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To cite this article: Lisa Stafford, Greg Marston, Amanda Beatson, Marianella Chamorro-Koc & Judy Drennan (2019): Interpretative accounts of work capacity assessment policy for young adults with disabilities, *Disability & Society*, DOI: [10.1080/09687599.2018.1561356](https://doi.org/10.1080/09687599.2018.1561356)

To link to this article: <https://doi.org/10.1080/09687599.2018.1561356>



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Published online: 21 Mar 2019.



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Interpretative accounts of work capacity assessment policy for young adults with disabilities

Lisa Stafford^{a,b} , Greg Marston^b , Amanda Beatson^c ,
Marianella Chamorro-Koc^d  and Judy Drennan^c

^aSchool of Public Health and Social Work Faculty of Health, Queensland University of Technology, Brisbane, Australia; ^bSchool of Social Sciences Humanities and Social Sciences, University of Queensland, Brisbane, Australia; ^cFaculty of Business, Queensland University of Technology, Brisbane, Australia; ^dCreative Industries Faculty, Queensland University of Technology, Brisbane, Australia

ABSTRACT

Young adults with disabilities are a specific target of the welfare-to-work policy introduced by many OECD countries over the past decade. The implementation of these policies is a significant concern for service delivery organisations and advocates in Australia and internationally due to complex intersecting structural barriers that persist for many young adults with disabilities. A particular focus of this article is work capacity assessments. Drawing on socio-political theories and interpretive policy analysis, the 22 in-depth interviews with personnel from service delivery organisations and advocacy organisations reveal how the deemed capacity to work process is not only interpreted as flawed, but the current policy approach disables young adults, perpetuates stigma, and creates division between service users and service providers. The accounts reinforce the need to contest such assessments and instead turn towards a rights-based capability approach permitting young adults with disability self-determination over their education-to-employment pathway.

ARTICLE HISTORY

Received 20 March 2018
Accepted 18 December 2018

KEYWORDS:

Disability employment;
work capacity assessment;
welfare to work; young
adults; service
providers; disability

Points of interest

- Young adults with disabilities experience lower employment than their peers without disabilities in Australia due to multiple barriers, including attitudes of others.
- Many countries like Australia have welfare-to-work strategies, such as work capacity assessments that 'encourage' young adults with disabilities into the workforce.

CONTACT Lisa Stafford  lisa.stafford@qut.edu.au

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- This research found that work capacity assessments are not helpful in practice for young adults with disabilities.
- Many problems with the assessments exist including unachievable work hours and work capacity being determined by others using a 'one size fits all' approach.
- The research recommends that young adults with disabilities should be supported to self-determine their work goals and the support they need. This process should focus on a person's capabilities and account for life experiences, personal characteristics, environment, and resources.

Introduction

The complexities of education-to-work transition in advanced industrial societies (Furlong and Cartmel 1997; Stafford et al. 2017) mean many young adults will experience difficulties in their transition to work. Young adults with disabilities are particularly at risk as it is well established they experience universally poor work outcomes and higher rates of unemployment than their peers without disabilities in Australia (Australian Institute of Health and Welfare 2011; Honey et al. 2014) and in other OECD countries (for example, Lindsay, McPherson, and Maxwell 2017; Magill-Evans et al. 2008; Malviya et al. 2012; Rusch et al. 2014; Rutkowski and Riehle 2009; Wolgemuth et al. 2016). Political-economic barriers, such as a preference for marketised policy and service systems (Roulstone and Prideaux 2012; Spagnuolo 2016; Wiggan 2012), as well as socio-cultural barriers, such as attitudes and discriminatory practices within these service systems (Critten 2016; Darcy, Taylor, and Green, 2016; Hemphill and Kulik 2016; Thornton and Marston 2009), play a significant role in shaping the pathways to employment for young adults with disabilities.

