

# Social Insurance and the Argument from Autonomy

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**Abstract.** In recent decades politicians and policy-makers have emphasised the need to shift from a “passive” to an “active” welfare state. This has resulted in policies that reduce compensation rates in social insurance or make compensation conditional on different requirements such as participation in rehabilitation or vocational training. This article argues that such policies are justified if they tend to ensure an adequate level of personal autonomy. To that effect, a ‘thick’ conception of personal autonomy is spelled out based on Norman Daniels’ extension of the principle of fair equality of opportunity. Some objections to policies limiting entitlement to social insurance are discussed. It is argued that although the objections fail to show that limited entitlement to social insurance is always unjustified, they identify considerations that must be taken into account for an overall assessment of such policies.

**Key words:** social insurance, active welfare state, justification, autonomy.

## I. THE ACTIVE WELFARE STATE

In recent decades politicians and policy-makers have emphasised the need to shift from a “passive” to an “active” welfare state that prevents rather than merely relieves poverty and distress (cf. Pestieau 2006, 47f).<sup>1</sup> As Frank Vandebroucke, one of the more ardent defenders of such a development puts it:

The traditional welfare state is, in a sense, predominantly a passive institution. It is only once an undesirable outcome has occurred that the safety net is spread. It is surely much more sensible for an active state to respond to old and new risks and needs by prevention. (Esping-Andersen et al. 2002, X)

Generally, the shift towards an active welfare state has renewed the interest in constructing social policies that reduce compensation rates in social insurance and make compensation from social insurance conditional on different requirements (Pestieau 2006, 47).

In this article I argue that policies that limit entitlement to compensation from social insurance are justified if they contribute to the preservation of an adequate level of personal autonomy. In section II, based on Norman Daniels’ extension of the Rawlsian principle of fair equality of opportunity, I spell out a conception of personal autonomy that is ‘thick’ enough for the task. In section III I present the argument from autonomy and in section IV I discuss some further implications of the proposed argument. In section V I argue that the argument from autonomy is in certain respects an improvement on previous arguments in the literature on the shift towards an active welfare state. In section VI I discuss three objections, arguing that although they raise important considerations

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1] The Belgian government coined the term “active welfare state” in 1999 when Frank Vandebroucke had become minister for social affairs and pensions. The European Council adopted it at the Lisbon summit in 2000 to characterize the common agenda for social policy within the European Union.

they fail to show that policies that limit entitlement to social insurance are unjustified. Section VII concludes.

## II. A 'THICK' CONCEPTION OF AUTONOMY

In the philosophical literature there are different conceptions of autonomy. For the purpose of this article it is fruitful to turn to Norman Daniels' theory of just health and his defence of what can be seen as a particular conception of personal autonomy based on extending John Rawls' principle of fair equality of opportunity. In Rawls' theory the principle of fair equality of opportunity requires that those with similar talents and abilities and with roughly the same willingness to use them should have the same prospect of success regardless of their initial place in the social system (Rawls 1999, 63; Daniels 2008, 57f). Daniels extends the principle of fair equality of opportunity by arguing that it is satisfied when we enjoy a fair share of the array of life plans we can reasonably choose in our society given our talents and skills (Daniels 2008, 58f).<sup>2</sup> Being primarily concerned with health and health care, Daniels argues that health in the sense of securing what he calls "normal species function" is strategically important to ensure fair equality of opportunity (Daniels 2008, 34f). Since health in this sense depends both on access to health care and broader social determinants, such as socioeconomic inequality and access to education and so forth, the proposed broadening of the principle of fair equality of opportunity allows Daniels to spell out a powerful argument for institutions that provide a wide arrange of health care services and institutions and policies that ensure social and distributive justice. As Daniels points out, the importance of socioeconomic factors for health fits especially well with Rawls' overall conception of social justice and the difference principle which holds that inequalities should work to the advantage of the group that is worst off in terms of primary social goods. Since a Rawlsian society would be an equal society, at least compared with many competing conceptions of social justice, it would also tend to be a healthy society (Daniels 2008, 95ff).

To further elaborate on the notion of fair equality of opportunity it is useful to turn to two issues that are of particular relevance for Daniels' extension of the principle. First, in many contemporary societies there are strong social norms about the value and merit of independence and everyone should be self-supporting. Being in the relevant sense self-supporting thus becomes a precondition for the preservation of one's dignity and self-respect. Since dignity and self-respect greatly influence the range of life plans and projects we can choose to pursue, I suggest that being in a relevant sense self-supporting is as much as health a prerequisite for fair equality of opportunity in Daniels' extended sense.

