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## The Spanish development of Southern welfare

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### Introduction

In Spain, welfare has historically incorporated some of the most characteristic features of the continental 'conservative corporatist' model of social policy (Esping-Andersen, 1990). In the last two decades, an incrementalist pattern has developed concerning welfare services and income policies alongside some inherited corporatist practices --despotic and democratic-- from both late Francoism and the transitional period to democracy (1976-79), respectively.

Spain has reconstructed a medium-size system of social protection as compared to the countries of the European Union. At present the Spanish Welfare State represents a fundamental structure for both social reproduction and political legitimisation<sup>[1]</sup>. Since its accession to the European Community (1986), Spain has followed a pattern of convergence in welfare of a three-fold nature: a universalisation of social entitlements (education, health, pensions); a confluence of welfare spending to the median of its European partners; and a diversification in the provision of social services by private and subsidised organisations.

Thus, the Spanish Welfare State can be labelled as a *via media* with respect to other existing welfare systems (Moreno & Sarasa, 1992, 1993). Indeed, the welfare system in Spain incorporates elements of both Bismarckian and Beveridgean traditions, or rather between bread-winner 'continental' and citizenship-centred 'liberal' models. It also represents a middle way of de-commodification and gendering, and of universal and means-tested access to services and benefits. Policies carried out according to targeting criteria have had a 'ripple effect' upon worse-off categories expanding the 'grey zones' between both social insurance and welfare assistance realms.

In Spain, liberalisation in the provision of welfare services is noticeable in a certain extension of free-market morals and, thus, in the proliferation of 'non-profit' -but characteristically subsidised-NGOs, and the reinforcement of the process of welfare privatisation. However, a trend away from 'residualism' and a parallel growth of institutional 'stateness', or state penetration of the welfare sphere (Flora, 1986/87; Kuhnle, 1997), can be also detected. In fact some reforms of universalisation (education, health pensions) have been put into effect in recent years encompassing some basic entitlements with traditional income related programmes.

### The South European model of welfare

In recent times, a distinct model of South European welfare (Greece, Italy, Portugal and Spain) has been contended (Ferrera, 1996a/b; Moreno, 1996). The discussion revolves around on whether the Mediterranean type of welfare is constituted by a family of

nations' (Castles, 1993) lagging behind those of the 'continental' model to which they belong (Katrourgalos, 1996), or else it is a mere 'Latin rim' characterised by a rudimentary level of social provision and institutional development (Leibfried, 1992; Langan & Ostner, 1991; Gough, 1996).

Further comparative research is needed in order to substantiate those claims for a distinct Mediterranean welfare regime. Unlike the Scandinavian or Anglo-Saxon typologies, cross-national studies including Greece, Italy, Portugal and Spain are lacking. A good few issues deserve a closer examination which could help us to define the overall picture of a Latin type of welfare. However, there is an analytical common ground to be explored.

The four South European countries share analogies regarding historical backgrounds, value-systems, and institutional peculiarities. They all had past experiences of authoritarian and dictatorial rule (for longer periods in the case of Portugal and Spain), and have suffered from economic and industrial 'delays' in the processes of modernisation (except for early-industrialised areas in Italy and Spain) (Giner, 1995). The religious factor has had a structuring role in all four countries, but the role of the Church as main organiser of social protection has diminished. This feature seems to correspond with a higher degree of secularisation in the social practices of Southern Europe. The impact of europeanisation and globalisation have brought about, respectively, increasing incentives to economic convergence with Northern and Central Europe (Economic and Monetary Union), and world-trade pressures to restrict social programmes (social dumping from less-developed countries). In broad terms similar social-demographic trends and macro-economic constraints can be observed in all four South European countries.

As concerns the cultural-axiological dimension of welfare development, a self-perception of differentiated needs and lifestyles is observable (intra-familial pooling of resources, home ownership, heterogeneity of social reproduction), with a compelling household solidarity and a pre-eminence of values of family inclusion and life-cycle redistribution (gift mechanisms, processes of age emancipation, proliferation of family companies and jobs). Moreover, cultural choices and practices have structured their civil societies in a characteristic mode (social networking, patronage, clientelism, group predation).

On analysing politico-institutional development the pivotal role of the family in social protection cannot be over-emphasised. In Southern Europe the welfare state is to a large extent the Mediterranean welfare family. Intra-familial transfers are both material and immaterial. Concerning the latter, the involvement of women to both elderly and children care is crucial. However, the increasing participation of female workers in the labour force, coupled with new burdens for family formation and expansion, raise big questions as whether Mediterranean welfare can survive as we know it at present.

Also characteristic of Southern European labour markets is an apparent cleavage between 'insiders' (hyper-protected core workforce), 'peripheral' (in-between gainfully employed) and 'outsiders' (precarious, 'left-outs', and 'junk' labourers). There are fragmented systems of income guarantees and wide inter-generation disparities in cash benefits (e.g. overprotection of the elderly in Greece and Italy).

The informal 'tax-free' economies in Southern Europe are large (estimates of the 'hidden' sector range from 15 to 25 per cent of GDP). This translates into an uneven distribution of financial burdens across the various occupational groups. Needy and honest contributors are penalised and *vice versa*. When targeting social policies to groups facing poverty and exclusion (Abrahamson, 1997), the 'Matthew Effect' is also perceived as providing disproportionate advantages for those with information resources over those who are entitled to benefits but lack of know-how and/or patronage network[2].

Both Mediterranean welfare mix and the gender/family/work nexus are adaptable and complementary. These practices often translate into institutional particularism and low efficiency in service provision. A greater number in the production/provision of social services are carried out by publicly subsidised organisations rather than subsidiary private and/or voluntary associations. In all four South European countries there are limitations to comprehensive reforms (implementation of a centrally run safety-net). However new approaches to welfare re-construction are gradually replacing traditional voluntaristic attitudes deployed by both powerful subcultures of the political Left (Socialists and Communists).