In this article, we focus specifically on work capacity assessment as it has emerged as a dominant theme from a larger study of Australia's national Disability Employment Services (DES) and the intersecting income support policy and programmes influencing the transition to work for young adults with disabilities (Stafford et al. 2017). Through a critical socio-political disability lens and an interpretive policy analysis approach, this article illustrates how work capacity assessments in practice are flawed in how they perpetuate – rather than remove – structural barriers to work for many young adults with a disability. This shared meaning is understood from the accounts of personnel from service delivery organisations as well as advocacy organisations who have experiences with the policy and processes in action. Before detailing the findings, the article first provides a brief overview of the welfare-to-work policy research undertaken by scholars over the past decade, including documented concerns about work capacity assessments.

Disablement and welfare-to-work policy

The interfacing systems of DES and income support have been increasingly influential in shaping the pathways to employment for young adults with disabilities. This has been particularly noted when many OECD countries have used a marketised and paternalistic logic to sanction disability income support within the broader scope of welfare-to-work policy (Goodley, Lawthom, and Runswick-Cole 2014; Roulstone and Prideaux 2012).

Recommendations to target and regulate new and existing income support recipients by increasing the difficulty of access to the Disability Support Pension have been adopted by many OECD countries. Specifically, individual countries have tightened eligibility (Barnes 2000; Drake 2000; Grover and Piggott 2015), enforced compulsory work activities for receiving benefits (Shakespeare, Watson, and Algaib 2017; Beatty and Fothergill 2015), implemented sanctions for non-compliance (Lantz and Marston 2012; Roulstone and Prideaux 2012), and increased the frequency of reassessing work capacity for persons already in receipt of disability-related benefits (Barnes 2000; Shakespeare et al. 2017). The aim of these reforms, according to Thomas (2012, 213), is 'freeing-up of market mechanisms and the curtailment state of welfare provision' which is all occurring under the guise of 'encouraging disabled people to self-manage, deepen their individual responsibility and join the ranks of the employed'. Young adults are specifically targeted by this policy, the rationale being that the earlier a person can be engaged in work, the greater the costs saved on income support provisions over their life-course (Grover and Piggott 2015).

Two key concepts shape policies such as the one described: new paternalism and normative notions of deservingness. The new paternalism concept suggests 'those who are impoverished suffer from defects of reason and/or character' and are less willing to comply with societal norms and expectations (Marston, Cowling, and Bielefeld 2016, 401); whereas the normative notion of deservingness is said to be 'central to the moral framework of distributive justice and social welfare in a modern liberal state' (Soldatic and Pini 2009, 83). As noted by Soldatic and Pini (2009, 83), this conceptualisation means 'structural disadvantage has been reframed as an internal effect' resulting from the individual's poor behaviour, thus rendering them unworthy and undeserving. These constructions are used by many OCED countries to justify reduced welfare spending (Roulstone and Prideaux 2012; Spagnuolo 2016), a practice also noted by Grover and Piggott:

A reorientation of welfare benefit support for disabled people that has emphasised a contractual, rather than rights-based approach and which as a consequence has increased the expectation that in order to receive support, individuals will have to act in a pro-social manner, most notably through attempts to re-enter wage work at earliest opportunity. (2015, 1)

Scholarly research highlights many flaws with the coercive welfare-to-work policy to move people with impairments into paid work, including failure to increase numbers or workforce opportunities and demand (Beatty and Fothergill 2015; Hall and Wilton 2011), non-removal of structural barriers (Barnes 2012; Shakespeare et al. 2017), non-broadening of conceptions of work (Roulstone and Prideaux 2012; Taylor 2004), and flaws in work capacity determinations/assessments (Shakespeare et al. 2017). An area that deserves more attention in terms of policy practice is work capacity assessment.

Deemed capacity to work

Adopted by OECD countries, such as the United Kingdom and Australia, work capacity assessments are mechanisms for implementing economic rationalism policy and concepts of new paternalism and deservingness. The assessments are designed to categorise, code, and sort people with disabilities according to their capacity to work with intervention and the amount of work hours one can perform (Garsten and Jacobsson 2013; Roulstone 2015; Shakespeare et al. 2017). This has become standard practice regardless of the appropriateness, effectiveness, and accuracy of such practices.

