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The Politics of American Social Policy, Past and Future

Theda Skocpol

Debates about fundamental reworkings of national social policy are at the center of U.S. politics—and are likely to remain there for the foreseeable future. As the turn of a new century approaches, Americans are looking critically at the scope and purposes of their nation's social policies. Reconsiderations are inspired by the changing needs of a national population that includes increasing numbers of elderly people, employed mothers, low-wage workers not making incomes sufficient to support families, and employees without long-term job security. Yet today's policy discussions also grow out of unresolved political disputes from the past. Today's debates are new incarnations of ongoing battles over the expansion, contraction, or reorganization of public services and social spending in the United States.

Some debates are certainly hardy perennials. "Welfare reform," for example, has come up at least once a decade since the 1950s (Bane and Ellwood 1994, chap. 1), and President Bill Clinton's boldly declared intention to "end welfare as we know it" is only the most recent version of a long-standing aspiration to substitute wage-earning jobs for dependency by the poor on public aid. Of course today's version of "welfare reform" is informed by heightened worries about the growing numbers of single-mother-led families in America (Garfinkel and McLanahan 1986). Have governmental policies encouraged this trend? What reformed or new policies might encourage the stability of two-parent families and offer appropriate support for single-parent families?

Concerns about social protections for the elderly also recur, and nowadays they are sometimes coupled with calls to reorient our public policies toward "helping America's children." The rapidly rising cost of Medicare is decried by pundits and politicians, even as the elderly and many of their family members are asking for new public help to defray the costs of prescription drugs

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and long-term care for the partially or fully disabled. At the same time, conservatives argue that existing programs such as Social Security and Medicare are "too costly." According to the Concord Coalition (Peterson 1993), the United States is certain to "go bankrupt," and "our children and grandchildren" will be deprived of a chance to realize the American Dream, unless there are large cuts soon in taxation and spending for such "middle-class entitlements" as Social Security and Medicare.

The Concord Coalition has predominantly conservative backing and appeal, yet some of its arguments are meant to appeal to progressives. Some liberals are, in fact, willing to contemplate cuts in programs for the elderly out of desperation to free up tax resources to aid children and working-age families. Reviving a reform strategy used in earlier eras of American history, contemporary liberal groups such as the Children's Defense Fund dramatize the needs of the young (cf. Children's Defense Fund 1994). Pointing to rising rates of child poverty, children's advocates call for expanded public commitments to ensuring family health services, education, and day care.

Somewhat more surprising than ever-revisited public discussions about reforming welfare and ensuring security for the elderly and children has been the recent reconsideration of the U.S. federal role in health care. The issue of comprehensive health reform had all but disappeared from the national agenda after the late 1970s. Experts still worried about problems of access and rising costs, but politicians had given up on debating grand solutions after the Democrats under Jimmy Carter failed to make headway on health reform, and after conservative victories in the 1980s apparently made it impossible to talk about major new governmental ventures.

Then, in the fall of 1991, an obscure Democratic candidate, Harris Wofford, overcame a forty-point deficit in the opinion polls to win a special senatorial election in Pennsylvania (Blumenthal 1991; Russakoff 1991). Wofford ran television commercials promising that he would work for health insurance covering every American, and his surprise victory over a well-established Republican opponent was widely attributed to this emphasis on universal insurance. Suddenly, electoral politicians awoke to the worries about health coverage that were spreading among middle-class citizens (Starr 1991), who no longer feel secure about their jobs and employment-based benefits.

During his campaign for the presidency in 1992, Democratic candidate Bill Clinton picked up on the theme of comprehensive health care reform, even as he highlighted the need for new national policies to promote employment and economic growth (Clinton and Gore 1992). After President Clinton assumed office in January 1993, officials in his administration and task forces assembled around its edges set to work devising bold new plans for reworking America's social and economic policies. Some steps were taken quickly and quietly, such as the summer 1993 expansion of the Earned Income Tax Credit to boost the incomes of low-wage working families (Howard 1994). In other areas, such as job training and welfare reform, elaborate plans have been worked out, only to

run up against draconian budgetary constraints that will probably prevent their full implementation. Democratic candidate Clinton had, after all, not only promised to reinvigorate national economic and social policies; he had also promised to cut the national budget deficit and trim back taxes for the broad American middle class.

Even in the face of powerful budgetary and political constraints, Clinton chose to stake much of his presidential prestige on a comprehensive “health security plan” unveiled in the fall of 1993 (White House Domestic Policy Council 1993). Echoing themes of universal protection reminiscent of former President Franklin Roosevelt’s legislation for Social Security during the New Deal, President Clinton unabashedly hopes to make the 1990s a watershed for U.S. public social provision comparable to that of the 1930s. As the president declared in his September 22, 1993, speech to the Congress and the nation:

It’s hard to believe that once there was a time—even in this century—when retirement was nearly synonymous with poverty, and older Americans died in our streets. That is unthinkable today because over half a century ago Americans had the courage to change—to create a Social Security system that ensures that no Americans will be forgotten in their later years.

I believe that forty years from now our grandchildren will also find it unthinkable that there was a time in our country when hard-working families lost their homes and savings simply because their child fell ill, or lost their health coverage when they changed jobs. Yet our grandchildren will only find such things unthinkable tomorrow if we have the courage to change today.

This is our change. This is our journey. And when our work is done, we will have answered the call of history and met the challenge of our times.

Stirring presidential rhetoric aside, the specific proposals put forward in late 1993 by the Clinton administration were rejected or withdrawn not long after Congress began to consider them. No health care reforms at all were enacted prior to the congressional elections of November 1994, and any proposals reintroduced by the Clinton administration in 1995 are certain to be fundamentally reworked before anything becomes law. This is true not only for health care reform, but also for proposed changes in welfare, employment programs, and programs dealing with the needs of working families. Still, no matter how much—or how little—actually happens during the (one- or two-term) presidency of Bill Clinton, fundamental issues are not going to go away. Financing health care, caring for an aging population, retraining displaced employees, putting welfare mothers to work, alleviating child poverty or substandard nurturance, and making employment sustainable along with parenthood for all American families—all of these matters and more will require repeated attention from presidents, congressional representatives, state and local governments, and citizens. Well into the early twenty-first century, the United States seems certain to be reconsidering and revising its public social policies.

11.1 Understanding U.S. Social Policy Making

So how are we to make sense of the making and remaking of social policies in the United States? Many people would answer this query timelessly—in moral-ideological terms, or in supposedly value-neutral technical terms. For moralists, battles over U.S. social policy may be seen as clashes between advocates of “big government” versus “the market,” or as combat between those who want to economically aid the needy versus those who want to control and reform their behavior. Meanwhile, for many professional experts, policy making is understood as a matter of doing objective research on the extent of societal problems, in order to devise optimal cost-efficient “solutions” for politicians to enact.

Moralists and technocrats thus look at social policy making in very different ways. But they have in common an almost total lack of historical and political sensibility. Both moralists and technocrats tend to look at policy formation outside of the context of America’s historically changing governmental institutions, and without reference to broader political tendencies and alliances. Consequently, moralists are unable to understand why their version of “good” triumphs or fails to triumph over “evil” at any given moment. And technically oriented policy experts feel no responsibility to consider matters of governmental feasibility, or to take responsibility when the “efficient” solutions they propose either are not accepted, or lead to unintended and unwanted outcomes.

The lack of historical and political sensibility is, in a way, quite comfortable for moralists and technocrats alike. In the face of political failures, moralists can simply redouble their shrill, absolutist cries for good versus evil. And technocrats can retreat to academia or think tanks and continue working out perfect solutions for unnamed future politicians to adopt—with unforeseen consequences, for which the experts need take no responsibility. What moralists and technocrats both fail to achieve, however, are reliable insights into the political constraints and possibilities for making and remaking American public policies at any given historical juncture, including the present.

Even in a volume such as this, where most contributions appropriately focus on the technical and normative dimensions of ideal social policies, there is a place for a historically grounded analysis of the politics of social policy making. That is what this essay offers. It includes, first, an overview of the politics of U.S. social policy making from the nineteenth century to the present, and then a set of reflections on the lessons we might take from political history about constraints and possibilities at work in contemporary debates about social policies for the future.