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<sup>2</sup>] Daniels notes that the implementation of the principle of fair equality of opportunity in any particular society requires that it is made specific relative to the circumstances in that society with regard to culture, technological level and economical situation etc. Thus, in any specific society fair equality of opportunity is achieved when all enjoy what Daniels calls "the normal opportunity range" which reflects basic facts of the society (2008, 61).

Second, the extent to which we enjoy a fair share of the array of life plans we can reasonably choose in our society given our talents and skills depends on the extent to which we can form relationships and become members of different social groups. In particular, social psychologists have emphasised that our ability to form different relationships and become members in different social groups is especially important for our ability to create ourselves as distinct persons. Marilynn B. Brewer and Miles Hewstone have for example argued that “the self is meaningful only in the context of one’s relationships to others and in one’s position in social groups” and that “the self is a cognitive construction, developed in the course of social interaction and experiences as a group member” (Brewer and Hewstone 2004, 3). I conclude that in order to really enjoy fair equality of opportunity in Daniels’ extended sense we must, in addition to being healthy and having access to a reasonable level of education, be in the relevant sense self-supporting and have the right characteristics to become members in a sufficiently wide range of social groups. When we do that we have what I will call “an adequate level of personal autonomy” (which I will also refer to as “the thick conception of personal autonomy”).

Daniels grounds the value of personal autonomy in the form of fair equality of opportunity on Rawls’ view that moral agents are essentially free and equal and thus have a fundamental interest in maintaining the conditions under which they can revise their life plans as time goes by (Daniels 2008, 61). But the importance of having an adequate level of personal autonomy could also be based on the idea that we create ourselves as distinct persons through the choices we make in our lives. In the words of Jonathan Glover:

[T]he distinctiveness of a particular person is not something just given, but is something we partly create in course of our lives. My distinctiveness is affected by the choices I make. Decisions about relationships, about what work to do, or where to live, may be influenced by how I see my life so far, and by my ideas of what sort of person I want to be. (1988, 17)

Some of our choices are in a relevant sense irreversible. For example, it is typically taken that the choice to become a parent is irreversible (or thinking in that way may be constitutive of being a good parent). But many other choices are reversible. Living in a certain area, having certain friends or pursuing a certain career are for example often reversible in the sense that we can move (at least if we can afford it), meet new friends and change careers (if our skills are attractive on the labour market). To have a reasonable opportunity to revise such choices we require an adequate level of personal autonomy. Now, I suggest that we have stronger reasons that operate on an individual level for preserving personal autonomy than the kind of life we are currently leading (with the exception of ‘irreversible’ choices). One reason for this is that personal autonomy makes it more likely that we stick to our commitments and projects for the right kind of reasons rather than due to lack of alternatives. This is true even if we have no thought of changing our lives or if thinking about changing our lives would be incompatible with the kind of life we lead. For example, even if Anne cannot dwell on the idea of leaving the covenant if she wants to remain a devoted nun, the mere fact that she could leave the covenant if

she put her mind to it makes her devotion more valuable in the sense that it is more likely that she remains a nun because of religious devotion as opposed to psychiatric obsession or lack of reasonable alternatives.<sup>3</sup> Another reason is that modern society is inherently dynamic. Economical and social circumstances continuously change. Hence, even if we wish to continue leading, in some relevant sense, the same life we must be able to respond to changing circumstances. A final reason is that psychological research suggests that our self-esteem is like a “sociometer” that measures our standing in the social groups we are members of (Kirkpatrick and Ellis 2004, 53). If our standing would drop we must be able to become members in other groups where we may have a better standing to preserve our self-esteem. Since personal autonomy ensures that we may become members in new groups, it is also a prerequisite for upholding our self-esteem in a dynamic and changing society.

### III. THE ARGUMENT FROM AUTONOMY

In recent decades many welfare states have taken steps to become more “active.”<sup>4</sup> As the European Commission notes in the 2007 Joint Report on Social Protection and Social Inclusion:

Member states are increasingly focusing on “active inclusion” to strengthen social integration. There is a clear trend towards making benefits more strictly conditional on active availability for work and improving incentives through tax and benefit reforms. (European Commission 2007, 9)

In many welfare states this shift has resulted in social insurance policies that in various ways limit entitlement to compensation from social insurance (cf. OECD 2007). For example, benefit levels in sickness insurance and unemployment insurance have been reduced overall or policies have been introduced that reduce benefit levels in relation to the period recipients have relied on the insurance. Policies that make entitlement to unemployment insurance conditional on participation in labour market programs, such as vocational training or subsidized work, have also been introduced in many welfare states (ibid.). There has also been an increased interest in using sanctions to compel recipients to comply with job search requirements and participation in rehabilitation (f. Abbring et al., 2005). I suggest that policies that in these ways limit entitlement to social insurance are justified if they contribute to the preservation of an adequate level of personal autonomy. I call this the argument from autonomy.