Research identifies a number of issues with this approach. Firstly, the assessments reconstruct complex disability experience into a medical deficit issue (Barnes 2000; Schoeman and Schoeman 2002), where people with disabilities are positioned as devalued dependents in need of protection (Marston 2013; Shakespeare et al. 2017). Medicalised approaches also promote professionalism; justifying the contracting of 'expert' others independent of the person with the disability to make a judgment about a person's level of incapacity, hours of work, and thus eligibility to disability income support (Piggott and Grover 2009). This policy practice and process is evident in Australia's Job Capacity Assessments. For example, Marston (2013, 218) discusses how the 'JCA [Job Capacity Assessment] process is a one-way exercise in clinical assessment that privileges expert medical knowledge and provides the Australian government with a way of rationalising compensation and deciding who gets what assistance'.

Sanctioning the 'expert professional' assessment over a person's (and their ally's) own knowledge of their body-mind needs permits managerial power and control over the lives of people with disabilities (Shakespeare et al. 2017; Titchkosky 2003). The degree of power embedded in work capacity assessment is substantial, as the decisions determined by others have dire consequence on a person's well-being and survival (Stewart 2017, 2018). As Dywer et al.'s (2018, 12) UK study found, such practices are 'exacerbating illness and impairment among incapacity benefit claimants ...', while Stewart (2018) revealed that statistics released in the United Kingdom link people

dying with growing rejection of Disability Support Pension claims while intensifying work conditionality requirements. Academics and activists have long warned of the consequences of medical/health professionalism in disability (Oliver 1990). As Zola noted back in 1977, when people are living off the suffering of others – we have a problem – a problem that is having a significant impact on the lives of people with disabilities today (Dwyer et al. 2018; Stewart 2018).

Another key issue relates to how work is defined. In the current policy context, the determination of one's capacity to work and the amount of hours one can work are underpinned by a capitalist view of productivity (Gleeson 1999; Spagnuolo 2016; Taylor 2004). Under this system, the worth of people with disabilities are devalued, and the concepts of dependency and burden are perpetrated (Gleeson 1999; Taylor 2004). This is due to an ableist perception of 'normative' body-mind requirements professed to be productive, along with the deemed working rates set for profit by economic systems (Gleeson 1999; Goodley et al. 2014).

Expert-led, medicalised compulsory work capacity assessments are also a direct contradiction to the right to determine one's own needs and exercise choice and control regarding work (Taylor 2004). As Grover and Piggott (2015, 249) highlights, 'there is a disjunction between the liberal approach to the right to work and a more authoritarian approach located in the obligation to work'. This disjunction in policy and practice effectively denies the term 'freely chosen' located in the United Nation's (2016) Convention on the Rights of Persons with Disabilities, Article 27:

1. States Parties recognize the right of persons with disabilities to work, on an equal basis with others; this includes the right to the opportunity to gain a living by work freely chosen or accepted in a labour market and work environment that is open, inclusive and accessible to persons with disabilities. Article 21(1).

The right to self-determine to work or not work as advocated by Taylor (2004), or – more broadly – the definition of work itself, has its own tension within disability studies and activism (Roulstone and Barnes 2005, 2). It is not within the capacity of this article to analyse these differing positions; however, several scholars, such as Piggott and Grover (2009) and Roulstone and Prideaux (2012), all note that while social inclusion, equity, and choice are important to emancipation, they are contingent upon challenging entrenched conditions held by society which lead to the disablement of people with disabilities from society in the first place. As Barnes (2012, 472) notes, there is a requirement to reconceptualise 'social organisation of mainstream employment and the meaning of work' from a socio-political framework to one driven by people with disabilities themselves.