11.2 The Political Formation of U.S. Social Policy

Modern “welfare states,” as they eventually came to be called, had their start between the 1880s and the 1920s in pension and social insurance programs

established for industrial workers and needy citizens in Europe and Australasia (Flora and Alber 1981). Later, from the 1930s through the 1950s, such programmatic beginnings were in certain countries elaborated into comprehensive systems of income support and social insurance encompassing entire national populations. In the aftermath of World War II, Great Britain rationalized a whole array of services and social insurance programs around an explicit vision of “the welfare state,” which would ensure a “national minimum” of protection for all citizens against income interruptions due to old age, disability, ill health, unemployment, and family breakup. During the same period, other nations—especially the Scandinavian democracies—established “full employment welfare states” by deliberately coordinating social policies, first with Keynesian strategies of macroeconomic management and then with targeted interventions in labor markets.

Comparative research on the origins of modern welfare states often measures the United States against foreign patterns of “welfare state development.” In such research, America is labeled a “welfare state laggard” because it did not establish nationwide social insurance until 1935, and an “incomplete welfare state” because it never enacted national health insurance or established full-employment programs coordinated with social policies. Certain insights can be gained from comparisons of this sort. But they overlook important social policies that were distinctive to the United States in the late nineteenth and early twentieth centuries, and direct our attention away from recurrent patterns in U.S. social policy and the political forces that have shaped and reshaped it over time. As I have argued in *Protecting Soldiers and Mothers: The Political Origins of Social Policy in the United States* (Skocpol 1992), it is important to break with the evolutionism and the socioeconomic determinism of most social-scientific research on the development of Western welfare states, particularly if one’s objective is to understand U.S. social policies and politics.

Modern U.S. social policies did not start with the Social Security Act of 1935. Between the 1870s and the 1920s, U.S. federal and state governments established many policies aiming to protect, first, veteran Union soldiers and their dependents, and then mothers and their children. I label the first two (often-overlooked) eras of modern U.S. social policy the “Civil War era” and the “maternalist era.” Recent eras are better known: the “New Deal era,” and what I shall tentatively label the “era of controversies over the federal social role,” which stretches from the 1960s to the present.

To make sense of these major phases of modern U.S. social provision from the Civil War to the present, I use a polity-centered theoretical framework, devised in critical dialogue with alternative social scientific theories that emphasize the sociodemographic, cultural, or class determinants of public social policies (for a survey of theories, see Skocpol and Amenta 1986). An essay such as this is hardly the place to go into great detail about this explanatory approach (for a full discussion of which see Skocpol 1992, introduction), but I can indicate its chief features.

I analyze social policy making in the context of the historical development of changing U.S. governmental institutions, political parties, and electoral rules. The United States started out with a federally decentralized “state of courts and parties” (Skowronek 1982), in which there were no centralized professionally run public bureaucracies. Instead, courts, legislatures, and patronage-oriented political parties held sway, with the parties competing for votes in the world’s first mass democracy for males. Only around 1900 did U.S. governments at local, state, and federal levels begin to develop significant bureaucratic capacities. This happened as patronage parties and electoral competition weakened. Yet public bureaucratization in the United States has always proceeded in fragmentary ways, and the United States has never developed a strong, well-paid, or highly respected stratum of national civil servants. Nor is there any clear concentration of centralized governmental power in the United States. Divisions of authority among executives, agencies, legislatures, committees within legislatures, and state and federal courts are arguably even more pervasive within twentieth-century U.S. governance than they were in nineteenth-century party-dominated politics. What is more, U.S. national politics has always been rooted in congressionally mediated coalitions of local interests. From the time of patronage-oriented party politics in the nineteenth century, down to the more bureaucratically centered coalitions of today, public programs have an easier time of being enacted in U.S. national politics, and of surviving, if they distribute benefits, services, or regulatory advantages widely, across large numbers of local legislative districts.

To make sense of patterns of policy making in each major era, I consider the impact of changing U.S. governmental and electoral arrangements on the initiatives taken by officials and politicians. These political actors take initiatives of their own, and look for policies that will further their careers within given organizational contexts. I also look at the impact of institutional arrangements on the identities, goals, and capacities of the various social groups that have become active, at one period or another, in political alliances contending over the shape of U.S. public policies. Finally, my polity-oriented perspective highlights “policy feedbacks” over time: the influences that earlier social policies have upon the institutional arrangements and social groups that shape later social policies. Not only does politics make policies, the opposite is also true: policies make, and subsequently remake, politics, either by changing the fiscal and administrative capacities of government or by encouraging (or frustrating) group demands or alliances in the electorate and representative bodies.

Let me briefly illustrate how I use this sort of institutionalist, polity-centered framework to analyze patterns of policy and the politics that shaped them from the Civil War to the present. My treatment of each period here is breathtakingly succinct, but readers can easily find fuller elaborations of analytic framework and empirical discussions in other publications by me and my collaborators (see especially Weir, Orloff, and Skocpol 1988; and Skocpol 1992, 1995).

11.2.1 The Civil War Era

Early American “social policy” included state and local support for the most extensive and inclusive system of primary, secondary, and higher education in the industrializing world (Heidenheimer 1981; Rubinson 1986). Less well known, but even more telling, early U.S. social provision featured generous local, state, and (especially) federal benefits for Civil War veterans and their dependents. From the 1870s to the 1910s, there was an enormous expansion of disability, survivors’, and de facto old-age benefits for veterans of the Union armies of the Civil War (for full details and documentation, see Skocpol 1992, chap. 2). By 1910, about 28% of all elderly American men, and nearly one-third of elderly men in the North, were receiving from the U.S. government pensions that were remarkably generous by the international standards of the day; many widows and other dependents of deceased veterans were also pensioners; and extra aid from state and local governments was often available to Civil War veterans and survivors. Union soldiers and their dependents, it was argued, had “saved the Nation” and should in return be cared for by the government, to prevent the possibility of their falling into dependence on private charity or public poor relief.

U.S. federalism, and its early electoral democratization, encouraged the competitive expansion of locally managed public education throughout the nineteenth century, while also allowing space for varieties of private schooling to flourish. Popular groups in America gained voting rights early, and farmers and workers alike saw education as a way to participate fully in a democratic polity and market society. No aristocracy, established church, or national bureaucracy held sway; thus schools and colleges and universities were free to proliferate competitively across localities and states. Early American public education was oriented more toward socializing majorities for citizenship than toward preparing elites for civil service careers (Katznelson and Weir 1985). During the Civil War, moreover, the ascendant Republicans enacted land grant subsidies to encourage public higher education and agricultural research to benefit farmers across many states.

In other ways, as well, the nineteenth-century U.S. polity encouraged inclusive social policies. After the Civil War, the expansion of benefits for Union veterans became rooted in competition between patronage-oriented political parties, as politicians used distributive policies to assemble cross-class and cross-regional electoral support from a highly mobilized and competitive male electorate (McCormick 1979). Union veterans and their dependents were seen as deserving of national support, but more than that, the old soldiers and those tied to them constituted critical blocs of voters, especially the tightly electorally competitive East and Midwest after the end of Reconstruction. Between the mid-1870s and the mid-1890s, the Republican Party in particular learned to combine tariffs and pension expenditures. Tariffs raised plentiful revenues for the federal government. In turn, the revenues could be spent on pensions,

applications for which could be manipulated in ways that helped the Republicans to appeal to electorally competitive states just before crucial elections (McMurry 1922). Along with party politicians, thousands of veterans' clubs federated into the Grand Army of the Republic became key supporters of pension generosity from the mid-1880s onward, keeping congressmen across many northern legislative districts keenly interested in such social expenditures from the federal fisc.

11.2.2 The Maternalist Era

During the early 1900s, various policies aiming to help women workers and mothers and children proliferated (see Skocpol 1992, part 3). The federal government established the female-run Children's Bureau in 1912, and expanded its mission in 1921 through the enactment of the Sheppard-Towner program partially to fund state and local health care education to help American mothers and babies. Meanwhile, dozens of states enacted protective labor laws for women workers, arguing that their capacity for motherhood had to be protected. And forty-four states also enabled local jurisdictions to provide "mothers' pensions" to impoverished caretakers of fatherless children.

Around 1900, the nineteenth-century U.S. "state of courts and parties" was undergoing major structural transformations. The Democrats and Republicans became less electorally competitive in most parts of the nation, and elite and middle-class groups were calling for political reforms that would weaken patronage-oriented parties and create nonpartisan, professional agencies of government. At this juncture, reformers who wanted the United States to imitate early European social insurance and pension programs made little headway. Informed publics did not believe that turn-of-the-century American governments could administer policies honestly or efficiently, and reformers feared "corruption" among politicians if huge new social spending programs—reminiscent to them of Civil War pensions—were created.

