

# Neoliberalizing the Welfare State: Marketizing Social Policy/ Disciplining Clients

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## INTRODUCTION

We live during a time of transformation for the welfare state. Across the developed world but elsewhere too, changes in social welfare policies reflect the growing influence of the market-centered philosophy of neoliberalism (Schram, 2015: Ch. 1). It has become the default logic for public policymaking today. A long time in coming to ascendancy, neoliberalism arose in response as the welfare state gained traction during and after the Great Depression of the 1930s (Peck, 2011). Neoliberalism's basic tenets were promulgated by Ludwig von Mises, Friedrich Hayek, Milton Friedman, and Gary Becker. It came to be associated with the 'Chicago School' of Economics. Especially as articulated by Becker and Chicago School fellow travelers, neoliberalism is centrally about the superiority of economic logic as the basis for all decision-making, public as well as private, collective and individual. A critical feature of neoliberalism is that it blurs the boundary between the market, civil society and the state. Neoliberalism disseminates economic rationality to be the touchstone not just for the market but for civil society and the state as well. Its emphasis on economic rationality as standing in for what is rational *per se* promotes the marketization of an

increasing number of practices throughout society. Most dramatically, it has led to a wholesale revision in public policy in a number of domains so that they are more consistent with market logic in the name of better promoting market-compliant behavior by as much of the citizenry as possible. It places increased emphasis on people practicing personal responsibility by applying economic logic to all forms of decision-making across a variety of spheres of life. People are expected to practice personal responsibility by investing in their own human capital to make themselves less of a burden on society as a whole or face the consequences of a heightened disciplinary regime. It is this last part that is often neglected (Harcourt, 2010). Neoliberalism's emphasis on personal responsibility for the choices people make has led to a more get-tough approach to social welfare policy.

The ongoing neoliberalization of social welfare policy itself is now taking place during a time of transformation that is fraught with risks for individuals, families and societies as a whole, indeed for the global economy overall. The ascendancy of neoliberalism as the prevailing rationality of our time is unfolding during what policy analysts call a 'critical juncture', where a well-ingrained 'path dependency' in social welfare policies has

come under increased pressure to change (Pierson, 2000). This critical juncture is associated with a cyclical swing back from policy commitments that have dominated the social welfare state in the post-World War II era (Stiglitz, 2012). The waning of support for the welfare state is, however, complicated by changes in the economy in recent years. In today's world, post the Great Recession, where the economy seems to be recovering but in an increasingly unequal way, there is a return of what we can call 'ordinary capitalism' that has provided a new neoliberal normal of growing inequality and dwindling economic opportunities for people on the bottom of the socio-economic order (Schram, 2015: Ch. 1). Under neoliberalism's insistence on the pervasive reliance on economic logic as the basis for all decision-making, public as well as private, collective as well as individual, the state buttresses markets rather than counters them and inequality grows virtually unabated, as not a bug but rather as a feature of this latest (neoliberal) iteration of the return to ordinary capitalism (Sassen, 2006).

In this context, the neoliberalization of social welfare policy indicates a stark shift in orientation. While the state's social welfare policy in capitalist societies has always been attuned to market forces, neoliberal welfare policy represents a significant shift away from a state that sought to buffer the effects of the market for those who were least able to participate in it effectively to now re-purposing the welfare state to be one that explicitly is committed to working to buttress the market rather than to counteract its most deleterious effects (Schram, 2015: Ch. 1). Examining changes in major social welfare policy primarily in the US, but also in other countries, provides evidence of how the neoliberalization of social welfare policy today includes putting in place a heightened disciplinary regime for managing subordinate populations who are deemed to be deficient in complying with the dictates of an increasingly marketized society where people are expected to leverage their human capital in order to provide for themselves and their families.

In what follows, I trace the rise of neoliberalism as the default logic of today's political economy throughout the world. I examine in detail its animating sources and its underlying philosophical roots. I review how it has come to be the common sense of capitalist political economies across the globe, and how it operates to structure public policymaking and policy design in those societies. I specify the way neoliberalism has influenced welfare policy implementation in the United States. I conclude with considerations on how to get beyond neoliberalism in social welfare policy via what I call a 'radical incrementalism' that makes small changes within the existing social

welfare policies that lay the groundwork for more progressive changes down the road.

### THE RISE OF NEOLIBERALISM: FROM EXPLICIT THEORY TO DEFAULT PRACTICE

Neoliberalism evolved in the twentieth century from being the preoccupation of economic theorists to becoming the default logic for public policymaking across the globe. At first, it was sustained largely in the writings of Ludwig von Mises and Friedrich Hayek and their followers in the Mont Pèlerin Society (Jones, 2014; [www.salon.com/2013/03/09/the\\_world\\_according\\_to\\_milton\\_friedman\\_partner/](http://www.salon.com/2013/03/09/the_world_according_to_milton_friedman_partner/)). It most centrally is reflected in their critiques of the welfare state, but especially in the thinking of John Maynard Keynes and the idea that the state should be a bulwark to counter the market. For Keynes, only the state was large and powerful enough to counter the excesses that come with swings in the market. The rise of Keynesianism and its emphasis on countercyclical policy provoked a strong reaction from theorists like Hayek in particular.

Hayek believed that the state could not be omniscient and that the decentralized market produced more points of information and was therefore a more intelligent system of decision-making. Hayek's *Road to Serfdom* (2007 [1944]) critiqued the idea of a welfare state that would undermine the autonomy of markets. He did concede the need for the state to provide for those who could not participate in the market enough to sustain themselves and their families. Hayek's work went on to prove to be catalytic in rolling back welfare state policies, not just in capitalist societies but eventually also in communist countries after the fall of the Soviet Union.

Hayek, however, was no simple conservative or classic economic liberal who prized individual freedom in some unreflective way. His neoliberalism is well captured when he said:

We assign responsibility to a man, not in order to say that as he was he might have acted differently, but in order to make him different.... It is doubtless because the opportunity to build one's own life also means an unceasing task, a discipline that man must impose upon himself if he is to achieve his aims, that many people are afraid of liberty. (Hayek, 1960: 70–5)

While vigilant in highlighting unwarranted forms of coercion, Hayek was in many ways the father

of what would come to be called ‘responsibilization’ and the idea that society needed to be structured to discipline subordinate populations to be economically compliant. Hayek saw neoliberalism in the practices that worked to produce a certain type of citizen/subject who was market savvy and compliant in all their choice-making activities.