Practice level implementation

Coding, classifying, and sanctioning people within work capacity assessment processes also leads to significant problems at the practice level within organisations. This is because the responsibility of implementing and monitoring peoples' compliance with their deemed work hours and job-seeking activities has been largely shifted to non-government organisations contracted by the government in countries like Australia. A tension has emerged from the duality of roles non-government organisations are required to perform in implementing these policies (Abello and MacDonald 2002; Thornton and Marston 2009).

Service providers are being tasked with compliance and breach of income support policy procedures, whilst building relationships and delivering client-focused service and placing people into work as required under the disability employment policy and performance measures (Abello and MacDonald 2002; Harris et al. 2012; Thornton and Marston 2009). Service delivery organisation personnel therefore act simultaneously as 'mediators of both policy and politics and as locations for conflict over the character and scope of the welfare state' (Brodkin 2013, 33). Thus, young adults with disabilities and services providers are both influenced by how work assessment policy is enacted. It is for this reason that it is important to uncover the meanings and interpretation of disability employment policy in action from personnel of front-line service delivery organisations as well as advocacy organisations.

Research design and methods

Research context

In this article, we present the meanings and experiences from personnel of service delivery organisations as well as advocacy organisations regarding work capacity assessment in action. The findings presented in this article are part of a larger study into policy and programme influences on the transition to work for young adults with disabilities in Australia, with a specific focus on those with primary physical and neurological disabilities. In stage one of this study, the focus was on understanding how disability employment and income policy is comprehended and practised within service delivery organisations in light of the tension of the duality of roles (monitor of compliance and person-centre service provision) personnel now assume. Additionally, identification of how policy is interpreted in practice helps to gauge the mismatch in policy intent and policy in action, and the impacts of policy on affected citizens – young people with disabilities. Several influential themes emerge from this stage one analysis, with work capacity assessment policy practice being a critical issue. The following is an outline of the interpretive

policy analysis approach used to explore these questions and frame the analysis.

Research approach

This study uses interpretative policy analysis to identify how policy is understood and practised in action by different actors involved in its implementation, not just its construction (Gains & Clarke, 2007; Schewatz-Shea & Yanow, 2011). Using this approach helps to uncover not just the various meanings held about a particular policy by different groups (such as policy-makers, service delivery organisations, advocacy groups, and affected citizens) (Yanow 2000), but importantly how they are interpreted and thus given meaning through processes and lived experiences. This is important as policy operates in a social world where human actors can vary their meaning and interpretations of policy words, acts, and artefacts depending on their experiences and prior knowledge (Yanow 2000).

Experience and knowledge is shaped by social, cultural, and political-economic influences. As Yanow (2000, 9) notes: 'what implementers do rather than what the policy says in its explicit language, constitutes the "truth" of policy intent'. Yanow (2000, 9) also connects this thinking to Lipsky's 'observations made when analysing street-level bureaucrats, agencies and clients'. Actors' meanings are conveyed through 'language, understanding and perceptions' and courses of action, which may reveal differences between members and the policy intent (Yanow 2000, 12). Taking this approach to answer this question and to build knowledge is critically important, as too few research studies take into consideration the proposition that policy problems and solutions are up for interpretation.

Data selection, collection, and analysis

To explore the interpretation and meaning of national DES and the intersecting income support system, participants from DES service providers across Australia and systemic advocacy organisations were invited to participate in an in-depth interview approach guided by a semi-structured interview schedule. During 2016–2017, twenty-two people participated in an interview with a duration between 45 minutes and one hour. The participants held various positions in these organisations – such as CEOs/directors, managers, policy/project officers, and specialist professionals. Six of the participants also self-identified as having a disability. Their interaction with disability employment ranged from one year through to extensive experience. The semi-structured interview explored transition to work across three areas: barriers to transition, solutions/strategies, and needs moving forward at the policy and programme

levels. Ethics approvals from two university committees and a non-government organisation's human research ethics committee were gained for the interviews.

