afford rent, many of them would be forced to live on the streets unless relatives or charities came to their assistance.

Those middle- and upper-income persons who believe that they could live easily in our imaginary society should reconsider just how much they currently benefit from an array of social policies. They currently benefit from the nation's largest housing subsidy program that allows them to deduct much of their mortgage payments from their income when calculating their federal and state taxes. (These tax benefits are larger in their cumulative size than all of the nation's welfare programs.) We have already discussed how the federal government underwrites their medical insurance payments by giving their employers tax breaks for funding them. Private entrepreneurs are enriched by their ability to write a significant share of their business expenses against their income when computing their federal and state taxes.

Many American social policies favor affluent Americans. They greatly increase their resources, for example, as they pay relatively low federal taxes as compared to counterparts in Europe and Canada, even if they often think they pay exorbitant taxes. If upper marginal tax rates are around 39% for affluent Americans, they often exceed 50% for affluent Europeans. Affluent Americans

pay only a 15% tax on capital gains when they sell stocks, bonds, houses, property, or other investments at a profit—and often pay little or no taxes on dividends or payments they receive from many state-issued bonds that pay tax-exempt interest. Many tax loopholes greatly assist affluent Americans to the point that Warren Buffett, worth tens of billions of dollars, argues that his secretary pays higher tax rates than himself. Americans have two welfare states: one for relatively poor persons, and another for relatively affluent persons. Other tax loopholes greatly assist affluent persons.

Affluent Americans benefit in many other ways from the American welfare state. Many of them would contract diseases if the nation lacked public health programs that inoculate its residents and screen for such diseases as tuberculosis. Without education, jobtraining, and social service programs, they could not employ productive people for their businesses. Without a publicly subsidized transportation system, they could not run businesses that receive and ship raw materials and products. Affluent people use the nation's social programs when members of their families become disabled, sick, or unemployed. They are entitled to Social Security benefits and pensions as well as Medicare. They write off mortgages on mansions and vacation homes.

LO 1-3 Understand Why **Vulnerable Populations Especially Need a Welfare State**



EP 1a EP 2a

EP 3a

EP 3b EP 5a

If our imaginary society truly existed, and those persons who lived in it suffered uncertainty and ill effects, the members of vulnerable populations would be placed in particular jeopardy by the absence of government programs, regulations, and civil rights, as our discussion of seniors and low-income persons already suggests. Such forms of prejudice as racism, homophobia, gender-based discrimination,

ageism, classism, hostility to immigrants, xenophobia, and dislike of persons with mental and physical issues were and are deeply rooted in American society.

Prejudices often profoundly shape the political process and the kinds of policies that affect vulnerable populations. Because low-income persons vote in relatively small numbers and many Americans do not understand or care about their economic issues, the Congress and state legislatures often enact policies that are relatively harsh toward them or that siphon scarce resources toward more affluent persons and interests. Because children cannot vote and often lack substantial support from the broader population, legislatures often give their programs relatively scant funding—while funding at far higher levels programs for elderly populations that are more powerful politically. Even older men and women encounter remarkably harsh policies, such as ones that require them to "spend down" their assets when they experience catastrophic illnesses until they become sufficiently poor to qualify for Medicaid.

Vulnerable populations need a welfare state, moreover, because they are more likely to experience poverty, economic uncertainty, and victimization. Poverty exists disproportionately, for example, among single women with children, persons of color, and persons with mental and physical challenges. If no government safety net programs existed, many members of these groups would not be able to meet their survival needs, such as food, medical care, income, and housing.

Vulnerable populations are also more likely than other groups to be victimized by landlords, employers, merchants, middle-income and affluent communities, credit card companies, and schools.

Absent protections and rights, immigrants to the United States would find themselves in particular jeopardy. They might be denied access even to emergency medical services, to schools, to work safety protections, and to a minimum wage—even as they filled

jobs that most citizens did not want and even as they paid payroll and other taxes.