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<sup>3</sup>] This is also an argument for endorsing a social welfare system that upholds a reasonable social minimum.

<sup>4</sup>] For countries in the EU, see The European Commission (2007) *Joint Report on Social Protection and Social Inclusion*; For the US, see Lawrence Mead’s “A summary of welfare reform” (2005). For the OECD, see the OECD report “New Ways of Addressing Partial Work Capacity” (2007). Activation of the poor and those who need assistance has more or less always been a prominent concern of social policy and social insurance throughout history.

Policies that limit entitlement to compensation from social insurance can preserve an adequate level of personal autonomy in different ways. To begin with, prolonged reliance on social insurance has been associated with mental stress and health problems that negatively affect our ability to form and realize the intentions that are required to pursue different kinds of lives. As noted by Wulf Gaertner, “[i]t is being reported by doctors and psychologists that individuals that have been out of work over a long period are suffering from this situation psychologically – and not only in real and obvious income losses. They get isolated within society and start losing the capacity to do and initiate certain things, a capacity which they formerly possessed” (Gaertner 1993, 62; See also Rodriguez et al. 2001). Policies that limit entitlement to social insurance can contribute to the preservation of personal autonomy by being constructed in ways that prevent prolonged reliance on social insurance through reduced compensation rates over time or making compensation conditional on various activation requirements. Studies have for example shown that reduced benefit levels tend to decrease sickness absenteeism (Henrekson and Person 2004), and sanctions in unemployment insurance tend to increase the transition from unemployment to work (Abbring et al., 2005).

Furthermore, policies limiting entitlement to compensation from social insurance can contribute to the preservation of personal autonomy by being constructed to give incentives to healthier lifestyle choices and reduce the prevalence of health problems associated with smoking and obesity. One example is various forms of bonus options in health insurance, which have shown to be effective in promoting the adoption of healthier lifestyle choices (cf. Zweifel 1992, 70, 80f).

Mere reliance on social insurance can also restrict our participation in different social groups or social contexts. For example, the sociologists Jonas Frykman and Kjell Hansson have shown that those who received compensation from social insurance in Gisslaved, a small town in Sweden, were largely excluded from participation in social life because of prevailing social norms (Frykman and Hansen 2005). Overall, since our personal characteristics are, as Worchel and Coutant put it, “the currency that can be used to buy membership in other groups or gain favour in the existing group,” we have reason to endorse limited entitlement to social insurance if it gives us incentives to behave in ways that make it more likely that we have the right characteristics to be able to buy membership in different groups (2004, 193). Policies that tend to prevent the need to rely on social insurance could thus contribute to the preservation of an adequate level of personal autonomy.

Finally, as argued by Richard Dagger, we require the assistance of others to ensure that we have a reasonable range of different life plans that we may choose to pursue. Dagger illustrates this point with the example of being able to read; it is vital to the exercise of our autonomy that we are able to read, but our continued ability to read is something that we owe also to writers, publishers, providers of books and newspapers, providers of light and other kinds of infrastructures (Dagger 1997, 39). Likewise, to sustain practices that are vital to personal autonomy we need the active assistance of others, which gives

us reason to endorse policies that increase the likelihood that others are able to provide such assistance, for example by promoting healthier lifestyle choices or the skills and knowledge required for the provision of the goods and services that enable us to attain an adequate level of personal autonomy. Taken together, these considerations suggest that limited entitlement to social insurance may preserve an adequate level of personal autonomy by giving incentives to the effect that we have a fair share of life plans we can reasonably choose from given our talents and skills.

#### IV. SOME ELABORATIONS

The argument from autonomy has some implications that deserve further discussion. To begin with, it can either be based on the claim that we should have a certain range of life plans to pursue at each time, or the claim that we should be able to pursue a certain range of life plans seen over some period of time. The first claim implies that any policy that causes the range of life plans we may pursue to fall below the prescribed range is unjustified. But this seems unreasonable because in many situations it would seem perfectly reasonable to accept that this range falls below any such prescribed range if the decrease is temporary and if it tends to ensure that we have an adequate level of personal autonomy in the long run. For example, making compensation from unemployment insurance conditional on participation in vocational training temporarily restricts the range of plans and ends we may pursue. But once completed vocational training may greatly increase the range of life plans we may pursue by making us more attractive in the labour market. Since it is unreasonable to deny that such policies preserves an adequate level of personal autonomy I suggest that the argument from identity should be based on the second claim, I will briefly return to the question of fixing the relevant period of time in the last section.