To identify meaning and interpretation, the interpretive policy analysis protocol (Yanow 2000) was applied to the interviews and documents. This involves a four-stage iterative process, which includes the following:

1. identify the data artefacts that convey policy meaning (e.g. programme rules);
2. identify communities pertinent to the policy issue;
3. identify and describe meanings being communicated in the artefacts; and
4. identify and discuss the implications of policy meaning on different communities and the points of differences in understanding and interpretations by different communities (Yanow 2000).

NVivo 11 was used in the coding of data. An extensive table of themes with subthemes and descriptions was produced from the iterative process of review and refinement. Pertaining to the specific theme of work capacity, the narratives were analysed according to language, actions, and artefacts relating to experiences of the policy in action. To help confirm consistency in interpretation of themes and subthemes, two coders reviewed the initial transcripts.

Limitations

There are some methodological issues/limitations to note when considering the findings in this article. While consistent meanings across participants relating to the work capacity assessment were found, it should be noted this was not the same for all major themes. Generalisation of the findings is limited to the data collected and reviewed in this study. Furthermore, the article represents only personnel's meanings of policy implementation. The voices and accounts of young adults with disabilities about their education-to-work pathways are being explored in depth in the following stages of this research study.

Findings

In Australia, young adults with disabilities aged younger than 35 years are subject to an assessment of work capacity (Job Seeker Classification Instrument and Employment Services Assessments) JSCI and ESA to determine whether they have mutual obligation in receiving the Disability Support Pension (Australian Government 2017a). The only exception is if

they have come through the eligibility rigid school–work pathway known as DES – Eligible School Leavers (Australian Government 2017b, 2017c). For anyone with a work capacity of eight hours or more per week (without a youngest child under six years old), they will have compulsory requirements (Australian Government 2015a). The compulsory requirements for under-35s are: full-time study or employment seeking.

Of interest in the policy is the use of the term ‘negotiate’; however, when examining the guidelines there does not appear to be much room for negotiation by the person with disability regarding compulsory activity or the right not to work. The person is given a work capacity score with weekly benchmarks of either 8 hours, 16 hours, 21 hours, or so on (Australian Government 2017c). A young adult with a deemed capacity of eight hours or more will have ‘mutual obligation’, that is ongoing requirements to meet regularly with the Department of Human Services and participate in the compulsory activities as set out in the Job Plan in order to receive their income support payments. Decisions about how much work is suitable or the nature of work have been pre-formulated. If individuals fail to comply with their compulsory activities, their income support in the form of the Disability Support Pension or New Start Pension can be suspended. How this policy is understood in action is illuminated in the accounts of our study participants.

Interpretative meanings

From our analysis of the participants’ accounts of work capacity assessments in Australia, it was understood that there was a consensus interpretation of the policy in action by implementers as a flawed process. This interpreted meaning arises from the participants’ experience with the policy in action. As one participant noted:

The simplest thing is that is just to make the eligibility and the assessment correct. It’s just a hindered process ... because it just puts numbers back into systems and then reassessments and just churns things all over again. (Research Participant #22, senior manager)

This understanding of the policy as flawed pertains not just to problems with process of eligibility and capacity determinations experienced on the ground, but the logic behind determining categories and cut-off points for employment support streams and the required hours of work benchmarks to be achieved. The study participants described how the determinations of cut-off points and benchmarking particularly made no sense. The meaning of these set benchmarks was described as unexplainable and intangible:

I don’t know what eight hours means. For so many disabilities, it’s not – it means bummer all ... hours; how many hours can you work. I find that bizarre. I just think

there may be particular disability groups where this might be quite a good measuring tool. But for many people with physical disabilities, you can work normal hours, you work shorter hours, you can work flexible hours, you can work but why would it be less than or greater than eight hours ... It doesn't actually have anything to do with the actual ... the outcomes for the individual concern. (Research Participant #4, CEO/director)

Demand side factors, such as labour market trends and vacancy ratios, embedded stereotypes and prejudice, as well as inaccessible environments are all influential factors in gaining employment (Clarke and Patrickson 2008; Stafford et al. 2017). However, these factors are often downplayed or disregarded in discussions about the availability and suitability of jobs for the hours of work prescribed (Clarke and Patrickson 2008; Stafford et al. 2017). This has been reaffirmed in international scholarly research with concerns raised about activation policy when there is a failure to increase workforce opportunities and demand (Barnes 2012; Beatty and Fothergill 2015; Shakespeare et al. 2017).