Milton Friedman was distinctively influential in developing the Chicago School of economic theorizing. His biggest contribution to the rise of neoliberalism was to pose his ideas of monetarism to that of Keynesianism (Jones, 2014). Rather than an active state counteracting the swings of the market, the state should back away from such fiscal policies that raised or lowered taxes and spending and instead impose a stable monetary system of moderate predictable growth. The goal of the state should not be to aggressively respond to market swings but instead should tamp things down by putting in place a stable flow of money. By the late 1970s, in the US in particular, the problems of simultaneous high inflation and low economic growth – i.e., stagflation – produced growing frustration with Keynesian policies, the election of Ronald Reagan as president and the institution of Friedman’s monetarism as official policy by the US government’s Federal Reserve Board, which was charged with primary responsibility for managing the monetary system. Friedman’s ideas had gone from the classroom and his textbooks to the halls of government. Now the state’s job was not to counter the market but to support it.

The ‘Reagan Revolution’, as it was called, produced reductions in social welfare spending, deregulation of the economy, tax cuts for the wealthy (Moynihan, 1988). It was mirrored in the policies of Margaret Thatcher in her long run as Prime Minister of England (Krieger, 1986). It was Thatcher who gave us TINA (there is no alternative) as the most thoughtless version of the need to back away from Keynesianism (Hay and Payne, 2015). As would become a commonplace slogan, the era of big government was over. While poverty rose and inequality accelerated, the momentum had swung away from the Keynesian welfare state toward a neoliberalized political economy where the state facilitated rather than counteracted an economy that had these inequitable outcomes. Growing poverty and inequality were not unintended bugs in the system of neoliberalism as much as they were defining features of a system where the state facilitated economic growth that produced winners and losers.

By then neoliberalism was more a ‘thought collective’ than an explicit ideological program (Mirowski, 2014). Its tacit nature is represented in how it came to be implicitly associated with

what was called the ‘Washington Consensus’ (Williamson, 2004). The Washington Consensus involved committing international lending practices to promoting economic liberalization in the debtor countries. Most famously, donors such as the World Bank and the International Monetary Fund came to impose ‘structural adjustment’ policies on the borrowing countries in exchange for the loans received. Latin American, African and Asian countries in particular commonly found the new terms of loans to involve conditions that led to the deregulation of the economy, reductions in taxes, cuts in social welfare spending and the privatization of state operations as well as the imposition of monetarist policies. Problems of growing poverty and accelerating inequality again were immediately noticeable but did not deter the growing insistence for ‘structural adjustment’. The Washington Consensus extended beyond the state to include the non-governmental organizations and others involved in promoting development to economically disadvantaged parts of the world.

Neoliberalism is not anti-liberalism; instead, it is a new form of liberalism. It is about both economic and political liberalism (Brown, 2015). It is very much an attempt at a return to the classic *laissez-faire*, free market economic liberalism of Adam Smith. But it is also based in an appreciation that with the New Deal in the US and social democracies in Europe there was the rise of the welfare state that was justified by a pro-government interventionist form of political liberalism which unavoidably remade the relationship of the state to the market. Neoliberalism might have at its core a wish or desire to roll back the state to return to *laissez-faire* economic policies and put in place a market fundamentalism. In this sense, neoliberalism is a form of conservatism that seeks to undo the welfare state as a counter to the market. Yet, as much as conservatives might have wished that that would happen, they quickly saw that history was not something that could be simply undone.

Instead, neoliberals were with time to appreciate the implications Karl Marx’s understanding of history as an undeniable force in shaping people’s ability to act. In 1848, Marx wrote in *The Eighteenth Brumaire Louis Napoleon*:

Men make their own history, but they do not make it as they please; they do not make it under self-selected circumstances, but under circumstances existing already, given and transmitted from the past. The tradition of all dead generations weighs like a nightmare on the brains of the living. And just as they seem to be occupied with revolutionizing themselves and things, creating

something that did not exist before, precisely in such epochs of revolutionary crisis they anxiously conjure up the spirits of the past to their service, borrowing from them names, battle slogans, and costumes in order to present this new scene in world history in time-honored disguise and borrowed language. (Marx, 1937 [1848]: 1)

For Marx, people are not completely free to act, individually or collectively, but they are free to act in response to structured conditions in any one place and time. In other words, they had to account for what came before and not simply wish it away. This was very true for neoliberals who wished to roll back the welfare state and enact a return to some type of market fundamentalism.

This points toward what has become a critical feature of neoliberalism, especially in its relationship to the welfare state. While neoliberals might have wanted to repeal welfare policies, as attempted under Reagan and Thatcher, more often than not, something else happened. Repeal was perhaps Plan A, but given that the welfare state had come to be entrenched, they could not simply undo it. The welfare state had become institutionalized. Its policies had acquired their own path dependency that generated a positive 'policy feedback' (as policy analysts call it) (Mettler and Soss, 2004). As people came to be accustomed to the benefits they gained from relying on the welfare state, they became more politically supportive of maintaining these policies. So, in that sense, there was no real chance of totally going back to a set of policies like those that pre-dated the welfare state. That would be Plan A. And if Plan A was not possible then a Plan B was needed. If the welfare state could not be repealed so as to reinstate market fundamentalism, then the next best thing would be to marketize the state. Over time, this has come to be a hallmark characteristic of neoliberalism, perhaps more than monetarism, deregulation, and tax cuts. Instead, of repealing the welfare state, neoliberalism involves marketizing welfare state operations so they run more like a business in the name of getting everyone involved in them, policymakers, program administrators, and clients to act in market-compliant ways.

In this sense, neoliberalism is really Plan B for market fundamentalists (Schram, 2015: 28–31). It is what they had to do given the historical significance of the welfare state, the path dependency of its policies, the positive policy feedback that they generated and the unavoidable reality that history is a real force that cannot simply be dismissed or wished away. Therefore, it is not surprising that neoliberalism is most often confronted with confusion when it is introduced as a topic of analysis. It is less a full-blown ideology than

a hybrid practice that has evolved out of historical circumstances. In practice, neoliberalism is not about market fundamentalism as much as it is about marketizing the state. It is less about doing away with the state than getting it to operate in market-compliant ways. In fact, it might be best to refer to neoliberalism not as an ideology at all, but instead as a more subordinate meaning system, a 'practical rationality', i.e., the common sense for making public policy today in a post-Keynesian era (March and Olsen, 2010).

