



Welfare Regimes in Latin America: A Retrospective Comparative Analysis

Regímenes de Bienestar en América Latina: Un análisis comparativo retrospectivo

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ABSTRACT

In this article we begin a retrospective study of the redistributive policies that were put into practice in Latin America between the 1990s and 2010s, namely in the periods between 1990-95 and 2010-15, taking into account the political factors of that context. Actors, institutions and political arrangements that were devised in the literature as modifiers of the development scheme must be analyzed retrospectively, with regard to their contribution to the consolidation of different trajectories of welfare regimes. Problematising what happened in this period becomes essential to understand the impact of the rupture and the scope of the continuity of the development process in eight different welfare regimes: Argentina, Bolivia, Brazil, Chile, Colombia, Mexico, Uruguay and Venezuela.

Keywords: Welfare regimes, Latin America, institutional trajectories.

RESUMEN

En este artículo comenzamos un estudio retrospectivo de las políticas redistributivas que se implementaron en América Latina entre las décadas de 1990 y 2010, específicamente en los períodos comprendidos entre 1990-95 y 2010-15, teniendo en cuenta los factores políticos de ese contexto. Los actores, instituciones y arreglos políticos concebidos en la literatura como modificadores del esquema de desarrollo deben ser analizados retrospectivamente, en relación con su contribución a la consolidación de diferentes trayectorias de regímenes de bienestar. Problematicar lo ocurrido en este período resulta esencial para comprender el impacto de la ruptura y el alcance de la continuidad del proceso de desarrollo en seis regímenes de bienestar diferentes: Argentina, Bolivia, Brasil, Chile, Colombia, México, Uruguay y Venezuela.

Palabras clave: Regímenes de bienestar, América Latina, Trayectorias institucionales.

Cita en APA 7: Gonçalves Bernardes, B. (2024). Regímenes de bienestar en América Latina: un análisis comparativo retrospectivo. *Revista Latinoamericana de Ciencias Sociales – Relacis*, V.3 (1).

Introduction

Latin American Regimes

Welfare states are an institutional force, established by principles that vary according to ideal types, or regimes (Esping-Andersen, 1990; Pierson, 2000). These regimes provide a theoretical basis for interpreting the complex historical and political process of social development strategies.

In the case of Latin America, the concept of social welfare regime has been identified as a set of policies and strategies undertaken by the dynamic between State, Market and Family (Arts & Gelissen, 2012; Barrientos, 2004, 2009; Huber & Bogliaccini, 2012; Filgueira, 1998, 2005; Fleury, 1999; Franzoni, 2007; Gough, 2004, 2013; Munck, 2013; Draibe and Riesco, 2007; Segura-Ubiergo, 2007). The first studies conducted by Mesa-Lago (1978, 1994) and Filgueira (1995, 2008) classify welfare schemes according to historical aspects, with the former defining them as (1) pioneers, with almost universal social protection coverage, (2) intermediate, characterized either by stratification in coverage and access to services, or by greater coverage of an almost universal nature, and (3) late, with a small percentage of the population covered and a limited number of social services. For his part, Filgueira (1998, 2005) adapts Esping-Andersen's theses to Latin America, understanding regimes in three distinct historical phases: liberal (1920-1950), developmentalism (1950-1970) and the Washington Consensus, defining three regimes: universal-stratified with extensive but stratified social protection; exclusionary comprising states with little capacity to intervene and few resources; and dual, which combine stratified and exclusionary social welfare types.

At a second level of analysis, Franzoni (2007), Gough (2004, 2013), Segura-Ubiergo (2007) or Draibe and Riesco (2007) generically classify regimes from the point of view of the weight of the state, the market or families and the dynamic institutional relationship between them. In this sense, they vary in terms of protectionism - with a greater focus on public policies centered on the state and decommodification -, productivism - where policies protect certain sectors of activity or where there is an intermediate degree of commodification -, familiar - where social coverage is minimal or non-existent - and, finally, mixed, i.e. where different degrees of protectionism and productivism coexist.

