

# A glossary of policy frameworks: the many forms of 'universalism' and policy 'targeting'

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## ABSTRACT

The recognition that certain characteristics (such as poverty, disadvantage or membership of marginalised social or cultural groups) can make individuals more susceptible to illness has reignited interest in how to combine universal programmes and policies with ones targeted at specific groups. However, 'universalism' and 'targeting' are used in different ways for different purposes. In this glossary, we define different types and approaches to universalism and targeting. We anticipate that greater clarity in relation to what is meant by 'universalism' and 'targeting' will lead to a more nuanced debate and practice in this area.

## INTRODUCTION

Actions taken for the benefit of public health require a balancing of the universal and the particular. All individuals are biologically susceptible to disease and all will experience ill health during their lives, making some universal services appropriate. However, many conditions do not strike evenly and certain characteristics can make individuals more susceptible, such as poverty, disadvantage or belonging to marginalised social or cultural groups.<sup>1</sup> As a result, it is argued that those who are more at risk, or at the greatest vulnerability to succumbing to ill health, should be treated differently by, for example, being given additional resources or assistance.<sup>2–4</sup> While straightforward in principle, achieving the right balance between 'universal' and 'targeted' programmes in practice is more difficult, requiring decisions to be made about what groups deserve what level and kind of support. As a result, how to combine universal and targeted policies, programmes and services remains a point of much discussion and debate.<sup>1 3–6</sup> This debate is likely to intensify as public health becomes increasingly concerned with issues of inequality.<sup>7</sup>

In practice, 'universal' and 'targeting' are used in different ways for different purposes in the academic literature.<sup>1 3 8</sup> Greater specificity is needed in relation to what is meant by 'universalism', 'targeting' and mixed approaches such as 'proportionate universalism'.<sup>1</sup> Specifying and clarifying what is meant by universal and targeting, and the different approaches which can be taken within each of these broad policy categories, are of central concern to social policy and welfare state scholars, and have been hotly debated since the 1940s.<sup>9–12</sup> Drawing on the welfare state literature and research into the effectiveness of policy targeting, in this glossary we outline different approaches to universalism and targeting. It is worth noting that while targeting is an issue for all governments, this paper draws predominantly on western industrialised examples.

## A BRIEF INTRODUCTION TO UNIVERSALISM AND TARGETING

Universalism in policy has its roots in concepts of community and the collective well-being of populations. Historically, the standardised treatment of people has been seen as important to national advancement, social order, national unity and cohesion.<sup>10 13</sup> At a general level, universalism seeks to apply the same standards to all individuals.<sup>8 14</sup> Supporters of universalism contend that by not differentiating between groups, different standards are not created for how different groups are dealt with.<sup>13 15</sup> That is, intentional abstraction is made from the pluralism of society in order to ensure 'fairness'.<sup>8</sup>

Universalism, as a guiding theme of government, is most often traced back to the Beveridge Report (although it existed as a theoretical concept prior to this).<sup>13 16</sup> Central to postwar welfare states, particularly in the UK, were concepts of universalism, which were introduced to counter 'residualism'.<sup>12</sup> Commissioned by the UK government and released in 1942, the Beveridge Report recommended, among other things, that healthcare, unemployment assistance, worker's compensation and pensions be introduced on a consistent and universal basis.<sup>15</sup> This was thought necessary to counter the existent piecemeal and residualist approach to government assistance. A residual approach to the provision of welfare posits that government assistance should only be provided when other forms—such as family and the market—break down. Under a residual welfare system, benefits are given only to the poor and means-testing is used to differentiate which individuals and groups warrant government assistance.<sup>12 17</sup> Although the truly universal system of the Beveridge Report was never completely implemented, the postwar move towards more universal policies, whereby government assistance is provided to the whole population, was nevertheless a radical departure from residualist approaches of the past.<sup>12</sup>

