

People with Disabilities and Labour Market Barriers: The Perspectives of Israeli Social Workers

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Abstract

Social workers play a key role in supporting the labour market inclusion of disabled people. Nevertheless, we know little about how they perceive the barriers that disabled people face and their role in addressing them. In particular, we need to know more about the extent to which they adopt an individualised versus a social model of disability. To address this gap, semi-structured interviews were conducted with twenty-three Israeli social workers providing employment-related services via public and non-profit organisations. A thematic analysis revealed that the participants tended to view their clients' barriers as related to individual characteristics, including their impairment, level of functioning and soft skills. Whereas social barriers were acknowledged as well, these were usually framed as related to employers' attitudes, including ignorance, stigma, fear and distrust. In addition, recognition of these social barriers was usually detached from the social workers' daily, individualised practices.

Keywords: demand-side interventions, discrimination, individualised model of disability, social model of disability, supply-side interventions

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Introduction

In many welfare states, social workers play a crucial role in supporting disabled people in securing and maintaining paid employment. However, our current understanding of how social workers perceive this role and approach their related daily practices in this context is limited. Particularly lacking is an understanding of whether they adopt an individualised versus social model of disability. To address this gap, this article explores how Israeli social workers give meaning to their role and the extent to which they apply an individualised or social model in their work.

In the following sections, we present the key characteristics of each model and how each conceptualises the marginalisation of disabled people in the labour market. Next, we outline the role of social workers in supporting disabled individuals in that market and explore their complex attitudes to the social model of disability. Finally, we briefly describe the local context, with emphasis on Israel's policies regarding the employment of disabled people and social workers' roles in implementing them.

The individualised and social models of disability

Across countries, unequal access to employment of disabled people is well-documented. Numerous studies have consistently shown that having an impairment decreases chances to secure and remain in paid work and increases chances to be overrepresented in low-paid, nonstandard, unskilled and unstable jobs. Additionally, many earn subminimum wages or work in sheltered employment, often involving subcontracted work, very low pay and monotonous tasks (e.g., [Geiger et al., 2017](#); [Schur et al., 2017](#)).

Whilst the labour market challenges of disabled individuals are widely acknowledged, their root causes remain debated. Central to this discourse is the contrast between the individualised and social models of disability. The former, which has traditionally dominated the views of policymakers, helping professionals and the general public, attributes the marginalisation of disabled people primarily to their mental and physical impairment-related characteristics ([Rothman, 2018](#)). When it comes to employment, these include low functioning; lack of social and other job-related skills and behaviours; communication difficulties and low self-esteem and motivation ([Darcy et al., 2016](#)). Accordingly, the intervention is curative and focused on individual pathology. The individualised model does not ignore the environment, but tends to address it as a given, emphasising the individual's need to adjust to it and meet its standards of normalcy and productivity ([Fadyl et al., 2020](#)).

In recent decades, disability activists, researchers and professionals have increasingly challenged the individualised model, calling for an alternative construction of disability as resulting from social oppression and exclusion

(Oliver, 1990; Shakespeare, 2013; Withers, 2020). This social model includes various approaches and theories, which rest on diverse, and sometimes contradictory ontological and epistemological assumptions (Goodley *et al.*, 2019). Common to all, however, is the view of social barriers as the main drivers behind the exclusion of disabled people. In the employment context, these include direct and indirect employer discrimination; inaccessible work environments organised according to (largely unchallenged) assumptions of what constitutes the typical or ideal ‘productive citizen’ (Fadyl *et al.*, 2020); stigmatic and ableist cultural representations and the competitiveness of the capitalist labour market (Oliver, 1990; Barnes and Roulstone, 2005; Foster and Wass, 2013). The social model advocates societal action in tackling these barriers.

Although originally, the social model, mainly in its British variant, has downplayed the individual’s role and highlighted the distinction between the biological (impairment) and the social (disability), in its more recent variants, it does not ignore the role of impairments and personal capabilities in shaping lived experiences (Goodley *et al.*, 2019). Importantly, however, it views individual practices as insufficient for making meaningful change in the lives of disabled people and in promoting social justice. In addition, it invites us to rethink the way impairments themselves are shaped by social mechanisms, as well as to explore how the complex needs associated with different impairments may be translated into social rights and change (Shakespeare, 2013; Feely, 2016; Roets *et al.*, 2019; Goodley *et al.*, 2019).

