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Social policy in emerging welfare states

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Abstract

The study of the Welfare States (WS) in emerging countries is becoming relevant in the field of comparative politics. The assumption of this paper is that there is a process of WS building at a global scale in the XXI century and some countries have reached an institutional structure similar to the ones of mature WS. However, it is clear that there are big differences among countries when we compare them in a regional basis. The aim of the paper is to contribute to the debate about characteristics and degree of development of social policy in the emerging WS of East Europe, Asia, Africa and Latin America, trying to understand the main challenges they face.

Keywords: Welfare States, Emergent Welfare States, Social Protection, Social Protection in Emergent Countries

Introduction

Increasingly governments of developing countries are concerned about the protection of pensioners and the weaker social groups, the fight against poverty, the reduction of inequalities, the generation of collective resources in education, health, housing etc. and the organization of labor relations in a formalized manner. That is why the study of emerging welfare states (EWS) is today a subject of growing interest (Carnes; Mares, 2007, p. 868).

There are many questions that can be asked in this regard: what social policy can the most economically backward countries carry out? What level of universalization can they achieve? In what policy areas? Why have some countries achieved greater development of social policy? Here one starts from the fact that in the 21st century an incremental process is taking place on a global scale, namely the construction of welfare structures in each country, which is a consequence of the modernization of Third World societies. In fact, some countries with emerging economies have already developed their own WS models, with a high degree of economic redistribution.

The EWSs that appeared in developing countries, the so-called emerging economies, are basically defined by contrast to mature WSs. Its logic is that the availability of economic resources leads to State intervention by means of a social policy that carries out a process of institutionalized economic redistribution, from which social citizenship is configured. Therefore, we focus our attention mainly on the way each State intervenes by means of a social policy.

The building of a WS in emerging countries will not be similar to that of European ones because their communities, families, or the organization of markets are different (Filgueira 2007, p. 14). In addition, developing countries have two differential factors: the predominance of an informal labor market and a high level of poverty among the population (Huber; Stephens, 2012, p. 67). However, the study of the EWS cannot have an approach that is different from the one developed for the study of mature WS.

This article will not polemize with the extensive literature on the explanatory frameworks about the origins of WS or EWS (Mokomane, 2013; Akan, 2011; Mahmoudi, 2011, Asher *et al*., 2015; Carnes; Mares, 2007; Gough; Thenborn, 2010; Garay, 2016). Its sole goal is to describe the diverse historical processes that lead to the structuring of EWS in regions of the Global South and of the post-communist world, briefly characterizing the recent social policy there implemented and their major economic traits. Although the production of economic surplus is not a sufficient condition for a country to have a WS, without that it is nearly impossible to accomplish a WS.

The article acknowledges that there are regional patterns that can be identified (Gough; Therborn, 2010), but stresses the importance of common institutional historical legacies shared by countries that partake of borders and mostly of a common historical trait of relationship with major global economic powers during the last centuries. Recognizing the relevance of the criterium 'level of wellbeing provided', recently employed by Gough and Therborn (2010), for instance, when organizing a typology of EWS, in this article the classification takes into account mostly the geographic proximity of countries belonging to great regions of the world. The main rationale is that for tracing the historical trajectories that lead to building up EWS, it is important to take into account the colonial and neo-colonial past shared by countries that belong to the same region. They not only share cultural identities, but also respond, however in different and even contrasting ways, to similar challenges that have inscribed indelible and peculiar impressions in both their institutional legacy and the political debate on how the State should provide social protection. Therefore, the article examines the processes that convey to the construction of EWS in post-communist countries of Central and Eastern Europe; of Asia, Africa and Latin America (hereafter, LA).

1 The EWS in post-communist countries of Central and Eastern Europe

The transition to the market economy in post-communist countries in Central and Eastern Europe had far-reaching effects for the welfare protection since the social policy, which was the masterpiece of the communist system (Mishra, 2004, p.79), was completely altered. The stagnation and subsequent decline of the planned economy had progressively reduced the quantity and quality of social benefits, what ended up by showing that the paternalist socialist state was a myth (Rek-Woźniak; Woźniak, 2017, p. 349).

