Citizenship - the missing key to public policy and welfare reform

Dr Simon Duffy of The Centre for Welfare Reform for the Masters in Public Administration Annual Conference at The Catholic University, Porto, Portugal, 5th May 2011
The loud argument

- State = good
- Markets fail
- Give help
- Increase services

- Markets = good
- States can’t plan
- Give choice
- Cut taxes
Quiet agreement

- **Meritocracy** - society should be led by the ‘best’ people - civil servants or business men

- **People can’t be trusted** - instead people must be governed by fear or greed

- **Economic growth is the goal** - growth creates money for taxes and for profit
An alternative view

- **Democracy is vital** - we cannot entrust our lives into the hands of an elite

- **Citizenship is the means** - we need to be trusted to improve our own lives as part of our communities

- **Social Justice is the goal** - we need the rights and duties that enable and support citizenship
“Above all, I think the idea of citizenship should remain at the centre of modern political debates about social and economic arrangements.

“The concept of a citizen is that of a person who can hold [their] head high and participate fully and with dignity in the life of their society.”

Professor Jeremy Waldron
There are eight degrees of charity, one higher than the other. The highest degree, exceeded by none, is that of the person who assists a poor Jew by providing him with a gift or loan or by accepting him into a business partnership or by helping him find employment - in a word, by putting him where he can dispense with other people's aid. With reference to such aid, it is said, “You shall strengthen him, be he a stranger or a settler, he shall live with you.”

Maimonides - Mishneh Torah: Seeds
help is not enough

- Independence - living our own life
- Citizenship - living together in a community
- Respect - treating each other as equals

help with dignity
There are 6 keys to citizenship:
We control our life...

it is an authentic life, with goals that make sense

We have enough money to pursue those goals

and we are at home in the community - we belong

We get help from others - we enable contribution

and we give help to others
and markets and states cannot be trusted...

- markets create wealth but unbearable inequality
- state power leads to damaging dependency
- at its worst meritocracy + utilitarianism = eugenics
The T-4 Action and other programs were used to kill 200,000 disabled people.

Killed with injections, gas or starvation.

The same doctors and nurses moved on to set up the gassing facilities for the Jews.

The Cemetery at Hadamar
German doctors warned Hitler that Germany was being overtaken in eugenic practices by other nations.

Institutions had been set up to house ‘undesirable’ or ‘subnormal’ people.

Sexual segregation and in Sweden and USA forced sterilisation.

Gross abuse and de-humanising treatment was common.

Institutions continue to this day...
Photos from “Christmas in Purgatory”
Post-war hopeful...

- General revulsion at eugenics
- Disabled people assert right to independent living
- Families organise new community organisations
- Institutions do begin to close
- New ‘community services’ begin to develop
but progress limited in UK

- 267,000 people live in residential care homes (the average size for people over 65 is 34).
- 242,000 people attend day centres
- 98,000 people receive ‘intensive home care’ or domiciliary care
government spends our money in advance - we must extract what value we can from their decisions...
We’d failed to think of

- **Power** - who is in control?
- **Rights** - what guarantees do people have?
- **Purpose** - what are we trying to achieve?
from professional-gift

to citizenship
decisions must be made by and with people
good outcomes build on people’s real wealth

- Family-centred
- Flexible funding
- Creative planning
- Partnership & trust
- Using community resources
1996 Inclusion Glasgow

- Helped people with most complex disabilities leave Lennox Castle Hospital

- Everyone went to their own home - cost less than residential care.
2003 In Control

Tested and developed model of ‘Self-Directed Support’ and ‘Individual Budgets’

Success - improved outcomes and reduced cost

Created a brand and a network of organisations

Friday, 6 May 2011
1. **Assessment**

So it looks like I can get £15,000.
2. Making a plan

Who else can we get to help us do this plan?
3. Getting the plan agreed

Yes - it looks like a good plan.
4. Money for my support

We’re opening a bank account for Zoe’s support money.
5. Organising my support

I can choose how I get my support.
6. **Support that suits me**

My life’s changed – I’m in control.
7. Being accountable

It’s gone well. Let’s talk about what’s next.
Are you happy with the control you have over your life?

Before

Unhappy

Quite Happy

Really Happy

Friday, 6 May 2011
Are you happy with your plans?
Are you happy with your money?

Friday, 6 May 2011
Are you happy with your home?

- Really Unhappy
- Unhappy
- Quite Happy
- Really Happy
Are you happy with your support?

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Happiness with community life overall...

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at its best, ‘personalisation’ can mean

1. A positive focus on the person - their real wealth
2. An equal and productive relationship with the professional - coproduction
3. A commitment to positive outcomes and citizenship
but **success & failure**

- 200,000 people in control of their money
- expectations are much higher
- public government policy is different
- control is often still highly limited
- very poor implementation
- public spending cuts target disabled people

Central government wants outcomes of the policy - but without the price: better laws and systems - they want their omelette and their eggs too.
New challenges

- so we must **campaign** for more fundamental change
- work to **protect** and enhance good practice
- **Extend** the reach of innovations into other public services - spread the virus
● **Education** - £6,600 per child - but classes of 30 - only 4 children are needed to pay for the teacher - what are the other 26 paying for?

● **Health** - in the UK, long term conditions account for around 70% of spending on healthcare - won’t they need self-directed support?
Life at Talbot School
I want patients to have far more control over the care they get. So people with long term conditions get to be part of designing the care they need. Choosing what suits them - and making it work. For mental health patients. For pensioners in need of care. For people with disabilities. It works.

A couple of weeks ago in Sheffield, I met a wonderful woman called Katrina. She's got three disabled sons. The oldest is Jonathan, a charming, warm hearted young man of 19. He can't walk or talk clearly, or feed himself alone. He's had a breathing tube in his neck since he was a toddler.... Jonathan's just got his own individual budget and care plan.

Now he's doing work with a local charity, attending a music group, has his own personal assistant. A child whose potential seemed so limited. Finally as a young man, engaged in life in a way he and his mother never thought possible. Katrina told me with the biggest smile I've ever seen. She said: We've gone from having nothing to having everything. I wish every child's needs would be taken this seriously.

Nick Clegg now Deputy Prime Minister
but progress is not guaranteed - successful innovations meet new forms of resistance
Hope: the Danish Rescue

- Denmark saved nearly all Danish and refugee Jews from the gas chambers.
- Eventually organising a fleet of fishing individual fishing vessels to help people get to neutral Sweden.
- This is the meaning of decency
What is our goal?

- Are we simply trying to build new toys and gadgets?
- Are we trying to amuse ourselves until we die?
- **Or**, are we trying to build a decent society?
- To become better citizens?
- What do we really want for our children?