The individualised versus social model in practice

To comprehend how both individualised and social models are applied in the employment context, a valuable analytical tool is the distinction between the supply- and demand-side approaches (Bills *et al.*, 2017; Frøyland *et al.*, 2019). The former assumes that inclusion of jobseekers into the labour market requires individual interventions. Focused on developing human capital and connections to the labour market, these interventions seek to enhance jobseekers’ educational qualifications and skills, change their attitudes to paid employment and facilitate job search.

In contrast, demand-side policies are aimed at employers (Bills *et al.*, 2017; Frøyland *et al.*, 2019). These range from micro-level efforts to influence employers individually, such as through awareness-raising campaigns, to macro-level interventions to transform the employment market. Crucially, whilst some demand-side interventions are based on persuasion—what Frøyland *et al.* (2019) call *enabling* measures—others are more obligatory and formal, or *demanding* measures.

Regarding the employment of disabled people, supply-side interventions have dominated policy and scholarly efforts (Chan *et al.*, 2010;

[Bauer and Gewurtz, 2022](#)). Although supply-side interventions have their merits, relying on them excessively whilst overlooking socio-economic and cultural exclusionary processes can hinder the inclusion of disabled individuals ([Meager and Hill, 2006](#); [Reinders Folmer et al., 2020](#)). Hence, substantial demand-sided measures are also needed to address selection methods, job structures, working conditions, physical and social environments and the meaning and organisation of work ([Baumberg, 2014](#); [Morris, 2019](#)).

In recent decades, employing disabled people has become a priority for Western governments, many of which have gradually adopted some insights of the social model ([Heymann et al., 2022](#)), and demanding measures ([Frøyland et al., 2019](#)). A key example is antidiscrimination laws, such as the Americans with Disabilities Act (ADA; [Pardeck and Pardeck, 2006](#)) and the UK Equality Act 2010 ([Bunbury, 2019](#)), which recognise disability as a protected legal category and prohibit disability-based workplace discrimination. This demand-side intervention includes the requirement that employers accommodate the work environment at individuals' request. Another such measure is quota schemes ([Revillard, 2023](#)). Whilst in the past, quotas have been criticised as reinforcing negative stereotypes about disabled people, in recent years they are increasingly seen as a form of affirmative action and as ensuring the collective right of disabled people to representation in the labour market ([Albin and Mor, 2018](#)).

Despite these demand-side interventions, disability employment policies remain predominantly supply-sided, rooted in the individualised model and often fail to significantly reduce the persistent employment gap. One key reason for this is that enforcement of these legal protections frequently relies on individual jobseekers or employees, with the state's role remaining marginal ([Albin and Mor, 2018](#)).

The role of social workers

In many countries, social workers play a pivotal role in implementing policy interventions aimed at closing the disability employment gap. They often hold direct responsibility for employment-related services, which encompass job development, placement services, management of sheltered employment facilities and assistance to clients in supported employment (SE). Even when not directly involved in employment-related services, many social workers are deeply engaged in the lives of disabled people, including their employment prospects ([Rothman, 2018](#)). Additionally, as advocacy is a crucial tool in the practice of many social workers, they can ensure the protection of employment rights ([Pardeck and Pardeck, 2006](#); [Hernandez et al., 2009](#)).

Despite their cardinal role, there is limited understanding of how social workers providing employment services perceive their role and the

extent to which they embrace a social versus an individualised model. The scant literature available paints a complex picture of an ‘uneasy relationship’ (Stainton *et al.*, 2010). On the one hand, the social work profession is committed to promoting human rights and social justice, with its core theoretical principles emphasising the need for both micro- and macro-level interventions. On the other, scholars warn that the profession often retains an individualistic, curative notion of disability, whilst overlooking it as a category of oppression (James, 2021; Slayter *et al.*, 2022). These critics argue that compared to other social categories, the influence of socio-critical theorising on disability remains limited (Burghardt *et al.*, 2021). Indeed, studies on social workers’ practice often highlight their traditional roles, including gate-keeping based on individual biopsychological assessment, and assisting service users with a focus on self-esteem, stigma management and the development of new skills. These studies also evince a tendency to prioritise professionals’ judgment over service users’ choices (Rummery, 2018).