At the end of the 1980s, when the communist system collapsed, the countries had to liberalize and deregulate the economy, eliminating subsidies and reducing the State intervention. This new trajectory was driven by the international financial organizations (IMF and WB) that conditioned the credits that these countries needed for economic reform. The implementation of the market economy led to the emergence of unemployment, poverty and insecurity that were exacerbated by the process of globalization. The new path did not break completely with the policies of solidarity and redistribution of the previous stage but, to face the new social risks, the post-communist countries were forced to introduce unemployment subsidies and welfare assistance (Cook, 2010, p. 671).

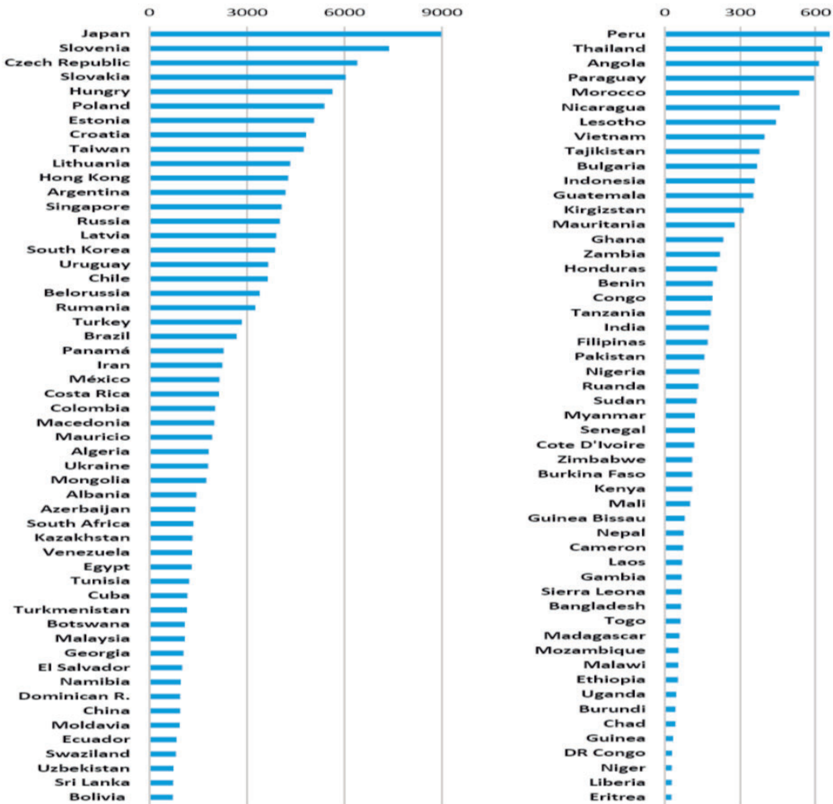
Countries of Central and Eastern Europe evolved differently from the rest of the former Soviet republics. In European countries, political and economic transitions made it possible to consolidate a contributory social security system, but the degree of economic liberalization and the decline in pre-existing social protection varied by country. The Czech Republic and Slovenia have maintained more supportive systems, with lower levels of poverty and unemployment; Hungary and Poland have intermediate positions in poverty and liberalization. On the other hand, the Baltic countries, together with Bulgaria, Romania and Slovakia, have suffered the greatest setbacks in social protection.

The rest of the ex-Soviet countries had more conflictive transitions, with greater economic decline and evolved towards authoritarian models. In Russia, the economy was only liberalized after the turn of the century, when the labor market was deregulated and private pension, education and health systems were introduced. Thanks to financial resources generated by raw materials (gas, oil), the Russian State can now provide the basic levels of protection within the framework of a nationalist policy. In Belarus the transition to the market was limited and social protection also remained in the hands of the State, so that welfare was better guaranteed, with universal protection in health and a public share of 75% of health expenditure (Cook, 2010, p. 682).

In contrast, it is relevant to mention that in the republics of Central Asia the transition to capitalism has been more dramatic (Djalili; Kellner, 2003, p. 68). These, together with Azerbaijan, were the poorest of the USSR and they specialized in the provision of raw materials or agricultural products (cotton) for the European industrialized communist countries. They are still dependent on exports of raw material to Russia and the population has suffered a drop in their standard of living, with high percentages of people below the poverty line (60% Azerbaijan, 83% Tajikistan, 48% Turkmenistan, 43% Kazakhstan, 50% Kyrgyzstan, 23% Uzbekistan). The education system, the health system and pensions have deteriorated in relation to the Soviet period. In addition, informality has grown in labor market. In Kazakhstan and Kyrgyzstan, a very residual WS has been established, where social assistance is very restricted, while Uzbekistan and Turkmenistan have continued with the Soviet centralized model.