Jamie Peck aptly speaks of 'zombie neoliberalism', where neoliberalism policy changes get enacted simply because they go unchallenged as the default logic for making public policy in the current era (Peck, 2010). While neoliberalism might have been an explicit theoretical orientation at one point, today it is more an implied understanding of what is to be done. Today, almost no one admits to being a neoliberal, even if they pursue neoliberal marketizing strategies for changing the relationship of the state to the market. It is generally understood as the common sense of public policymaking in the US most especially, but increasingly elsewhere as well, that when the welfare state cannot be rolled back, we search for ways to marketize it so that it becomes less of a counter to the market and something that runs along market lines so as to better promote markets.

Wendy Brown has insightfully noted that neoliberalism is more about the state than the market (Brown, 2015). She notes that it is most centrally about changing politics so that it too operates in market-compliant ways, as in allowing wealth to dominate the electoral process and monied lobbyists to draft the laws that get enacted as well as rewriting public policies to be more supportive of markets and those who dominate them. Neoliberalism's greatest effects are perhaps seen in its being the default logic for the politics of remaking the state more so than how it works to reshape markets.

The zombie-like quality of neoliberal thought today is perhaps no accident, as Henry Giroux notes:

Neoliberalism is not merely an economic system, but also a cultural apparatus and pedagogy that are instrumental in forming a new mass sensibility, a new condition for the widespread acceptance of the capitalist system, even the general belief in its eternity. Seeking to hide its ideological and constructed nature, neoliberal ideology attempts through its massive cultural apparatuses to produce an unquestioned common sense that hides its basic assumptions so as to prevent them from being questioned. (Giroux, 2015)

Therefore, a good case can be made that neoliberalism has gone from being an explicit economic

philosophy to an implicit understanding about the politics associated with remaking the state. It is the common sense of the politics of public policymaking. It reflects history as a real force to be contended with. It raises the issue of what Hegel called the 'cunning of reason', where actors unknowingly enact what history has led them to do in spite of their own best intentions.<sup>1</sup> The thoughtlessness of neoliberalism today may only make it that much harder to counteract. It is something that people do simply because that is the way things get done at this point in time. As result, neoliberal failures often lead to a doubling-down where they are replaced or modified with other even more intensified forms of neoliberalism. Nowhere is this tragedy more noticeable it seems than when we look at the neoliberal marketization of US welfare policy for the poor.

### **MARKETIZING THE WELFARE STATE: NEOLIBERAL SOCIAL WELFARE POLICY**

Neoliberalism as enacted today is producing nothing less than a regime-wide transformation of the welfare state. We can see this transformation as traversing the continuum of domestic policy across the welfare state. The idea of state policy existing on a continuum is put to good use by Pierre Bourdieu. Bourdieu has noted that the state is riven with conflict and that it is better to characterize it as a 'bureaucratic field' (Bourdieu, 1994). Bourdieu suggests that within this bureaucratic field there is a continuum of domestic policy, with the left hand of the state providing aid and the right hand of the state imposing discipline. Yet for Loïc Wacquant, there has been a joining of the left and right hands of the state in recent years as policies have become more punitive, emphasizing punishing the poor for their failure to conform to social and legal norms, especially regarding work and family (Wacquant, 2009). Social welfare and criminal justice policies, for instance, have become more alike, aiding and disciplining the poor simultaneously so that they will be less likely to engage in deviant social practices. Neoliberalism is spreading punishment across domestic policies in the name of disciplining the poor to become personally responsible, market-compliant actors (Soss, Fording and Schram, 2011a).

Yet neoliberalization involves more than punishment in the name of disciplining the poor. The marketization of social welfare policies actually has been the most noteworthy development under neoliberalism. In policy after policy, there has been a dramatic shift to relying on

private providers, where clients are turned into consumers who get to make choices, and both are held accountable via performance measurement systems that indicate whether market-based objectives have been met. Examples in the US include: welfare reform where private providers now dominate in placing clients in jobs, managed-care systems for regulating the private provision of publicly funded health care, Section 8 vouchers for subsidizing low-income families' participation in private housing markets, and education vouchers that subsidize parents' placing their children in private charter schools (where students must score sufficiently high on standardized tests for the schools to continue to participate in the privatized public education system in that locality).

Neoliberalism involves both carrots and sticks; it is about discipline more than just punishment (Soss, Fording and Schram, 2011a: 6–9). Discipline is not just negative in limiting people's behavior; it is also productive in seeking to bring into being a new type of responsabilized citizen/subject who applies economic rationality to all their choice-making practices. To help usher in this new citizen/subject, service providers across the social welfare state are also being disciplined in ways that make for profound transformations in the delivery of all kinds of public services. As part of the effort, public policies across the social welfare continuum are themselves undergoing a fundamental transformation as they are being neoliberalized to shift to imposing discipline to achieve market compliance by all actors in the system, service providers as well as clients. From income redistribution programs such as public assistance for the poor to criminal justice policies such as the system of mass incarceration that has arisen in the era of the war on drugs, social welfare policies are becoming more alike as they feature a strong disciplinary approach grounded in marketized operations. Increasingly, for-profit providers are required to demonstrate they can meet performance standards. Clients must manage to make do with whatever limited opportunities the economy provides.

Getting people to be self-reliant in an economy that offers them dwindling opportunities inevitably intensifies the disciplinary core of social welfare's neoliberalization. Today, many people are still struggling with the effects of the Great Recession and the growing inequality and economic hardship it has produced. It has proven to be a pivotal moment not just economically but also politically. Just as the roots of the economic transformation stretch back before the Great Recession, the influence of wealth to forestall state action to address issues of social welfare has been growing

for just as long (Bonica et al., 2013). The growing inequality in income and wealth has led to massive expenditures in lobbying by the wealthy to lower taxes, reduce regulation of business, and limit social welfare legislation. As a result, there is now the distinct possibility of the United States moving to a tiered society. At the top, there is a limited stratum of upper-class and upper-middle-class people, ensconced in positions of corporate oversight and needed professional occupations. At the bottom is everyone who is increasingly deemed as not deserving of the state's attention, in part because they failed to position themselves as successful participants for the globalizing economy and are therefore seen as a burden that a globally competitive corporate sector cannot and will not carry. At the extreme, those in poverty are cast aside as disposable populations who are to be monitored, surveilled, disciplined, and punished more than they are to be helped.