The Israel context

Like other welfare states, Israel faces a significant employment gap between individuals with and without disabilities. The former have substantially lower opportunities for paid employment, face a higher risk of earning less and are more likely to be employed in less secure and lower-status positions (Barlev *et al.*, 2021). Many of them, primarily those with developmental disabilities, often find themselves working in sheltered settings with very low income (Orbach *et al.*, n.d.).

Efforts to narrow this gap have gained momentum over the past two decades, partly due to the growing influence of the disability rights discourse and advocacy efforts. One of the most notable initiatives is the Equal Rights for People with Disabilities Law (1998), which includes an antidiscrimination article (Mor, 2012). Similarly to the ADA and UK Equality Act, the Israeli law prohibits employers from discriminating against jobseekers and employees based on disability and mandates (reasonable) workplace accommodations. The law also incorporates an affirmative action component, including a quota requirement for public employers, adding to a previous quota for private employers (Albin and Mor, 2018). In 2012, the government also ratified the UN Convention on the Right of Persons with Disabilities in 2012, which identified the rights of disabled people to work (Art. 27) and to rehabilitation services (Art. 26).

In addition to these rights-based initiatives, the Israeli government provides various occupational rehabilitation programmes. A key example of these supply-side initiatives is SE, assisting the individual on the route to the paid labour market by providing personalised plans, placement services

and on-the-job training and guidance. SE services are provided mainly by non-profits and funded largely by the government (Gal *et al.*, 2022).

Israeli social workers have historically taken a lead role in these services and schemes (Holler, 2019). As part of their responsibilities, they are mandated to develop personalised rehabilitation plans, frequently act as intermediaries between service users and the labour market and often hold managerial positions within these services. Additionally, they commonly serve in case management roles within community services that are closely connected to employment-related issues and services (Soffer, 2017).

In conclusion, whilst social workers play a pivotal role in delivering employment-related services, there remains a notable gap in our understanding of where they stand in the ongoing debate between the individualised and social models of disability. To bridge this gap, this article examines how Israeli social workers interpret their roles and the degree to which they align with either the social or individualised model of disability.

Method

Participants

We interviewed Israeli social workers selected through convenience sampling, which involved direct outreach to workers in occupational rehabilitation organisations. Snowball sampling was employed to recruit additional candidates. The final sample included twenty-three social workers (nineteen women; $M_{\text{age}} = 40.133$; $SD = 11.13$; range = 26–65). All worked in employment-related services: twenty-one in non-profits providing outsourced services to the government and two in public agencies. Their professional experience ranged from 3 to 30 years ($M = 11.41$). Six had an MSW with expertise in occupational rehabilitation, eight had taken courses on the subject, whilst the remaining nine had not received any specific training in it.

Data collection

Semi-structured interviews, lasting 60–90 minutes, were conducted in Hebrew by BSW students taking the first author's course on disability. The interviews were part of the final course assignment, and the first author provided the students with personal training and guidance throughout the data collection. An interview guide prepared by the authors included multiple employment-related topics, including job description (e.g., 'Describe your main activities'); barriers and facilitator of labour market participation (e.g., 'Describe in detail the process of including one of your service users in paid employment'); employment-related

practices (e.g., ‘Describe how you typically intervene in order to assist service users in employment-related issues’); level of interventions (e.g., ‘Describe the extent to which your interventions are focused on the individual, group, community or policy level’) and required policy changes (e.g., ‘If you were the Welfare Minister, what kind of changes would you suggest in the field?’). All interviews were audiotaped and transcribed.

Ethical considerations

Prior to data collection, ethical approval was obtained from the Ethics Committee of Sapir Academic College. The participants signed a consent form prior to the interview and were told they could stop the interview at any time. In addition, all identifying information was removed from the data and pseudonyms were used throughout.