A gross indicator of social protection levels offered by governments is social expenditure. Although it does not demonstrate to what services or goods or to what social groups the spending is directed, data is available for most countries in the world. A reasonable amount of social expenditure per capita is a necessary if not sufficient precondition for the structuring of a WS. Graph 1, which relates social expenditure, excluding education, to the population size of each country, shows a major concentration of ex-communist countries from central and eastern Europe in the first block, far exceeding the countries that are beginning the process of building a 'social assistance model' in Africa and Asia. Nonetheless, some countries in the region, especially those in Eastern Europe, present a low social spending per capita.

Graph 1: Social expenditure per capita – from 2005 to 2017*



* With the latest data available, excluding education spending. Values in purchasing power parity (PPP) in dollars.

Source: Own elaboration with data from ILO (2017), ECLAC, ECSC and WB

2 The EWS of Asia

Traditionally, Asian countries have concentrated their political efforts on promoting economic expansion without giving much relevance to redistribution of wealth. Therefore, the fiscal resources of the States were not mainly allocated to social policy and, consequently, there has been a slow development of WS. Economic growth in recent decades has facilitated the reduction of poverty in Asia and also led many countries such as China, South Korea, Taiwan, the Philippines and Nepal to double social spending, although 1.2 billion people still live below the poverty line, that is, they don't have at least 3.1 dollars per day, in purchasing power parity (PPP) of 2011. After the economic crisis of 2008, governments of Asian countries became aware of the vulnerability of the population and the social protection has become a priority in their agendas, being considered one of the pillars for economic development. Particular attention is paid to the situation of workers in the informal sector and the aging of the population (ILO, 2017, p. 148).

There is a great asymmetry among EWS of Asia. On the one hand there are countries with a very extensive protection systems; on the other there are countries in the initial phases of construction of the WS. Japan, Taiwan and South Korea have institutionalized WSs based on a social security system that has reached a high degree of universalization and redistribution (Kwon, 2009, p. S14). In Hong Kong and Singapore, social protection has also been set up through provident funds. The case of China is interesting, because it has initiated a process of economic development with a new social policy within the framework of a market economy (Shi, 2012, p. 790).

The formation of the WS in East Asia has followed a corporatist pattern; in addition, social security and provident funds have served for the mobilization of capital to develop the economy. This is why the WS of East Asia is often known as a "developmentalist" model (Kwon, 2009). In Taiwan and Korea, democratic transitions were decisive for the universalization of social policy. However, there are remarkable variations in the levels of social welfare provided by each country.

Japan has a society with a high level of economic equality, although anchored in traditional hierarchical values; it has not managed to develop a modern welfare system based on public services. Japan faces important challenges such as modernizing the tax system and the structure of small companies so that to allow them to gain competitiveness (Steinmo, 2010, p. 88). It has to reform the labor market, change the social role of women – which has led Japan to have one of the lowest birth rates in the world –, and face the aging of the population with a migration policy. It also needs to develop more assistance-type protection.

Taiwan faces the challenges of unifying social security programs, expanding their services and increasing social spending in welfare programs. The WS has a great potential in Korea (Choi, 2007, p. 17) that has a society with a standard of living similar to the western countries. Its main challenge lies in the integration of fragmented social security and health structures. The pension system currently covers 70% of the population at retirement age. A target in Korea is increasing the participation of women in the labor market by expanding the services for the care of children and the elderly.

Finally, China, which has already developed a far-reaching social policy, has the challenge of creating an integrated social security system with national funding that guarantees equal benefits (Sánchez; Hernández, 2016). In addition, pensions and healthcare must expand to reach the entire population. Also, the *Dibao* (cash transfers) must have more resources to reduce high levels of poverty, since 11.8% of the population lives on less than $1.25 / day in PPP of 2015 (ESCAP, 2015, p.51).