Yet the same set of political circumstances that discouraged social spending for workingmen in the United States opened up opportunities for what I call "maternalist" reformers advocating social programs for mothers and children. Until 1920 (or a few years before in some states), American women lacked the right to vote, yet they were hardly absent from politics more broadly understood (Baker 1984). Elite and middle-class women formed voluntary organizations to engage in charitable, cultural, and civic activities. By the turn of the century, nation-spanning federations of women's voluntary associations had formed, exactly paralleling the three-tier structure of U.S. local-state-federal government. Women's federations allied themselves with higher-educated female professional reformers, arguing that the moral and domestic values of married homemakers and mothers should be projected into public affairs. Organized women urged legislators regardless of party to enact new social policies to help families, communities, and—above all—mothers and children. During a period when U.S. political parties were weakened, and when male

officials and trade unions could not readily take the lead in enacting social policies for workingmen, U.S. women's voluntary federations were uniquely well positioned to shape public debates across many local legislative districts (Skocpol 1992, page 3; Skocpol et al. 1993). Thus the United States tended to enact maternalist regulations, services, and benefits at a time when European nations were establishing fledgling social insurance programs for industrial workers and their dependents.

Women's voluntary associations were more successful at setting agendas of civic debate and getting legislators to enact regulations or "enabling statutes" than they were at persuading governments to generously fund social programs. Mothers' pensions, in particular, were never adequately funded, and soon degenerated into new versions of poor relief. Ironically, too, after American women were admitted to the formal electorate by the Nineteenth Amendment in 1920, the civic engagement of many women's groups weakened. For this and a variety of other reasons—including the mobilization of the American Medical Association in opposition to Sheppard-Towner maternal health clinics—the expansion of maternalist social policies came to a halt by the later 1920s, and indeed was partially reversed. Then came the Great Depression, bringing with it social and political upheavals that ushered in the next great era of U.S. social policy innovation.

11.2.3 The New Deal Era

This watershed period featured various federal programs to help the (temporarily) unemployed, with the Social Security Act of 1935, which included national Old Age Insurance (OAI), federally required and state-run unemployment insurance, and federal subsidies for optional, state-controlled Old Age Assistance and Aid to Dependent Children (ADC, which was a continuation of the earlier mothers' pensions). In the public discourse of the 1930s and 1940s, the most "deserving" recipients of social benefits were said to be normally employed men who were temporarily forced out of work by the Depression, and the elderly. By the early 1950s, it was clear that social insurance for retired elderly wage earners and their dependents had emerged as the centerpiece of such generous and comprehensive public social provision as there would be in post-World War II America (Amenta and Skocpol 1988). The only other truly generous and comprehensive part of postwar national social provision was the GI Bill of 1944, which featured employment assistance and educational and housing loans for military veterans.

A number of structural changes and political developments set the stage for the policy innovations of the 1930s and 1940s. The federal government—and within it the Executive—came to the fore in the emergency of massive economic depression. State and local governments and charity groups exhausted their resources and literally begged for federal interventions, even as business groups and other conservatives lost their ability to veto governmental initiatives. Economic crisis also spurred the unionization of industrial workers as

well as protests by organizations of farmers, the unemployed, and—perhaps most important—old people. Among the elderly, there emerged a widespread federation of local Townsend clubs demanding generous pensions for the elderly. Economic crisis also spurred electoral realignment, shifting votes from Republicans to Democrats—and transforming the Democrats from a warring camp of southern “dry” Protestants versus northern “wet” Catholics, into a nationwide conglomerate of local and state political machines all hungry for new flows of economic resources.

What the Depression, the New Deal, and even World War II did not do, however, was to remove contradictory local and state interests from “national” U.S. policy making. Even at their strongest, President Franklin Roosevelt and the assorted New Deal reformist professionals who flocked into executive agencies during the 1930s, all had to compromise with congressional coalitions rooted in state and local interests (Patterson 1967). Above all, they had to respect Southern Democrats’ determination to protect their region’s sharecropping agriculture and low-wage industries from actually (or potentially) unsettling “intrusions” by northern unions or federal bureaucrats. Southerners were happy to have resources from the federal government, but did not want either centralized controls or benefits that might undermine existing southern labor and race relations. And if the truth be told, congressional representatives of other localities and states in the nation felt pretty much the same protective way about whatever the major labor and social relations of their areas might be. There was a broad congressional consensus throughout the New Deal and the 1940s to preserve a great deal of federal variety in economic and social policy (Skocpol and Amenta 1985).

From this perspective, the shape and limits of the major social and economic programs of the New Deal era are not surprising. Federally run employment programs did not survive the mass unemployment of the 1930s, because efforts to institutionalize Executive-run “full employment planning” and “social Keynesianism” ran afoul of congressionally represented southern, business, and farm interests (Weir and Skocpol 1985). The Social Security Act included only one truly national program—OAI—enacted in an area where no states had previously established programs. Unemployment insurance, meanwhile, was made federal rather than national, not only because representatives of the South wanted their states to be able to establish terms of coverage, benefits, and taxation, but also because representatives of Wisconsin and New York wanted their “liberal” states to be able to preserve the terms of the unemployment insurance programs they had already established, prior to the Social Security Act (Amenta et al. 1987). Public assistance programs for the elderly and for dependent children were given federal subsidies under Social Security, but otherwise left entirely in the hands of the states.

During World War II, New Deal reformers tied to the National Resources Planning Board talked about permanently nationalizing and expanding both public assistance and unemployment insurance. But their proposals got no-

where at all, and Congress disbanded the National Resources Planning Board soon after they were made. Only OAI tended to expand coverage and become more comprehensive after 1935. Widows and orphans of wage-earning “contributors” were added to OAI in 1939, transforming it into Old Age and Survivors Insurance. During the 1950s, benefits for disabled wage earners were added to what was now known simply as Social Security, and coverage was extended to more occupations. The American “welfare state” that emerged from the New Deal and World War II was hardly comprehensive by the international standards of the day, yet it did eventually become relatively complete and generous for retired, disabled, or deceased regular wage earners and their dependents. The GI Bill and other World War II veterans’ programs served as a kind of social support program for many young families in the 1950s. But of course, this was a temporary set of supports that “grew up” with the age cohorts that fought World War II, and has not been in place for the younger cohorts that have followed (Newman 1993).

11.2.4 The Era of Controversies over the Federal Social Role

A new period of innovation in U.S. social policy was launched in the aftermath of the civil rights struggles of the 1950s and 1960s, as southern blacks gained the right to vote and liberal Democrats very temporarily gained executive power and majorities in Congress (Patterson 1981, parts 3 and 4). Liberals dreamed of “completing” the social and economic agendas left over from the unfinished reform agendas of the 1930s and 1940s, and many activists hoped to rework U.S. social programs in ways that would aid and uplift the poor, particularly the newly aroused black poor.

Despite the extravagance of liberal hopes (not to mention radical demands) at the height of the War on Poverty and the Great Society, policy legacies and institutional features inherited from the New Deal era shaped and limited the openings available to policy makers. As Margaret Weir (1992) has explained, liberals, unionists, and civil rights activists were not in a good position to create public full-employment programs that might have jointly benefited the black poor along with white and black unionized workers. Instead, institutional and intellectual legacies from the New Deal and the 1940s encouraged public policies that emphasized “commercial Keynesian” macroeconomic strategies supplemented by small federal programs designed to reeducate the poor to make them “employable.” Soon caught in political controversies and squeezed for resources during the Vietnam War, federally sponsored employment-training efforts never really succeeded.

As the War on Poverty gave way to the Great Society and Nixon reforms, the emphasis shifted from job training and community development programs, toward helping the poor through new or expanded categorical social benefits such as Aid to Families with Dependent Children (AFDC), food stamps, and Medicaid. Reasons for this shift are many, but they include liberal demands for more spending on the poor, the after-effects of urban rioting, and the prefer-

ence of the Nixon administration for spending rather than subsidies for services and antipoverty agencies that were likely to be part of the Democratic Party's organizational base. For a time, expanded social spending on targeted welfare programs helped welfare mothers and their children, as more needy single-parent families than ever before were added to the welfare rolls. Yet during this same period, the Social Security Administration took advantage of the heightened concern with antipoverty policy to put through long-laid plans for Medicare, nationalized Supplemental Security Income, and indexed Social Security benefits. In due course, the elderly on Medicare, Supplemental Security Income, and Social Security after it was indexed in 1972 benefited most from the social policy innovations of the so-called War on Poverty era. Despite the focus of the rhetoric of this period on poor working-age people and children, the most generous and sustainable innovations of the period helped to pull most of the American elderly out of dire poverty for the first time in modern history (Danziger, Haveman, and Plotnick 1986, 61).