Data analysis

Using MAXQDA software, the data were analysed thematically in the following phases (Braun and Clarke, 2006). First, both authors read and reread the textual data. Second, the first author employed initial open-hand coding using a bottom-up inductive approach. In practice, this included breaking the data into discrete units of meaning and coding each. Third, both authors discussed the initial categories and grouped them into several key topics. Fourth, the key topic of barriers to labour market participation was further analysed by both authors using the theoretical distinction between the individualised and social models of disability as a term of reference. We paid particular attention to two dimensions: how the participants perceived the source of the problem (impairment-related vs. social) and their preferred level of solution (changing individual or social aspects).

Trustworthiness

Our findings are presented in the form of selected anonymised interview excerpts and their interpretations. These quotes have been translated by a professional and approved by the authors. The authors have also held peer debriefings throughout the data analysis process to ensure the coherence and consistency of all themes and subthemes (Nowell *et al.*, 2017).

Findings

The participants pointed out several barriers hindering the inclusion of disabled people in the labour market. Analysing these barriers through

the lens of the individualised versus social model of disability showed them to be focused on individual attributes, either impairment- or personality-related. Similarly, when asked to describe successful cases, the participants often emphasised individual attributes. Whereas social barriers and facilitators were also identified, their role was perceived as marginal and less clear-cut.

'You have people with this profile ...': individual barriers

One of the almost obvious individual barriers was a person's impairment, with many participants describing how certain types of impairments prevent disabled people from meeting the standards of paid employment:

The mentally challenged, it's hard for them to get up in the morning [...] or they're preoccupied with invasive thoughts all day, so that they cannot concentrate on the work itself. [...] In the case of] psychotic individuals, this makes it very difficult for them to behave normally in terms of work, capacity, and meeting targets [...]. Blind persons cannot always be included, not all of them are digital [...]. Hearing impairment is a serious limitation; people with cognitive impairment with conduct disorders. (Nurit, f, 49)

Closely related to and often inseparable from the impairment was people's perceived functioning, seen by the participants as essential for finding and retaining a job. Reduced functioning due to impairment was associated with low productivity: 'Part of this population are currently unable to work [...]. You have people with this profile of low functional-occupational level [...]' (Tamar, f, 53).

Many individual barriers were directly linked not to impairment, but rather to personality, primarily lack of work-related soft skills and attitudes. These were framed as individual characteristics, including laziness, tardiness, and authority issues: 'I have a guy who very much wants supported employment, but has problems with authority. Technically, he can work, but if you cannot do what your employer tells you, you have a problem'. (Batya, f, 38)

Conversely, acquiring soft skills was perceived as essential for services users' inclusion in the competitive labour market: 'What helped him succeed was first of all his desire to work [...]. And thanks to this motivation and his really high occupational skills, he has been working there for over four months, and they're very-very pleased with him [...]' (Bracha, f, 30).

A central arena identified as giving rise to some of these personality barriers was the sheltered factories. Employees in these settings were often perceived as reluctant to take steps towards entering the labour market, partly due factors such as fear of uncertainty or failure, deficient soft skills or economic considerations. In this context, the sheltered factory,

where a substantial portion of the clients had been employed for many years, was seen as a negative incentive or ‘golden cage’:

I have a guy that I’ve been accompanying for over a year in the sheltered factory. He’s relatively young and keeps wanting to do this and that, but never actually gets into the process [...] no real desire to perform [...] I think there’s also some difficulty with the illness and its acceptance. (Oded, m, 34)

Besides highlighting the importance of soft skills, participants often underscored personality barriers that were not directly related to work or to any impairment. A notable example is hygiene, with many participants considering unpleasant body odours or sloppy appearance as a barrier. As Batya stated, ‘A person who stinks, nobody will want to employ him, and even if they do, this would make the environment flinch, so it’s also very important how they look’.

‘Employers that we call “friends”’: social barriers

Some social workers also addressed social barriers. A key focus was on employers’ attitudes and their reluctance to employ disabled people due to ignorance, stigma, fears or distrust.