India is a very relevant case in Asia because of its size and its high population. It shares the problems of EWS, such as the fragmentation of the pension system (which originated as provident funds) and of the health system. Moreover, 90% of employment is in the informal sector, which prevents workers from accessing social security or public health services. On the other hand, the traditional structure of social castes greatly hinders the development of a universalist system (Greve, 2015, p.677). Only 19% of the population has some degree of social protection (ILO, 2017, p. 150).

A characteristic of India is the persistence of broad, endemic and extreme poverty that reaches practically half of the population (Brass, 1995, p. 298). In fact, 22% of the population live with less than $1.9/day in PPP of 2011 (ESCAP, 2015). Poverty is mainly found in rural areas but is moving to urban centers with migration, although it varies according to each provincial state. The fight against poverty began in the 1970s with the government of Mrs. Gandhi. She started a path based on programs that help to acquire productive capacities in which the subsidy is linked to some work activity.

In 2005, the Rural Employment Guarantee Law was approved. It aims to guarantee each adult 100 days in public works and gives access to a minimum vital assistance. It can be considered as the largest anti-poverty program worldwide, reaching 73.9 million people in 2014 (similar programs exist in Bangladesh and Nepal). It does not have a universalist character, since many households do not access it because some provincial states do not want to share the costs, or do not have the capacity to manage it, or the poor do not request it because do not know it exists (Fraser, 2015, p. 684).

Another important program is the "Mid-day meal" that has been widespread in public elementary schools since 2004. It serves to combat child malnutrition and, in addition, facilitates the integration of lower castes (Pellissery et al., 2015, p. 793). Limited coverage pensions and health programs for low-income workers of the informal sector were established in the mid-1990s, which reach tens of millions of people. But welfare programs end up being discriminatory in India because they are used by political parties to create clienteles and because they are managed at the regional or local level where corruption is more acute (Mitra, 2000, p. 660; Brass, 1995, p. 290). This is a big problem especially in the most backward regions that are the most dependent on federal transfers (Charron, 2010, p. 188).

The countries of Southeast Asia such as Malaysia, Thailand, Indonesia, the Philippines and Vietnam have also implemented important welfare programs (Gough, 2004). They have higher levels of social spending per capita than in other Asian countries such as Bangladesh, Pakistan, Afghanistan, Sri Lanka or Laos. Indonesia is a good representative of the first group. As in other countries, social policy began to be implemented in the 1960s with pensions and health insurance for public servants and workers in the formal sector, which were managed in a fragmented manner. In 1998, only 8% of the population had social protection. With the advent of democracy, the well-known *Jaring Pengaman Sosial* program was established. It has been the embryo of the current social protection system there existent (Fossati, 2016, p. 310). It included health care for the poor, subsidies for rice, subsidies for education and job creation and, most importantly, it stated the need for State intervention to promote collective well-being. Subsequently, in 2005, a free basic health care system was established throughout the country, which aims to achieve universal coverage through the National Health Insurance, in 2019. However, despite these advances in health, Indonesia only gives pension coverage to 14% of the population at retirement age, while Malaysia does it to 20% and the Philippines and Vietnam to 40%.

Two cases of great interest in the west side of Asia are Iran and Turkey. Iran has a market economy submitted to a State intervention through economic planning. It is highly dependent on oil exports which industry is nationalized (Merinero-Martín, 2004). To combat poverty, the different Islamic governments have advocated redistribution through social policy. To this end, price control is used, and subsidies are extended to basic products such as food, energy and housing, especially in the rural area, where 23% of the population is located. In 2005, these subsidies reached 2.5% of GDP (Mahmoudi, 2011, p. 153). Religious charitable "foundations" of Iran such as *Komitaeh-Emdad, Imam Khomani* and *Bonyad Mostazafan* are important entities in the field of social assistance (Mahmoudi, 2011, p. 158), and at the same time they manage important business holdings. They administer grants while establishing client-type relationships that act as mechanisms of Islamist mobilization.

In Turkey, in 2009, 18% of the population lived in poverty and 42% of the workers had an informal job (Akan, 2011, p. 373). According to government data, Turkey has a contributory pension system that, in 2008, covered

81% of the population at retirement age. The system (Social Security Institution) is fragmented, having three distinct funds with each group of workers – public servants, company employees and self-employed workers – having its own rules of coverage. The deficit generated by the spending on pensions, which reached 5.6% of the GDP in 2002, forced a reform that took place in 2009, which equated the amounts of the funds.