Adding to questions over the logic of the policy in action is the learnt understanding that the determinations made are simply 'judgement calls' about 'capability'. This raises doubts over the validity of the tool and process, which further adds to interpreting the Job Capacity Assessment as a hindering process:

Yeah, if you haven't had experiences you fall below the eight [eight-hour benchmark], and you look like you're not capable. It's not as scientific, I always thought it was some sort of scientific, and I actually looked at the tool and stuff. It's just like – well someone's just making a judgement call. (Research Participant #3, CEO/director)

The seemingly arbitrary process of coding and determining hours and needs reflects some of the issues also raised by Shakespeare's (2016) assessment of the UK's work capacity assessment, and Garsten and Jacobsson's (2013) review of Sweden's processes. In our Australian case, the policy in action was not only interpreted as flawed because the processes and underlying conceptions of the processes were found to be problematic; it was also felt to be harming young adults by stigmatising and blaming them. This was particularly the case with mutual obligation requirements to receive income support and unobtainable work-hour benchmarks. The process was felt to be setting many young adults with disabilities to fail. This is illustrated in the following excerpts:

... Yeah, to say that somebody who generally has an issue that stops them from working or stops them from working as much as they would like to. That they don't deserve to be supported by the government, I think is sending a really bad message. Just the fact that it's constant, every newspaper you pick up, it's about these DSP bludgers. It's like really? Is that really how we should be talking about people with a disability, who really do have some significant barriers to work. (Research Participant #5, manager)

It's just bean-counting, it's bullshit. It seems like we've ... there's two things; one that people with disability are always there or their families are always there to rot the system ... But evidence suggests that that is not the case, and when it does happen, it's at very minor scale. (Research Participant#4, CEO/director)

Barnes (2000) and Shakespeare et al. (2017) highlight a similar problem in the United Kingdom, where instead of the policy aiming to help and support people by removing barriers, it actually stigmatises people further, reinforcing and further producing disablement.

Deficit focus

Concerns over the deficit focus of assessments links back to critiques of the medical model of disability (Oliver 1990). A deficit-orientated approach views disability as a burden, a tragedy, something that needs to be fixed/adapted (Riddell 1993, 448). The issues raised by critical disability studies are located in the accounts of the participants – a shared meaning that a deficit model overlooks structural issues, removes self-determinations, and overlooks strengths of the person.

... think the two biggest problems people with disability have with DES is they don't have any say, really, over the type of work they do, or how fast, or when. It's patronizing to them. What's wrong with you? All the deficits with people. It's not focus – it's not strengths-based, and it's – almost, in a way – and sometimes – is this deliberate? It's not meant to be supportive. (Research Participant #1, policy/project officer)

I guess historically there's been very much a focus on your deficits, I suppose, rather than – and what you can't do and your lack of capacity, rather than the things that you can do and your ability. So, there's been a focus on disability rather than ability. I think that seems to be an issue that needs to be addressed, in terms of income support and eligibility for that, and eligibility for employment services as well. (Research Participant #2, policy/project officer)

The suitability of such an approach has been shown by Shakespeare (2016) to be insufficient to determine multi-dimensional factors that influence people in their pathway to work. Furthermore, medical functional approaches fail to identify capabilities of the person, strengths and interests of the person, and the support needed to help them into suitable and interesting work (Mitra 2006).