In the case of Spain, the most relevant aspect of its welfare development is constituted by the effects of the deep process of decentralisation both at the level of planning and policy implementation. The institutional outcome of the interplay between central, regional, and local governments will respond to the very nature of a contractually open process of power accommodation. Institutional uncertainty goes hand in hand with a gradual federalisation of politics in Spain (Moreno, 1997a).

### **Social expenditure trends**

Throughout the 1970s and 1980s, the growth of public expenditure in Spain was similar to that of the OECD countries during the 1960s and 1970s. Furthermore, in none of the OECD countries has public spending increased as much as in Spain since 1975. Public spending grew from 26 per cent of the GDP in 1975 to over 47 per cent in 1995. Table 1 reproduces data concerning total public expenditure as a percentage share of GDP during 1980-92. Note that in this period, all South European countries more than doubled the percentage growth for the EU-12. Increases in Greece, Italy, Portugal and Spain reached 16.2 per cent, 11.3 per cent, 20.2 per cent, and 13.1 per cent, respectively. These rates compare to the mean 5.4 per cent for all EU countries. Already in the second half of the 1980s, the Spanish public expenditure per capita, measured in relative purchasing units, was similar to equivalent mean figures in Germany, Italy, France, and the United Kingdom.

During the period of the *PSOE* Governments (1982-1996), the growth in public spending was aimed to be managed by: (a) A restraining in the instrumentalisation of social policies as the means of expanding the economy; (b) A re-adjustment of the proportion of public, private, and associative sectors in running the economic activities, and (c), An emphasis on efficiency ethics so that public managers and decision-makers could maximise the use of public moneys (Borrell, 1988). All things considered, Spain confronted a period of constant increases in public expenditure at a higher level --in relative terms-- than most of the European countries. This was the result of providing the means to cover new and costly social programmes (universalisation of education, public health and pensions). But, above all, it was aimed at accomplishing the objective of bringing economic modernisation in line with the rest of the EEC/EU countries. Public finances were greatly conditioned by the substantial governmental intervention in the economy through subsidies for purposes of industrial re-structuring and for the development of a comprehensive programme of public works and infrastructure (highways, railway, telecommunications).

In broad terms, the policies of modernisation implemented by the Socialist Governments reflected the desire for europeanisation expressed by the Spanish population at large. Since the accession of Spain to the EEC (1985) the general feeling in the country has invariably been one of convergence with the rest of its European partners. This social consensus<sup>[3]</sup> has remained a factor of paramount importance in Spanish politics and greatly explains the legitimacy of the often harsh economic measures carried out by the government in the last years.

**Table 1: Total Public Expenditure in EU countries (1980-86-92)**  
(as percentage of GDP)

	<b>1980</b>	<b>1986</b>	<b>1992</b>
Austria	48.1	51.6	50.2
Belgium	51.9	54.1	59.2
Denmark	56.2	55.7	59.2
Finland	35.5	40.7	51.7
France	46.1	51.3	52.0
Germany	47.9	46.4	49.2
Ireland	50.5	54.1	43.9
Netherlands	54.8	56.6	54.7
Sweden	60.1	61.6	67.3
United Kingdom	42.9	42.5	44.1
<b>Total Europe</b>	<b>45.4</b>	<b>48.6</b>	<b>50.7</b>
Greece	33.2	47.7	48.3
Italy	41.9	50.7	53.2
Portugal	35.9	44.0	46.1
Spain	32.0	40.7	45.1

**Source:** OECD.

Since the transitional period to democracy (1975-1979) the growth of public expenditure in Spain has not been covered adequately by equivalent increases accrued by the general tax collection. This has provoked a relatively high level of public debt, a pattern of fiscal crisis common to various degrees in UE countries. However, Spain ranked fifth in 1993 as the EU-12 member state with a lowest ratio of public debt: 55.9 per cent as a percentage of GDP. This figure compares with minimum rates of 6.8 per cent and 43.9 in the cases of Luxembourg and France, and a maximum of 145.2 per cent in Greece (the percentages for Italy and Portugal were 118.3 and 66.6 per cent, respectively). Table 2 reproduces figures of public debt and deficits in EU countries[4].

**Table 2: Public debts and deficits in EU-12 countries**  
(as percentage of GDP)

	<b>Gross Government Debt</b>		<b>Net borrowing (-)</b>	
	<i>1980</i>	<i>1993</i>	<i>% change</i>	<i>Average 1980-92</i>
Belgium	78.8	142.2	63.4	-8.8
Denmark	39.9	80.4	40.5	-2.5
France	20.1	43.9	23.8	-2.3
Germany	31.8	48.9	17.1	-2.2
Ireland	70.8	99.0	28.2	-7.7
Luxembourg	13.8	6.8	7.0	2.7
Netherlands	47.6	81.2	33.6	-4.9
United Kingdom	54.3	48.2	-6.1	-2.7
<b>EU12</b>	<b>39.0</b>	<b>66.0</b>	<b>27.0</b>	<b>-4.4</b>
Greece	28.8	145.2	116.4	-11.9

Italy	57.8	118.3	60.5	-10.7
Portugal	37.2	66.6	29.4	-7.4
Spain	17.5	55.9	38.4	-4.4

**Source:** Ferrera (1996a: Table 7).

The annual rate of growth of the GDP between 1970-75 was 5.2 per cent while the social expenditure increased 9.7 per cent. In the period 1975-80 social expenses grew annually at 8.9 per cent whereas the GDP did at a rate of 1.8 per cent. Figures on social spending for the period 1980-92 are reproduced in Table 3 (measurement criteria by Eurostat). Note that all South European countries increased their social expenditure at a higher rate than the mean figure of 2.7 per cent for EU-12: 7.1 per cent, Greece; 6.2 per cent, Italy; 2.9; Portugal; and 4.4 per cent, Spain.