Turkey also has a basic program of unemployment insurance and a means tested program in which it spends 0.9% of GNP in 2009 (Akan, 2011, p. 374). Social protection is mainly directed to families with elderly dependents. It is managed by six institutions, including religious organizations, being much vulnerable to political clienteles.

Therefore, considering these countries together, we observe a substantial variation among the systems of social protection. Graph 1 shows that this variation follows a similar pattern in terms of social spending per capita. There is a strong dispersion of countries along the scale, with some countries such as Japan, Taiwan and South Korea at the top of the first column, among the countries that spend more in welfare in the planet while many other lag behind among the ones with much lesser social expenditure, indicating that a part of the Asian countries have not started yet a process of takeoff in the EWS.

3 The EWS of Africa

The analysis of social welfare in the African countries is the most difficult and complex, due to the lack of data. In addition, sub-Saharan Africa is the poorest and most underdeveloped area of the planet (Mbaku, 2014, p. 531). In most countries of the region there is a limited social protection structure, which in general does not reach 18% of the population (ILO, 2018, p. 123). An indicator of this, can be seen in graph 1, that shows the strikingly low social spending per capita in African countries. Most of them are located at the bottom of the second column where expenditure is really low. A number of them spend less than 200 dollars per capita/year and have not managed to set up a welfare system that effectively fights poverty.

However, African governments have implemented welfare programs, which are gradually becoming a priority in their current development strategies. African countries have certain characteristics that hinder the development of social policy (Sánchez; Hernández, 2016). Among them, those of an institutional nature stand out expressing a lack of State. An ILO report has categorized 40% of African States as weak (ILO, 2017, p. 122). Another institutional feature is the predominance of political and administrative clientele structures. Other set of characteristics are of a sociological nature, such as the strong weight of the family and the religious communities in the provision of welfare, together with the dependence on foreign aid and NGOs, and the fact that welfare goals are limited to basic social services. As to the features of economic nature, there is lack of a culture that supports social protection programs, as these are considered to deplete resources necessary for economic development (Mokomane, 2013, p. 256). Migration within the countries and from outside them is also important.

Governance problems are also a major issue in Africa. Many leaders are mainly interested in personal enrichment and rule. In order to achieve these, they have established a centralized structure of power, which does not respect human rights and does not guarantee the rule of law (Mbaku, 2014, p. 538). Institutional organizations also reinforce the capacity of local and administrative elites to exploit citizens. In short, where the State is not "absent", a neo-patrimonial State with personalist authoritarian regime dominates, in which the separation between the public and private spheres is blurred, and in which the public sector bureaucracy is configured as a network of clients around the dictator. Social security is organized in favor of them.

In Africa, more than half of the population lives in extreme poverty (that is, they live on less than $1.25/day, in 2015 PPP) and depends on a subsistence agriculture (Mokomane, 2013, p. 250). The backwardness is usually attributed to the lack of a coherent national bourgeoisie and of sufficiently strong middle classes, which leads to the emergence of un-institutionalized structures in the economic sphere (Hyden, 2002, p. 145). The lack of economic development explains, on the one hand, why 75% of workers are in the informal sector in spite of the fact that sub-Saharan countries have had high rates of economic growth during the first decade of the 21st century (6.2% in 2012). On the other hand, workers in the formal sector are unproductive, with long working hours, poor salaries and high levels of poverty, besides having very restricted access to health insurance, pensions and social assistance (ILO, 2017, p. 14).

At present, almost all African countries have set up some form of social protection for workers in the formal sector, such as pensions, sickness or maternity insurance, which many have since independence. However, we must differentiate cases with more developed welfare structures in southern and eastern Africa such as South Africa, Botswana, Namibia, Zimbabwe and Kenya and northern Arab countries, from the rest of sub-Saharan countries. In the former, there is a relatively extensive social protection, with a public expenditure in social policy around 8.6% of GNP. In these countries, besides reasonable health indicators, there is high levels of literacy (ECA, 2017, p. 40), although in southernmost countries there are serious health problems due to the spread of AIDS (Gough; Therborn, 2010, p. 713).