Nor was this the end of the story of how the War on Poverty and Great Society ended up shortchanging the poor. By the later 1970s, and particularly during the 1980s, political backlashes set in against the social policy innovations and extensions of the 1960s and early 1970s. Leaving aside important exceptions and nuances, one can say that expanded "social security" provision for the elderly (poor and nonpoor alike) remained popular with broad, bipartisan swatches of American voters and politicians, while public "welfare" assistance to the working-age poor became an increasingly contentious issue among politicians and intellectuals, and within the electorate as a whole. The division between "social security" as a set of earned benefits and "welfare" as undeserved handouts to the poor had been built into the programmatic structure of federal social provision since the New Deal; in the wake of the policy changes of the 1960s and 1970s, this division became highly politicized along racial lines. AFDC, food stamps, Medicaid, and other targeted "welfare" programs expanded after the mid-1960s. But, argued conservative critics, America's social problems got worse, not better. Although few experts familiar with statistical arguments about poverty accept the accuracy of claims by analysts such as Charles Murray (1984) that federal antipoverty programs have actually "caused" increased in out-of-wedlock childbearing or crime, it is fair to say that this argument has expressed (and helped to create) a sea change in popular and expert opinion over the past couple of decades. After all, expansions of welfare in the 1960s and 1970s manifestly did not reverse or prevent such poverty-related social ills as increasing out-of-wedlock childbearing. Thus, even if the causal picture is not what Murray argues, the picture he paints can easily have a broader ideological resonance with general expert and citizen frustration about "welfare as we know it."

Attacks on expansions of federally mandated or subsidized welfare programs for the poor aided the electoral fortunes of Republicans and—more generally—of conservative critics of governmental social provision (Edsall and Edsall 1991). Various reasons can be cited why such attacks were politically

successful. Some would argue that they appealed to tacit racism in the U.S. white majority (Quadagno 1994); others would argue that, racism aside, middle-class and working-class citizens were less and less willing to pay taxes for federal social transfers during a time of employment instability and declining real family wages. Whatever the reasons, conservative Republican Ronald Reagan used antiwelfare appeals as part of his winning campaign for the presidency in 1980. And after Reagan ascended to office, the rate of growth of federal social spending slowed. More pertinent, a sweeping tax cut was enacted in 1981, setting the stage for growing federal deficit that has since made it virtually impossible for new social programs to be funded. The persistence of a huge federal deficit also encouraged renewed conservative calls for severe cutbacks in federal social programs, including Social Security and Medicare (as well as “welfare,” which after all accounts for only a tiny portion of the federal budget).

The Reagan administration of the 1980s did not eliminate many programs or cut absolute domestic social spending, but it did retard the growth of expenditures on targeted programs that had already lost considerable ground in the face of inflation during the 1970s. More important, the Reagan era signaled an ideological sea change. Both politicians’ rhetoric and the actual squeezing and disrupting of governmental programs that occurred in this period helped to delegitimize governmental solutions to domestic social ills. Politicians became highly reluctant to discuss taxation as a positive means to the resolution of civic or individual concerns (Blumenthal and Edsall 1988). And the huge federal budget deficit created by Ronald Reagan’s tax cuts itself moved to the center of public discussion as supposedly the leading problem for the nation to resolve in the 1990s—neatly directing attention away from the increasingly acute difficulties faced, not only by welfare recipients, but by less-educated *working* families in the U.S. national economy (Danzinger and Gottschalk 1993; Freeman 1994).

Many of the supporters of Bill Clinton hoped that the election of this moderate Democratic president in 1992 would suddenly undo the delegitimation of the federal social role that had progressed so far since the 1970s. It is by now apparent, however, that the policy initiatives of the Clinton administration often cannot assemble congressional majorities, and are invariably debated in a context of the continuing federal budget crisis and intense popular distrust of government. The decade of the 1990s is proving to be as ideologically contentious as any period in modern U.S. political history—especially on matters having to do with the extent and forms of federal government involvement in the regulation or funding of social benefits and services.

11.3 Opportunities and Constraints in U.S. Social Policy Making

Patterns in history are not just of antiquarian interest. They speak to issues that continue to animate U.S. political debates today. Although no one can predict the outcome of ongoing policy debates and political struggles, we can

discern a number of interesting patterns across past eras of U.S. social policy and politics—patterns that at least cast light on alternative strategies, and on constraints and possibilities that matter for all of us as we debate policies for the American future, including debates about the particular kinds of policies featured in this volume.

11.3.1 The Popularity of Social Programs for the “Worthy” Many

It is often claimed that Americans are a people inherently opposed to taking “handouts” from government. But a full historical purview suggests that much depends on how benefits are understood and structured. Since the nineteenth century, large numbers of mainstream American citizens have been delighted to accept—and politically support—certain generous, government-funded social benefits. Public education, Civil War benefits, the Sheppard-Towner health program aimed at American mothers and babies, and Social Security insurance—all are examples of broad social programs that have done very well in U.S. democracy. Such programs have been aimed at beneficiaries culturally defined (at any given time) as “worthy” because of their past or potential contributions to the nation. Children have been understood as potential citizens and economic contributors, and military veterans as those who served and “saved” the nation. By the 1930s, the elderly were seen as worthy of support after a lifetime of “contributions,” through both taxes and work. And back around 1900, interestingly enough, mothers were celebrated as “serving the community” through childbearing and rearing in the home.

By now, of course, things have changed for mothers. Since the 1960s, the labor-force participation of married American women, including mothers of young children, has grown sharply. Elite and middle-class Americans no longer celebrate the cultural ideal of the “stay-at-home mother,” and this erosion of the original cultural understanding behind mothers’ pensions/ADC/AFDC coincides with the racial tensions over poverty programs that I discussed above. More than ever before in U.S. history, welfare mothers have come to be defined as “not working,” as taking “handouts.” Not only are mothers on public assistance more likely to be unwed or divorced and disproportionately nonwhite, rather than the mostly white widows they once were; their work as child rearers in the home is no longer consensually valued in American culture. Indeed, the capacities of poor mothers to do an adequate job of raising their own children are nowadays very often questioned by professional experts and the middle-class public. Back in the 1910s, reformers argued that mother love in the home was the key to good child rearing, and that poor fatherless children should be taken out of the orphanages or foster homes to which they had been consigned. Today, reformers are just as likely to argue that poor children would be better off in day care centers, or maybe even in orphanages.

The structure of benefit programs as more or less universal matters, too (along with cultural understandings about which categories of people are worthy beneficiaries). Although middle-class and working-class Americans are

typically reluctant to see public monies spent for the poor through welfare programs, they have repeatedly been willing to support politically and pay taxes for social benefits that are considered to be “earned” by citizens such as themselves. Aid to the poor has also been acceptable whenever such aid has been part of broader, more universalistic policies that also benefit middle-class citizens (Skocpol 1991). As Hugh Heclo (1986) has explained, perhaps the best way to help the poor in America is to do so without talking about them, in the context of social services or benefits that have a broader, more universal constituency.

Social Security benefits for the retired elderly are the best contemporary example of support by Americans for universal social policy. Because of the way the financing for Social Security was set up (a matter discussed below), and because of how the program was portrayed by its administrators after 1935 (Derthick 1979), retired wage earners are thought to “earn” pensions linked to their records of employment and the previous levels of their wages. Actually the system is financed from current taxes, and there is considerable redistribution toward lower-income retirees, but these features of the system have never been made politically visible to the average participant. Social Security now encompasses almost all employed Americans and their families, and since the 1970s it has become by far the nation’s most effective antipoverty program, without being defined as such. In recent decades, Social Security has enjoyed strong bipartisan support across lines of class and race.