As Barrientos (2004, 2009) points out, the 1980s and 1990s changed Latin American regimes, which saw a clear deterioration in state services, along with the stratification of labor protection, an increase in informality, and the success of the economy's international insertion. Along with these elements, the 2000s and 2010s presented themselves as an opportunity that is important to revisit, particularly with regard to the effects of political-institutional factors in shaping new dynamics in social welfare regimes.

Data analysis

The liberalization/privatization process of Latin American welfare regimes presents a different spectrum between cases, particularly between those that would follow a more orthodox model, compared to others that are more moderate (Abel & Lewis, 2002; Barrientos, 2004). In regimes where privatization has reached high levels, including replacing the old protection and health systems, nationalization reforms have become more difficult, since the costs of change are

higher for the power structure that benefits certain political and social actors. However, even in cases where the liberalization process was more moderate, limitations arise in the transformation of welfare regimes due to pressure from the most privileged groups and sectors (Abel & Lewis, 2002; Cortés, 2008; Pribble, 2011, 2013a, 2013b). By the early 2000s, a transformation of the political landscape in Latin America had become evident (Malamud, 2009; Munck, 2008; Munck, 2009; Patrício, 2012).

In this milieu, comparative qualitative analysis (QCA) makes it possible to assess possible pathways through multi-causal analysis in two different set of data (1990-1995/2010-2015) (Amenta & Hicks, 2008; Ragin, 2008). The main step in its application is to construct points by association, case by case, for each index. As the annex table shows, these indices are constructed using standardised indicators (z-scores) (Katz et al., 2005).

Table 1.

Index and indicators

Index	Indicators	Source(s)
Institutionalized Public Welfare (IPW)	<i>Public spending by functions, in percentages of GDP (central government)</i>	ECLAC
	<i>Proportion of persons above retirement age receiving a pension</i>	ILO, Rudra (2007)
	<i>Pupils starting grade 1 and reaching the last grade of primary school (%)</i>	ECLAC
	<i>Hospital beds (per 10 000 population)</i>	WHO, Rudra (2007)
Liberal Spectrum (LS)	<i>Private social security systems</i>	De la Torre & Rudolph (2018), Filgueira (1998, 2005), Mesa-Lago (2012), Kritzer (2000), Rofman (2005)
	<i>Private expenditure on health as a percentage of total expenditure on health</i>	ECLAC, WHO
	<i>Private schools enrollment</i>	ECLAC
	<i>Economic liberalisation</i>	The Heritage Foundation
Vulnerability Matrix Index (VMI)	<i>Poor and extreme poor (% of population)</i>	ECLAC
	<i>Informal sector as a percentage of total workforce</i>	ECLAC
	<i>Vulnerable population in the labor market (%)</i>	ECLAC; ILO
Political Fragmentation (FRAG)	<i>Constitutional structure</i>	Lijphart (1984), Huber, Ragin & Stephens (1993), Cheibub, Elkins & Ginsburg (2011)
	<i>Party system fragmentation</i>	Gallagher & Mitchell (2005); electoral data
Institutional Left (LFT)	<i>Left in government (%)</i>	Electoral data
	<i>Left in parliament (%)</i>	Electoral data
	<i>Union density</i>	ILO

As shown in table 1, points by association take into account five index each formulated by several indicators explored in the literature. Taking into account the dynamic relationship between the state, the market and the family, we analyze the effort of public policies through the index of "institutionalised public welfare" (IPW), which is the result of four indicators: the aggregate of public expenditure (AggPE), an indicator of generational stratification (Pensions) and two indicators of performance in the education (Edu) and health sectors (Hth).

$$IPW = \frac{AggPE + Pens + Edu + Hth}{4}$$

The Liberal Spectrum index (LS) is the result of an evaluation of the historical liberalisation that took place between the 1970s and 1990s in Latin American welfare systems measured by privatisation indicators (Abel and Lewis, 2002; Avelino et al., 2005; Barrientos, 2004; Ffrench-Davis, 2005; Filgueira, 1998, 2005; Franzoni, 2007, 2009). There is also a measure of social security systems (PrivSS). Health and education indicators are also included, as well as an indicator of the economy's openness (EO).