Sub-Saharan countries have mainly set up social security systems for workers in the formal sector, while social assistance is rudimentary or absent: only in half of them social assistance provision reach 9% or more of the population (ILO, 2017, p. 129). In southern and eastern Africa, means tested programs are widespread, although a main problem is the lack of an administrative apparatus to carry out poverty checks, which is why there are frequent errors of exclusion of those who should receive them. The non-contributory pension is the most extended program. It not only helps to fight the poverty of the elderly but has other purposes, such as improving the educational levels of the young people or investing in productive activities – what can reduce poverty –, whose example is agriculture in Namibia or farms in Lesotho. This program has also stimulated the inclusion of women in the labor market. However, conditional cash transfers are not widespread, among other reasons, because education operates under very precarious conditions. There are also subsidies for unemployed people to carry out public works but with a minimal incidence on promoting employment (Mokomane, 2013, p. 255).

In Africa there is a paradox that more than 50% of social spending goes to pensions, although the elder are only 3.8% of the total population. The development of child protection programs and education is one of the greatest challenges for African governments because it is the continent with the highest proportion of infantile population.

A case of special interest is South Africa, recognized for the extension, equity and efficiency of its welfare programs, where 48% of the population receives social benefits or services (ILO, 2017, p. 23), in addition to having universalized non-contributive pensions. These were extended with the democratic transition of 1994. Thanks to a strong social mobilization; since 2010, these pensions have reached 100% of the minimum wage.

Arab countries of North Africa are also a case to consider. All of them had high levels of social spending thanks to the 'developmental' State that emerged following independence (Martín-Muñoz, 1999, p. 210). Free access to school became widespread, tertiary education and public health services were organized, what has reinforced the legitimacy of the new States (Picard, 2006, p. 220). The colonial path determined that the countries colonized by France followed the tradition of corporate social insurance, while the ones colonized by the United Kingdom, such as Egypt, followed the universalist tradition by means of the provident funds (Sánchez; Hernández, 2016, p. 237).

However, the lack of economic growth and the growing demographic rates ended up blocking the advancement of social policy. Income from oil revenues hid the structural deficiencies of a productive system that shows high unemployment rates and a good part of workers in the informal sector (Martín-Muñoz, 1999, p. 209). After successive crises since the 1980s, adjustments were made in public spending, reducing State intervention, what has increased social discontent that culminated in the 'Arab Spring' of 2011. Currently, the expansion of welfare programs is a relevant issue of the governments' agenda in the Arab countries.

4 The EWS of Latin America

Social policy originated in LA countries at different times of the twentieth century (Mesa-Lago, 1983). The first social protection programs appeared in the 1920s in Chile, Uruguay, Argentina, Brazil and Cuba. Another group initiated social policies in the 1940s and 1950s, as Costa Rica, Mexico, Peru, Venezuela. Others, the late group, in the 1960s. Logically, this has been a determinant factor in the welfare development that these countries have reached at present.

After the World War II, the so-called 'import substitution' policy – also found in Asia and Africa – induced an autonomous industrial development through the importation of capital and protectionist policies. This produced an economic expansion that allowed the enlargement of social security with a progressive incorporation of different groups of workers. This process reached its apex in the 1970s. Its financing was made possible thanks to the protection of internal markets that allowed employers to transfer social security costs (contributions) to consumer prices.

The result was the building of a corporate type of WS in which social security was granted to those who participate in the formal labor market, that is, to those who contributed to the system. This model leaves out of protection workers in the informal sector of the economy (Del Valle, 2010). It was also configured as a fragmented and stratified system in which public servants and employees of strategic companies, being the first to be incorporated into social security, obtained the best benefits. In addition, a regressive fiscal system characterized the model since a substantial portion of the financing of social policy was obtained through consumption taxes paid by all workers, even those in the informal sector.

However, not all countries ended up structuring similar social protection institutions. According to Filgueira (1998, p. 7) three models were shaped: a) countries with stratified universalism; b) countries with dual systems; and c) countries that have an exclusionary model. The first one, including Chile, Argentina, Uruguay, and the second one, encompassing Brazil, Mexico and Venezuela, reached broad coverage, although in the latter model there was the exclusion of rural workers. However, in the exclusionary model, which includes the Dominican Republic, Guatemala, Honduras, El Salvador, Nicaragua, Bolivia and Ecuador, informality has prevailed in the labor market and the State had a reduced capacity for providing social protection. In the latter group coverage of social risks was mainly in the hands of the family or the communities, and social policy was focused on the poorest.