Conservatives who are opposed to large governmental programs of social provision understand well that Social Security is hard to cut back as long as it has middle-class support. It is therefore not incidental that contemporary conservative tactics for shrinking Social Security take the form of efforts, first, to convince young upper-middle-class employees that Social Security is a “bad deal” for them economically, that they would be better off to turn to private investments for retirement. Another tactic is to attempt to undermine the confidence of all Americans that Social Security will be there in the future, by suggesting that the system is “bound to go bankrupt” as the post-World War II baby boom generation ages. Actually, Social Security is currently in fine fiscal shape, and any problems for the long-term future could readily be addressed by the kinds of bipartisan commissions that have made adjustments in the past. Using lurid projections that presume no such adjustments will ever be made, conservatives propose to “save” Social Security by trimming it back into a program targeted especially on the most needy elderly, and taking better-off middle-class people out of the system.

Some critics of Social Security may honestly believe this is just a matter of fiscal responsibility, but many surely have learned a lesson from political history: Social Security has expanded and survived *because* it has middle-class participation and support. If middle-class Americans are removed from the system, they would soon resist paying taxes that are currently used to create proportionately more generous pensions for lower-income workers. Social Secu-

rity would soon be gutted, turned into one more demeaning welfare program for the poor. Then it could easily be cut back even further, transferring resources to private investments controlled by the well-to-do while leaving millions of elderly Americans mired in poverty, as they were before the 1970s. Their children and grandchildren (especially the women among them) would also suffer, because any taxes they saved during their working lifetimes would be more than offset by the expense and disruption of caring for parents without adequate resources to live with dignity in retirement. Historical analysis suggests that this sort of scenario will very likely unfold if Social Security is changed from a relatively universal social benefit for the deserving majority, into a means-tested welfare benefit narrowly targeted on the most needy few.

11.3.2 The Problem of “Government Bureaucracy”

History also shows that arguments over particular social policies at given moments of U.S. history have been closely linked to perspectives on what U.S. government should do, and to beliefs about what it apparently *can* do effectively. Americans are recurrently skeptical that government can administer programs effectively. What is more, policy debates are influenced by the reactions of governmental officials, citizens, and politically active social groups to previous public policies. Prior policies may be seen as models to be extended or imitated, or they may be seen as “bad” examples to be avoided in the future. If policies that serve as an immediate referent for debates are seen as wasteful or corruptly or inefficiently administered, those perceptions can undermine efforts to create new or expanded policies along the same lines.

Back in the early twentieth century, for example, some politicians and trade unionists wanted to imitate Civil War pensions, extending them into pensions for most elderly working Americans. But most politically active middle-class groups in that era viewed Civil War pensions as a negative precedent. They were trying to reduce the power of the kinds of elected legislators and party politicians who had worked to expand Civil War pensions in the first place. And they saw Civil War pensions not as social expenditures that legitimately aided many deserving elderly or disabled people, but as sources of funding for “political corruption” (Skocpol 1992, part 2).

In the 1990s, some politicians and groups want to build upon existing parts of U.S. social policy—for example, moving from Social Security for the elderly to universal “health security” for all Americans. During the Medicare battles of the 1960s, reformers were successful in invoking the Social Security model to mobilize support for medical insurance for all of the elderly, rather than for benefits targeted on the poor elderly alone (Jacobs 1993, chap. 9). Today, however, the Social Security precedent may have less influence. Many people believe that the U.S. government bungles virtually any program it touches. They point to problems with the postal service, or with earlier federal regulatory programs, in order to argue that the quality of American health care

will inevitably be undermined if the national government takes a stronger role in the health care system.

A historical and institutional perspective on the 1993–94 debate over health care reform helps us to understand why the comprehensive health security plan introduced by President Clinton in September 1993, apparently to great acclaim, so quickly became the target of rhetorically devastating attacks against “governmental bureaucracy.” To be sure, President Clinton and his advisers tried to use lessons from U.S. political history in devising and arguing for their version of comprehensive health care reform. I have already noted the president’s attempt to link up with favorable attitudes toward Social Security by emphasizing universal health coverage that “can never be taken away” from any American. In addition, the president and his advisers tried to be clever (to the point of obfuscation) about the issue of governmental power. They took it for granted that Americans are wary of giving “the state” a stronger role than “competitive market forces.” Consequently, they proposed a version of health reform—called managed competition—that supposedly did not rely on taxes, and that allegedly would preserve and enhance market competition in the offering of health insurance “choices” to all Americans (Starr 1994; Hacker 1994).

Still, the president and the health care experts who advised him may have failed to notice a quite important—historically noticeable—nuance about American reactions to governmental power. Especially since the 1980s, conservatives have proclaimed that Americans invariably hate taxes. But history shows that middle-class Americans have been quite willing to pay taxes when they were sure that these monies would go for worthy purposes from which they along with other citizens benefit. At the same time, history also reveals that many sorts of proposed social policy reforms—including proposals for publicly guaranteed health coverage in the 1910s, 1930s, 1940s, and 1970s—have been highly vulnerable to ideological counterattacks against government “bureaucracy” (Skocpol 1993). Arguably, Americans resent government regulations even more than they may dislike taxes.

Of course, the Clinton health care reform plan of 1993 was very susceptible to the “bureaucracy” criticism. It tried to achieve universal coverage and cost control in health care by overlaying multiple existing private bureaucracies—hospitals, insurance companies, medical associations, state and local governments—with still more layers of federal bureaucratic regulation. Conservative critics were able to ridicule the proposed Clinton reforms for their regulatory complexity.

Although U.S. government has always been in many ways much *less* bureaucratic than the governments of other advanced-industrial nations, nevertheless there are understandable reasons why Americans fear public regulations. Precisely because the federal government in the United States lacks strong administrative bureaucracies that can reach directly into localities or the economy, national-level politicians tend to enact programs that rely on a combination of

financial incentives and legal rules to get things done. The federal government partly bribes and partly bosses around state and local governments and nongovernmental groups—getting them to help the federal government do what it cannot do alone. Ironically, however, this sort of situation often gives rise to louder outcries against “federal bureaucratic meddling” than might exist if the national government were able to act directly, especially by using administratively unobtrusive financial transfers to cover a modicum of health insurance for everyone. Such outcries are especially likely to occur if the federal government proposes to regulate more than to subsidize.

Thus, in the debates over the Clinton health plan, lots of groups—including insurance companies, but also hospitals and state governments—feared that federal regulations might financially squeeze and forcibly remodel their operations over time, without giving them offsetting benefits in the form of generous federal subsidies to pay for currently uninsured groups of citizens. This worry about the “bureaucracy” of the Clinton health care plan was obviously enhanced by the fact that the president’s declared objectives include “controlling costs” in the national health care system, as well as extending coverage to all Americans. The president promised to do all of this without raising new general tax revenues, and opinion polls indicated that people were (rightly) skeptical about “getting something for nothing.” Ironically, by trying to quell worries about taxation, the president and his allies heightened even more deep-seated—and historically very predictable—worries about “government bureaucracy” in the United States.

11.3.3 Will Americans Pay Taxes for Social Programs?

U.S. history gives the lie to a notion accepted as virtually sacrosanct in the early 1990s: Americans will not pay taxes to fund social programs. At the same time, history highlights how crucial the issue of taxes is. If programs are not linked to reliable sources of funds, they cannot readily expand into the sorts of generous, cross-class programs that gain broad popular support in American democracy.

Civil War benefits in the late nineteenth century had the luxury of being linked to a politically complementary and very generous source of federal taxation. Republicans in that era were not only the party that had “saved the Union” and wanted to do well by the veterans and their relatives. Republicans were also supporters of high tariffs on U.S. industrial and some agricultural commodities. Those tariffs rewarded carefully fashioned alliances of businessmen, workers, and some farmers in the North, while in effect punishing southern farmers, who did not vote for the Republicans (Bensel 1984, chap. 3). At the same time, tariffs generated a lot of funds for the federal treasury. Actual “surpluses” emerged at key junctures, and the Republicans needed politically popular ways to spend them. One of the answers, from the Republican point of view, was Civil War benefits, because these tended to go to people in their northern electoral coalition—such as farmers or residents of small nonindus-

trial towns—who were likely to have served (or had family members or neighbors serve) in the Union armies, but who did not necessarily benefit from tariff regulations (Sanders 1980). For a time, the Republicans ended up in the best of all possible policy worlds; they could support and expand politically complementary taxation, regulatory, and spending programs.