The hollowed-out welfare state has less to offer those disadvantaged by economic transformation. Increasingly what it does have to offer is not so much assistance as discipline – discipline focused on getting people to internalize market logic and accept personal responsibility for the need to find whatever means, however limited, to get by in the changing economy (Soss, Fording and Schram, 2011a: Ch. 2). This is the core of what is being called neoliberalism, a new liberalism that restructures the state to operate consistently with market logic in order to better promote market-compliant behavior by as many people as possible (Brown, 2003, 2006).

Neoliberalizing social welfare programs prioritize people learning to be economically minded about everything they do so they can more profitably develop their human capital and become less in need of relying on the government for assistance. Everyone must learn to think about all aspects of their lives in terms of return on investment (what is commonly now called ROI) (Heady, 2010). Even government programs for the poor come to be centered on inculcating this neoliberal ethos (Schram, 2006: Ch. 5). The result is that self-governance replaces the government. It is the ultimate form of privatization. Neoliberalism is heavily invested in getting ordinary people to be not just factors in production, but sources of capital themselves. Activating those on the bottom of the socio-economic ladder to participate more extensively in investing in their own futures through acquiring debt, whether for schooling, buying a home, or other purposes, becomes an important source of economic growth in an economy led by the financial industry.<sup>2</sup>

Yet, for those who fail at becoming on their own financially savvy neoliberal citizen-subjects,

who can develop and leverage their own human capital, the state works to inculcate market-compliant behavior via a panoply of incentives and penalties. And when that does not work, especially as the inequitable economy grows in ways that do not create economic opportunities for them, then coercive controls are imposed. The goal is to control and contain those left behind so as a disposable population they are less of a burden on the rest of society. Social welfare institutions must of necessity be adjusted accordingly. In the transformed context, we see a shift from redistributing resources to the economically disadvantaged to an emphasis on enforcing compliance to behavioral standards so that subordinate populations become less of a burden on society.

Given its disciplinary focus, neoliberal social welfare unavoidably has moralistic and tutorial dimensions, focused on telling the poor how to behave more so than providing them with needed assistance. The inculcation of personal responsibility becomes central to the welfare state. In this highly neoliberalized paternalistic context, the helping professions that provide the critical social services are inevitably transformed. It is here at this neoliberal terminus that we find a transformed social work, depoliticized and refocused on managing disposable populations. Social work no longer stands outside power but now is more than ever thoroughly assimilated to it. Across a wide variety of populations in need of various forms of assistance and treatment, social work shifts to technologies of the state, forms of governmentality, practices associated with getting served populations to internalize an ethic of self-discipline and personal responsibility. The goal of this responsabilization is for subordinate populations to handle their own problems as best they can on their own, with the aim that they become less of a burden for the constrained state. As a result, they should become more willing to take up whatever limited positions in the globalizing economy that they are afforded.

Social work increasingly comprises forms of psychological services focused on helping realize the disciplinary demands of the neoliberalizing state, which is now ever more dedicated to managing rather than serving disposable populations. When examining changes across a number of different areas of human service provision today, most striking are the parallel shifts in treatment toward a more disciplinary approach to managing service populations (Schram and Silverman, 2012). It is the end of social work as we knew it and the ascendancy of a neoliberal regime that disciplines subordinate populations to be market compliant regardless of the consequences.

### MARKETIZING US WELFARE POLICY FOR THE POOR: FROM MEDICALIZATION TO NEOLIBERALIZATION

Especially for the poorest populations in the most neoliberalized regimes, like the US, the marketized welfare policies we see being put in place rely heavily on the medicalization of the problems they ostensibly confront. Medicalization is, arguably, the main way that welfare policy discourse today creates a stage for enacting what Michel Foucault called 'neoliberal governmentality', where the state is in the business of disciplining the poor to become self-disciplined citizen-subjects who will be less of a burden on the rest of us in spite of the persistent poverty they endure (Lemke, 2001). Neoliberal governmentality is premised on the idea that all of social life, public and private, in civil society as well as in the state and the market, should be seen as a venue for developing and deploying one's personal human capital so as to perform as a social actor consistent with market logic. This hypertrophy of market logic to become the common-sense basis for making all social choices requires that people become disciplined citizen-subjects who internalize market rationality as their social ethic. For low-income people who lack ability to perform effectively in this manner or who simply resist the orientation, there is the emerging danger that they will be seen as in need of behavioral modification in the form of what is called behavioral health and related services offering treatment to overcome whatever personal limitations prevent them from practicing neoliberal governmentality (Kaylor, 2008). Social welfare policy increasingly is oriented toward combining medical and economic logics in the service of disciplining clients to act consistently with neoliberal governmentality and thereby reduce the burdens of the state in assisting people to live otherwise.

In the process, what emerges is a paternalistic economistic-therapeutic-managerial discourse for treating subordinate populations in an age of neoliberalization (Schram, 1995). The goal is to re-inscribe the neoliberal cardinal principle that all people in the social order need to take personal responsibility for the choices they make.<sup>3</sup> The goal is to produce disciplined citizen-subjects who are capable of effectively making rational choices for improving their life chances, leaving aside and even rationalizing the fact that low-income individuals and subordinated populations are really given nothing more than an empty gesture when asked to choose between the lesser of two evils. These forced, false choices invariably leave the poor just as they are: poor still. This is

the pervasive reality of the fraudulent nature of the choice system neoliberalism puts in place, whether it is about choosing a social welfare service provider, charter school, or low-wage job.