The economic crisis of the 1980s was a "critical juncture" in the path of the EWS of LA. According to Martínez Franzoni and Sánchez Ancochea (2016, p. 207) the crisis had two main effects: one was the privatization of welfare programs such as pension and health; another was the expansion of means tested programs. Privatizations were more radical in some cases than in others. Specifically, more in Chile, Argentina, and less in Costa Rica, Brazil and Uruguay.

LA had a process of economic growth at the beginning of the 21st century, and there were changes in the ideological tendency of many governments (Filgueira, 2013, p. 20). As a consequence, a process of 're-reform' of privatizations and a new development of State intervention by means of a redistributive social policy was initiated. A good example of the new stage was the creation in 2010 of the National Health System in Uruguay. In this period, an expansion of social security and non-contributory welfare programs was possible. Programs of conditional cash transfers in favor of families (mainly mothers) with dependent children were expanded and generalized, reaching 0.3% of regional GDP. Non-contributory pensions for the elderly and the disabled were also widespread among countries such as Bolivia, Argentina, Brazil and Ecuador. As a result, 71% of the population at retirement age in LA receives a pension nowadays, whether contributory or non-contributory (ILO, 2017, p. 136).

The transformations of the last decades aimed to extend social protection towards traditionally excluded groups, mainly to those in the informal sector of labor market. It was made possible by the democratic ambience, after the so-called third wave of democratization, as well as to the combination of electorally responsible governments and the pressure of the coalitions formed around the new social movements (Garay, 2016). However, LA countries face the great paradox of having generated a dualism in social protection, since there is a part of the population included in the institutionalized social security system while another part receives a means tested residual protection. Reducing this dualism by increasing the levels of labor market formality is among the greatest challenges posed to EWS in LA in the future.

However, in contrast with the broad dispersion found in Asia, the level of social spending per capita in LA countries is more even. In Graph 1, most countries occupy the region from the middle of the first column to the upper part of the second one. The block of countries with a low social spending per capita are those where a universal social security system of a contributory type is lacking.

Final Remarks

From a general perspective, it can be said that social security, usually pensions, have been the basis for the building of welfare systems, which have initially structured corporate or 'clientele' models. However, this initial institutional formation advanced mostly towards the development of an institutional WS.

Among the main problems to impede the expansion of social security are poverty and the great dimension of the informal sector of the economy. Governments in emergent countries have established anti-poverty programs as a priority in the 21st century. Because of that, it is possible to characterize the social protection systems there built as EWS. In most countries, at first, the measures had a residual character because they were mainly means tested supply of services and goods, but they have tended to acquire a more inclusive nature, becoming institutionalized, often universal, providing protection to social groups that have been excluded so far. One of the most striking example of this institutionalization can be found recently in LA.

Non-contributory pensions, conditional cash transfers and unemployment insurances are the most relevant and most widespread mechanisms to combat poverty. It is important to emphasize that these means tested subsidies are not aimed to directly combat poverty, but to facilitate the economic transformation of families and communities. They are resources that have been invested in agriculture, allowing women to enter the labor market, or in the acquisition of job skills for the unemployed.

Health expenditure is another central element for the development of the EWS, even in cases of a low social spending per capita. The objective in several of these countries is to establish a national primary care system, but it has had less success in Africa than in the other world regions. Although public education has not been considered in this work, it can be said that its lack greatly conditions the development of social protection in the most backward countries. A positive example is the region of LA, where conditional transfers based on education are a key element in fighting poverty and, at the same time, help the formation of human capital and the formalization of the labor markets.

As this paper has shown, there are striking differences among the four regions and also among the countries in each region, particularly in Asia. Nevertheless, LA countries have among themselves a more similar pattern of provision of welfare and of social spending per capita, as well as pos-communist European and African countries. LA and pos-communist European have more frequently structured social protection systems that can be called EWS. In these two regions, it has not been achieved in countries with a low social spending per capita, where a universal social security system of a contributory type is lacking. In contrast, the vast majority of African countries is lagging behind, with few exceptions, in building up an inclusive and more robust system of social protection.

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