$$LS = \frac{PrivSS + PrivHth + PrivEduc + EO}{4}$$

As ECLAC has emphasised with regard to population gaps and vulnerabilities (Barros et al., 2009), the vulnerability matrix index (VMI) is measured on the basis of a poverty indicator and two employment indicators.

$$VMI = \frac{Pov + InfW + WV}{3}$$

Alongside federalism, electoral systems, presidentialism and the interaction between the latter and the legislature also have a significant impact on policymaking (Kitschelt et al, 2010; Patrício, 2012; Pribble, 2013a). Constitutional structure is a measure that allows us to consider opportunities and constraints for parties in pursuing policies (Lijphart, 1984; Cheibub, Elkins and Ginsburg, 2011; Huber, Ragin and Stephens, 1993; Huber and Stephens, 2001). In parallel, we take into account party fragmentation as a measure of competition (Bartolini and Mair, 1990; Mair, 1990; Kitschelt et al., 2010).

$$FRAG = \frac{Const + PartFrag}{2}$$

In the case of the left, from the perspective of mobilisation, but especially systemic institutionalisation (Esping-Andersen, 1990; Powell, 2009; Nilsson, 2011), we consider its weight in the formation of government coalitions, its election to the lower house (Murillo, 2001; Strom and Nyblade, 2009) and union density.

$$LFT = \frac{LftGov + LftParl + UDens}{3}$$

For the first set of data (1990-1995), Argentina, Brazil, Chile and Uruguay have been referred to as pioneering countries in the institutionalisation of social policies (Mesa-Lago, 1994). However, Filgueira (1998, 2005) clarifies that both social spending and the criteria for investment in welfare policies differentiate Argentina, Chile and Uruguay (state-stratified) from the Brazilian

and Mexican cases. However, taking into account the education, health and social protection sectors, Filgueira (1998, 2005) considers that the Brazilian case is closer to the state-stratified regime, namely in public spending, social protection and health.

For the liberalisation index, Chile, Argentina and Colombia have high values; Argentina and Uruguay had not completely privatised their social security systems (Mesa-Lago, 2012); Mexico and Uruguay also show identical results in terms of health privatisation and economic openness; the differences between Bolivia and Venezuela are accentuated by the highly privatized social security systems.

The Bolivian case is the most vulnerable, both in terms of access to and the structure of the labour market, and in terms of poverty. Colombia differs from the former in the structure of the labour market. Brazil, Mexico and Venezuela have average vulnerability values. In the case of the political fragmentation index, Brazil stands out with the highest value. Argentina and Venezuela are classified here as cases of medium fragmentation.

Table 2.

Degrees of membership, by case and index (1990-1995)

Institutionalized Public Welfare (IPW)		
Cases		Score
Uruguay, Argentina	Highest	1
Brazil, Chile	High	0.8
Mexico	Average	0.6
Venezuela	Low	0.4
Bolivia, Colombia	Lowest	0.2
Liberal Spectrum (LS)		
Cases		Score
Chile	Highest	1
Argentina, Colombia, Mexico, Uruguay, Venezuela	High	0.8
Bolivia, Brazil	Average	0.6
Vulnerability Matrix Index (VMI)		
Cases		Score
Bolivia	Highest	1
Colombia	High	0.8
Brazil, Mexico, Venezuela	Average	0.6
Chile, Uruguay	Low	0.4
Argentina	Lowest	0.2
Political Fragmentation (FRAG)		
Cases	Caraterísticas	Score
Brazil	Highest	1
Argentina, Venezuela	Average	0.6
Bolivia, Mexico	Low	0.4
Uruguay	Very low	0.2
Chile, Colombia	Lowest	0
Institutionalized Left (LFT)		
Cases	Caraterísticas	Score
Chile	Average	0.6
Argentina, Brazil, Mexico, Venezuela	Low	0.4
Uruguay	Very low	0.2

Bolivia, Colombia Lowest 0

In the second set of data (2010-2015), Argentina has the highest IPW values, followed by Brazil, Chile and Uruguay (Table 3). Once again, these four pioneering countries continue to have the highest public spending on average (Mesa-Lago, 1994). Bolivia, Mexico and Venezuela follow with average institutionalization. Bolivia is the case with the highest growth in all indicators.