Furthermore, we have stronger reasons to endorse a particular policy the more effective it is in preserving an adequate level of personal autonomy. At the same time, because policies limiting entitlement to social insurance operate through incentives we may end up in a worse position in case we need to rely on the insurance than we would have with a less demanding policy. To see how the argument from autonomy handles the trade-off between stability and incentives it is instructive to turn to the example of Anne. Anne is a lawyer and she may *ex ante* endorse an unemployment insurance policy that requires that recipients change careers and accept work in other locations when they have relied on the insurance for some time. Such a policy tends to increase the rate of return to work and thus ensure an adequate level of personal autonomy. Suppose that Anne becomes unemployed. The argument from autonomy does not justify requiring her to move and change career as long as her unemployment does not harm her personal autonomy. With time, however, it is more likely that being unemployed will cause her to have less than an adequate level of personal autonomy. Rodriguez et al. have for instance shown that prolonged reliance on welfare increases the risk of depression (Rodriguez et al. 2001). In the absence of any further considerations it would then be justified to require that she

changes careers and moves to another town (for example to work as a receptionist in a law-firm). What happens if Anne refuses to accept the job as a receptionist? Leaving her without support may cause her to have less than an adequate level of personal autonomy. At the same time, there is an increasing risk that being unemployed affects her health status and her ability to remain a member in different social groups and networks on equal terms, at the same time as she will have fewer resources overall. Since the negative effects on personal autonomy from such factors may cause her level of personal autonomy to fall below the adequate level irreversibly or for a very long-term, it is in her interest to accept the new job as a receptionist.

It is important to note that the argument from autonomy does not justify all policies that limit entitlement to social insurance. Putting aside the danger that she might be tempted to exaggerate the negative psychological consequences of forcing her to move for another kind of job, Anne may risk depression or psychosis if she were compelled to comply with such a requirement. In that case, the argument from autonomy does not justify requiring her to accept the job she has been offered. Of course, to what extent certain requirements contribute to the preservation of an adequate level of personal autonomy of those with certain characteristics, such as educational level or different measures of health status, is an empirical question that can only be determined on an aggregated (group) level and not on an individual level.<sup>5</sup> Nevertheless, there is some kind of requirements that would seem more efficient than others in preserving an adequate level of personal autonomy. Stuart White has for example suggested that instead of mere work-requirements conditionality should be based on what he calls “civic labour,” i.e. “labour that provides a significant service for, or on behalf of, the wider community” (White 2003, 98). Since policies that make entitlement to social insurance conditional on the notion of “civic labour” provide individuals subject to such policies with a broader range of ways in which they could satisfy the relevant conditions, they are arguably more efficient in preserving personal autonomy than mere work-requirements.

I conclude this section with a comment on the relation between the argument from autonomy and paternalism. Because paternalism implies an interference with individual freedom it is often considered objectionable. But paternalism is less objectionable the more it is likely that those interfered with acknowledge the reasons for the interference (Husak 1981). Since we have strong reasons to preserve an adequate level of personal autonomy we also have strong reasons to endorse policies that promote our personal autonomy even if they would temporarily interfere with our freedom. This makes it more likely that we would find the interference and the paternalism of the argument from autonomy less objectionable. Moreover, in those cases limited entitlement to social

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5] On an individual level we can only know ex post whether a particular policy had the desired effects on that person's personal autonomy. An assessment of how different kinds of requirements affect individuals' personal autonomy could for example be based on WHO's International Classification of Functioning, Disability and Health (ICF) which provides a framework for the description of health and health-related states to assess to what extent individuals are able to participate in their society (cf. WHO 2002).

insurance is justified by reference to the protection of people other than those who are subject to such policies, the argument is not paternalistic. For example, there is nothing paternalistic about policies that aim at keeping parents out of poverty because poverty harms their children's wellbeing.