Obviously, there are people who... are very afraid to employ people with disabilities, whether because they are sometimes deterred by the appearance, deterred by the disabilities, sometimes even before they get to know them. I think they’re extremely afraid to give an opportunity, because what if it turns out he’s not suitable [...] what if he gets hurt [...] how would it look if I fired a person with disability? (Lotem, f, 41)

Importantly, whereas some social workers did acknowledge employers’ reluctance as a key barrier, this was usually disconnected from their daily practices and often detached from the rest of the interview, which focused on personal characteristics and supply-side interventions. For example, when Tohar (f, 48) was asked about interventions with employers, she answered:

We need on the one hand to work with the person and on the other we also have this external work, to create some kind of social change in terms of the employers, their perceptions [...]. When I meet with the client at the entrance to the employer or in a café [...] I see his conduct [...] does he know the social codes? Can he speak appropriately? How does he dress for all sorts of occasions? How does he conduct himself in a new context?

The common demand-side intervention for addressing this social barrier was finding a ‘friendly employer’—someone willing to collaborate regularly with the rehabilitation agency. The practice was grounded in both a ‘business case’ approach, emphasising the advantages of hiring their clients,

and a ‘moral case’ approach, highlighting the ethical aspects of doing so. Similarly, successful cases of inclusion were often attributed to a ‘unique employer’, kind and willing to accommodate their clients’ needs.

What are the reasons for success?... First, she’s a very pleasant individual, they like her very much. In this case I also know the employer [...] a good man [...]. He agreed it would be until one o’clock at first, and that they’d then extend it gradually, until it became a fulltime job” (Batya).

Notably, none of our participants mentioned invoking more demanding demand side-interventions such as antidiscrimination legislation or the quota systems. In the very few cases these were brought up, participants usually framed them as ineffective and even counterproductive:

Although we are now able to find employers that we call ‘friends’ [...] who have a certain percentage they are willing to employ, there is some legislation that doesn’t work so well, and I think it’s very-very hard to force people through the law, and when you do force someone then eventually it looks the same’ (Ziva, f, 57).

Alongside individual employers’ reluctance to hire disabled people, a few participants identified the problem as stemming from structural labour market factors, such as normative expectations of productivity. For example, when asked about the disadvantages of paid work, Meitar (f, 39) said:

Not all my clients want to go to work. And for good reasons. First, the treatment—the capitalist labour market is very much based on productivity. [...] Now someone coping with mental issues is often very stressed, and cannot handle any more stress. He’s got enough anxieties on his mind, with no need for outside help...

Even when participants identified structural barriers, the identification was often blurred and both the problem and its solution were framed in individualistic terms. Namely, whilst the labour market was recognised as too competitive to meet service users’ needs, social workers kept focusing on their own inability to keep up:

[...] it didn’t work, mainly because she was very inflexible [...] willing to work only on certain hours and certain days. [...] there was also the difficulty of passing a work interview. If you’re sitting in the work interview with a coat and a hat and hands in your pockets than you communicate something that’s less... no matter how much we tried to tell her that, she didn’t quite manage to get the message (Nurit).

Discussion

In recent years, social work scholars have called upon social workers to challenge the traditional, individualised understanding of disability and

to take a leading role in advocating for the rights of disabled people and tackling barriers (Kim, 2010), including in the labour market (Hernandez *et al.*, 2009). In the Israeli context, the findings indicate that social workers still grapple with fully embracing this call for a paradigmatic shift. They focus on an individualised model of disability when discussing their clients' difficulties in securing and maintaining in paid employment. Additionally, whilst social explanations are also pointed out, these are often marginal and ambiguous.

To be sure, a person's impairments, functioning and personal characteristics may indeed affect their ability to secure and retain paid employment (Hendricks, 2010; Bell and Silverman, 2018). Similarly, to support disabled people in closing the employment gap, interventions that address these individual barriers are essential. Such supply-side interventions can facilitate job skill development and support job seekers in meeting employers' demands and market standards, often based on a (imaginary) vision of the 'average' worker.