In terms of the institutionalization of private systems, Chile continues to be the paradigmatic example. Mexico has maintained the weight of private healthcare and has seen a slight increase in the indicators for private education and economic openness; the same is true of Colombia. Bolivia has also maintained part of its private social security systems, along with a very significant increase in private education. Still with a medium-high level of liberal institutionalization is Brazil, which is consolidating the role of private health and education systems. The Venezuelan case continues to show a high proportion of private healthcare, while maintaining the format of social security systems. Finally, the Uruguayan and Argentinian cases show a considerable decline in the private health sector.

The VMI index shows a significant increase in informal labour. Bolivia, Colombia, Mexico, Venezuela and Argentina register significant increases. In the poverty indicator, Mexico shows a significant increase, while the other cases show significant decreases. The Venezuelan case maintains its vulnerability structure, while the Brazilian case is closer to Argentina.

Brazil and Argentina maintain a high degree of political fragmentation. The Colombian case shows greater political fragmentation as a result of the end of the former electoral monopoly. The Bolivian case, on the other hand, has more diffuse constitutional fragmentation due to the inclusion of new constitutional mechanisms.

The Bolivian, Uruguayan and Venezuelan cases also show an exponential increase in the presence of the left in government and the legislature compared to the 1990s. The Argentinian and Chilean cases show a consolidation of the left in government and parliament.

Table 3.

Degrees of membership, by case and index (2010-2015)

Institutionalized Public Welfare (IPW)		
Cases		Score
Argentina, Brazil, Chile, Uruguay	Highest	1
Mexico	High	0.7
Bolivia, Colombia, Venezuela	Average	0.6
Liberal Spectrum (LS)		
Cases		Score
Chile	Highest	1
Mexico	High	0.8
Bolivia, Brazil, Colombia	Above average	0.7
Argentina, Uruguay, Venezuela	Average	0.6
Vulnerability Matrix Index (VMI)		
Cases		Score
Bolivia	Highest	1
Colombia	High	0.9
Mexico, Venezuela	Above average	0.7
Argentina, Brazil	Average	0.6

Chile, Uruguay	Low	0.4
Political Fragmentation (FRAG)		
Cases		Score
Brazil	Highest	1
Argentina	High	0.8
Colombia	Average	0.6
Bolivia, Chile, Mexico	Low	0.4
Uruguay, Venezuela	Lowest	0.2
Institutionalized Left (LFT)		
Cases		Score
Bolivia	Highly	1
Uruguay, Venezuela	High	0.9
Argentina, Chile	Above average	0.7
Brazil	Low	0.6
Colombia, Mexico	Lowest	0.2

Cases

Taking into account the main objectives, it is to be expected that liberalisation factors, in conjunction with vulnerabilities in the labour market and access to income, will become necessary and sufficient factors for the lower degree of institutionalized public welfare. The FRAG and LFT indices, on the other hand, will only be more relevant in the second set of data. The factors 'fragmentation' and 'institutional left' are both sufficient for the institutionalization of public welfare.

The liberalisation factor is usually necessary and sufficient in cases with a higher IPW, making it a viable explanation. Even in cases with a lower degree of liberalisation, the LS factor is consolidated as a constant of the public welfare development model (Barrientos, 2005, 2009).

In a parsimonious solution ($LS \sim LFT$), the cases of Argentina, Brazil and Mexico express the importance of the process of privatization of welfare services combined with the lesser presence of the institutional left. According to Filguera (2005) and Barrientos (2009), Mexico expresses the importance of the liberal spectrum through the deep privatization reforms of social security systems and the multiplication of welfare forms to combat poverty. Finally, Bolivia, Colombia and Venezuela are cases of low public investment in social welfare.

Table 4.

Consistency 2010-2015

Configuração	Consistency	Cases
$LS \sim VMI^+ +$	0.96	ARG, BOL, BRA, COL, MEX, VEN
$LS \sim FRAG * LFT$	1	BOL, CHL, URU, VEN

Fonte: FSQCA 3.0.