**Table 3: Social Expenditure in the EU countries**  
(as percentage of GDP)

	1980	1986	1992	s (1980-92)
Belgium	28.0	29.4	27.8	-0.2
Denmark	28.7	26.7	31.4	2.7
France	25.4	28.5	29.2	3.8
Germany	28.7	28.1	26.6*	-2.1
Ireland	21.6	24.1	21.6	0.0
Luxembourg	26.5	24.8	28.0	1.5
Netherlands	30.8	30.9	33.0	2.2
United Kingdom	21.5	24.3	27.2	5.7
<b>EU 12</b>	<b>24.4</b>	<b>26.0</b>	<b>27.1</b>	<b>2.7</b>
Greece	12.2	19.4	19.3	7.1
Italy	19.4	22.4	25.6	6.2
Portugal	14.7	16.3	17.6	2.9
Spain	18.1	19.5	22.5	4.4

\* 1991. **Source:** Eurostat, 1993.

According to OECD criteria, in 1983 social spending already reached 24 per cent of the Spanish GDP. However, and due to a different structure of expenditure allocation, the coverage of those expenses related to social policy programmes (education, housing, and pensions) were smaller than in the countries above referred to. Both bureaucracy and financial transfers granted mainly to mining and agricultural sectors were higher compared to equivalent figures in core European countries (Lagares, 1988).

Recently, as has happened in other advanced industrial countries, bureaucratic 'muddling through' in Spain has been responsible to a considerable degree for the incrementalist nature of public expenditure growth. Nevertheless, the various political inputs carried out by successive democratic governments since the demise of Francoism have greatly determined the changing allocation of funds within the budgetary structure of Spanish public expenditure.

In the period 1980-92, social spending increased 4.37 per cent its share in the Spanish GDP. Table 4 reproduces data regarding the functional breakdown of social expenditure composite in percentages of the GDP. The entries corresponding to sickness, old-age and unemployment add up to three quarters of all the increases in social spending. In fact

expenses for these three functions comprised 71.3 per cent of the total. Maternity and family expenses decreased notably. This pattern seems to reinforce the interpretation of households as fundamental components of the Spanish welfare state and subject to multiple and varied demands.

**Table 4: Distribution of main categories of social protection (1980-86-92)**  
(by categories and as percentage of both GDP and social expenditure)

	1980		1986		1992	
	% GDP	% SE	% GDP	% SE	% GDP	% SE
Sickness	4.69	25.60	4.54	22.92	5.59	24.65
Disability	1.37	7.48	1.59	8.04	1.84	8.12
W. Accidents	0.44	2.41	0.40	2.01	0.51	2.26
Old Age	5.42	29.59	6.47	32.66	6.71	29.58
Survivors	1.80	9.85	1.89	9.53	2.26	9.97
Maternity	0.25	1.36	0.21	1.05	0.20	0.88
Family	0.52	2.85	0.24	1.21	0.20	0.88
Emp. Promo.	0.11	0.61	0.16	0.82	0.21	0.91
Unemploy.	2.73	14.91	3.23	16.29	3.87	17.05
Housing	0.00	----	0.03	0.15	0.16	0.72
Administr.	0.67	3.65	0.80	4.06	0.86	3.79
Miscellan.	0.31	1.70	0.25	1.26	0.27	1.21
<b>Total</b>	<b>18.31</b>	<b>100.00</b>	<b>19.80</b>	<b>100.00</b>	<b>22.68</b>	<b>100.00</b>

**Source:** Rodríguez Cabrero, 1994 (Tables 9.46/9.47).

As in most continental Europe, social welfare in Spain has been traditionally designed to secure 'income maintenance' to those citizens who have made contributions to the social security system during their working life. The financing of social protection spending is met in its larger part by both employers' and employees' contributions (see Table 5 for figures regarding EU-12). However, a significant shift has been taken place in recent years with a gradual transferring of public moneys from the national budget to the social security accounts. This is particularly relevant as regards pensions (non-contributory) and health care. These are two of the main reforms in the Spanish Welfare State on which we focus our attention in the next section.

**Table 5: Contributions as a percentage of social protection spending (1992)**

	Employers' contributions	Employees' contributions	Total contributions
Belgium	35	27	62
Denmark	7	5	12
France	51	29	88
Germany	40	30	70
Ireland	23	15	38
Luxembourg	30	22	52
Netherlands	20	42	62
United Kingdom	26	16	42
Greece*	47	27	74
Italy	51	16	67
Portugal	42	21	63

Spain

53

17

70

\* 1991 statistics. **Source:** Eurostat.

## Reforms and future scenarios

The impact that education reforms have had in the aggregate of social welfare is to be underlined. Fifteen years after the first changes introduced in educational public system their re-distributive effects are evident. To a degree still to be assessed, such an impact has considerably affected the mechanisms of social reproduction ingrained in a liberal-meritocratic ideology. The extension of means-tested schemes of grants has also reinforced social re-distribution.

The universalisation of the educational system has translated into education coverage of 100 per cent of the population in the 4-15-year age group[5]. In 1992, educational coverage of women was higher for age groups ranging from 16 to 29 years. It is particularly worth noting that 63 per cent women were receiving formal education as compared to 53 per cent of men. Furthermore, there was a difference of over 8 percentage points concerning the 20-24 year-olds (see Table 6 for educational coverage by gender and age groups).