'One size fits all' approach to assessment

The flawed process was also understood in terms of the lack of flexibility or account of the life stage of the participants. The assessment does not recognise that young people are often in transition from education into work, and thus allowances are needed for age, transition, and experience. This is

problematic given the multitude of barriers identified in the pathway to employment for young people as highlighted at the beginning of this article, as well as the complexities encountered in the education-to-work pathway. Concerns were raised that the assessment has no allowance for age and experience:

Just this artificial kind of thing that we can determine, if someone looked at me, and also it's not an age based tool. When you're looking at young people, they haven't had a whole lot of experience, so this idea that you're assessing them the same as someone that's 40 that could've had an acquired disability, and had a whole range of different experience is ridiculous. But if someone looked at me when I was 16, 17, and said – okay well this is your pathway, I'd be horrified, I wouldn't be here. (Research Participant #3, CEO/director/General Manager)

Participants spoke about the lack of recognition of the significant gap in support for recent school-leavers in transition, as well as the inappropriateness of the assessment/entry process for the recent school-leaver still in the process of transition:

... because there was a big gap, those ones that have left school, those 18 to 20 year olds ... Yeah. There's a huge gap there, because if someone's – if they've not been picked up at school, once they – we try and pick them up at school, because once they get in that system, it is a nightmare to try and get them out that cycle. Once they go to Centrelink, they get the compliance and, oh, it actually makes it a lot harder than it does at school. You've got more resources while they're at school. Once they get out of school and they're going on to – say they're going on to DSP or Newstart or whatever, it starts to get more difficult. (Research Participant #16, senior manager)

The lack of acknowledgement of young peoples' transition is surprising given that many scales or instruments recognise there are differences between young people and adults. The World Health Organisation International Classification of Functioning, Disability and Health (ICF) is an example of this, where the ICF Child and Youth Version was introduced in 2007 to recognise the different experience, life-stage needs, and circumstances. However, it needs to be noted that concerns are raised over the theoretical underpinning of the ICF and the operationalisation of the model (Hemmingsson and Jonsson 2005; Imrie 2004). With the issue of age-appropriateness of assessment comes concerns regarding the misfit between the determination of work capacity and the young person's level of needs.

Misfit in benchmark hours and referral

Inappropriate work capacity determination, referrals to an employment support stream, and/or service referrals are common experiences at the street

level that lead to the interpretation of the policy in action as flawed. One issue relates to inappropriate support stream referrals. There was a very real sense that there were inappropriate referrals being made throughout the process, which creates problems for the young person and providers in achieving set benchmarks. This is illustrated in the following:

Yeah and I think too, the Job Capacity Assessment – or the indicator, the [JSIC] really needs to be looked at more closely, from a national perspective, if we're going to appropriately place young people to services, for service delivery and good outcomes. (Research Participant #11, CEO/director/GM)

Totally inadequate. I actually had a meeting in Canberra earlier this year with one of the minister's advisers about the remodelling of DES. I said until you fix the referral system that's the biggest weakness in the system, inappropriate referrals. (Research Participant #22, senior manager)

Providers gave examples in practice of benchmark allocations that did not fit the young person, raising questions over the correctness of the determinations made. Many felt the benchmarks were inappropriate according to age and circumstances:

... on a person's hours. You do wonder sometimes where they've got [sighs] and how they've made that decision and often we'll ask for it to be reviewed or take the person in and try and influence, especially with this new 30-hour benchmark, it's just ... (Research Participant #9, manager)

It was also felt that the assessment was detrimental because it sets young people with disabilities up to fail in securing employment to the level determined by assessors – and thus in meeting their mutual obligation. This is because one or more of the issues encountered in the assessment process has the potential to greatly influence attainment of the employment outcome set by employment services assessment and the meeting of compulsory activity requirements:

So, if we have those honest conversations, but not actually set them up to fail in this as well. We've got to get you in at your 15 hour – you're on Newstart. It's actually gone up to 23 hours. How on earth are they going to get to 23 hours in the first place ... It's *kids*. (Research Participant #14, senior manager; original emphasis)