Emerging out of pre-existing 'culture of poverty' arguments that got inflected as part of the right-wing reaction to progressive social policy in the 1960s, by the 1990s the US-led western welfare states, increasingly focused on with getting the poor to accept responsibility for their bad choices. The idea of bad choices had become ascendant in welfare policy discourse and had helped frame 'welfare dependency', rather than poverty, as the problem that needed attention (Schram, 2000: 62–3). This amounted to nothing less than an aphasic shift, where welfare discourse operates to impair our ability to put into words the trauma of poverty, and we use euphemistic substitutes such as 'welfare dependency' to paper over our complicity in perpetuating other people's destitution, while simultaneously shifting the blame away from the structure of society to the individual behavior of those who are forced to live in poverty (Schram, 2006: 136–9). With this old aphasic shift taking a new form, welfare dependency becomes the center of our discursive terrain dealing with how, in the contemporary parlance of our therapeutic culture, to 'treat' recipients for their diseased condition of dependence on welfare. Welfare use beyond the shortest periods of time as a form of transitional aid, as, say, when a single mother relies on welfare while working through a divorce, is now considered abuse. In other words, welfare use beyond a few months is now welfare abuse, signaling the need to undergo treatment to overcome one's dependency on welfare. The dependency metaphor operates like a metonymy in which a contiguous reference point is emphasized rather than the original object of concern. The poverty that precedes welfare dependency is ignored, and instead we are asked to focus on the reliance on welfare.

This semiotic shift is, arguably, most convenient for the rich and powerful in the United States, who increasingly need to deflect attention from the lack of upward mobility afforded to the lower classes in the ossifying and deeply unequal class structure that has emerged with the changing economy associated with globalization, and the proliferation of low-wage jobs as the only recourse to subsistence for many. Dependency becomes a displacement for talking about the underlying structural poverty of that economy, which our liberal, individualistic, agentistic political discourse cannot effectively address. So 'welfare use', 'welfare receipt', and the especially *verboten* 'welfare taking' are all being replaced by 'welfare dependency'. As a result, reliance on welfare is articulated as a sign

that a single mother suffers from 'welfare dependency', which, like other dependencies, is something from which the client needs to be weaned with an appropriate therapeutic treatment. Under welfare reform, all applicants for assistance are screened, diagnosed, assessed, and referred for the appropriate treatment to accelerate the process by which they can overcome their vulnerability to being dependent on welfare.

Medicalization represents modernity's preference for science over religion, expressed in the growing propensity to conceive myriad personal problems in medicalized terms. It envisions the poor as sick, as opposed to bad (Conrad, 2007). Yet that revised outlook comes with a price: welfare dependency is defined as the product of an individual's behavior, more than the inequities in the social structure or political economy. In this way, medicalization suggests that upward mobility is still possible. The poor are not fated to be poor; they can be cured of their ills and thereby activated to advance economically. This convenient displacement story, redirecting focus away from the structural embeddedness of persistent poverty in the changing economy, serves the political interests of powerful groups invested in not having to attack those structural roots of contemporary poverty. By highlighting that the poor can be cured of their dependency on welfare, medicalizing implies that mobility is still possible, when in fact it is less than likely.

One manifestation of how medicalization implies mobility is the proliferation of 'barriers' talk in welfare policy implementation (Houser et al., 2015). A major preoccupation in welfare reform as a new form of governance is assisting recipients to overcome 'barriers to self-sufficiency'. 'Barriers', contrary to the term's ostensible meaning, is most often construed under welfare reform as personal problems. Racial and sexual discrimination in the workplace or the lack of decently paying jobs is not usually acknowledged in state welfare programs as a barrier to moving from welfare to work. Instead, barriers are most often discussed as personal problems arising from internal issues specific to the individual rather than as external conditions in society that are blocking one's advancement. As a result, more and more programming under welfare reform is concentrated on what are seen as the related conditions that give rise to welfare dependency, be they mental health issues, behavioral problems, or addictions. In the masculinized discourse of welfare reform, even children risk being referred to as barriers to work. The goal is to get single mothers to be comfortable being the breadwinner for their families, even if it means cutting back on their commitments to their children. Yet the idea

of instilling a commitment to taking paid employment is couched in the terms of liberal political discourse. Self-esteem classes as well as psychological counseling have become common features of welfare-to-work programs as ways of engendering the self-confidence needed for participants to become the autonomous, self-sufficient actors assumed by liberal political discourse (Soss, Fording and Schram, 2011a: Chs 9–10).

These 'soft-skills' classes are often provided by contract agencies who have the background to work on getting people to change their behavior. This cadre of organizations include non-profit, for-profit and even faith-based organizations. The issues addressed involve the full gamut associated of 'barriers' confronting welfare families, not just getting a job, but also marriage, parenting and other issues that can lead to single mothers, in particular, needing to rely on welfare. The overarching goal is the inculcation of personal responsibility as an alternative to providing cash assistance. No doubt placing adult recipients in jobs becomes the priority issue under welfare as reformed.

Over time, this issue enacts its own neoliberal self-fulfilling prophecy. US welfare policy for the poor, mostly single mothers with children, was dramatically reformed in 1996. The 60-year-old Aid to Families with Dependent Children (AFDC) was replaced with Temporary Assistance for Needy Families (TANF) program with the passage of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. With time limits, work requirements, sanctions for non-compliance with welfare-to-work rules, the welfare rolls plummeted more than 60% in five years (Soss, Fording and Schram, 2011a). The participation rate of eligible poor families has declined dramatically as well. Predictably, the percentage of income-eligible families receiving public assistance declined from 84% to 40% between 1995 and 2005 (Brown, 2010). Although levels of need expanded greatly during the Great Recession that began in late 2007, TANF caseloads largely held steady at these low levels, leading most policy analysts to conclude that participation rates among income-eligible families have declined even further. At the same time, extreme poverty levels increased every year since welfare reform was enacted (Edin and Shaefer, 2015: xvii; Shaefer and Edin, 2012).

Eventually, welfare became the medical treatment program it posed as. Its get-tough regime chased away most eligible families. Only those who most desperately needed assistance applied. As more and more of the welfare population exited under welfare-to-work programs that required recipients to make 'rapid attachment' to paid



employment in the labor force, the remaining population is increasingly made up of recipients who have indeed incurred certain personal problems at high rates. For instance, it is estimated that 'a growing share of [those individuals receiving] Temporary Assistance for Needy Families [TANF], which offers cash support to low-income single caregivers, is composed of individuals with mental illness, as new work requirements result in faster exits of those without mental health conditions' (Danziger, Frank and Maera, 2009: 1). The rate of depression among TANF recipients grew in the post-welfare reform era. This, ironically, reinforces the medicalized character of welfare dependency as if it were a real phenomenon that was always already there in the first place, as if most recipients were always suffering from the illness of welfare dependency and its related medicalized conditions. Just like any good discourse, 'welfare dependency' then became its own self-fulfilling prophecy, making itself real by manufacturing the reality that, it claims, pre-existed it. Reliance on welfare comes to be seen less as an economic problem and more as mental health issue.