**Table 6: Educational coverage by gender and age groups (1980-92)**

	1980			1992		
	Women	Men	Both	Women	Men	Both
<b>16-19</b>	44.8	42.9	43.7	63.3	52.8	57.9
<b>20-24</b>	16.9	15.3	16.0	34.9	26.5	30.6
<b>25-29</b>	1.9	3.5	2.7	11.3	10.4	10.8

**Source:** Spanish 'Active Population Survey'.

The four areas of our subsequent analyses carry the main bulk of social expenditure: 'Pensions', 'Health care', 'Unemployment and employment promotion', and 'Social assistance and targeting'. In Table 7 a selection of five categories related to social protection spending in the EU-12 countries is reproduced. As far as the South European countries is concerned, a look at these data reveals two main deviations: Social expenses under 'Old-age and survivors' in Italy (15.4 per cent) and under 'Unemployment benefits' in Spain (4.8 per cent) are disproportionately higher than to the EU-12 mean figures. In fact those percentages are highest of all EU-12 countries considered. These findings tell us a great deal about the most pressing challenges facing both Italy and Spain with relation to welfare financing. Now, let us turn to examine the four areas above mentioned.

**Table 7: Main categories of social protection expenditure in EU-12 (1993)**  
(as percentage of GDP)

	Old age & survivors	Sickness	Unemploy. benefits	Disability	Family
Belgium	11.9	6.0	2.6	2.9	1.9
Denmark	11.0	6.0	4.1	3.0	3.3
France	12.7	7.7	2.0	2.2	2.0
Germany	12.1	8.0	2.0	3.5	2.2
Ireland	5.7	6.1	3.0	1.5	2.2
Luxembourg	11.2	5.9	0.2	3.5	2.7
Netherlands	11.9	7.1	2.9	7.2	1.6
U. Kingdom	10.8	5.1	1.6	3.1	2.6
<b>EU 12</b>	<b>11.9</b>	<b>6.5</b>	<b>1.9</b>	<b>2.4</b>	<b>1.8</b>



Greece	10.2	2.3	0.5	1.5	0.1
Italy	15.4	5.4	0.5	2.2	0.8
Portugal	7.0	5.3	0.8	2.4	0.8
Spain	9.4	5.9	4.8	2.3	0.2

**Source:** European Commission, 1995.

### *Pensions*

As a consequence of the mobilisation led by the Spanish Trade Unions, which culminated in the General Strike of 14<sup>th</sup> December, 1988, large increases in pensions -as well as unemployment benefits-took place subsequently. Subsequently, there was a reinforcement of the pattern of expenditure growth since the beginning of the 1980s. With the implementation of the 'Non-contributory Pensions Act', in 1990, coverage for both old-age (over 65 years) and disability pensions (over 65 per cent for citizens between 18 and 65 years) became universal[6]. Note that in the period 1980-92, the number of pensioners rose by 2,6 million (2,1, contributory, and 0,5, non-contributory), from 6,6 to 7,2 million, and the total expenditure increased from 5.9 per cent (5.8 per cent, contributory, and 0.1 per cent, non-contributory) to 8.6 per cent (8.1 per cent, contributory, and 0.5, non-contributory) as percentage of the GDP. Average Social Security pension benefits increased from 66.5 per cent of the minimum salary in 1980 to 93.3 per cent in 1992. Non-contributory (social assistance) pensions were 53.3 per cent of the minimum salary in 1992[7] (Cruz Roche, 1994). Table 8 reflects the evolution in the number of pensions in Spain for the period 1980-92.

**Table 8: Evolution in the number of pensions in Spain (1980-92)**  
(in thousands)

	<b>1980</b>	<b>1986</b>	<b>1992</b>
Old Age	2,190	2,536	3,009
Disability	1,024	1,490	1,629
Widowed	1,027	1,338	1,678
Orphanage	138	158	166
Non-contributory	359	362	717
Miscellaneous	19	24	28
<b>Total</b>	<b>4,757</b>	<b>5,908</b>	<b>7,227</b>

**Source:** Spanish Ministry of Labour and Social Security.

Spain has gone through significant demographic changes in recent times. Population is nearly 40 million with a mere annual growth rate of 0.2 per cent since the beginning of the 1980s. The main reason for such sluggish increase of the population is the decline of fertility rates since the 1970s: 3.0 per cent in 1965; 2.8 per cent in 1970, 2.1 per cent in 1980 (a percentage lower than the required to ensure generation replacement), and 1.23 in 1992 (the lowest in Europe). In parallel, the proportion of the population aged 65 or over grew from 10.9 per cent of the total in 1980 to 13.2 per cent by 1990[8].

Italy and Greece are well above the EU mean percentage of 62.0 per cent for the *per capita* average old-age pension (77.6 per cent and 78.8 per cent in 1991, respectively). This is not the case of Spain and Portugal (47.3 per cent and 42.1 per cent, respectively) with a more balanced inter-generation distribution of resources[9] (see Table 9 for 'intensity rates' of old-age pensions in Europe, those being defined as average benefits per head as percentage of the GDP). However, a general concern about the 'uncontrolled' increase of pensions with relation to the GDP growth was behind the modification of the criteria in the annual re-



valuing of benefits (forecast rate instead of past inflation rate), and a tightening of requirements for contributory pensions.

**Table 9: Intensity of old age protection in the EU-12 countries**  
(average pension as percentage of GDP per head)

	1980	1993
Belgium	52.8	57.4
Denmark	68.4	68.0
France	60.0	72.8
Germany	51.3	51.2
Ireland	54.2	43.8
Luxembourg	58.2	65.0
Netherlands	70.6	76.4
United Kingdom	56.9	63.9
<b>EU 12</b>	<b>56.2</b>	<b>62.0</b>
Greece	48.5	78.0
Italy	62.1	77.6
Portugal	41.3	42.1
Spain	49.6	47.3

**Source:** European Commission.

A more restrictive criteria in the definition of disability, together with a closer overall administrative control, reduced considerably the acute increase of this type of pensions up until 1985<sup>[10]</sup>. The process in Spain has been somewhat different from that of the Italian case where *clientelismo* and connivance between employers and prospective claimants are among the causes for the highest public spending in the European Union for the categories of 'Disability' and 'Old-age and survivors' put together (Ferrera, 1995).

