CITIZENS WITH DISABILITY – CRISIS OF THE WELFARE STATE IN EUROPE?

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Abstract
The present paper brings a basic characteristic of once in Europe common form of the welfare state, including its currently published criticism. It presents the examples of disintegration of traditional values of social solidarity. It deals with risks that may arise from the potential development and that may threaten citizens with disability who are still predominantly perceived as subjects of social solidarity. In the environment of the European Union it concerns demographic aspects (aging population), increasing expenses on welfare transfers and the development of medicine as the economically most demanding subsystem of public budgets of the future.

Key words: disability, citizen with disability, public budgets, welfare state, social prevention, solidarity of the population, aging, health, risks, society.

Introduction
In the last decade, developed European countries (to be more precise, countries of the so-called anglo-saxon world) have been trying to solve serious problems of economic growth that culminated with the financial crisis and consequently economic recession after 2008. Apart from the well-known causes of the crisis (a significant one was the so-called real-estate bubble in the USA) the basic cause is probably the process of globalization and the related emancipation of the states formerly referred to as developing (China, India, South America, etc.). The characteristic feature of these “new” economics is almost total absence or very poor social security of the work force. It is the criteria comparable with the countries from, for instance, the EU. It is impossible not to mention in this connection the complete fiasco of the Lisbon strategy of the EU for a decade until the year 2010. A daring or rather a megalomaniac statement about the economy of the EU as a leading economic and financial environment until 2020 was to some people who grew in the former Soviet Union block countries and experienced their “concept of bold tomorrows” a bitter reminiscence of all kinds of things.

It goes without saying that what people now are witnessing gradually in all countries of the EU, which means both the new and the old countries, is an increased “nervosity” that is being manifested by political, economic, budget and generally social problems and that is impossible not to concern the citizens of the EU with disability. A calling for “reforms” is still more and more evident in these countries. These “reforms” do not mean anything else than
the effort to secure at least to a certain extent readiness of wealthy societies for events that globalization brings and will bring. Practically, in all countries of the EU, however different the extent of urgency or order is, efforts are beginning to show to adjust the following systems:

a) pension security scheme
b) public health care
c) models of social security (benefits and services)

From the nature of the issue it is obvious that all that has been stated above has a direct impact on the living conditions of the citizens with disability.

The percentage of people with disability in individual countries of the EU is stated from 5% to 19%. However, practically it does not mean such a big difference in the number of people with disability but the difference in criteria during the assessment. According to The Statement of Reasons of the European Union regarding the approval of The Decision of the European Council about the European year of people with disability 2003 approximately 38 million people have disability in the EU or every tenth European of all age categories. Therefore, it is very important to be able to name the risks (real or just impending ones) that may appear in Europe in the coming years and that may entail deterioration of the quality of life of the citizens with disability.


Aim of review: To reveal attributes of crisis in the Europe’s welfare state in the viewpoint of citizens with disability.

Method of review: Analysis and comparison of scientific literature and documents, analyzing changes in society in the aspects of citizens with disabilities.

The welfare state and citizens with disability

The welfare state may also be perceived, in accordance with authors, in a way as a kind of (and the time being) answer of the modern society to “all ills” of the historic development, reaction to exclusion, poverty, injustice and inequality of opportunities. The golden years of the welfare state or a state of public services (sometimes almost pejoratively “assistance state”) are, as it seems, definitely over. Despite that, the efforts of many social-political schools of thought and official formations advocate for its preservation or maintenance. Sometimes a requirement for “intensification” of the achievements of the welfare state is encountered. The principal idea of the concept of the welfare state is redistribution – by means of the public policy to distribute again what was primarily distributed by the market, with the aim to (Krebs, 2005):

• balance chances and create the conditions with the help of social policy so that all citizens were given certain acceptable living standard (welfare) corresponding to the possibilities of the society and to do so not as a charity but as a welfare right,
• secure conditions for a long-term stability and prosperity of the society as a whole.

It is a concept of social policy typical for democratic countries with a relatively developed market economy that includes also a state in social protection of providing of public services (generally these are thought to be services of a public character, thus, mainly in the area of social services and benefits but also in health care and education, unemployment services, realization of housing policy etc.)

The welfare state is often characterized as a state that:

• is notably engaged in solving social problems of its citizens and has a dominant, often monopoly, position in the social sphere,
• substantially assumes social protection of its citizens and thus controls a considerable part of the environment for social actions of people,
manages extensive and cohesive system of welfare security and considerable range of services provided for free or for charges that do not match the real value,
is characterized by a high level of redistribution,
is extremely demanding on economic sources,
leads to centralization, bureaucracy and anonymity.

Generally, a welfare state is perceived as a state with a strong public sector and significant interventions in the social sphere and also as a certain type of government that seeks “the third way” between centralized economy and the economy of the free market. The responsibility for basic living conditions here is not just a matter of individuals but it is a public affair. The concepts of welfare states in the European region are greatly differentiated; nevertheless, the focus of the concept, in general and in all forms of the welfare states, is the process of redistribution. This is allowed due to the existence of many principles on which the welfare state and its existence is founded. For the present purpose, the core principle shall be the principle of solidarity.