Yet medicalization has not changed fundamental attitudes about welfare, which remain ambivalent at best. Most Americans still do not in principle oppose government assistance for low-income families, and in fact continue to believe that we have a collective obligation to help the poor. For instance, from the 1980s through 2009, 60–70% of Americans indicated they supported government assistance for the poor and believed government had a responsibility to guarantee every citizen food to eat and a place to sleep (Pew Research Center, 2009). At the same time, most Americans also continued to believe that those in need should receive assistance only if they maintain a commitment to personal responsibility and a work ethic.

The campaign against welfare dependency was successful not because it changed this mix of attitudes. Instead, its success was in reframing the issue to focus on welfare dependency as a problem that needed immediate treatment. The problem of dependency came to be seen as a major source of society's economic, as well as social and cultural, ills. It increasingly was framed as creating a significant drain on the economy even as it encouraged out-of-wedlock births, single-parent families, and a decline in the work ethic. The dependency frame saw public assistance not as a hard-won protection *for* poor workers and their families; instead, it viewed welfare as a policy imposed *against* workers' values as well as their bank accounts.

This 'us versus them' identity politics reframing of welfare has been facilitated by the fact that welfare has for a long time been depicted in the

mass media using highly misleading racial terms and imagery. As a result, the public tends to exaggerate grossly the extent to which blacks have received public assistance and in turn has become increasingly critical of welfare as a program for poor blacks, who are seen as 'other' people, not like most white middle-class families, and who do not adhere to work and family values. Racial resentments and old stereotypes of black laziness have become more influential in spawning growing hostility toward welfare (Gilens, 2000).

With the medicalized discourse of welfare dependency firmly entrenched today in public deliberations about welfare use, welfare reform increasingly has turned into the social policy equivalent of a twelve-step program. Rather than a program to redistribute needed income to poor families with children, it has become a behavioral modification regime centered on getting the parents of these children to become self-disciplined so that they in turn will become self-sufficient according to ascendant work and family values. Increasingly, this behavioral modification regime is implemented via public-private partnerships in which state and local governments contract with private, often for-profit, providers to move single mothers with children off welfare and into low-wage jobs, or if not that then marriages. In this way, medicalization facilitated neoliberal marketization of welfare programming in service of producing a newly disciplined subordinate population that is being regimented into the low-wage labor markets of the increasingly unequal globalizing economy. In the process, the 'welfare poor' increasingly became the 'working poor', while extreme poverty increased and the profits of low-wage employers soared. Medicalization helps depoliticize poverty as a problem that the individual must seek treatment for rather than a public issue that we as a society need to address. Medicalization is the handmaiden of a profoundly depoliticizing neoliberalization that intensifies the focus on disciplining the poor to realize the objective of manufacturing a subordinated low-wage workforce for a changing economy that was being retrofitted to compete in the global economy.

### NEOLIBERAL GOVERNANCE: ORGANIZATIONAL REFORMS AND NEW POLICY TOOLS

The marketization of the welfare state involves both neoliberal organization reforms and policy tools to enact its medicalized approach to combating welfare dependency. Neoliberal organizational reforms, such as devolution, privatization, and

performance management accountability schemes, have been joined with paternalist policy tools, including sanctions, i.e., financial penalties, for non-compliant clients, to create a flexible but disciplinary approach to managing the populations being served (Soss, Fording and Schram, 2011b). What we can call 'neoliberal paternalism' represents a significant movement to marketize the operations of social service organizations more generally so that they inculcate in clients rationally responsible behavior that leads them to be market compliant, and thus less dependent on the shrinking human services and more willing to accept the positions slotted for them on the bottom of the socio-economic order (Brown, 2003). Organizations are being disciplined so that they can be held accountable for in turn disciplining their clients in this more market-focused environment. Neoliberal paternalism is transforming the human services into a disciplinary regime for managing poverty populations in the face of state austerity and market dysfunction.

This transformed environment involves: (1) deskilling in staffing patterns associated with relying on former clients as caseworkers, (2) marketizing of administrative operations stemming from the reliance on for-profit providers who are held accountable via performance management schemes, and (3) disciplining of clients via paternalist policy tools. These changes in organization and policy were a long time in coming. From the penultimate moment of the welfare rights movement in the early 1970s until the passage of welfare reform legislation in the mid-1990s, the number of welfare recipients stabilized at relatively high levels (even as benefits declined). Recipient families came to have essentially entitlement rights to assistance, albeit modest and often. Welfare policies nonetheless have long been entwined with multiple purposes, among the most important of which have been to return to the roots of social service work and instill or restore morality in the poor so as to assimilate marginal groups into mainstream behaviors and institutions (Katz, 1997). Further, as Richard Cloward and Frances Fox Piven contend, welfare policy has historically served to 'regulate the poor', effectively undermining their potential as a political or economic threat (Cloward and Piven, 1975). Others have noted that welfare served to regulate gender relations by stigmatizing single mothers receiving aid (Gordon, 1994). The stigmatization of welfare recipients as undeserving people who need to be treated suspiciously has not only deterred many welfare recipients from applying for public assistance, but also communicated to the 'working poor' more generally that they should do whatever they can to avoid falling into the censorious category of the 'welfare

poor'. Welfare reform in the 1990s, however, accentuated the disciplinary dimensions of welfare policy in dramatic ways.