Since the publication of Geoffrey Rose's 'Sick Individuals and Sick Populations' in 1985, universalism has been of central concern to public health and health policy more broadly.<sup>18</sup> Rose's population approach argued that health risks are spread across a continuum, rather than confined to particular groups.<sup>18</sup> Recent work on welfare state regimes has argued, on the basis of better health outcomes experienced by social democratic states (eg, the Nordic states) that favour 'universal' approaches to social assistance and welfare, that universalism is beneficial to public health.<sup>18 19</sup> The underlying assumption of these arguments is that, through an impartial approach to allocating resources, universalism relieves inequality. Today, universalism is most commonly associated with Nordic countries,<sup>17</sup>

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which are understood to have strong social insurance systems, which cover healthcare, education, parental care and other benefits. These states are thought to promote greater equality through their 'equal' treatment of different groups (be it men, women, different ethnicities or religious groups), by treating all individuals as the same.<sup>8 19</sup>

However, welfare scholars argue that many states which have been described as 'universal' exclude certain groups by virtue of viewing populations as homogenous.<sup>20</sup> This means that they are either not really universal at all, or in practice have been found to incorporate various degrees of targeting.<sup>10</sup> The universalist approaches of postwar Britain and the Nordic states have come under attack from scholars concerned with social diversity.<sup>10 20–22</sup> Labelled as 'false universalism', they are seen as insufficient for dealing with social difference.<sup>20</sup> For example, universalism in the postwar era overlooked the needs of women and minority groups and catered predominately to white men.<sup>20</sup> Meanwhile, significant gaps have been found in the 'universalist' programmes of the Nordic states, particularly in benefits for immigrants and guest workers.<sup>21</sup> Here, proponents of universalism are accused of confusing 'impartiality' with uniformity and 'equality of treatment' with 'sameness of treatment' regardless of the different needs or ability to access services.<sup>8</sup> These ideas have their roots in the work of Ronald Dworkin<sup>23</sup>, who argued that equal treatment of all individuals is insufficient. Giving equal treatment to all people would mean, for example, providing the same resources to someone with a disability and someone without a disability. To be sensitive to differences in need, Dworkin's theory of equality argued that individuals must be treated differently. Hence, while universalism is regarded as a precondition of equality, it does little to promote redistribution and ignores existing inequalities.<sup>23</sup>

Others argue that universalism does not truly exist in practice, as judgements are constantly made in the delivery of services about who gets what, against a range of criteria.<sup>21 24</sup> For example, within a universal healthcare system, decisions are routinely made about which individuals *need* which services. Some policy researchers suggest that this can still be considered 'universalism', and merely reflects the need for 'fine tuning' at the margins.<sup>10 25 26</sup>

With regard to specifying which groups should be targeted for additional assistance, decisions must be made about 'cut points' in order to define the group to be targeted.<sup>3</sup> Yet groups can be 'cut' in an almost infinite number of ways. For example, we can differentiate between groups on the basis of means (ie, position in and access to the market economy), needs, geography, race, religion and so on. At the 'pointy end' of policy and programme delivery, decisions need to be made about how to target which pay more attention to some issues than others. For example targeting on the basis of poverty will not address issues of gender inequity.

Indeed, experimentation with policy targeting has shown that hitting the target sometimes misses the point.<sup>27</sup> For example, place-based targeting has become an increasingly popular way to address social disadvantage since the 1990s in countries such as the UK and Australia. Here, areas or 'postcodes' of concentrated disadvantage are targeted for increased investment or implementation of programmes. On closer analysis, however, it appears that this area-based targeting is insufficiently sensitive—picking up significant numbers of individuals who do not need additional resources, while missing many who do due to the wide geographical spread of poverty in countries like the UK.<sup>28 29</sup> This suggests that targeting may need to cut more finely in order to be effective.