### *Health care*

The 1986 General Health Act was committed to the development of a National Health Service which guaranteed the right to health care for all Spaniards and all foreigner citizens resident in Spain. Coverage, which was already very high in 1980 (83.1 per cent for all citizens and residents), was almost total by 1991 (99.8 per cent). (Almeda & Sarasa, 1996).

Three quarters of the financing of Spanish health is public. Of the remaining one quarter, 85 per cent are direct payments by individuals (mostly for private care and medicines). These figures have kept stable during the 1980-93 period. But the most significant variation of this period is reflected in the shift of the financing of public expenditure from contributions to taxation. In 1980, as much as 82 per cent of all spending on health was met by social contributions, whereas in 1993 the corresponding figure was 20 per cent (see Table 10). This dramatic change is in line with the assumption that universalisation of the public health service should be related to a system of general financing by taxation on the basis of a more equitable philosophy.

**Table 10: Health financing in Spain (1980-93)**

	1980	%	% GDP	1993	%	% GDP*
Direct taxes	7.6	---		---	--	
Indirect tax.	6.4	---		---	---	
Subtotal tax.	14	18		60	80	

Social contr.	62	82		15	20	
<b>Total Publ.</b>	<b>76</b>	<b>100</b>	<b>4.6</b>	<b>75</b>	<b>100</b>	<b>5.1</b>
Private insu.	3	12		2.5	10	
Direct pay.	21	88		22.5	90	
<b>Total Priv.</b>	<b>24</b>	<b>100</b>	<b>2.6</b>	<b>25</b>	<b>100</b>	<b>2.7</b>
<b>TOTAL</b>	<b>100</b>		<b>7.2</b>	<b>100</b>		<b>7.8</b>

\* 1991. **Source:** Gallo de Puelles (1994: 865) and Rodríguez Cabrero (1994: 1478).

Regarding the provision of health services, the public system has continued to purchase many of its hospital services from both private and charitable sectors. The expansion of the public coverage has not been matched with equivalent increases in resources. Let us remind that the increase of public expenditure on health during the period 1980-93 was merely 0.4 per cent. This figure seems to confirm the view that a universalisation of coverage has not been matched with an equivalent intensity on standards of care. Note that around 8 per cent of the population is covered by private health insurance (Freire, 1993). Some occupational schemes remain for groups of the hyper-protected core of the workforce.

Public complaints towards the public health systems mostly relate to the bureaucratic-administrative impediments that hinder the functioning of hospitals rather than the quality of the services being provided by them[11]. Furthermore, levels of efficiency vary according to the powers on health provision which have been decentralised to the 17 Autonomous Communities[12]. Some of these have implemented policies for the provision of services of a 'quasi-market' nature (Catalonia, Valencia), and have faced since then problems for the financing of their respective public health systems[13]. A rationalisation of health consumption -primarily, medicines-has come to the fore on the discussion of adapting levels of expenditure to socio-demographic changes (particularly in reference to citizens of 65 years and over. See Table 11). There is need for longer time-series in order to evaluate with a degree of plausibility the effects of these reforms of hospital management, financial restraining and improvement of both efficiency and equality on health care.

**Table 11: Projections on the evolution of population over 65 years of age for the EU countries (1980-2040)**  
(percentage of the total national population)

	<b>1980</b>	<b>1990</b>	<b>2000</b>	<b>2020</b>	<b>2040</b>
Austria	15.5	14.6	14.9	19.4	23.9
Belgium	14.4	14.2	14.7	17.7	21.9
Denmark	14.4	15.3	14.9	20.1	24.7
Finland	12.0	13.1	14.4	21.7	23.1
France	14.0	13.8	15.3	19.5	22.7
Germany	15.5	15.5	17.1	21.7	27.6
Ireland	10.7	11.3	11.1	12.6	16.9
Luxembourg	13.5	14.6	16.7	20.2	22.0
Netherlands	11.5	12.7	13.5	18.9	24.8
Sweden	16.3	17.7	16.6	20.8	22.5
U. Kingdom	14.9	15.1	14.5	16.2	20.4
Greece	13.1	12.3	15.0	17.8	21.0
Italy	13.5	13.8	15.3	19.4	24.2
Portugal	10.2	11.8	13.5	15.6	20.4
Spain	10.9	12.7	14.4	17.0	22.7

**Source:** Council of Europe.

### *Unemployment and employment promotion*

Unemployment rate in Spain is the highest in the European Union. According to the macro-survey carried out every term in Spanish households (*Encuesta de Población Activa*, Active Population Survey), at the beginning of 1997 the number of unemployed amounted to 21.5 per cent. Despite the fact that the EPA survey is methodologically sophisticated and technically accurate in its mechanisms of data collection and processing, a long-standing controversy has developed on whether its results are representative of the actual situation of the labour market in Spain. The persistence of a large 'hidden' tax-free economy in Spain largely distorts the reliability of the *EPA* data. Unquestionably, there is a sizeable portion of survey respondents who either hide their labour status or 'disguise' it (e.g. working within the informal sector). Some authors are of the opinion that the registered unemployed at the governmental job agencies of *INEM*<sup>[14]</sup> reflects more approximately the 'real' number of the unemployed in Spain (around 13% per cent of the total active working population in mid-1997). Nevertheless, on comparing the diverging *EPA* and *INEM* figures the number of those citizens who simply do not bother to file a job demand at the *INEM* agencies is also to be taken into account.