However, when concentrating on individual barriers, social workers may find themselves falling short of their professional aspirations (Khalif *et al.*, 2020). Such an individualistic orientation can also inadvertently shift blame onto disabled individuals, perpetuating stigmatising and ableist attitudes. Two findings from the literature are particularly relevant in this context. First, studies have shown that the disabled employees keep earning less, even after accounting for their limited (observed and unobserved) productivity that stems from differences in education, training or functional limitations (Baldwin and Choe, 2014; Kruse *et al.*, 2018). This underscores a sobering reality: impairment-related reduced productivity, often itself a consequence of discrimination and constrained opportunities, cannot fully account for the consistently lower earnings of disabled employees. Rather, it points to the enduring presence of discrimination.

The second finding pertains to the impact of the changing organisation of work on disabled people (Foster and Wass, 2013; Morris, 2019). Consider the shift towards a service-driven economy, which requires individuals' minds to 'function like machines' (Morris, 2019, p. 255). Such post-Fordist labour-market changes, driving many low-skilled employees to 'customer-facing' jobs, require interpersonal skills and investment in both emotional (Hochschild, 2019), and aesthetic labour (Van den Berg and Arts, 2019). According to Morris (2009), this transition may explain the poor outcomes of people with learning disabilities and long-term mental health conditions in the UK labour market.

In light of these findings, it becomes clear that when social workers prioritise individual-oriented interventions over considering the broader social context, they not only face challenges in substantially improving the lives of their service users but may also perpetuate their psycho-emotional disablism (Reeve, 2019). Note moreover that disabled job-seekers and employees often evaluate themselves through an ableist lens,

acknowledging their perceived ‘failure’ to meet standards of speed, motivation and emotional and aesthetic labour. These self-perceptions can contribute to their sense of being problematic workers. According to [Wilton \(2004\)](#) such sentiments make it difficult for disabled workers to shape valued subjectivities in the context of paid work and may ‘also impact on the extent to which workers may be willing to pursue requests for accommodation’ (p. 429).

Although to a much lesser degree, our participants also addressed social barriers. This was done mainly by persuading individual employers to hire their clients. Such a ‘moral’ or ‘business’ case approach, aimed at addressing employers’ ethics and feelings of responsibility or at presenting the hiring as a wise business decision, can increase employers’ motivation and commitment and its use is indeed valuable ([Burgess et al., 2009](#)).

Nevertheless, as [Frøyland et al. \(2019\)](#) suggest, these ‘enabling’ demand measures often ‘fail to deliver what they promise, in particular when it comes to disabled individuals’ (p. 317). Frequently, they run the risk of becoming mere ‘window-dressing’, symbolic acts decoupled from actual organisational and recruitment practice. Thus, by choosing not to utilise the protection provided by the Israeli antidiscrimination law, social workers may give up on an important tool. Moreover, since effectively utilising this legislation requires strong self-advocacy skill, without the support of social workers, service users might also find themselves having to give up on this tool ([Bean and Krcek, 2012](#)). No less importantly, the quality and scope of protection provided by antidiscrimination laws hinge on legal interpretations, established in individual cases brought before the courts. Hence, by avoiding the use of law, social workers not only encounter difficulties in securing remedies for their specific clients but also struggle to take part in improving the law and increasing its transformative potential for all disabled individuals.

Crucially, using legal tools need not involve going to court or entering into a contentious relationship with employers. Instead, these tools can be integrated into informal dialogues with employers, forming part of the persuasion process. In this sense, both enabling and demanding demand-side measures can be used to enhance effectiveness. For example, social workers can draw employers’ attention to legal requirements, offer guidance on the necessary steps for compliance and even assist them in envisioning accessible workplace arrangements. Note that unlike the USA, for example, Israel provides employers with funding and various benefits (such as training) in order to support them in accommodating disabled employees. Over the years, only a limited number of employers have taken advantage of these options, highlighting the crucial role social workers can play in this regard. Taken together, these examples show that raising employers’ awareness of the law can act as a powerful lever to convince them not only to be more ‘friendly’ towards disabled people,

but also to institute more enduring, systemic changes within their organisation.