The shift to a more disciplinary approach to managing the welfare poor was facilitated by a concerted campaign by conservative political leaders to replace poverty with welfare dependency as the primary problem to be attacked (Schram and Soss, 2001). With this heightened rhetoric about welfare dependency, the importation of behavioral-health models of treatment and associated organizational and staffing patterns came to be seen as not only plausible but desirable. As a result, welfare reform has remade the delivery of welfare-to-work services along lines that parallel addiction recovery programs (see the drug treatment example below). Welfare agencies have instituted services that are the social welfare policy equivalent of a twelve-step program: individuals learn in the new 'work-first' regime to be 'active' participants in the labor force rather than 'passive' recipients of welfare (Schram, 2006: Ch. 7). Such a view of welfare dependency has led to the importation of a 'recovery model' into welfare reform, one aspect of which is the staffing of welfare-to-work contract agencies with 'recovered' former welfare recipients. While former recipients have been relied on in the past, several studies of welfare reform have in recent years noted that the agencies studied had undergone change such that now about one-third of the case managers are former recipients (Ridzi, 2009: 137; Watkins-Hayes, 2009: 14). This proportion indicates numbers that go beyond mere tokenism (Turco, 2010). One of the virtues of the recovery model is that it is consistent with long-standing calls for a representative bureaucracy (RB) (Meier, 1975) that can practice cultural competence (CC) concerning the unique needs of its clients (Brintnall, 2008): a culturally competent bureaucracy is one 'having the knowledge, skills, and values to work effectively with diverse populations and to adapt institutional policies and professional practices to meet the unique needs of client populations' (Satterwhite and Teng, 2007: 2). A representative bureaucracy that draws from the community it is serving is seen as furthering the ability of an agency to practice cultural competency in ways that are sensitive to community members' distinctive concerns and problems (Carrizales, 2010). In other words, RB = CC. The recovery model holds out hope that a more representative bureaucracy will be more sensitive to the ways in which its welfare clients are approaching the unique challenges that have brought them to the agency's doorstep.

Yet there are ironies in this way of moving toward realizing the RB = CC formula. Former recipients, as indigenous workers from the

community, under the medicalized version of welfare are seen as former addicts in recovery. If welfare is seen as a dangerously addictive substance, then the implementation of a disciplinary treatment regime is a logical next step. The medicalization of welfare in fact should be seen primarily in metaphorical terms, as just described, and the main way of providing this medicalized treatment has been to increasingly rely on former clients who have gotten off welfare and can serve as 'success story' role models in ways that are consistent with the 'recovery model' in addictions treatment (Ridzi, 2009; Watkins-Hayes, 2009). The decentralized service delivery systems and private providers that so characterize welfare reform are fertile ground for the importation of medical models of dependency treatment. The use of performance management systems is also entirely consistent with the need to track measurable outcomes resulting from the provision of services or the application of treatment to clients.

Under this scheme, case management is a routinized and deskilled position focused largely on monitoring client adherence to program rules and disciplining them when they are out of compliance. There is, in fact, evidence that with the shift to a more decentralized, privatized system of provision, local contract agencies have gone ahead and moved to a more deskilled welfare-to-work case management by replacing civil servants, social workers, and other professionals with former welfare recipients (Ridzi, 2009; Watkins-Hayes, 2009). In the process, a form of community self-surveillance is put in place that Cathy Cohen calls 'advanced marginalization', where some members of a subordinate group get to achieve a modicum of upward social-economic mobility by taking on responsibilities for monitoring and disciplining other members of that subordinate community (Cohen, 1999).

While this staffing pattern may at times be relied on for less controversial reasons as a simple cost-saving measure consonant with the business model, it is also entirely consistent with a recovery model philosophy that puts forth former recipients as behavioral role models. These former recipients are frequently referred to in the literature as 'success stories' (Schram and Soss, 2001). Yet the recovery model suggests they are hired for another reason. The recovery model is grounded in the philosophy that underpins the twelve-step program of Alcoholics Anonymous and its predecessors, which over time has spread to other areas of drug treatment and mental health services, along with the core conviction that clients must be willing to support one another in overcoming their addictions (Alcoholics Anonymous, 1953).

Government programs are now run more like businesses, and the application of the business model to welfare involves getting case managers and their clients to internalize the business ethic as well. Policy changes emphasize case managers using disciplinary cost-saving techniques to get clients to move from welfare to paid employment as quickly as possible regardless of whether they and their children improve their well-being.

In the new neoliberalized welfare system, local devolution and privatization have been joined by performance management. Performance management accountability schemes measure the performance of private contract agencies to hold them accountable for meeting performance outcome goals. Performance management more than anything else has led many working in the system to suggest that 'social work' has been replaced by a much more preferred 'business model' (Soss, Fording and Schram, 2011a). Agencies inevitably feel the pressure to outperform the other agencies being evaluated in these performance schemes. Proponents of neoliberal organizational reform predict that local organizations will respond to the competition among provider agencies by innovating in ways that advance statewide goals and improve client services. Devolution will provide the *freedoms* they need to experiment with promising new approaches. Performance feedback will provide the *evidence* they need to learn from their own experiments and the best practices of others. Performance-based competition will create *incentives* for local organizations to make use of this information and adopt program improvements that work.

Studies have suggested several reasons why organizations may deviate from this script in 'rationally perverse' ways. Performance indicators provide ambiguous cues that, in practice, get 'selected, interpreted, and used by actors in different ways consistent with their institutional interests' (Moynihan, 2008: 9). Positive innovations may fail to emerge because managers do not have the authority to make changes, access learning forums, or devise effective strategies for reforming the organizational status quo. Performance 'tunnel vision' can divert attention from important-but-unmeasured operations and lead managers to innovate in ways that subvert program goals (Radin, 2006). To boost their numbers, providers may engage in 'creaming' practices, focusing their services on less-disadvantaged clients who can be moved above performance thresholds with less investment (Bell and Orr, 2002).

In this environment, case managers are under constant pressure to get their clients to stay in compliance with welfare-to-work rules and if the clients fail to do so they are penalized with sanctions

that reduce their benefits. This preoccupation with monitoring clients for compliance represents a change in the role of the case manager as part of the administrative transformation of welfare policy implementation. The rise of neoliberal paternalism in fact is associated with a shift in the nature of casework, marked by the passage of federal welfare reform in 1996 (Lurie, 2006). The prime directives for TANF case managers today are to convey and enforce work expectations and to advance and enable transitions to employment. Efforts to promote family and child well-being are downplayed in this frame, but they are not entirely abandoned. Under neoliberal paternalism, they are assimilated into efforts to promote work based on the idea that 'work first' will put clients on the most reliable path toward achieving a self-sufficient, stable, and healthy family.

