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Welfare: Theoretical and Analytical Paradigms

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Contents

Acronyms	ii
Abstract.....	iii
Introduction	1
Key Concepts.....	1
Context: From Welfare State to Neoliberalism	2
Paradigms of Welfare and their Ideas on Universalism and Targeting.....	3
“Worlds of Welfare”: Profiles, Modifications and Criticisms	6
Responding to Crisis: Ideas of Social Investment.....	11
Current Trends.....	17
Relevance of These Issues for Emerging Economies.....	18
Arguments for targeting.....	20
Arguments against targeting	21
Arguments for universalism	21
Arguments against universalism.....	22
The Influence of Ideas, Interests and Institutions.....	23
Issues and Challenges for Emerging Economies.....	26
Policy Options	28
Conclusion	31
Appendix: Notes on Social Security Provision	33
References	38

Acronyms

ALMP	Active labour market programme
BRICS	Brazil, Russia, India, China and South Africa
CCT	Conditional cash transfer
CEE	Central and Eastern European countries
EITC	Earned Income Tax Credit
EU	European Union
GDP	Gross domestic product
GNP	Gross national product
ILO	International Labour Organization
IMF	International Monetary Fund
ISSA	International Social Security Association
MI	Minimum income
NGO	Non-governmental organization
OAP	Old-age pensioner
OECD	Organisation of Economic Co-operation and Development
PAYG	Pay-as-you-go scheme
RMI	Revenu minimum d'insertion
SSI	Supplemental Security Income
TTIP	Transatlantic Trade and Investment Partnership
UN	United Nations
UNICEF	United Nations Children's Fund
US	United States
WHO	World Health Organization
WTO	World Trade Organization

Abstract

The paper reviews paradigms of welfare, principally the industrialization thesis, the three worlds of welfare and social investment states and shows how these link to wider public policies and underlying assumptions. It locates explanations in historical and contemporary contexts. The literature of social policy is seen to be both descriptive and prescriptive and to have developed in response to key crises. The paper considers arguments for and against universalism and targeting, and shows how these concepts fit within theories of welfare. It considers lessons from this review for discussions of how to develop social security and health systems in emerging economies and indicates the value of systems that include all or the vast majority of the population, organized around principles of collective social insurance and recognize the value of caring work. Proposals have, however, to be set in economic systems with fair, living wages and progressive income tax structures—goals which run counter to the current trajectory of financial capitalism.

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Introduction

This paper aims to set out a framework for the debate on how best to develop health and social security systems in future, looking at concepts of universalism and targeting and reviewing the main paradigms of welfare states. It discusses the assumptions, arguments and policy implications related to universalism and/or targeting. Key questions considered are:

- What are the underlying assumptions related to universalism and targeting in these diverse paradigms?
- What are the arguments for universalism or targeting in these paradigms?
- What are the policy implications of these paradigms?
- What issues should be considered by policy-makers in emerging economies aspiring to expand health and social security coverage in terms of population, the level of benefits, and scope?

Principles of universal or selective/targeted social provision have long been central to discussions of the development of the welfare state (Anderson and Ytrehus 2012). While these concepts are often discussed as issues of social philosophy, it is important to understand why and how they have been promoted and implemented and with what effects: to do this, it is necessary to place these discussions in their historical and comparative context. First, however, we need to review the key concepts around which theories and analyses have revolved.

Key Concepts

Welfare was commonly used from the 14th Century to indicate happiness or prosperity. A subsidiary meaning was of merry-making. The extended sense of welfare as an object of organised care or provision came in in the 20th Century. The welfare state in distinction from the warfare state was first named in 1939 (Williams 1985:281).

A ‘*welfare state*’ is a state in which organized power is deliberately used (through politics and administration) in an effort to modify the play of market forces in at least three directions—first, by guaranteeing individuals and families a minimum income irrespective of the market value of their work or their property; second, by narrowing the extent of insecurity by enabling individuals and families to meet certain ‘social contingencies’ (for example, sickness, old age and unemployment) which lead otherwise to individual and family crises; and third, by ensuring that all citizens without distinction of status or class are offered the best standards available in relation to a certain agreed range of social services (Briggs 1961: 288).

Three policy domains are central to the welfare state—health care, pensions and labour market policy: “the lion’s share of social expenditure in all of the affluent democracies goes to two areas, health care and pensions” (Pierson 2001a:11). The welfare state “is generally taken to cover those aspects of government policy designed to protect against particular risks shared by broad segments of society” (Pierson 2011b:420).

Richard Titmuss, seen by many as the founder of the discipline of social policy, pointed out that to equate the welfare state only with visible state provision is misleading, and he drew attention to the social division of welfare, noting three systems of welfare: social or public; fiscal; and occupational. The latter two tend to be regressive, favouring the middle class. Debates today still focus mainly on the most visible aspects of welfare. He also

warned against over-simplifying the distinction between *universal* and *selective (or targeted)* services. These have many forms, he observed, and selective services can play a role within a universalistic system (Smith and Titmuss 1987). He outlined three models of social policy: the residual welfare model; the industrial achievement-performance model; and the institutional redistributive model (Titmuss 1974).

T.H. Marshall distinguished between universal programmes that guarantee a social *minimum* and those that strive to provide a social optimum (Marshall 1965:91–92). Targeting, by contrast, is when the scope of beneficiaries is more restrictive. More recently, Mkandawire noted that under universalism, the entire population is the beneficiary of social benefits as a basic right, while, under targeting, eligibility for social benefits involves some kind of means-testing to determine the “truly deserving”. However, he pointed out, policy regimes are hardly ever purely universal or purely based on targeting—most are hybrids (Mkandawire 2005).

Universal services do not stigmatize: they are available and accessible without involving any loss of dignity or self-respect. They can be preventative if used by all the population and delivered through socially approved channels. A universalist system involves a comprehensive set of services, social security, education, personal social services, health care and housing. Some additional selective, specialist services may still be required to meet special needs or respond to the exclusion of some groups from services which ideally should be available to all (Anderson and Ytrehus 2012).

Context: From Welfare State to Neoliberalism

The nineteenth and twentieth centuries witnessed major transformations of economic systems around the world. The first was the creation of capitalist markets in the Western hemisphere. The second was the transition from capitalism to socialism in several countries. The third was the transition in the reverse direction: from centrally planned, command systems back to market-based economies. The new globalization of business attached to an explosive expansion of information technologies (ITs) and the rapid IT-based industrialization of the Asian economies may constitute a fourth great transformation that will change the economic order of the globe (Kangas and Palme 2005:1).

The historical development of the welfare state is one of both continuity and change. Path dependence is evident but major policy shifts have also occurred in response to crises. There was a general rise in public and social expenditure over time in advanced societies with benefits being written into law. The welfare state paradigm fitted with the age of

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