In this respect, we can see the continued importance of the LS indicator, which is highly present in all cases, in parallel with the vulnerability indicator. For this set of data, the necessity test for the IPW result with the LS and FRAG indicators achieves satisfactory consistency (0.91).

Table 5.

Outcome, 1990-95

Configuração	Cases
$LS^* \sim VMI^* \sim FRAG$	CHL, URU
$LS^* FRAG^* \sim LFT$	ARG, BRA, VEN
$LS^* VMI^* \sim LFT$	MEX
$\sim IPW = LS^* VMI^* \sim LFT$	BOL, COL

Source: *FSQCA 3.0*.

Contrary to the results from the first half of the 1990s, the trajectories clearly group the cases, where the lower presence of VMI dictates a higher presence of IPW. The LS variable also maintains a high consistency (0.83), and it is likely that the historical institutionalist argument of the dependent trajectory can be applied in determining the public institutionalization of welfare.

Table 6.

Outcome, 2010-2015

Configuration	Cases
$LS^* VMI^* FRAG^* (LFT)$	ARG, BRA
$LS^* VMI^* \sim LFT$	COL, MEX
$LS^* \sim VMI^* LFT^* \sim FRAG$	CHL, URU
$LS^* VMI^* LFT^* (\sim FRAG)$	BOL, VEN

Source: *FSQCA 3.0*.

CHILE AND URUGUAY: BETWEEN PARADIGMS

Within the 'liberal regime' classification, Chile represents an institutional framework that has allowed the legacy of policies initiated by the military dictatorship to continue (Pribble, 2013b). During the coalition governments, there was an increase in investment through social programmes and policies, in line with the privatization process. In the second half of the 1990s, the *Concertación* saw a split between those who favored a more productivism approach and those who preferred a more protectionist approach (Pribble, 2013a). However, fear of a return to uncontrolled public accounts and the strong presence of technocracy proved to be important factors (Pribble, 2013). Even with the internal divisions caused by the ideological differences between the ruling coalitions and parliamentarians, there is a greater weight of the legacy of policies, i.e. greater costs in changing the institutional framework of public welfare.

In Uruguay, the *Frente Amplio* (FA) won the 2004 presidential elections. The rise of this common left-wing front was accompanied by a continuous improvement in the country's socio-economic conditions. In Chile, Bachelet's first government approved reforms to the pension system, now centered on the profits generated by the copper industry, measures initiated by the previous President Lagos and which made it possible to increase coverage and benefits (Pribble, 2013). However, due to the increase in coverage, Bachelet and the statist wing of the *Concertación* would face renewed concerns about the increase in spending and the difficulties of universalizing the system (Pribble, 2013). Also, in the field of combating poverty, Presidents

Aylwin and Frei would introduce various income transfer programmes, without them achieving coverage as significant as the Lagos government's *Chile Solidario* (Pribble, 2013b).

In health, Chile continued to have a dual system with only a small proportion of the population able to access private services (Pribble, 2013b). The public sector, which in the early 2000s took care of more than 70 per cent of beneficiaries, remained underinvested, while the private sector became a strong political player (Pribble, 2013b). Despite the 2004 reform that established the Plan de *Acceso Universal a Garantías Explícitas*, private investment in health remained at around 40 per cent. Despite these changes in the social protection and health systems, it is clear that not only is the productivism character maintained through the addition to the international and labour markets, but also the political obstacles imposed by the fear of controlling public debt. Once again, the productivism nature of the Chilean welfare system was maintained despite the governance of the more statist sectors of the *Concertación*.

Since the 1990s, governments in Uruguay have broadened the spectrum of family support and protection. In 1995, an increase in the family allowance was approved and in 1999 a non-contributory version of this benefit was established (Vigorito, 2006). Still under the presidency of Colorado Battle, Uruguay continued to universalize this support (Pribble, 2013). The universalization of child benefit was greatly boosted by electoral competition between the traditional parties and the gradual rise of the FA (Pribble, 2013a).