## V. PREVIOUS ARGUMENTS

The argument from autonomy is based on Daniels' notion of "fair equality of opportunity." However, as Daniels points out himself, this notion is close to Amartya Sen's notion of "capabilities to function in different ways (Daniels 2008, 64ff; Sen 1993, 31). Given the similarities between the two notions it would seem that the argument from autonomy could be reformulated in terms of capabilities. According to such an argument we have reasons to endorse policies that give incentives to healthy lifestyle choices and employment because good health and employment are required for the exercise of a wide range of functionings in most modern societies (cf. Dean et al 2005). But this does not mean that the argument from autonomy is redundant. The considerations leading to the argument from autonomy also support an argument based on capabilities, which makes the argument from autonomy support the capability approach rather than the other way round. And although Sen points out that appeal must be made to underlying concerns and values to distinguish between important and trivial functionings, he does not elaborate on this (Sen 1993, 32). The argument from autonomy, however, specifically relates the importance of specific characteristics and functionings to their relevance for membership in different social groups and the wider notion of social identity and fair equality of opportunity. Finally, whereas Sen notes that functionings are relevant for our well-being, the argument from autonomy spells out the relation between functionings (such as having good health or having a certain level of skills), membership in different social groups and well-being.

The proposed argument is in some respects also an improvement on other arguments for limited entitlement to social insurance in the literature. Lawrence Mead has argued that poverty and reliance on social welfare depend not as much on lack of opportunities as lack of "competence" among the poor. Mead does not elaborate what he means with "competence" other than saying that we are competent when we have the attitudes and skills we need to hold any job such as literacy and punctuality (1986, 24). By making entitlement to social welfare conditional on work requirements individuals are given incentives to behave in a "competent" way. Since individuals fulfil their obligations towards society by leading "competent" lives, and most individuals want to lead such lives, making entitlement to social welfare conditional on work requirements is justified (Mead 1986, 82ff; 1997, 1f). But, as Mead also points out, this argument cannot be made for the beneficiaries of social insurance programs who typically have a work history and thereby also the required "competence" (1997, 26). Neither is "competence" in the sense of coping with work an issue with regard to sickness insurance or unemployment insurance. The



underlying notion of “competence” is therefore not ‘thick’ enough to ground a justification of limited entitlement to compensation from social insurance.

Limited entitlement to social insurance may also be justified by arguments pertaining to the promotion of social inclusion or the prevention of social exclusion. Such arguments are especially frequent in the current debate on the shift towards an active welfare state. But *social exclusion* is a contested concept. According to Burchardt et al., an individual is socially excluded if (a) she or he is geographically resident in a society and (b) she or he does not participate in the normal activities of citizens in that society. Among the “normal activities” are consuming at least up to some minimal level the goods and services that are considered normal, engaging in an economically or socially valued activity such as paid work or education, engaging in social interaction with family or friends and identifying with a cultural group or community (Burchardt et al. 1999).

It is commonly taken that social exclusion is bad, either for the individuals who are excluded or in general. Making a distinction between involuntary and voluntary exclusion (which he calls “social isolation”), Brian Barry has argued that involuntary exclusion is bad because it violates social justice and that voluntary and involuntary exclusion are both bad because they threaten social solidarity (Barry 2002). Julian Le Grand has argued that both involuntary and voluntary exclusion are bad because they lead to negative externalities. For example, that rich and well-educated families put their children in private schools may have a negative effect on the quality of public schools, thereby affecting children from poorer and less educated families (Le Grand 2004). Likewise, reliance on social insurance affects production and economic performance.

Individuals relying on social insurance are socially excluded in the sense that they do not work. But although social exclusion may be bad for reasons pertaining to social justice, social solidarity or negative externalities, these arguments fail to show that reliance on social insurance is always equally bad. That we rely on social insurance is not problematic from the point of view of social justice as long as we are entitled to compensation. Neither is it problematic from the point of view of social solidarity. Through previous contributions we have acquired a *prima facie* right to rely on social insurance. Therefore, others are not likely to resent us for relying on social insurance (at least as long as they are aware that we are entitled to it and we have not relied on the insurance for too long a period). Nor are we likely to resent the rest of society because we rely on social insurance - at least as long as we do not rely on social insurance because of lack of fair equality of opportunity. As to arguments pertaining to negative externalities, the effect on production or economic performance from reliance on social insurance is negligible when taken individually. Although there may be good arguments for the moral relevance of such effects on an aggregated level, most of us would not accept giving up our entitlement to compensation from social insurance because of the difficulties and controversies involved in determining the nature and extent of such effects. That we have acquired a *prima facie* right to compensation from social insurance through previous contributions makes it plausible to require that limited entitlement to social insurance is

justified by arguments we are likely to accept. Since arguments pertaining to effects on an aggregated level remain controversial, such arguments are in general inadequate to justify policies that limit entitlement to social insurance.