Given the high rate of unemployment in Spain some observers are puzzled by the relatively stable social situation in the country, particularly concerning sections like the young (among whom unemployment rates reach percentages of around 40 per cent and 45 per cent, respectively, for male and female of 20-24 years). Explanations for this less-traumatic phenomena associated to unemployment in Spain rest upon two considerations: (a) The considerable public expenditure concerned with unemployment benefits: 4.8 per cent of the GDP was allocated to this social expense, the highest percentage in all EU-12 countries in 1993 (see Table 7); and (b) Support to the unemployed by familial and household networks of micro-solidarity.

In the aftermath of the 1992-94 economic crisis the issue of implementing active employment policies has come to the fore in the discussions between the government, the Owners' Confederation (*CEOE*) and the most representative Trade Unions (*CCOO* and *UGT*). A widespread perception of the need to establish a new legal framework aimed at job creation, especially for the young, and limiting the burden of labour costs to improve competitiveness had been felt by the social partners. Prior to this, it is to be noted that the impact of deregulation on the growth of employment in Spain had been very limited. In fact, the legal framework did not seem to constitute in itself a compelling variable for the creation or destruction of employment in Spain. With the same labour legislation, half a million jobs were created in Spain in 1987 and 400.000 were destroyed in 1993 (Missé, 1997).

Flexibility and deregulation were the main themes behind active labour market measures in the first half of the 1990s. But the immediate effect brought about by deregulatory policies was an exponential rise in the number of temporary and part-time occupations (nearly 40 per cent of the total labour force). In 1996 only 4 per cent of all new jobs were established on a permanent basis. New contracts benefited from fiscal subventions and some consolidated the spurious practice of formalising *de jure* temporary contracts replacing *de facto* permanent working positions.

In the period between the end of 1994 and 1996 the number of companies hiring employees increased significantly from 564.000 to 642.000; so did the number of part-time jobs (175.000). In order to alleviate a social perception of labour precariousness and avoid the perverse effects of the so-called 'junk' jobs both Employers' associations and Trade Unions (*CCOO* and *UGT*) engaged in negotiations and agreements to be put into law by the *PP* Government in May-June 1997.

Corporate welfare measures and fiscal incentives are to be met by Spanish public expenses favouring those companies hiring employees on a full-time and permanent basis. CCOO and UGT have given consent to legislation allowing a substantial reduction to be paid by the employers to newly-hired employees if they are made redundant in the future. These provisions are aimed at counteracting the effects of what seemed an unstoppable process of job precariousness since 1994. These policies are expected to have a greater impact in family-type companies and micro-enterprises. Rebate for employers' contributions to the Social Security will range between 40 per cent and 60 per cent. For those small businesses under the system of income tax modules -instead of the corporation tax regime- the welfare credits will affect new employment with no payments in the first two years[15].

The single most significant feature in the composition of the Spanish labour force is the increasing participation of women. This trend seems to correlate with the growing incorporation of women in formal education (see Table 6). In the last two periods of general growth of employment in Spain (1964-74 and 1985-1990), women's participation in the labour force increased *vis-à-vis* male workers. In 1969 there were 32 female workers for every 100 male employees[16]. This ratio increased up to 39/100 in 1974, to 41/100 in 1985 and to 46/100 in 1990 (Garrido, 1994). In relative terms, women's participation is larger in the public sector than the private. Note that in 1964 there were 17 for every 100 male public employees. The ratio jumped to 70/100 in 1991. Even more representative of this changing pattern is the fact that, within the age group of 25-29 years, the proportion of female public employees was 105 for every 100 male workers in 1990. Reasons for job security and stability appear to be paramount for women in such an age group. In contrast with the situation in Germany and United Kingdom, employment interruptions in Spain --and Southern Europe, as a whole-- are motivated more by professional reasons and less by maternity concerns. This pattern translates into high continuity rates and less part-time jobs (Jurado & Naldini, 1996).

A change in the priorities of greater numbers of women with respect to their traditional subordinate position within the labour market and their commitment to raising children has been taking place in the last two decades. This changing role of women within both labour market and households will have important repercussions for the future of the Spanish Welfare State. The generation born between 1950 and 1970 is characterised in the main by well-educated women committed to professional activities. This pattern is coupled with a postponement to give birth to their first children. Further, marriage rates have diminished as a result of unemployment, problems of matching expectations of 'good' jobs according to higher levels of qualifications, and rising costs of living particularly in urban areas. Transformations in family patterns are similar in other Southern European countries which are reflected in attitudes of ambivalent familism by women (Flaquer, 1995; Saraceno, 1995).

### *Social assistance and 'targeting'*

The process of deepening the political and administrative decentralisation, according to the 1978 Constitution, is the most compelling force behind the shaping of welfare development in Spain. De-concentration of social services has had a much larger impact than privatisation (Almeda & Sarasa, 1996).

Plural Spain has gone through a substantial social, economic, and political transformation since the inception of the 1978 Constitution. The *Estado de las Autonomías* ("State of Autonomies") has transcended to a large extent the traditional cultural patterns of ethnoterritorial confrontation in Spain (Moreno, 1997a). In budgetary terms, variations were substantial in the period 1978-1991: central government expenditure decreased from 90 to 65 per cent; regional government rose from zero to 22 per cent; and local government, from

10 to 17 per cent.

Let us remind that according to the 1978 Spanish Constitution, social assistance is a power of the 'exclusive competence' of the 17 Autonomous Communities. These have made use of these powers extensively for purposes mainly of institutional legitimisation. Of great relevance for our analysis has been the programmes of *rentas mínimas* (minimum income benefits) or, in other words, *salario social* (social salary).