A similar policy experiment in Australia demonstrates that the costs of targeting, even in relatively simple geographic terms,

can be disproportionately high. Since the late 2000s, successive Australian governments have experimented with 'compulsory income management', where a portion of government benefits are 'quarantined' for spending on approved items (such as clothing or food). Compulsory income management operates in postcodes of high socioeconomic disadvantage. Reviews of income management have shown that it costs governments in excess of \$A1 billion per year to administer, with little to no evidence of effectiveness.<sup>30</sup> In one of the first trial areas, the scheme was estimated to cost \$A4100 per person per annum, constituting one-third of the total allowance paid to that individual in the same year.<sup>30</sup>

Even if compulsory income management was shown to be effective, and worthy of substantial investment, schemes that are aimed solely at the poor can quickly lose public support. Those who are better off, and pay more taxes, may object to their tax dollars being spent on high-cost schemes which they see as only benefiting other groups—leading to significant political pressure to retract targeted policies.

While targeting is often viewed as a means to address levels of inequality while saving government money (compared with administering universal policies), in practice targeting is highly complex and may not always be the most effective means to achieve either of these objectives.

In addition to deciding which groups to target, when it comes to designing policies, programmes and services, we must also consider differential supply. For example, we may decide that different groups have different levels of needs that need to be addressed, but services or support may also need to be differential. This raises questions about what level of differentiation is required in the supply of services or programmes to adequately address various forms of need. In other words, how much diversity should policies and programmes seek to encompass?

To help public health researchers and policymakers meet these challenges, we outline two approaches to universalism: *general universalism* and *specific universalism*. This is followed by an examination of the different principles that can be applied to targeting, which 'cut' the population and/or the supply of services in different ways. These are: *negative selectivism*, *positive selectivism* and *particularism*. We conclude with a discussion of a relatively new framework for addressing social inequality: *pre-distribution*. To begin, however, we provide a definition of residualism (a type of selectivism) because of its centrality to many of the other concepts discussed in this glossary.

### Residualism

Residualism refers to the provision of services and support solely to the poor and as a last resort (eg, when other forms of welfare, such as family or voluntary, fail).<sup>12</sup> Under a residual approach, no universal services are provided.

### General universalism

General universalism favours impartial determination of welfare recipients, as well as impartial allocation of benefits. Here, universalism refers to the degree of impartiality applied to the process of selecting individuals or groups deemed eligible for assistance, and also to the dispensing of this assistance.<sup>8</sup> These 'flat-rate' benefits are applied to all, irrespective of citizenship, class, means or need.<sup>10</sup> General universalism can be defended and sought on many grounds, including social rights, efficiency, productivity and the protection of the population.<sup>8</sup> Public health examples of general universalism include infectious disease control and sanitation, the benefits of which are available equally to everyone.

### Specific universalism

Specific universalism defends and extends social rights, as a way of achieving impartiality.<sup>31</sup> It supports free, universal availability of public services such as education and healthcare to all on the basis of citizenship (though it does not necessarily guarantee universal access).<sup>31</sup> Universal public healthcare systems, such as those in Australia and Canada, are examples of specific universalism. Additionally, people have the right to welfare in compensation for the inequality arising from modern society.<sup>11</sup> Specific universalism is concerned with addressing the lack of social rights, which is considered a barrier to an egalitarian society.

Citizenship forms the basis for these rights,<sup>31</sup> but specific universalism goes beyond flat-rate benefits in an attempt to redress existing inequalities.<sup>8</sup> For example, within a universal education system, students attending schools in areas of entrenched disadvantage would be given additional resources. Hence, specific universalism addresses the general and specific needs of different groups, on the basis of citizenship.

Despite this additional targeting, specific universalism and its defence of social rights is criticised for overlooking differences between groups and individuals through its focus on the common good. Social rights tend to be defined by the dominant culture and some groups may feel they are insensitive to the diversity of needs and beliefs of minority groups. As noted above, Williams calls the postwar attempts at specific universalism 'false universalism' due to their tendency to obscure social diversity, through a concept of society 'built upon a white, male' norm, supported by a nuclear family structure (ref. 20, p.206).