Our discussion should not suggest that members of vulnerable populations need or seek handouts. Indeed, their members have often displayed remarkable resilience and ingenuity in addressing their own needs during specific historical eras and in contemporary society. As we discuss at many points in this book, they have developed their own self-help strategies, community institutions like churches and businesses, and power resources in local communities. They have also advocated for policy reforms, such as civil rights legislation and enhanced funding for social programs. They have fought for improvements in their communities, such as enacting zoning requirements that decrease the number of bars and liquor stores in low-income areas, funding affordable housing, promoting good-quality schools, funding job-training programs, and promoting the development of healthy neighborhoods with recreation facilities, fullservice grocery stores, and safe streets.

Imagine, too, how the work of professional social workers would be impeded if virtually no social policies had existed during the Great Recession from 2007 to 2009 or during Hurricanes Harvey, Irma, and Maria in 2017. After reading Insert 1.1, discuss the following questions:

- To what extent can social workers provide effective interventions to economically distressed families if they cannot refer them to the myriad social programs of the American welfare state?
- To what extent is micro policy advocacy—in which social workers "go to bat" for clients and link them to those services, benefits, and rights provided

INSERT 1.1 Critical Analysis Critically Reflecting on Your Professional Role

Assume that you work with a family whose finances were devastated by the economic recession of 2007 to 2009 and beyond. Or imagine that you are working with victims of Hurricanes Harvey, Irma, and Maria in 2017, whether in Texas or Florida. In this imaginary situation, there is virtually no welfare state in the United States. Also assume that you are working with a family that has two preschool-aged children. Assume that both parents have lost their jobs and have had their house foreclosed on because they cannot make their mortgage payments—or lost their homes in Hurricanes

Harvey, Irma, and Maria in 2017. Also assume that the parents are unable to purchase sufficient food for themselves and their two children. Lacking health insurance, the mother is unable to afford medications for her diabetic condition. Assume the family's car has been repossessed because they can no longer make payments on the loan they took out to purchase the car in the Great Recession or that their cars were destroyed by surging water in one of the three hurricanes—so they find it difficult to travel to job interviews or even to go to supermarkets.

them by the welfare state—an important professional role? (Drawing on your personal knowledge, identify how you could provide micro policy advocacy to this family now, when numerous policies and programs exist that could help them.)

You will learn about the challenges that confront 18 vulnerable populations as you move through the history of the American welfare state. These include African American, Latino/a, Asian American, and Native American populations. They include women, older people, and people with physical, mental, and substance-abuse disabilities. They include children. They include the lesbian, gay, bisexual, trans and queer (LGBTQ) population, criminal offenders, homeless people, and juvenile delinquents. They include some Jewish Americans, some Asian Americans, and some white Americans. They include low-income persons. They include immigrants. They include veterans. I discuss challenges that these various groups have confronted in prior and present periods, as well as the enactment of some policies that have hindered or helped them.

LO 1-4 Move from our **Imaginary Society to** a Welfare State

Let's define a welfare state as an organized and societal response to the needs and rights of residents something that our imaginary society does not possess. A vast array of social policies form the foundation of welfare states that we can classify by their form, purpose, and the way they have been grouped or clustered in welfare states. We can also identify policies that shape implementing and funding systems that allow specific policies to be actualized.

LO 1-5 Learn the Varieties of Social Policies

In its broadest sense, social policy represents a collective strategy to address social problems. This collective strategy is fashioned by government laws, rules, regulations, budgets, and personnel—that is, enactments that affect or bind the actions of residents, government officials, professionals, and the staff of social agencies. Let's consider these aspects of social policy in more detail.

Constitutions define the social policy powers of government at the federal and state levels. As we have already noted, the failure of the federal Constitution to enumerate social welfare functions for the federal government was interpreted to mean that such functions should be left to state and local governments and to the private sector. As a result, the development of social welfare policies in this country was seriously delayed. States, too, possess constitutions that establish important duties of state governments, as well as how they govern themselves.