In order to combat poverty and situations of social exclusion, the 'Family Minimum Income' was introduced in the Basque Country in March 1998. This constituted a precedent and provoked a 'demonstration effect' in the subsequent programmes of minimum income benefits implemented in all 17 *Comunidades Autónomas*. Although showing a degree of diversity in policy design and coverage, programmes of 'minimum income' developed by the Spanish 'historical nationalities' and regions aim at combining cash benefits with policies of social insertion (employment promotion and vocation training schemes, primarily).

The impact of these *ab novo* programmes of 'minimum income' have had a dramatic effect in the debate about the completion of a 'safety net' in Spain. They are quasi-universalistic entitlements sharing some common features which can be identified as follows: (a) Families are the units of reference even though individuals can be beneficiaries; (b) Means-tested criteria is related to a threshold of household income under which cash benefits are awarded (around two thirds of minimum wage); (c) Residence status of applicants is required (ranging from 1 to 10 years); (d) Periods of extension are available provided that beneficiaries have complied with social insertion activities and social needs remain the same (Aguilar, Gaviria & Laparra, 1995). (See Table 12 for basic data on minimum income programmes).

**Table 12: Minimum income programmes in Spain (1993)**  
(by Autonomous Communities)

	% of basic non-contributory pension	# Beneficiaries	Total # (including related schemes*)
Andalusia	95.5	950	5,000
Aragon	81.6	106	106
Asturias	100.00	150	1,661
Balearic Islands	----	----	----
Basque Country	99.2	11,786	16,486
Canary Islands	81.6	1,683	1,683
Cantabria	81.6	100	100
Castile-La Mancha	111.4	1,224	4,307
Castile and Leon	81.6	2,495	2,495
Catalonia	100.6	7,000	7,000
Extremadura	85.6	441	1,265
Galicia	85.7	1,476	2,743
La Rioja	94.3	205	205
Madrid	101.9	10,996	10,996
Murcia	92.4	500	580
Navarre	100.6	997	1,460
Valencia	100.0	1,873	1,873



<b>Mean/Total</b>	<b>93.3</b>	<b>41,982</b>	<b>57,960</b>
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\* One-off emergency cash payments are also taken into account.

**Source:** Aguilar, Gaviria & Laparra (pp. 90 and 654).

These meso-governmental initiatives have certainly stirred up welfare development in Spain. However, and due to their increasing financial difficulties, it remains to be seen whether these programmes will continue to be a priority for the regions. They may confront a situation of either requesting co-funding from the central government or containing the scope of their coverage benefits.

In all future scenarios, the action by the regional and local government will be of decisive importance for welfare development in Spain. Indeed, the centre-periphery institutional interplay is a structuring variable which pre-determines to a great extent the diverse nature of welfare outcomes in contemporary Spain.

Since 1988 concerted action of the three levels of government to establish a comprehensive network of community centres has been instrumental for the extension of social services to the population at large[17]. The *Plan Concertado de Prestaciones Básicas de Servicios Sociales* in municipalities was established in 1988[18] aiming at providing services at the municipal level for the following purposes: (a) Information and counselling; (b) Social and day care services[19] for the disabled and elderly; (c) Shelter for harassed women, single mothers, orphans or mistreated minors, and homeless; and (d) Prevention and social insertion.

This network of community centres has overtaken much of the social system developed by the Catholic Church during the 1960s. In the period 1989-96, the *PSOE* Governments have not been opposed to lending support to private assistance and charities of a religious nature[20]. Nevertheless, they have often tended to favour NGOs of a secular nature, as well as the Red Cross and the powerful National Organization for the Blind (*ONCE*), a policy somewhat reversed by the *PP* Government since 1996.

As in other South European countries the 'problem' with targeting is that social services and benefits do not always reach the needy or the citizens entitled to them. The mixed and fragmented nature of Southern welfare -both income related and universalistic-- makes the evaluation of welfare provision not an easy task. On assessing the 'Matthew Effect' there are two opposing views. One contends that the more the non-poor benefit, the more unequal the welfare state becomes. (Le Grand 1982: 137). The other sustains that allowing some predation of social outcomes by those not directly targeted tends to encourage coalition formation between least-favoured classes and sections of the middle class in support for continued welfare state policies (Korpi 1980: 305). In summary, both beneficial and detrimental effects of the 'Matthew Effect' are intertwined in a manner arduous to be unfold. Here lies one of the main analytical challenges for experts dealing with the case of the Southern Welfare.

### **Future scenarios for Europe**

Economic problems faced by the European Union in order to adapt itself to the increasing competition within the Single Market and with respect to industrialised countries in south-east Asia have led some authors to label the present situation as a 'frozen welfare landscape' (Esping-Andersen, 1994). 'Eurosclerosis' is also regarded as a major obstacle to economic progress as global competition intensifies (Taylor-Gooby, 1996). Implicit in these remarks is the quest for the achievement of a new model of development and growth within the international economic order. There is also an alternative prescription which proclaims



the idea of a 'fortress Europe': the secession from the international world arena would preserve the maintenance of the European welfare regimes (Castells, 1996). An economic 'wall' around EU member states would guarantee social rights achieved by generations of Europeans. It would also stimulate a balanced growth which, in turn, would create new employment coupled with job-sharing and the reduction of working time. Immigration would be tightly regulated. Undoubtedly this option would mean a U-turn in the cosmopolitan approach of the European culture (Moreno, 1997b).

The lingering 'demise' of the nation-state as main source of economic planning seems more than plausible. Financial globalisation maximises speculation by a handful of monetary strategists in banks, investment funds, financial trusts, and the like. A concerted effort within the European Union is required if goals for the preservation of social solidarity institutions are to be accomplished. The possibility of establishing a new 'social contract' is at stake (Ferrera, 1996b; Rodríguez-Cabrero, 1997). This very much depends on the internalisation of values of compassion and solidarity by the citizenship at large and, in particular, by the bulk of the middle classes. Opting for the principles of social justice would be dependent on each citizen being able to place him or herself in the social position of any other person, and particularly the marginalized (Rawls, 1971). The realisation of this point is essential if welfare systems of solidarity characteristic of the European societies are to be revitalised.