Finally, Robert Goodin has argued that in some cases insurance cannot fully compensate individuals for their losses in terms of how they may carry on with their lives and projects (what Goodin calls “means-replacing compensation”). Instead, to achieve the same level of well-being individuals had prior to their losses, they are given means to adopt other plans and projects (what Goodin calls “ends-displacing compensation”). Since ends-displacing compensation violates individuals’ autonomy, it is better to adopt policies that prevent the need for compensation in the first place whenever means-replacing compensation is infeasible (Goodin 1995, 176). But means-replacing compensation may also harm individuals’ autonomy. To take one example, reliance on means-replacing compensation from unemployment insurance may be stigmatizing and exclude individuals from certain social contexts thereby harming individuals’ autonomy in the same way as many forms of ends-displacing compensation. Goodin’s argument therefore fails to justify insurance policies that it nevertheless may be in our interest to adopt.

#### VI. FOUR OBJECTIONS

In this section I will discuss one objection to the argument from autonomy and three general objections to policies that limit our entitlement to social insurance. These objections raise important considerations that must be taken into account in assessments of policies limiting entitlement to social insurance but they fail to show that such policies are always unjustified.

The first objection is that the strength of the argument from autonomy depends on the extent to which our ability to lead different lives depends on our physical or personal characteristics. But, the objection goes; this makes the argument to start from the wrong end: we should not limit entitlement to compensation from social insurance to ensure that we have the right physical and personal characteristics for leading different lives but seek to create a society where we may lead any life regardless of our characteristics. Rather than adopting policies to reduce reliance on social insurance because people relying on social insurance find it more difficult to be accepted in society we should change society to accept individuals who are relying on social insurance. Although it is easy to sympathize with such an attitude it is nevertheless part of a liberal democratic society that we are largely free to organise ourselves as we see fit. Williams Galston has for example argued that “[l]iberal governance acknowledges that important spheres of human life are wholly or partly outside the purview of political power. As such, it stands as a barrier against all forms of total power, including the power of democratic majorities.” (Galston 2005, 1)<sup>6</sup> In

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<sup>6</sup> John Rawls has in a similar vein argued that we are allowed to determine and pursue our own idea of the good life within the limits of just institutions (Rawls 1999, 496).

a liberal state it is thus not always the task of the state to determine which characteristics should regulate membership in different social groups. Nor is it obviously unjust that we must have certain characteristics for membership in different social groups. For example, it is not unjust that I cannot join the local football team because I am a lousy football player – even if I am a lousy football player because I am obese. That the strength of the argument from autonomy depends on the extent to which individuals run the risk of being excluded is therefore not an objection. It simply reflects the fact that in a liberal society we lead our lives in social settings that to a certain extent determine what characteristics we must have to be accepted.<sup>7</sup>

The second objection, which is a general objection to limiting entitlement to social insurance, is that individuals' need to rely on social insurance is often correlated with socioeconomic factors that are wholly or partially beyond their control. For example, studies have shown that smoking in adulthood is correlated with socioeconomic factors such as education and income level (Power et al. 2005), and obesity among adults is correlated with childhood obesity (Krebs et al. 2007) at the same time as individuals who smoke or are obese tend to rely more on sickness insurance (Lundborg 2007). Since it is arguably unjustified to impose burdens on individuals because of factors that are wholly or partly beyond their control, it is also unjustified to limit entitlement to social insurance.

John Roemer has proposed how the influence of factors partly beyond our control can be taken into account on a policy level. Briefly, the idea is to adjust for factors partly beyond individuals' control to determine when they have exercised "a comparable degree of responsibility" (Roemer 1993, 149). Roemer gives an example involving lung cancer and smoking behaviour. First, society decides what factors seem important in determining smoking behaviour, such as occupation, ethnicity, gender, parents' smoking behaviour and income level. Second, the relevant population is divided into different types where each type consists of individuals who have approximately the same values for all factors. Two individuals have exercised comparable degree of responsibility if the numbers of years they have smoked are similarly related to the median number of years smoked within their type. Suppose that a sixty-year old white college professor whose parents smoked until she was seven smokes eight years and a sixty-year, black, male steelworker, whose parents were chain-smokers, smokes twenty-five years. If they are both median smoker for their type they have exercised a comparable degree of responsibility (Roemer 1993, 150f). To take comparable degree of responsibility into account, entitlement to social insurance could be limited in accordance with individuals' type. For example, a social insurance policy could be constructed in such a way that entitlement to compensation from social insurance for those of the first type is limited when they have smoked for more than eight

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7] This does not mean that we should not try to make society more inclusive or that the state may not contribute to such a development. Neither is it to deny that it in many cases it is unjust to exclude people from membership in different groups because of their characteristics. Such cases are commonly regarded as cases of discrimination. Where to draw the line between discrimination and legitimate requirements for membership in different social groups is a further question that is beyond the scope of the present contribution.

years whereas those of the second type must smoke more than twenty-five years for their entitlement to social insurance to be limited.