Some social welfare strategies involve public policies, laws enacted in local, state, or federal legislatures. These include the Chinese Exclusion Act of 1882, the Social Security Act of 1935, the Adoption Assistance and Child Welfare Act of 1980, the Americans with Disabilities Act of 1991, and the Medicaid Program created by adding Title XIX to the Social Security Act in 1965. These public policies can be modified or terminated, as illustrated by the effort by President Donald Trump and Congressional Republicans to terminate the Patient Protection and Affordable Care Act of 2010 (ACA).

Court decisions play important roles in American social policy. By overruling, upholding, and interpreting the federal and state constitutions, statutes of legislatures, ordinances of local government, and practices of public agencies such as mental health, police, and welfare departments, courts establish policies that significantly influence the American response to social needs. For example, in the 1980s, the courts required the Reagan administration to award disability benefits to many persons with mental disabilities even though many administration officials opposed this policy. Federal circuit courts declared two proposals developed by President Donald John Trump to curtail immigration from some mostly Muslim nations to be unconstitutional in 2017.

Budget and spending programs are also an expression of policy, as society cannot respond adequately to social problems if resources are not allocated to the relevant programs and institutions. For example, Americans chose not to expend a major share of the gross national product (GNP) on social programs before the 1930s but greatly increased levels of spending during the Great Depression and in succeeding decades. Despite the large increases in spending on social programs in the 1960s, the 1970s, and even the 1980s, the nation chose to devote a significant portion of its federal budget to military spending during the Cold War and to make successive tax cuts—policies that greatly reduced the resources available for social programs. President Trump and Congressional Republicans developed budget policies that made deep cuts in many social programs and tax policies that mostly enriched affluent Americans and corporations as we discuss in Chapter 13.

International treaties, as well as policies of the United Nations, govern an array of economic, social, migration, environmental, and national security issues in an era of globalization.

Stated or implied objectives also constitute a form of policy. For example, the preambles and titles of social legislation suggest broad purposes or goals. As its title suggests, the Personal Responsibility and Work Opportunity and Reconciliation Act that Bill Clinton signed in August 1996 emphasized rules and procedures for getting welfare recipients off welfare rolls rather than providing them with training, education, or services.

Rules, procedures, and regulations define the way in which policies are to be implemented. Legislation often prescribes, for example, the rules or procedures to be used by agency staff in determining applicants' eligibility for specific programs such as Medicaid. Courts often prescribe procedures that the staff of social agencies must use to safeguard the rights of clients, patients, and consumers, such as preserving the confidentiality of their records or safeguarding the rights of persons before they can be involuntarily committed to mental institutions. Government agencies issue administrative regulations to guide the implementation of policies, such as requiring agencies to provide translation services to people who do not speak English. These regulations have the force of law.

Compared with written or official policies, informal policies are subjective views of persons and groups that influence whether and how they implement specific policies. Assume, for example, that the government required nursing homes to provide recreational services to their residents (official policy). Also assume that the staff of a particular nursing home did not want to provide these services (informal policy). The subjective views of the staff would need to be changed to implement the formal policy, whether by giving them training, convincing management to enforce the official policy, or by using coercive strategies like withdrawing public funds from nursing homes that failed to provide recreational services.

LO 1-6 Explore the Purpose of Social Policies



Regardless of their specific form, social policies can be classified by their ultimate purpose in the welfare state as they address specific social problems or issues, such as:

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Needs-meeting policies, including programs that give persons food, medical care, housing, and income (which would include some contemporary programs such as the Supplemental Nutritional Assistance Program [SNAP], Medicare,

Medicaid, rent subsidies and public housing, Supplementary Security Income [SSI], and Temporary Assistance to Needy Families [TANF])