### Selectivism

Broadly, selectivism refers to the provision of services and support to select social groups.<sup>32</sup> However, in contrast to residualism, differentiation is not *necessarily* made on the basis of economic means. Unlike residualism where assistance is provided solely to the 'poor' on the basis of income or wealth, selectivism is more likely to sit alongside a universal framework in order to deal with social diversity (and hence is incorporated by some scholars into the definition of universalism).<sup>8 25 32</sup>

There is a long history of selectivism in industrialised countries, where special initiatives are targeted at different groups such as the short-term and long-term unemployed and single-income families.<sup>10 25 33</sup> Selectivism can be broken down into two categories: negative and positive.

#### Negative selectivism

Negative selectivism targets the provision of services and assistance on the basis of individual means (ie, using means testing), within a universal framework.<sup>7</sup> For example, low-income healthcare cards. 'Proportionate Universalism', put forth by the Marmot Review<sup>1</sup> for action on the social determinants of health, could potentially constitute a form of negative selectivism. Proportionate Universalism is defined as universal action with a proportionate (or targeted) element tailored to the level of 'disadvantage' experienced by different groups. It is unclear, however, whether disadvantage is defined on the basis of means (making it a negative selectivist approach) or some other basis (making it a positive selectivist approach, discussed below).

Critics of negative selectivism argue that it does not take account of differences in needs (independent of means), and perpetuates the belief that those in receipt of assistance from the state are in some way deficient, resulting in stigma.

Negative selectivism is also criticised by defenders of universalism, who contend that this approach can easily lead down the

path of tiered or dual systems. The argument is that if universal health or education services deteriorate, people start looking for private alternatives. As the private services grow, public services can deteriorate further, leaving those without the means to purchase private ones with a lower quality of service or care. This can be seen in Australia, where the emergence of private healthcare and education led to government investment in a public and private system, drawing funding away from the public.<sup>34</sup> In turn, this is also thought to create a situation that could slide into residualism, where in time public education or healthcare ends up being provided *solely* on the basis of means.<sup>35</sup>

Negative selectivism has intuitive appeal: those who need greater financial assistance can be given 'selective' services or support, without having to incur the costs of providing this support to the whole population. In practice, however, economic analysis has tended to prove this assumption wrong. For example, Whitehouse<sup>36</sup> has demonstrated that administering a means-tested taxation system in the USA is costly. Under such schemes, those on low incomes may receive proportionally greater benefits from employment than those on higher incomes (through reduced tax rates and additional taxation benefits) and incentivise work, but when the administrative cost of such schemes is taken into account, it can prove cheaper to take a universal approach.<sup>36</sup>

Similarly, Mitchell *et al*<sup>37</sup> have shown that universal macro-economic changes can actually have greater impacts on levels of inequality than selectivist approaches. When support or services are applied universally, they often have a greater impact or uptake among those experiencing the greatest need. Hence, in the long run, universal approaches can be cheaper and more effective than selectivism.

#### Positive selectivism

Positive selectivism aims to provide additional services and resources for certain groups on the basis of needs (eg, without means testing).<sup>12</sup> Returning to the example of education, within the education system, greater resources would be placed not just into areas of disadvantage but also into those with, for example, learning difficulties, irrespective of their socioeconomic position or means. Another example of positive selectivism in education is affirmative action, where students from specific sociocultural groups are given lower minimum requirements for entry into university (again without means-testing). In healthcare, community health services for refugees or specific indigenous health programmes are examples of positive selectivism.