It is usually interpreted in its emotive or possibly moral way and it is being forgotten that in the course of the development of the welfare state it has already become an immanent part of the majority of the current social systems that could, by no means, function without its existence (Muslikova, 2005). That is why at present the majority of representatives of social sciences (and even political representatives regardless their specialization) does not consider or speak about the thorough breakdown of the welfare state (i.e. removal of the solidarity principle), but it rather focuses on the correction of its parameters with the aim to achieve longer sustainability of the individual systems of support (Czech Statistical Office). However, it may also concern removal of “an unpleasant tang” that is brought to the society by excesses in the form of the so-called “abusement” of the solidarity principle.

It is not that this term did not exist in the golden era of the welfare state, but it was not socially (by media) reflected in the way that is common nowadays. Together with the undeniable “tension in the public budgets” the term “abusement of the public support” is still more frequent in the developed Europe. Only the analysis of this term (it is not possible to assess scientifically, exactly if the abusement of the public means is committed more by socially excluded people or wealthy people, natural persons or legal (and multinational) companies – there is a lack of precise data, but it is possible to find the answer by mere estimate of “abilities” of the mentioned groups when searching where the abusement is really happening) is still worth a separate paper, for now, it is possible to say that a certain shift in perceiving the “right” to public support has been apparent in the last twenty to thirty years in Europe.

In connection with centuries of social exclusion (sporadically even elimination) of people with disability the question is being faced and in future it will be faced more often when one is really dealing with the abusement of the solidarity principle (typically: a person receiving unemployment benefits works illegally and thus he/she is getting untaxed money) and when the term “abusement – of, for example, social benefits” – means reminiscence of historical traditions of segregation and exclusion accompanied, in individual cases, by the usual feeling of “envy.” It cannot go without noticing that in the last few years it has been observed that also less wealthy and powerless people stop feeling solidarity with “clients of the welfare state.” It can be asked where the causes of the current increasing desolidarization and the disappearing respect to the unemployed or socially handicapped are. It can also be asked if the current relation to, for instance, socially excluded segments of societies or directly to Romany people as such cannot be a model for the future relation to people with disabilities. No matter how unfounded the mentioned concern sounds, especially in the light of the above-mentioned values of the positive moods of the European public, there exist scenarios that agree with these concerns in the development process of societies.
These days, every person more or less feels that the world in which he/she lives is full of risks, uncertainties and dangers. Social status, employment, market value of skills, partners, neighbours one could rely on, all that is unstable and vulnerable. The unemployed, this in the past dominant army with which the majority of people sympathized, are becoming more of a “burden” for many face to face with new facts and a group potentially or actually abusing its position. In the Czech society and surely not only there the so-called socially handicapped, not yet directly people with disability, have become victims of “desolidarization” and that is despite the fact that official political manifestos of all dominant social formations (e.g. political parties) and social programmes of all organizations focused on “the fight against social exclusion” say something else.

**Manifestations of the decline in solidarity (risks of the future relation between the society and people with disabilities)**

Manifestations of the decline in solidarity within the welfare state occur practically in all areas that are affected by its inner problems. These are connected with, for instance, flexibilization of work including easy substitution of unqualified or less qualified workers, changes in the conception of “work security”, including changes in the attitudes of those who have a job toward the unemployed. The second area that is discussed in this respect is the crisis of a family perceived in this case primarily not as a matter of breakdown of relations among family members (domain of psychologists), but as viewing the society-wide consequences of the change of this still basic unit of Christian-civilization sphere. The source of tension in this area is mainly a conflict between those who limited the number of their children and thus gained a one-sided advantage and those who have children. These people saved on expenses on children, however when they grow old they will be cared for (at least partially) by descendants of those who had children and they all face a real risk of a lower living standard. In a way, it is natural that in this system children are not perceived as an important support in the old age but often (completely in contrast to the centuries of logic and tradition) as a heavy economic burden of the present.

**Solidarity between generations**

Demographic problems of “wealthy” countries became a popular tool against organized solidarity. Today’s generation of economically active people in many developed countries contributes to the pension insurance system the most in all its history and then the generation of today’s pensioners receives the highest pensions in history. However, those who financially support contemporary pensioners in the current system will have significantly lower pensions one day, which is given by the logic of an aging population and changes in the labour market (Keller, 2005).

The following two charts that show a model valid for the Czech Republic are the evidence of possible difficulties that can be brought by the future development of the demographic structure of population (Czech Statistical Office). In the first one possible scenarios of the development of the number of population are outlined:

- the top variant counts with a high increase in natality (more than 2 children per woman) and an increased influx of migrants,
- the middle variant counts with an average increase in natality and an average influx of migrants,
- the low variant counts with the preservation of low natality (on average 1,3 children per woman) and the current influx of migrants.
Figure 1. Expected population development in 2050 (in M.)