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## Notes

<sup>1</sup> According to a 1996 national survey, 46.3 per cent of Spaniards agreed that, "The State is responsible for each and every one of its citizens, and has the duty to help them to solve their problems"; 35.7 also agreed that "The State is only responsible for the well being of least-favoured citizens", and 13.0 per cent were of the opinion that "Citizens are responsible themselves for their own well-being and have the duty to sort out their own problems" (Don't knows: 5.1 per cent. CIS, 1996). ▲

<sup>2</sup> This 'halo effect' refers to the assertion in the Gospel according to Matthew: "For whomsoever hath, to him shall be given, and he shall have more abundance; but whomsoever hath not, from him shall be taken away even that he hath" (13:12). ▲

<sup>3</sup> With an increasing critical voice from the Spanish Communist Party integrated in the electoral coalition United Left (*Izquierda Unida*). ▲

<sup>4</sup> At the end of 1996, Spain ranked seventh in EU-15 with 69.6 per cent. Net borrowing requirement was 4.4 % of GDP which compared with highest rates for Greece (7.4 per cent) and Italy (6.7 per cent), and lowest for Luxembourg (-1.8 per cent) and Ireland (0.9 per cent). ▲

<sup>5</sup> Note that around 12 per cent of the total public expenditure is paid to concerted private schools. Together with the non-concerted private education they both covered 31 per cent of all student population in 1990 (38.6, pre-school; 34.5 per cent, elementary; 28.7 per cent, middle; and 8.1 per cent, university). ▲

<sup>6</sup> General requirements are (a) Residence in Spain during the 5 years, and the last 2 prior to the concession of the pensions; and (b) lack of resources (to be determined by means testing). ▲

<sup>7</sup> However the minimum salary decreased from 77.5 per cent of the per capita GDP in 1980 to 52.4 per cent in 1992. ▲

<sup>8</sup> Projections for the year 2020 estimate that 18.3 per cent of the total population of Spain will be over 65 years of age (see Table 11). ▲

- <sup>9</sup> In Italy it may be improper to speak of a 'selfish' old-age generation but, according to F. Castles and M. Ferrera, "...clearly there is a set of life-cycle distributions which strongly favour the interests of the old" (1996: 175). ▲
- <sup>10</sup> Fraud was carried out by trying to cover up labour cases of various kinds: e.g. early retirement or aged unemployed. ▲
- <sup>11</sup> There has been a traditional emphasis on hospital care instead of primary attention. This hospital-centred pattern of health care is ingrained in some public perception which tends to disregard services at the primary level. Such a popular feeling has perverse 'bureaucratic' effects as regards the overcrowding of public hospitals. ▲
- <sup>12</sup> By 1991 over half of health spending was managed by both 'historical nationalities' (Basque Country, Catalonia, and Galicia) and regions (Andalusia, Aragon, Asturias, Balearic Island, Canary Islands, Cantabria, Castille and Leon, Castille-La Mancha, Extremadura, La Rioja, Madrid, Murcia, Navarre, and Valencia). ▲
- <sup>13</sup> This issue became a priority for the nationalist Catalan coalition, *Convergència i Unió*, in order to lend legislative support to the minority *PP* Government after 1996. ▲
- <sup>14</sup> The Spanish *INEM* (National Institute for Employment) classify as registered unemployed all those citizens who have filed a job demand in any of its agencies and who legally qualify as unemployed. Thus, those who have a 'visible' job, the disabled or the students under the age of 25 are excluded. In order to be eligible to unemployment and social assistance benefits citizens must comply with the requisite of being registered at the *INEM* agencies. ▲
- <sup>15</sup> In implementing this new legislation, the political input of the Catalan nationalists (*CiU*), who have supported the minority *PP* Government in the Spanish Parliament after the 1996 General Election, is to be underlined. Shop-keepers and owners of small businesses in Catalonia have traditionally been faithful and strong supporters of the Catalan electoral coalition. ▲
- <sup>16</sup> In 1975 there were nearly 1 million public employees in Spain. At the beginning of 1996 the corresponding figure was nearly 1,800,000. ▲
- <sup>17</sup> The same year the Ministry of Social Affairs was first created by the *PSOE* Government. In 1996 the *PP* Government integrated it into the Ministry of Labour and Social Affairs. ▲
- <sup>18</sup> Central, regional and local authorities have contributed respectively 42 per cent, 33 per cent and 25 per cent to the Plan. It has covered all Autonomous Communities except the Basque Country and Navarre. The latter maintain a regime of fiscal quasi-independence with respect to the central Treasury (by means of collecting all taxes and handing over to the central administration an agreed amount as *cupo*, or quota, in payment for the general services of the state). This arrangement has enabled the Basque Country and Navarre to enjoy a higher level of social spending. ▲
- <sup>19</sup> These can be defined as a domain within which organised services are provided to strengthen personal autonomy of both carers and often care receivers. Note that residential provision of the elderly reached around 2 per cent of citizens over 65 years of age. However, residences privately run for the elderly have greatly expanded in recent years. ▲
- <sup>20</sup> Note that by 1988, Caritas, the charitable organization run by the Roman Catholic Church, programmed 8,353 million Pesetas to its social programme, an amount which was just above 9 per cent of the newly created Ministry of Social Affairs' budget (Rodríguez-Cabrero, 1990). Note that by 1988, Caritas, the charitable organization run by the Roman Catholic Church, programmed 8,353 million Pesetas to its social programme, an amount which was just above 9 per cent of the newly created Ministry of Social Affairs' budget (Rodríguez-Cabrero, 1990).

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