The differences between specific universalism and positive selectivism are subtle. Positive selectivism is seen as being more sensitive to diversity and difference than specific universalism, which tends to base welfare on a normative model of the citizen through simple classification. In doing so, specific universalism can overlook differences *within* categories seen as having specific needs (eg, the elderly may have some needs in common, but not all). In practice, this is achieved through a more decentralised welfare system. Specific universalism (like general universalism) is an institutional approach, where the state makes authoritative decisions at all levels of society.<sup>8</sup> Positive selectivism creates a more decentralised model, where state-funded agencies embedded in communities are sensitive to, and can cater for, difference and diversity.<sup>38 39</sup>

While generally seen as more equitable, the *supply* of support or services within a positive selectivist framework may still be homogenous, thereby counteracting its attempts to address different levels of need. For example, public housing may be provided on the basis of need and be made available in greater supply to some groups over others, but the form of this housing

may be homogenous and better suited to the needs of some groups.<sup>40</sup> The public housing provided might accommodate those with smaller nuclear families, rather than those with the larger and more complex family structures which typify indigenous families. In industrialised countries like the USA, Canada and Australia, affirmative action policies in education enable particular sociocultural groups to be granted access to university with lower minimum requirements, but the education they receive will still be tailored to the white majority. Addressing diversity in the allocation and supply of services and assistance requires a level of ‘particularism’ (defined below).<sup>8</sup>

Moreover, the virtues of a positive selectivist approach are, like universalism, complicated by the concern over the need for ‘choice’ in welfare states.<sup>8</sup> An important development in the past two decades within modern welfare states is the emphasis now placed on the right of individuals to make choices with regard to welfare and services.<sup>41</sup> Referred to as ‘new public management’, this paradigm is underpinned by a belief that the denial of choice limits empowerment and self-determination.<sup>42</sup> Here, a positive selectivist framework is still seen as creating an unfair distinction in the way citizens are treated, between those who have sufficient means to be able to make choices about services on their own terms (who have a ‘contractual’ relationship with the state), and those who lack means and market-based independence, and are in receipt of services not necessarily of their choosing.<sup>8 43</sup>

For example, those with sufficient means can choose which services they use and whether they purchase alternatives to those funded by the state (eg, a choice between public and private healthcare or education). Those who cannot establish market-based independence can still access services—such as education, healthcare, housing or forms of income support—but they are not on conditions of their choosing. They are placed under the ‘tutelage’ of state officials and state-funded service deliverers, who will determine ‘need’ and if or how it will be addressed.<sup>43</sup> Often, this follows gendered lines, where men engage with the state on contractual terms and women are more often in ‘tutelage’ relationships—unable to choose the right service for themselves.<sup>8</sup> As noted under negative selectivism, this can lead to the attachment of stigma to public services and the creation of dual systems.

### Particularism

Proponents of particularism reject universalism on the basis that it does not adequately deal with diversity in either allocation or supply (even when combined with selectivism).<sup>38</sup> Proponents of particularism contend that different standards are appropriate for individuals and groups in different circumstances. Particularism aims to address differences between individuals on the basis of diversity of needs, moral frameworks and social expectations,<sup>38</sup> through a non-institutional model (ie, where the state does not make authoritative decisions on behalf of individuals). Particularism requires an appreciation of the different social identities of different groups (requiring investigation of values, wants, norms *and* needs).<sup>8</sup> Particularist principles are said to allow for, and encourage, empowerment and a diversity of supply (eg, heterogeneous services which take account of cultural and ethnic identities).<sup>35 38</sup>

Purchaser/provider models in disability and healthcare are an example of particularist trends. Here, funds are given directly to individuals so that they may ‘purchase’ a service from providers. Proponents of these models argue that they ‘empower’ individuals to make choices about services and care, and promote a more client focused service from providers (eg, one that caters better to the specific needs of an individual).<sup>44</sup> In contrast, a selectivist model would provide people with certain disabilities a

standard set of services (ie, all individuals with a disability would be treated the same).