- Regulations that restrict the ability of landlords, employers, corporations, manufacturers of drugs and food, providers of health and mental health services, and the police to victimize consumers or persons with whom they deal
- Opportunity-enhancing policies such as schools, preschools, job-training and job-finding programs, subsidies to small businesses, tax incentives to help persons start businesses or to encourage corporations to train low-income persons, and programs that help persons become American citizens
- Policies that establish and fund social and medical services to help persons with a range of personal and familial problems as well as an array of medical problems
- Education policies that provide preschool, primary and secondary, and postsecondary educational programs
- *Civil rights policies* that specify the rights of specific groups, such as women, men, persons of color, persons of every national origin, persons with mental and physical challenges, older persons, children and youth, persons of all faiths, and persons with specific sexual orientations
- Referral and linkage policies that establish case-management, ombudsman, and outreach programs
- Equality-enhancing policies that target resources to low-income populations (such as the Earned Income Tax Credit and many means-tested programs) and that tax resources away from affluent persons, such as the progressive federal income tax

- Asset accumulation policies that help consumers develop savings accounts and real estate as well as develop small businesses
- Infrastructure development policies that promote the development of transportation systems and parks
- Economic development policies that provide tax incentives and loans to citizens and businesses to stimulate job training for employees and that facilitate the economic development of low-income areas
- Protective policies that help persons who are subject to abuse or violent actions of others, such as protective services for children and policies that protect women from physical assualt—as well as policies that promote safe neighborhoods
- Preventive policies that aim to avert the emergence of specific social problems such as public health policies that decrease levels of bacteria in food and
- Disaster relief policies that shape the immediate response to natural disasters such as Hurricanes Katrina in 2005 in New Orleans; Hurricane Sandy in New Jersey and New York State in 2012, and Hurricanes Harvey, Irma, Jose, and Maria in Texas, the Gulf Coast and the Caribbean islands in 2017.

To these domestic policies, we need to add policies that are germane to globalization. With the increasing movement of capital, labor, pollution, and diseases across national boundaries, Americans have increasingly had to cope with an array of global issues—even if they have developed humane policies only reluctantly in recent decades. They have had to develop:

- *Immigration policies* to determine how to deal with legal and social issues associated with persons who cross international boundaries with or without specific kinds of visas or other legal documents
- Policies shaping work conditions (wages, work safety, child labor, and hours of work) of workers in the nations with whom the United States conducts trade under various trade agreements such as the North American Free Trade Agreement (NAFTA) and treaties of the World Trade Organization (WTO)
- American policies germane to festering *health*, poverty, economic, and environmental conditions in developing nations, such as the HIV/AIDS epidemic in many African, Asian, and Eastern European nations

- American policies that shape *global environmental* problems that powerfully influence the health and well-being of citizens in all nations
- · National and international security policies that not only provide safety to nations around the globe from invasions and terrorism, but that also discourage any nation, including the United States, from operating outside the orbit of the Geneva Agreements, the United Nations, and international law

LO 1-7 Understand the Grouping or Clustering of Social Policies and Social **Problems**

Social policies, as well as some social problems, are grouped or clustered in specific policy sectors, such as mental health, health, child and family, safety net, welfare, education, gerontology, immigration, criminal justice, and civil rights. This grouping or clustering partly reflects historical traditions where specific policies were clustered in specialized programs and agencies that addressed specific social problems. "Problems of the mind" came to be addressed by specific organizations, such as "asylums" (later called hospitals for mentally ill persons), family counseling agencies, community health centers, and private counseling services with social workers, psychologists, and psychiatrists. Problems of neglected or abused children were clustered in public child welfare agencies, child guidance clinics, and family counseling clinics. "Welfare" agencies came to subsume public cash assistance to an array of "needy persons" including single mothers and blind, disabled, and elderly persons. Heath problems came to be subsumed in hospitals and clinics—and to be funded by private health insurance and public programs like Medicare, Medicaid, and the Children's Health Insurance Program (CHIP).

This grouping or clustering of social policies into policy sectors has both positive and negative consequences. If persons possessed problems of the mind, for example, they knew where to go to get counseling and related services. If persons believed that a child was abused or neglected, they knew that child