Nevertheless, for two reasons I think we should be careful with such measures. First, as Roemer points out, the claim that socioeconomic factors influence individuals' choices is political and not metaphysical in the sense that it is not a claim that individuals cannot overcome such factors by acts of will (Roemer 1993, 149). Given that we have reasons to endorse social insurance policies that prevent that our level of personal autonomy falls below the adequate level we may also have reasons to oppose adjustments of the incentives because of our "type." If smoking more than  $x$  years increases the risk of lung cancer to some level that we find unacceptable, then it is in our interest to be given incentives to smoke less than  $x$  years regardless of the number of years the median smoker of our type smokes. Second, our current values and preferences are largely influenced by the values and opportunities we were brought up with. These, in turn, were largely influenced by socioeconomic factors beyond our control. Despite this, we tend to think that the choices we make in the light of our preferences and values are within our control. For example, although which party we vote on is largely correlated with socioeconomic factors beyond our control we still tend to think that our decision to vote on a particular party is within our control. To deny that our decision to vote on a particular party is within our control would amount to denying that we are autonomous agents. The same is true of many lifestyle choices in the sense that denying that choices about what to eat or whether to exercise are within our control would amount to denying that we are autonomous agents. Thus, in order to preserve our status as autonomous agents we must think of some choices as being within our control even if they are to a certain extent influenced by factors beyond our control. To make policies limiting entitlement to social insurance dependent on socioeconomic factors would therefore in many cases amount to a denial of our equal status as autonomous agents by implying that certain groups have less control over their choices than others.<sup>8</sup> These remarks suggest that it is important to base conditionality on requirements that depend on choices we typically take to be within our control. For example, with regard to health insurance, it would be preferable to base premiums on dietary choices, or choices about physical activity, that are usually considered to be within our control rather than Body Mass Index (BMI) that also reflects other factors such as genetic predisposition and childhood BMI (cf. Krebs et al 2007). In general, it

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8] Thomas Nagel has also noted the importance of agency in determining which choices or actions we should be held responsible for in his essay "Moral Luck." Plausibly, which choices are typically seen as within the control of autonomous agents partly depends on prevalent social norms and attitudes, which in turn are influenced by progress in fields such as psychology, sociology and biomedicine. For example, sexual orientation used to be seen as something within our control, but is nowadays commonly seen as caused by biological factors and beyond our control. Moreover, it is important to note that adjusting policies that limit entitlement to social insurance to personal characteristics, such as educational level discussed in section 3, is not to deny our equal status as autonomous agents. The reason is that the motivation behind such adjustments is primarily to increase the efficiency of the policy and not to adjust for lack of autonomy (see Nagel 1979, 37).

may be warranted to base conditionality on individuals' effort in participating in physical activities or in programs to quit smoking rather than on their biometrical status.

This reply to the second objection opens up for two further objections. The third objection is that limiting entitlement to social insurance primarily affects those who are already vulnerable and disadvantaged. For example, studies have shown that individuals in low skilled and low status employment have higher rates of sickness absence than those in high skilled high status employment (North et al., 1993). Consequently, policies that result in less protection from social insurance would only add a further disadvantage to individuals who are already disadvantaged. To answer this objection, policies could be constructed in ways that mitigate such negative effects for already disadvantaged groups. For example, entitlement to compensation could be conditional on broader notions of civic labour rather than the narrower requirement of finding a work that one may do after some fixed period of time.<sup>9</sup> It is also in the interest of members of disadvantaged groups to be given incentives that help them escape poverty and preserve an adequate level of personal autonomy.<sup>10</sup> Rather than showing that policies that limit entitlement to social insurance are unjustified, the objection points to the importance of mitigating adverse consequences for vulnerable groups.