At its best, proponents of particularism depict different social “groups assert[ing] particular welfare needs on the basis of empowered identities” (ref. <sup>35</sup> p.332). At its worst, critics suggest that the emphasis on choice and pluralism risks subverts efforts to combat inequality.<sup>35</sup> Moreover, as it is inherently discriminatory, it also has the potential to promote social exclusion.<sup>38</sup> Choice-based models can create economic, social and racially stratified communities, because they depend on market-based approaches, which ultimately produce winners and losers. For example, in the USA, new public management has seen the introduction of markets into education. Citizens are provided with a range of schooling options to choose from, which cater to different needs and preferences. However, in practice, some groups may be excluded from the full range of service choices. In the USA, choice-based models have increased racial and socioeconomic segregation in public schools and failed to produce efficiency gains.<sup>45</sup>

### Pre-distribution

Recently, ‘pre-distribution’ has gained interest—particularly in the UK—as an alternate means of addressing social inequality. The other policy frameworks covered in this glossary focus on *redistribution*. That is, tax-and-spend and tax-and-transfer measures to address differences in means, need or opportunity between citizens. In contrast, pre-distributive policies attempt to shift how markets distribute resources from the outset.<sup>46</sup> Pre-distribution is in some ways universal, in that it affects all market players, and in other ways ‘selectivist’, by seeking to assist those disadvantaged by the market. However, concern for market design (rather than redistributive efforts to ‘clean up’ after market forces) means that pre-distributive approaches are fundamentally different to the other concepts presented in this glossary and thus constitute their own category.

Pre-distribution centres on “market outcomes that encourage a more equal distribution of economic power and rewards even before government collects taxes or pays out benefits” (ref. 47 p.35). Many ‘pre-distributive’ policies are extremely old: industrial relations policies such as union membership and wage protections have existed for centuries. The novelty of pre-distribution is to present these policies as the solution to a ‘new’ problem, namely the perceived failure of redistributive policies to combat inequality. Policies that have the ability to tip the balance of power in the market against some individuals and towards others are argued to be more effective than after-market redistributions, which leave unequal market power intact. Other examples of pre-distribution include financial sector regulation and taxation reform (eg, addressing company and inheritance taxes).

Hacker argues that a considerable advantage of pre-distribution is its ability to sidestep the public backlash associated with redistributive approaches and policy targeting (where individuals contest governments’ expenditure of their ‘tax dollars’ on other groups).<sup>46</sup> However, powerful interests, for example, must still be negotiated in order to implement pre-distributive approaches to industrial relations policies such as minimum wage protection and support for unionism.

While some policy authors have argued that pre-distribution is not incongruous with Smith’s original theorising of markets,<sup>47</sup> in terms of its use and implementation to explicitly tackle social inequalities, it is a new concept. As such, little is known about whether pre-distributive policies can gain sufficient public and political support, or how effective they will be once implemented. Theoretically, at least, they have the potential to complement universal and selectivist frameworks, as



means to reduce inequities in power. In this sense, pre-distributive policies may prevent the emergence of the types of inequalities that redistributive policies seek to address once they have occurred, thereby reducing the burden on governments to implement redistributive policies.

## CONCLUSION

Universal and targeted programmes are not simple opposites. Rather, they sit on a scale of redistributive approaches that can be used by governments to counter, maintain or potentially increase social inequalities. Each of the universal and targeted approaches outlined in this glossary, along with emerging concepts such as pre-distribution, have their own advantages and disadvantages. Recommendations for greater universalism or targeting therefore need to be based on a clear understanding of the specificities of the different approaches that sit beneath each of these umbrella terms.

Recommendations made by researchers or policymakers also need to take account of the empirical evidence concerning the effectiveness and cost-effectiveness of different approaches in practice. While different forms of policy targeting continue to have political and intuitive appeal, existing research suggests that they are costly, difficult to administer and may actually be less effective at 'targeting' individuals with greater levels of need than universal policies.

We anticipate that greater clarity around different forms of universalism and policy targeting will lead to a more nuanced debate and evaluation of which approaches are effective in which contexts.

## Key messages

- ▶ Research on health equity has emphasised the need for universal and targeted policy interventions.
- ▶ Currently, there is much debate over how universal and targeted efforts should be balanced.
- ▶ Greater specificity is needed with regard to what is meant by 'universal' and 'targeted', in addition to the advantages and disadvantages of different approaches.

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