A key question arising from these findings pertains to why, despite the profession's profound commitment to social justice and to ecological interventions, as well as repeated calls to embrace a disability rights vision, an individualised, supply-side approach remains the primary and often default approach, particularly in the labour context. One possible explanation can be found in social work education and training. In Israel, as in many other countries (Ogden *et al.*, 2017), accredited social work programmes tend not to take disability seriously, with most including only limited disability-specific courses. This is particularly so when it comes to employment. In our sample, nine of the participants reported that they had not received any dedicated training in employment or rehabilitation.

Most importantly, when disability is included in the curriculum, it is usually taught from an individualised perspective (Kim and Sellmaier, 2020). Bean and Krcek (2012) found, for example, that amongst all courses offered by American schools of social work, only one mentioned the ADA in the course description. The marginal place of disability and the dominance of the individualised model become even more salient in field placement (Fuld, 2020).

Our findings align with other studies (Gadot and Pitowsky-Nave, 2023) that demonstrate how, even when social workers perceive employment barriers as due to policy-level issues, their interventions often remain individualised. This theory-practice gap suggests another training-related deficit: lack of skills and knowledge on how to implement demand-side interventions. Various studies have shown this to be a key barrier in engaging in macro-level interventions (e.g., Sabag and Levin, 2023). Relatedly, social workers often hesitate to engage in policy-related interventions, especially those involving legal frameworks, due to perceived inaccessibility or a lack of confidence in their knowledge and skills (Weiss-Gal *et al.*, 2020).

Finally, another key factor is the organisational context. Most social workers are employed by private non-profits providing outsourced services for the government. These agencies, operating in a competitive, market-based environment, are predominantly assessed and funded based on their capacity to provide concrete individual placements. Social workers operating within such a new-public-management regime (Banks, 2011) might find themselves constrained by strict time and cost limitations, with their primary duty being to facilitate individual placements. These constraints, which prioritise measurable, evidence-based, market-oriented targets (Shdaimah and Strier, 2020), leave social workers with little leeway to engage in demand-side interventions, particularly if those do not directly, overtly and immediately benefit their own clients. The organisational context's impact has also been highlighted in studies

examining the barriers social workers face when implementing macro-level interventions (Ferguson, 2007; Gal and Weiss-Gal, 2015; Strier and Feldman, 2018; Zelnick and Abramovitz, 2020). These studies underscore how the marketisation and managerialism of social services have created a dominant organisational culture and funding mechanisms that emphasise individualised practices and limit the scope and nature of more critical and macro-level interventions.

Limitations and implications for research and practice

This study had several limitations. First, whilst it suggested several explanations for social workers' inclination towards individualised practice, due to its qualitative, explorative nature, these explanations could not be systematically examined, suggesting a direction for future study. Second, as our findings were based on social workers' perspectives, an examination of their services users' perspective and experience would also be highly relevant.

Our findings point to promising avenues for future research. First, there is a need for systematic analysis of the diverse individual, organisational and socio-cultural factors that influence the adoption of a social model of disability by social workers. Second, further exploration is required to gain insights into effective and innovative methods for seamlessly integrating demanding demand-side interventions into informal employer dialogues. This research should also assess the extent to which these interventions not only foster a 'friendlier' attitude towards disabled employees but also lead to lasting, systemic changes within organisations.

Practically, several steps are needed to better align social workers with a paradigmatic shift towards the social model of disability. First, social work training should incorporate socio-critical approaches to disability. This should include a particular focus on understanding how various social, cultural, environmental and economic barriers hinder the inclusion of disabled people in the labour market, as well as how to address these barriers in daily practice. The latter should include knowledge on legal remedies. Finally, as studies on social workers' critical and macro-level practices have demonstrated (e.g., Ferguson, 2007; Gal and Weiss-Gal, 2015; Strier and Feldman, 2018; Zelnick and Abramovitz, 2020), to facilitate the lasting implementation of social understanding and knowledge, a transformation in social workers' broader organisational context is required. This includes the need to challenge the current, rigid, new-public-management regime, and to establish a state-funding mechanism which encourages social workers to expand their roles beyond concrete, measurable individual placement and consulting services, encompassing community- and policy-level interventions. It also involves nurturing an organisational culture (e.g., role description, guidance and involvement

of service-users) that supports social workers' engagement in demand-side interventions.

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