On the one hand, the second chart shows the increase of the average age of the population by 2050 and on the other hand it reflects the increase of the number of population over 65 years of age. According to this source there exists a real presumption that by the year 2050 the number of population over 65 years of age (receiving pension) will have increased from the current 2.2 million to almost 3.5 million. All that will happen in case of the expected decrease in the absolute number of inhabitants stated above.

Figure 2. Estimated number of people eligible for retirement by 2050
(medium variant of projection; in M.)
(available on http://www.czso.cz/csu/redakce.nsf/i/odhad_poctu_osob_s_narokem_na_starobni_duchod_do_roku_2050)

It is apparent that the principle of solidarity between generations is going to face a particularly difficult test. However, when speaking about the aging of population it is necessary
to say that **the changes in functioning of the welfare system will, beyond any doubt, also concern citizens with disability.**

Two kinds of expectations in particular come into consideration:

- The increasing proportion of seniors of higher age will also mean the increase of people with disabilities in this population group (not every old age means dependence, however, in the last years most inhabitants have been dependent on a certain extent of support from another person),
- In the society of “old people” social and political processes will take place and they will alter the traditional transfers of financial means. People with disability may “benefit” from them – e.g. in the health care sphere, but they can also mean a decrease of means “traditionally” given to this group of inhabitants (see difficulties with financing of modern residential care homes versus necessity to build facilities for seniors who need a higher level of support – e.g. Alzheimer disease).

**Solidarity of healthy people and people with disabilities**

A similar logic that apparently commands relations between the old and the young also begins to function in the relation between healthy people and people with disabilities. It is reflected by “tempting” advertisements of some health insurance companies that are luring clients on, e.g., contraception allowances. It is obvious that in this way they gain a generation of women in the active age – a group that contributes to the fund of health insurance from their incomes (unlike children, students and pensioners) and does not incur heavy expenses in health care. The principle of solidarity is put aside in these campaigns. The younger generation of the economically active people that finances the system of the health insurance from its contributions draws many times less means from it than the older generation that already does not contribute to this system. There exist qualified estimates according to which more than 75% of expenses on health care is consumed by people older than 65. Moreover, as a result of the development of the medicine and the increase of the number of people with disability, including people with chronic diseases, nowadays as well as in the future the demand for additional financial inputs will grow. They would enable to provide a highly demanding health care that did not exist before and also, nowadays, they would enable quality health care for the seriously ill and the still larger senior population. The still growing **discrepancy between the possibilities of the modern medicine and available means to cover the provided care** means a real threat. As a result, it will be necessary to revise the current setting of parameters that is the basis for a solidary system of financing the health care.

It seems that a particularly difficult test for the principle of solidarity and even basic rights and freedoms shall be reparative possibilities of the currently rapidly developing science field – medical genetics. So far internationally accepted ban of any discrimination of a person because of his/her genetic heritage has been valid. Convention on human rights in biomedicine took effect for the Czech Republic on 1st October, 2001. It states (and to the future?), for instance, that the current state of the right of future parents to decide about their own parenthood shall be preserved. This right cannot be restricted in any way even though it is possible to trace opinions and procedures in European societies that could lead to such a restriction in the future.

For instance, the discussion about the “right” of parents to keep a child that is diagnosed with a serious genetic disease by means of prenatal tests and whose treatment costs the society millions of Euros. This discussion is still being led as “ethic”. When it becomes a “practical” discussion one can only guess.
Conclusions

1. People with disability as a whole represented, are representing and probably will represent a justifiable subject of targeted social solidarity in Europe. However, as a result of the still decreasing extent of this solidarity they will be sooner or later exposed to strong economic pressures mainly in consequence of advancing globalization and liberalization of societies. People with disability are perceived as legitimate recipients of redistribution products. The employment of people with disability – and so their possibility to contribute to the welfare system with their taxes and legal payments – is gradually worsening despite a whole range of measures of the active employment policy. There is an evident causality with the level of education that has the power to lower or eliminate unemployment risks.

2. With respect to the above-mentioned thorough and less compromise securing of the rights of people with disability by the people with disability themselves (more precisely by their organizations) and more consistent enforcement of their rights will probably become a necessity in the future. Because relying on “natural human solidarity” in the sense of political support of the principle of redistribution will be probably no longer possible in the extent people have been accustomed to up till now.

3. Especially for that reason, the question of exceptional need to increase legal and civic awareness of people with disability concerning society-wide shifts and the necessity to be ready for advancing and intensifying pressures on decreing of the necessary security of the vulnerable groups of inhabitants is assuming crucial importance.

4. It is beyond doubt that a significant part of the “enlightenment” work can and must be taken by universities and their specialists. Those who work in the fields of social work, special needs pedagogy or economic sciences can and should propose alternatives to “crisis scenarios” of the future development of relations between majority societies and the minority of people with disabilities.

References