Maternalist social policies ended up being very limited in the public funding they could mobilize, and thus the benefits they could deliver to broad constituencies. As I pointed out earlier, the federated women's associations that had considerable success at influencing public opinion and the enactment of regulatory legislation in the states, often could not persuade legislators to raise taxes and generously fund programs for mothers and children. This was an era of attacks on taxes by advocates of business competitiveness, and those attacks were especially likely to be effective in local and state governments, where funding decisions were made about mothers' pensions. At the federal level, tariffs were raising proportionately less revenue, and the income tax, instituted in 1913, remained marginal and focused only on the wealthy.

The only maternalist program that managed to tap into expanded funding for a time was the Sheppard-Towner program of the early 1920s. This was the one maternalist program structured as federal subsidies for a set of services open not just to the poor but to all American mothers; consequently, women's groups were able to ally with the Children's Bureau to persuade Congress to increase the program's appropriations over its first years. But by the mid-1920s, Sheppard-Towner had come under fierce attack from conservatives, including doctors, opposed to federally supervised and financed social services. The original legislation, enacted in 1921, expired in 1926 and had to be reauthorized by Congress. While majority support still existed, opponents in the Senate were able to use the institutional levers available to determined minorities in U.S. governance to block reauthorization after 1928. Sheppard-Towner subsidies disappeared, and the Children's Bureau lost influence along with resources within the federal government.

It is well known, of course, that U.S. federal government revenues expanded after the Depression and World War II. During the 1930s, all levels of government were strapped for resources in a devastated economy, but the federal government gained relative leverage over local and state governments because of its continuing ability to borrow. Although the Roosevelt administration tried to cut taxes and reduce government spending, it also raised and deployed "emergency funding" to cover many economic and social programs. Then during World War II, the federal income tax was expanded to encompass much of the employed population. Automatic payroll withholding was instituted, a device that makes tax payments less visible to citizens, thus ensuring a regular and expanding flow of revenues to the federal government during the postwar economic expansion.

The various programs enacted in the Social Security Act of 1935 surely benefited from the overall growth of federal revenues starting in the 1930s and

1940s. Yet OAI, the part of the 1935 legislation that eventually became popular and virtually universal—and usurped the label “Social Security”—carried its own source of funding: an earmarked payroll tax that was supposed to be used to build up a separate “trust fund” to cover future pension obligation. Because of President Roosevelt’s fierce insistence on “fiscal soundness” for nonemergency social insurance programs, retirement insurance actually kicked in as a set of taxes well before any benefits were paid. After 1939, the program became more of a pay-as-you-go venture than it was originally (Achenbaum 1986; Berkowitz 1987). Still, Social Security retirement insurance always benefited—ideologically as well as fiscally—from the existence of its earmarked payroll tax and nominally separate trust fund. Social Security taxes were deliberately labeled “contributions” and were treated as payments that built up individual “eligibility” for “earned benefits” (Derthick 1979; Zollars and Skocpol 1994).

As the system expanded to include more and more categories of employees, new taxes were collected ahead of the payment of benefits. Most retirees during the 1950s, 1960s, and 1970s actually did very well in terms of what they had paid into the system over their working lives. Increasing Social Security payroll taxes were accepted politically by most American citizens as the system expanded toward near-universal coverage. Once the coverage became very broad, the majority of citizens—the elderly and their children—gained a stake in promised benefits. Even today, Americans do not object as much as one might expect to Social Security taxes, despite their regressiveness and the large cut they take from average incomes. The Social Security system’s trust fund remains relatively solvent within an otherwise severely strained federal budget, and this affords it a bit of political protection in the face of determined conservative efforts to cut social spending.

Taxes are arguably the pivot on which the future of federal social policy may turn. The Concord Coalition, Ross Perot, and other advocates of deficit cutting are determined to severely cut both federal taxes and federal social spending. The aim is to shift U.S. savings into private investment funds. Deficit cutters appeal to American middle-class citizens as taxpayers—especially as payers of property and income taxes—rather than as potential beneficiaries of existing or new broadly focused social programs. As I have already discussed, deficit-cutting conservatives are hard at work trying to reduce American middle-class faith in the viability and legitimacy of “middle-class entitlements” such as Social Security and Medicare. And of course, deficit cutters are determined to block broad new federal commitments to universal health care or long-term care benefits for the elderly.

On the other side of the political spectrum, progressives want to increase government-funded “investments” not only in the economy, but also in education, health care, and other social services. Progressives have already lost many battles to expand such social programs to the degree that they are narrowly targeted on the poor, on blacks, or on inner cities. They are still trying to expand programs for children. But many in the voting public remain suspicious

that “children’s programs” are a proxy for “welfare” expenditures or for make-work social service jobs (Taylor 1991). One way out is to advocate, as the Clinton administration has done, either “tax credits” for the less privileged (such as the Earned Income Tax Credit) or extensions of universal “security” programs (such as health care coverage) that are claimed to benefit the middle class as much or more than the poor. But such progressive strategies are badly hampered by the unwillingness of Democratic Party politicians to think creatively about—or talk publicly about—taxes. After all, tax-expenditure programs can hardly be expanded indefinitely as a tool of federal social policy, in an era of huge deficits and reduced overall tax revenues. And new universal social programs cannot work politically, as we have seen in the recent health care debate, unless they have some federally mobilized resources behind them.

11.3.4 Better Social Policies for the Future?

A historical-institution, polity-centered approach to understanding the politics of U.S. social policy making encourages us to consider macroscopic contexts, period effects, and interconnections among specialized “policy areas.” Even so, implications can be drawn out for the particular policy issues addressed in this book. I have already discussed the implications of my approach for understanding the 1993–94 debates about President Bill Clinton’s health security bill. Those debates sputtered to inconclusion in the fall of 1994, and comprehensive health financing reform is unlikely to come again soon onto the U.S. legislative agenda. I expect the next rounds of debate to focus on extending coverage for people leaving welfare, on extending insurance coverage to all or most American children, and—perhaps above all—on cutting Medicare as a way to relieve pressures on the federal budget. The constraints that will operate in these debates are well captured by the general discussions I have already offered. Consequently, I propose to say little more here about health care reform; I shall focus instead on long-term care for the elderly, educational reform, and issues about child care provision.

New policy ideas in each of these areas cannot be considered on economic-efficiency grounds alone. Any new proposals would necessarily be debated, enacted, and implemented within the context of the sorts of overall limits and possibilities I have already discussed, and against the backdrop of previously existing social policies about children and the elderly. The focus of this volume, moreover, is largely on social *services*, not simply monetary benefits financed privately or through government. That means that the politics of each of these areas activates actual or would-be service deliverers, as well as the social groups that do, or might, benefit from the services in question. Day care providers, teachers, school administrators, nursing-home operators, doctors, and insurance companies—all of these sorts of “providers” matter as much as, and usually more than, children and old people in the *politics* of designing and redesigning social services of the sorts we are considering here.

Long-Term Care

Possibilities for financing long-term care for the elderly are very much tied up by current national concerns about the federal budget deficit and the growing cost of commitments that have already been made to elderly health care through Medicare and Medicaid. (Although neither Medicare nor Medicaid offers sufficient coverage for long-term care, and certainly not for home-based care, Medicaid does cover nursing home expenses for the impoverished elderly and for middle-class retirees who “spend down” to the near-poverty level in order to attain eligibility.) Because of current citizen hostility toward government and public spending, proposed new cuts in federal expenditures for Medicare and Medicaid are likely to dominate debates about “health care reform” for the next few years. If recent trends toward squeezing physician and hospital reimbursements continue, we may expect that Medicare and Medicaid will function less and less effectively over time, spreading popular disillusionment with public health insurance, without addressing the actual social needs privately, either. Crises of coverage, cost shifting, and efficiency in America’s current hybrid health financing “system” may simply deepen for a decade or so, as the aftermath of the failed debates of 1994 plays out politically.

As we have learned elsewhere in this volume, private insurance is unlikely to offer viable policies to help today’s young and middle-aged adults plan for possible long-term care expenditures when they become very old. Yet enactment of a new comprehensive, non-means-tested federal guarantee in this area seems equally unlikely. An economically rational solution might be a federal requirement that each American “save” from private income for future long-term care, either in the home or in institutional settings. This sort of proposal would rely on federal regulatory power, but not spending, and it might attract support from nursing home operators and health care providers. However, any such mandatory requirement would be very much subject to political criticism as a form of “governmental coercion”—and as an additional tax burden on already hard-pressed working-age families. I conclude that such a mandatory savings plan could not succeed during the 1990s if proposed and debated in isolation. It might, however, succeed as part of an overhaul of Medicare or Social Security, or as part of a new approach to universal health care (which might come sometime early in the twenty-first century).