This was further reinforced with benchmark changes being made in lieu of policy changes. Often these changes happened without consultation or justification. Furthermore, the increased hours were felt inappropriate and unfeasible for many:

All of a sudden, overnight, we had people who are about to start working 15-hour-a-week jobs or 22 hour and all of a sudden overnight they went to 30 hours. It was like, oh okay, great. (Research Participant #9, manager)

Variability in administering the assessment

There was also significant concern over how the assessments were being carried out, and by whom. In regional areas, the assessments were even more likely to be carried out on the telephone, not face to face:

Face-to-face are very, very thin on the ground, frustrating if you've got someone with a psychological problem or even depression and anxiety, if you're doing a private [phone] or something it's very hard to get that – I believe it would be very hard to get that core information. So, we always try and get a face-to-face if there's one available but yeah, they're getting fewer and fewer. (Research Participant #16, CEO/director/GM)

Many participants questioned how a valid understanding of need can be determined from this process. It was difficult for participants in the study to imagine how the complex intersection between person, environment, and work context to identify barriers, opportunities, and supports needed to enable the person in their pathway to gain meaningful and appropriate work could be established from a telephone call.

Conclusion

As it stands, the work capacity assessment policy in action is understood by participants as a flawed process, rather than a process to facilitate a self-determined pathway to employment. This article has shown that the interpretations of personnel highlight multiple failings. These include intangible benchmarks, incongruence–misfit of benchmark hours, and a 'one size fits all' approach to categorising and classifying people with disabilities. While the Australian government has recently acknowledged problems with assessment in the reform of the disability employment service model, (Australian Government 2016) whether or not it will be replaced by a less top-down assessment system is still unknown.

Critical to any advancement for young people with disabilities and their older counterparts globally is a reorientation towards a capability approach, which recognises the intersection of personal characteristics, environment, and resources in determining capabilities (Mitra 2006). This requires a holistic and co-determination approach which supports people with disabilities to determine whether paid work is an option, and – if so – the type of paid work, as well as the strategies required to help meet their work goals and support needs. Understanding how structural barriers produce disablement and stigmatisation of people with disabilities by society is an important focus for determination of capability (Barnes 2000; Mitra 2006; Shakespeare et al. 2017).

In addition to adopting a capability framework, the notion of work itself needs contestation, because social worth and productivity value is closely

tied to labour and labouring (Gleeson 1999). The underlying assumption that one must work in order to have value in a capitalist society perpetuates social cultural norms and stigmatisation (Goodley et al. 2014; Taylor 2004). Changing policy by way of 'contracting' young adults to look for paid work, but not addressing the very things that create exclusion from the workforce is illogical. Rather, a call for problematising and/or reconceptualising 'work' has been noted as a need in scholarly works (for example, Barnes 2000; Hall and Wilton 2011; Grover and Piggot 2015; Prideaux et al. 2009; Roulstone and Prideaux 2012). This is an important area of focus going forward in post-industrial economies where high-quality paid work is becoming less abundant (Standing 2011). Overall, this study has reinforced the need to contest the 'contractual' deficit-orientated assessment processes as the current approach devalues young people with disabilities, upholds stigma, and creates divisiveness between service users and service providers.

Acknowledgment

We wish to acknowledge the individuals who committed their time to participate in this study. We also wish to thank various organisations for their help in promoting the study.

Disclosure statement

No potential conflict of interest was reported by the author.

Funding

This research is supported under Australian Research Council's Linkage Projects funding scheme (project number LP150100168) and research partners - Jobs Australia and Disability Employment Australia.

ORCID

Lisa Stafford  <http://orcid.org/0000-0003-3439-9972>

Greg Marston  <http://orcid.org/0000-0002-0263-140X>

Amanda Beatson  <http://orcid.org/0000-0001-7741-2060>

Marianella Chamorro-Koc  <http://orcid.org/0000-0001-7982-1626>

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