Thus, case managers today initiate their relationships with new clients by screening them for work readiness and delivering an 'orientation' to describe work expectations and penalties for non-compliance. In parallel with individualized drug treatment plans, welfare-to-work case managers then develop 'individual responsibility plans' – or 'contracts of mutual responsibility' – to specify the steps that each client will take in order to move from welfare to work. These rites of passage establish a relationship in which the case manager's primary tasks are to facilitate, monitor, and enforce the completion of required work activities. In celebratory portrayals of the new system, case managers are described as being deeply involved in their clients' development, as 'authority figures as well as helpmates' (Mead, 2004: 158).

In some states, this ethos is expressed by the neoliberal relabeling of caseworkers as 'career counselors'. The label evokes images of a well-trained professional who draws on diverse resources to advise and assist entrepreneurial job seekers. In practice, however, few aspects of welfare case management today fit this template. It is rare today that welfare-to-work caseworkers have a social work degree of any kind. Many, however, have management degrees from Strayer, DeVry, Capella, or other vocationally oriented schools that line the strip malls across the country. It is common in many states that a sizeable number of case managers are former recipients who qualified for their jobs by virtue of their experience with the system. Under the business model of service provision, the relationship between client and case manager is rooted in an employment metaphor: the client has signed a 'contract' to do a job and should approach the program as if it were a job.

The case manager's job is now to enforce that contract, often using the threat of sanctions to gain compliance. As one major study reported, case

managers spend most of their time enforcing compliance to individual responsibility plans and very little time counseling clients (Soss, Fording and Schram, 2011a: 223–6). The change is palpable. One former recipient case manager, as reported in this study, stressed in a most poignantly metaphorical way that welfare is no longer a social service. She suggested it was now herding cattle instead of tending sheep; while a shepherd takes care of the sheep, a cattle herder just runs the herd through a pen in an insensitive fashion.

The shift from tending sheep to herding cattle at one level is not necessarily that significant since both can be interpreted as dehumanizing. Yet the desensitization implied by this way of characterizing the shift is noteworthy in itself. It also points to another problem with performance measurement. The preoccupation with numbers emphasizes meeting benchmarks as the primary goal irrespective of whether the client is actually helped. In the public management literature, this is the problem of suboptimization (Guilfoyle, 2012). Simon Guilfoyle refers to suboptimization as analogous to synecdoche, in which a part stands in for the whole. Suboptimization occurs when a measure of one particular outcome of service provision implies that other dimensions, usually less measurable, if no less important, have also been met. Suboptimization is rife in human services where the intended outcomes almost always include difficult-to-measure subjective states of being, including improvements in overall well-being. Suboptimization results when outcome goals are achieved in name only and the full spirit of the goal is lost or forgotten in the process. Meeting performance benchmark targets can misleadingly imply that the overall goal has been met when in fact only an indirect indicator implies that is the case. Welfare-to-work targets might be met but all that has really happened is that we have moved clients from the 'welfare poor' to the 'working poor' with no real improvements in their overall well-being.

Yet suboptimization's deleterious effects go further. They can produce an instrumentalization, a veritable means-ends inversion, where the performance measurement benchmark or target becomes the end in itself. Under these conditions, human service professionals are encouraged to forget about the overall goals of their program and focus exclusively on meeting the designated benchmarks. Once this happens, it is likely that all work with clients is converted into activities associated with meeting the target irrespective of whether the broader goal is achieved. Once an agency puts in place a performance measurement system it risks creating an instrumentalization that changes the very work that human service workers do. With all

the debate about 'high-stakes testing' under neoliberal education reform, the threat of performance measurement to change how work is done is most popularly discussed in the mainstream media as the 'teach to the test' effect, where school teachers teach students only what they need to know to improve their test scores even if this means their overall learning is not really enhanced (because critical thinking skills and other important forms of learning are neglected).

The 'business model' may be replacing 'social work' as the way to deliver neoliberal, marketized welfare-to-work programming but the results are proving to be devastating for the poor, who are increasingly blamed for their welfare dependency as a treatable condition. The result is that more of the 'welfare poor' are being made into the 'working poor', while their poverty persists but employers increasingly profit (Edin and Shaefer, 2015: 157–8; Shaefer and Edin, 2012).

### GETTING BEYOND NEOLIBERAL WELFARE POLICY: THE ROAD TO RADICAL INCREMENTALISM

The disciplinary approach to the poor is spreading from the US to other countries (Brodkin and Marston, 2013). The results elsewhere are proving no better than in the US. As more and more evidence mounts about the horrors of neoliberal welfare policies, interest grows in moving beyond neoliberalism's insistence that the welfare state buttress markets rather than counter them. Yet, just as neoliberals could not simply wish away the welfare state, the same is true for the opponents of neoliberalism. The road beyond neoliberalism is most likely one that goes through it, not around it. That means engaging it, not ignoring it, and in the process trying to bend it to better purposes and more humane ends. I call this sort of realistic approach 'radical incrementalism', where small incremental steps within the existing regime are strategically taken that lay down a path for eventually getting beyond it (Schram, 2015: 173–98).

For instance, welfare policies that enhance people's ability to participate in markets effectively so as to live decently need to be supported, even as we insist that social protections be maintained and even improved so that no one has to endure poverty whether they are participating in labor markets or not. We can do this; we can do two things at once. We can walk and chew gum at the same time. We can work both sides of the street. We can work through neoliberalism so as to get past it. Rather than bemoaning

its hegemonic status, we should begin the process of working through it in radically incremental ways: right now, before neoliberalism imposes any more hardship than it already has done.

### Notes

- 1 On how contemporary feminism may be unreflectively realizing the goals of neoliberalism that overvalorize individual choice via market participation, see Fraser (2009).
- 2 Now even retirees are being reconstructed in the neoliberal imaginary as protoworkers who must produce or find other ways to reduce their reliance on state-funded pensions. See Coole (2012).
- 3 In many ways, neoliberal governmentality ends up undermining the individualization that comes when human services work to empower clients to practice self-determination. See Yeatman, Dowsett and Gursansky (2009).

### ACKNOWLEDGEMENTS

Thanks are extended to Adam Dahl, Mitchell Dean, Tom Grimwood, Patricia Jefferson, John Maher, Melania Papa-Mabe, Matt Sparke, Amanda Tillotson, and Vanessa Wells for helpful comments on an earlier draft.

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