Education

Primary and secondary education in the United States remains centered in a publicly organized system of schools, almost entirely run at the local level and financed mostly through local and state taxes. As we have seen, institutional investments made long ago within U.S. federal democracy (rather than considerations of economic or social “efficiency” in the mid-twentieth century) have made the public educational system what it is today. This is true, even though the historical ideal of “schooling for all” has in recent decades been consider-

ably eroded by the growth of secular private schools catering to the children of privileged middle-class professionals living in urban areas. The opting-out of certain upper-middle-class parents has no doubt reduced support for public school taxation. Yet financial allocation to public schools has, in the aggregate, grown steadily in recent decades, so it is hard to argue that American public schools are starved for funds.

Current ideas about “school reform” focus on organizational incentives rather than money as such. They range from proposals for empowering principals and teachers in individual schools, through plans for promoting competition among public schools within local areas, to calls for tax-financed vouchers that would enable parents to choose among public schools or (even) between public and private schools. Whatever their conceptual merits, such proposals have very different possibilities from a polity-centered perspective. Given the existing institutional arrangements within—or against—which reforms would have to be enacted and implemented, it seems very unlikely that Americans will suddenly decide to totally scrap public schools in favor of a private, market-oriented voucher system. Such a step would be seen by many voting citizens—and portrayed by providers employed in the current public school system—as little more than a vast tax subsidy to parents who are now paying for private schooling in addition to paying taxes for public schools. More public money would have to be raised and spent at a time when Americans are highly sensitive about raising taxes.

Reforms that rearrange administration or financing within the public school system seem much more likely, however, because U.S. public opinion is increasingly aware that there are problems with the quality of school performance. Significant rearrangements—including vouchers for public school “choice”—are being enacted within particular states or localities. If they prove attractive in politically visible ways—by lowering school-related tax costs and/or improving the educational performance of schools—such reforms could then spread by “competitive emulation” across many localities and states. That was the way that America’s commitment to public schooling originally grew up in the nineteenth century: *not* from the top down at the behest of the national bureaucratic or professional elites, but from the bottom laterally through competitive emulation across many localities. I would expect school reform to happen again in this manner, to the degree that there are any significant modifications in the status quo.

Child Care

Child care represents a politically conceivable new area for significantly expanded public financing in the United States, but probably not for direct provision of child care services by the federal government. Over the past several decades, U.S. women’s labor-force participation has increased markedly, including the employment of mothers of infants and toddlers as well as school-age children. For better or worse, single parenthood is also very much on the

rise; about half of all American children born today can expect to spend significant portions of their minority in single-parent (usually mother-led) households (McLanahan and Sandefur 1994). Such social trends increase the potential social demand for, and economic relevance of, preschool and after-school child care. Yet these trends are playing out in a U.S. polity that currently does less through government to provide for, or to finance, child care than many European nations do currently, or have done historically.

From the late nineteenth century through the 1950s, many conservative or social democratic nations in Europe got into the child care business for essentially demographic reasons, to ensure high enough birth rates to sustain labor forces and populations of potential military recruits (Bock and Thane 1991). As a country of immigration, and a nation in privileged geopolitical circumstances, the United States did not worry as much about encouraging more births or more labor-force participation by mothers. Such child care subsidies as the United States developed historically were mainly centered in the welfare system. Mothers' pensions from the 1910s, federalized as ADC/AFDC from the 1930s, encouraged impoverished widows or single mothers to care for their children in the home, while remaining at least partly outside of the wage-labor market.

Because of these historical legacies, any debates about new U.S. child care policies for the 1990s are inevitably tied up with the contentious politics of "welfare reform"—yet another round of which is currently under way. For reasons that I discussed above, a new consensus has emerged among most experts and citizens, an agreement that stay-at-home motherhood should no longer be subsidized for the poor. According to proposals from the Clinton administration and congressional Republicans, AFDC is supposed to be turned into a program promoting paid-labor-force participation by impoverished single mothers. At the same time, children's advocates are arguing that any state or national legislation to limit welfare benefits and move single mothers into the low-wage labor force must be accompanied by the substantial expansion of public provision of, or subsidies for, day care services, including those offered through the Head Start program. As Arleen Leibowitz explains in her contribution to this volume, less-privileged children might well benefit from expanded day care services in terms of cognitive development and social skills that prepare them to do better in school. But it remains to be seen whether legislators and the American voting public will be willing to pay the cost of such expanded social services for the poor alone. In past historical episodes of "welfare reform," the end result has been to spend less on the poor and coerce them more. And indeed, very conservative Republicans today argue that welfare benefits should simply be cut off and children placed in orphanages if single mothers will not or cannot find work to sustain their offspring.

Given recent family changes, coupled with Americans' long-term proclivity for universal rather than poverty benefits, there might well be a broad potential constituency for more universal forms of child care provision. This could be

true particularly for nonbureaucratic and noninvasive financial transfers, such as refundable tax credits, or vouchers available to all families, or enhanced dependent allowances delivered through the tax system. Broad financial transfers could be designed to deliver proportionately more aid to lower-income families, while leaving choices about specific types of care to families themselves. But the more universal the system, the more costly it would be in terms of tax revenues. Because of the current fiscal and political climate in the United States, electoral politicians will probably not promote the discussion of universal child care subsidies, no matter how acute the social needs may be. Debate for the foreseeable future is likely to remain focused on poor mothers and their children. Only after the next round of "welfare reform" is completed is it likely that U.S. politics can begin to focus on more fundamental issues of how to support all American families in a world where paid employment and parental duties must be combined in very new ways than in the pre-1970s past.

Elsewhere (Skocpol 1991) I have advocated a set of family security programs aimed at working-age adults and their children—the groups that are not well served by existing social programs. Family security measures would include universal basic health care financing of some sort, job training available to displaced or potential employees across the class structure, benefits for working parents, and assured support for single-parent families. These programs could be financed in part by the transfer of resources now spent on other social programs, including welfare. New taxes would also be required, and they could include a consumption tax (such as discussed in Fuchs 1994) as well as payroll deductions from absent parents for child support (Garfinkel 1992). If history is any guide, American citizens might conceivably be more supportive of relatively universal family security measures than they are of social programs targeted on the poor alone.

Nevertheless, given the electoral and institutional deadlocks that plague the U.S. national government right now, it is an open question whether any new programs that include taxes could be enacted by Congress, even if rational proposals were to be devised by federal officials or extragovernmental experts. New U.S. social programs to enhance the security of the elderly, of children, and indeed of all American families will never come about until both intellectuals and politicians start to talk about the socioeconomic functions, as well as dysfunctions, of taxes. The U.S. federal state has nearly reached the limits of what it can constructively accomplish through regulation and mandates in the absence of stable new sources of public revenue.

American citizens might, or might not, respond to new, wide-ranging discussions about the uses of tax revenues for supporting the young, the old, and working-age families in the middle. Yet it is certain that the citizenry will not respond unless they begin to hear thoughtful arguments and nonideological debates that encompass all sides of the issue. What do Americans want local, state, and national governments to do to cushion insecurities for families at various phases of the life cycle? How should governments act in partnership

with citizens and businesses and providers of social services? And who will pay—in part, through taxes—for what we decide we want? Social scientists should enter this sort of broad democratic conversation, not just as designers of efficient “policy instruments,” but also as citizens conversing with their fellows about the kind of good government and society we want for the twenty-first century.

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Comment Seymour Martin Lipset

Many discussions of American public policy in a comparative context suggest, as Theda Skocpol notes in her paper, that the United States has been a “welfare laggard,” or as some others have put it, an outlier among the developed industrial democracies. Much of Skocpol’s previous work has raised questions as to

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how valid this generalization is. In her book *Protecting Soldiers and Mothers: The Political Origins of Social Policy in the United States* and other writings, she has noted that the United States adopted important welfare policies about the same time as a number of European countries. The earliest was the provisions for benefits for Civil War veterans and their families, which began in the last part of the nineteenth century and continued into the twentieth. Since the overwhelming majority of adult males in the North served in the Union Army, this meant that a very large proportion of the population outside of the South was covered. These benefits included old-age pensions, dealt with health problems, and provided for support of widows and children. As noted, the timing corresponded with the introduction of welfare programs in various European nations, such as those fostered by Disraeli in Britain and Bismarck in Germany. The second early American program to which Skocpol has called attention involved various maternalist measures mainly on the state levels, which provided benefits for mothers and children.