The fourth objection is that even if adverse consequences of limited entitlement to social insurance are mitigated there may still be harm to innocent third parties. Children are a particularly vulnerable group. Less protection from social insurance is associated with an increased risk of poverty and low household income. Apart from the more obvious effects of not being able to participate in the same kind of activities as their friends, evidence suggests that low household income tends to negatively affect children's health, cognitive abilities, and school achievement (Brooks-Gunn and Duncan, 1997). Poorer health, poorer cognitive abilities and poorer school achievements may permanently affect children's personal autonomy as adults. For example, individuals with poor cognitive abilities and school achievements are less likely to acquire a higher education and consequently more likely to end up with a narrower range of employment opportunities. Individuals in poor health may find it more difficult to participate in everyday activities in social life. This objection points to a general problem for arguments based on the beneficial consequences of adopting particular policies: in many cases policies have beneficial consequences for some and less beneficial consequences for others. How should we deal

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9] For example, following a recent reform of the Swedish sickness insurance individuals on sickness insurance are required to seek work that they can perform after 180 days. In case their health status prevents this, they are entitled to continued reliance on sickness insurance. To mitigate negative effects for disadvantaged groups, it could for example be required that those whose health-status permits it either seek work or participate in some broader notion of civil labour after 180 days to be entitled to continued reliance on social insurance.

10] As noted in section 3 above, to what extent policies that limit entitlement to compensation from social insurance have the intended effect is an empirical question. It also depends on other factors, such as availability of employment opportunities and so forth.

with mixed effects of limited entitlement to social insurance? Mixed effects raise intricate questions that it are not always possible to solve on a principled level. Instead, at some point we must turn to a fair procedure through which we can deal with particular cases of mixed effects taking into account the characteristics of different groups. Daniels has developed such a procedure that he calls “accountability for reasonableness” which requires that (i) the reasons appealed to are publicly accessible, (ii) that the reasons are such that fair minded people who are disposed to find mutually accepted terms of cooperation accept them as relevant for the issue at hand, (iii) there is some mechanism for challenging and disputing resolutions and (iv) there is some kind of regulation to ensure that (i) – (iii) are met (Daniels 2008, 118f). I suggest that accountability for reasonableness provides a procedure by which intricate issues about mixed effects can be handled on a policy level taking relevant socioeconomic factors into account. Nevertheless, as to the question of harm to innocent third parties such as children, the considerations pointed out above suggest that factors that operate during childhood may have a strong influence on one’s future abilities and level of personal autonomy. This supports the more general claim that consequences that affect children raise special concern and should be weighted accordingly in the overall process of assessing the desirability of different policies limiting entitlement to compensation from social insurance.

## VII. CONCLUDING REMARKS

The shift towards an active welfare state has increased the interest among politicians and policy-makers in limiting entitlement to social insurance. Taking Daniels’ broadening of the principle of fair equality of opportunity as a starting point, I have argued that policies that limit entitlement to social insurance are justified if they contribute to the preservation of an adequate level of personal autonomy. I called this “the argument from autonomy.” To be sure, whether particular policies are justified by the argument from autonomy is largely an empirical question. For example, whether it justifies policies that make entitlement to compensation from social insurance conditional on vocational training depends on the extent to which such training tends to ensure an adequate level of personal autonomy. This, in turn depends on factors that operate both on individual and societal levels. But instead of making normative arguments, such as the argument from autonomy, irrelevant, this brings forth and specifies the role of normative arguments in identifying which empirical questions are relevant for the justification of welfare state policies. In this way the argument from autonomy contributes to the overall justification of social insurance policies that limit entitlement to compensation by identifying empirical questions that deserve further research.

I have also discussed four general objections to limiting entitlement to social insurance. Although these objections are forceful, I argued that they fail to establish that such policies are always unjustified. Nevertheless, the objections identify issues that need to be addressed in a comprehensive discussion about policies associated with the

shift towards an active welfare state. I think that three such questions are particularly important. The first question pertains to the effectiveness of policies limiting entitlement to social insurance. As discussed in section IV, it is typically only possible to establish an effect of such a policy on an aggregated level and not on an individual level. But how strong must this effect be to claim that the policy contributes to the preservation of an adequate level of autonomy and that it makes such a policy justified? The second question is related to the first. In section IV I argued that the argument from autonomy should be understood in the sense that a policy is justified if it ensures an adequate level of autonomy seen over some longer period of time rather than at every particular time. But this raises the question how long should this period be. The final question pertains to the problem of mixed effects. How should the mixed effects on autonomy for members of different groups be weighted? I suggest that ultimately these questions must be answered within an overall discussion of the justification and legitimacy of policies limiting entitlement to social insurance and the shift towards a more active welfare state. Apart from issues related to the appropriate conception of autonomy, and its significance relative to other values we have reasons to preserve or promote, this must also include a discussion of which conception of legitimacy is appropriate for an assessment of the justification and legitimacy of the welfare state – be it “active” or “passive.” I hope the present article can contribute to such a discussion.

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