These programs demonstrate that Americans in the late nineteenth and early twentieth centuries were willing to pay for welfare programs for specific groups. Yet these do not, in my judgment, negate the conclusion that the United States was and remains a welfare laggard. The veterans' benefits were given as recompense for service in the army during wartime, not as a right for all citizens or in order to redistribute income or as an entitlement. The program, as Skocpol indicates, did not set a precedent for the extension of welfare benefits to the rest of the population. Advocates of such policies, who tried to use the veterans' benefits as a model, failed.

The maternalist policies do correspond somewhat to latter-day, or contemporary, welfare programs. They were fostered by middle-class women, active in the feminist or suffragette movements. They were concerned with the problems of children of single mothers, largely of widows and divorced women. These policies also did not last, ending either around the time of World War I or, in the case of the one federal program, in the 1920s. Like Civil War Veterans' benefits, they did not serve as a model or precedent for federal policies.

There was, it should be noted, a third early set of policies that had definite roots in American values and that has continued into later times: support for education. If the United States has been a welfare laggard, it has been the educational leader with respect to expenditures and coverage for the different age groups, reflecting the country's greater commitment to equality of opportunity. From early in the nineteenth century, America led the world with respect to attendance at elementary school, then with high school, and finally in more recent times with the proportions of the age cohort going to college and graduate school. For each level of education at any given moment in time there have been more people studying in the United States than in Europe. And Americans have been willing to pay for the costs involved. This emphasis on education continues down to the present. A review of public opinion data over fifty years by Ben Page and Robert Shapiro (1992, 128) notes that "education has

long been an area in which most Americans want government to spend more money.” The most recent data on governmental expenditures reveal that the United States is still behind most developed countries with respect to welfare, but not to education.

There have, of course been major changes in the preferences of Americans since the 1930s. The Great Depression and the New Deal led to an American welfare state including Social Security, unemployment insurance, and various entitlement and transfer programs, such as AFDC, Medicare, and Medicaid. But as noted, comparative data still show that the United States has not caught up to the European countries. The proportion of the gross national product that Americans pay in terms of taxes per capita is the lowest in the developed world.

Why the United States lags may be dealt with historically and comparatively. On one hand, many historians and, I think, Theda Skocpol prefer to answer the question historically or situationally. And they have pointed to past American movements in support of greater state intervention for more welfare. It is true that there has been interest in welfare programs and statist economic policies, but it is also true the advocates of these policies have had less success here than elsewhere, that they have failed repeatedly, as with the recent effort to extend health coverage.

The analysis of American behavior in the welfare area may be linked to the discussions of Why no socialism in the United States? The “why no socialism” debates refer to the fact that the United States is the only industrialized country that has not had a significant socialist or labor party. The subject must be treated cross-nationally. (To this may be added the fact that today America is close to having the weakest trade union movement among industrialized countries in terms of the proportion of the labor force who belong.) The discussion has been particularly important for Marxist theory, as well as politics, since Karl Marx stated explicitly in *Capital* that the most developed country shows to the less developed the image of their future, that political systems are a function of the level of technology of economies. What this meant to Marxists prior to World War I was that the United States, as the most economically advanced country, would be the first socialist country. Various prominent Marxists assumed this would happen. As it became clear that the United States was not behaving properly, they became very concerned about the implications the lack of a socialist movement in the United States had for the validity of Marxist theory. The subject, of course, has been addressed by many nonsocialists and has been researched by academic scholars.

Those who have written on the issue have suggested many explanatory variables, in fact so many that the outcome seems overdetermined. One of the most interesting sets of hypotheses was advanced by H. G. Wells in 1906 in *The Future in America* and elaborated on by the American political theorist Louis Hartz in *The Liberal Tradition in America*, published in 1955. Wells and Hartz emphasized the impact of the dominant ideology or creed, of America’s organizing principles, which have been classically liberal, on the polity. Classical

liberalism, now sometimes referred to as libertarianism, favors a weak government, is suspicious of or fears the state. It subsumes Jefferson's dictum, that government is best which governs least. This antistatist doctrine defines the conservative or national tradition of the United States. Conversely, in Europe and Canada the dominant organizing principles have been statist. Conservatism in many of these countries has meant Toryism, an emphasis on mercantilism, a powerful activist state, elitism, noblesse oblige, and communitarianism. Harold Macmillan, who served as a Tory prime minister of Britain, defined Toryism, the ideology of his branch of the Conservative Party, as "paternalistic socialism." The argument derivative from Wells and Hartz suggests that, where national traditions legitimate statism, both the egalitarian left and the hierarchical right endorse welfare policies. Europe produced a statist right and a statist left, while the liberals, squeezed between them, were the politically weak backers of antistatist ideology and policies. In America, Wells argued, two parties were missing, the socialists and the conservatives. He contended as of 1906 that both American major parties would be wings of the Liberal Party in Britain, the left and the right.

In various writings in Canada and the United States, I have emphasized, as have many Canadian scholars, that Canada is the country of the counterrevolution, which, retaining the monarchy and state-related church, produced respect for the mercantilist state, while the United States is the country of the Whig revolution, and therefore has been antistatist and classically liberal (Lipset 1990). The different outcomes of the American Revolution produced varying receptivities to state intervention. Canada, though never electing a socialist party to national office, has two, the New Democrats (NDP), and the separatist Parti Québécois (PQ), which have been strong in most of its provinces. Four, Manitoba, Ontario, Saskatchewan, and British Columbia, have been governed by the NDP; Quebec has a PQ government. And the country has been much more receptive to welfare state measures than the United States. Brian Mulroney, who served as Conservative prime minister for most of the 1980s, described the welfare state as Canada's "sacred heritage" in the 1988 election campaign. His successor, Kim Campbell, who held office briefly after Mulroney retired, noted that Canada is basically a social democratic country. The leader of what has sometimes been described as the Reaganite right in Canada, Preston Manning, of the Reform Party, said in 1994 that Canadians owe a debt of gratitude to the social democrats of the country, the NDP, who are responsible for Canada's health plan, its system of family allowances, its more extensive provisions for the unemployed than the American, and many other welfare measures. Clearly the orientation of Canada toward welfare policies is quite different from that of Republicans. The latter are the only major anti-statist party in the developed world.

This brief comparative look does not mean that Skocpol is wrong in her analyses, or in her contention that there has been considerable support for social welfare policies in the United States. She prefers to explain their relative

weakness as the outcome of specific conflicts and political processes. She is basically correct on the details. But she underplays what I consider to be important, namely, that the larger value context within which American politics takes place makes it much more difficult to institutionalize statist economic and welfare policies here than in Europe and Canada. It does not make it impossible. As Gerhard Casper emphasized in his talk to our conference, America has an extensive regulatory state, one that is stronger than those in most social democratic systems and in Canada. Where Europeans and Canadians choose direct state intervention, ownership or control of industry, and redistributive policies to produce more equality of result, Americans favor education and regulation to enhance equality of opportunity and a more competitive society. I would contend that the regulatory emphases are also related to the greater moralistic streak in American society. This orientation derives in some considerable part from the fact that this country is the only Protestant sectarian nation, Methodist, Baptist, and a myriad of others. The Euro-Canadian hierarchical churches, Catholic, Anglican, Orthodox, Lutheran, which have been state-related, not only have contributed to statist orientations in their countries but also have made them much less moralistic and individualistic than the United States, with its congregationally organized sectarian denominations.

The Wells and Hartz approach does not account for the success or failure of any particular policy effort or the strength of different ideologies in the United States, Canada, or other countries. There are other important factors that I do not have the time or space to deal with, particularly the varying political systems; divided government; checks and balances; president and Congress; weak executive authority compared to the more unified, parliamentary strong executive polity; and the different stratification systems, one postfeudal with stronger, more visible social classes and the other a product of a new revolutionary society with less consequent deference for elites and the state. The American sociopolitical system favors limited government, the European a strong state. But it is necessary to analyze specific differences through detailed historical case studies. And this is what Skocpol has done thoroughly and eloquently. I would simply urge the need for both comparative cultural and structural analyses as well.

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