In health, Uruguay presents a different scenario, especially as the military dictatorship continued with public investment (Castiglioni, 2005). However, it remained very unequal with problems of financial sustainability in the private sector between the 1990s and the early 2000s (Pribble, 2013a). With the financial and social crisis, demand for the public sector increased, reaching more than half of the population in 2006. More radical changes in the sector were also held back by the division of the private sector, which was less corporatist and politically dominant than in Chile (Pribble, 2013). It wasn't until the FA governments that the *Servicio Nacional Integrado de Salud* was established, with changes in access, funding and increased coverage.

Table 7.

Party fragmentation, electoral volatility and majorities: Chile and Uruguay (1990-2015)

	Fragmentation	Volatility	Senate majority	Lower house majority
Chile (1990-95)	1.99	10	1989 - No 1993 - No	1989 - Yes 1993 - Yes
Chile (2010-15)	2.13	13.9 (2009)	2009 - No 2013 - Yes	2009 - No 2013 - Yes
Uruguay (1990-95)	3.33	11.9	1989 - No 1994 - No	1989 - No 1994 - No
Uruguay (2010-15)	2.65	14.6 (2009)	2009 - Yes 2014 - No	2009 - Yes 2014 - Yes

Sources: *Servicio Electoral de Chile* e *Corte Electoral* (Uruguay); Roberts e Wibbels, 1999, Mainwaring, España e Gervasoni (2009), Concha (2014).

In the cases of Chile and Uruguay, the reversal and reaction to the liberal character of their welfare regimes suggests different degrees. While in Chile the institutional reversal is clearly

more complex, with a greater weight of the legacy of policies. While the *Concertación* represented a quasi-programmatic continuity in the management of public debt, in other words, the costs of institutional change becoming higher; in Uruguay, the degree of continuity also shows some signs of reaction in the party-political field, with the more statist legacy of its welfare regime maintaining its distinctive mark, the result of lower informality and the proportion of poor people and the maintenance of certain electoral cleavages inherited from the traditional hegemonic bipolar dispute. However, the financial and social crisis had a defining impact on health and protection policies, projecting a moderate institutional reaction within the structure of the welfare system during the Vasquez and Mujica governments. In both cases, the lesser presence of political-institutional fragmentation proved to play a decisive role in the continuity of policies and the institutional framework of welfare regimes, unlike the institutional left, which had a more moderate effect.

ARGENTINA AND BRAZIL: THE PROTECTIONIST TURN

The 2001 financial crisis greatly affected Argentina's social fabric (Munck, 2008). At the same time, since the 1990s, the Peronist movement and the Justicialist Party had been facing a series of divisions caused by the neoliberal public policies of then President Menem (Levitsky, 2003; Pribble, 2013a). The Justicialist Party has always been concerned with building a mass base allied to a mix of trade union organizations and representatives from different sectors of society. While Menem (1989-1999) embraced the liberalisation context, the Kirchner governments (2003-2007/2007-2015) were later protectionist. This flexibility is also explained by the party's organizational evolution, which Pribble (2013b) considers to be the result of a clientelist mechanism.

In 2003, the Duhalde government (2002-2003) established the *Jefes y Jefas* program to protect elderly people over the age of 70 who were not covered by the pension system. However, this plan only multiplied the stratified nature of the complex pension system, with a particularistic vision of protecting certain sectors (Bertranou and Grushka 2002). Paradoxically, but from a political point of view, it was in 2006 that the Justicialist government of Néstor Kirchner approved a moratorium measure on the pension system for citizens of retirement age, paying the total remaining contributions in instalments. This measure would greatly increase pension coverage, with future generations not being eligible (Pribble, 2013a). It was in 2008 that Cristina Kirchner's first government published Law 26425, which completely eliminated private pension systems, pooling their funds into a state-run system and making all pensioners eligible for contributory and non-contributory systems (Arza, 2013). These reforms were almost always accompanied by the hegemony of the PJ, reinforced by the unsustainability of the old pension system, and the decline of the mixed system affected by the aftershocks of the crisis. At the same time, the Kirchner government decreed universal child benefit for families in the informal market, with the process of renationalizing the private pension system (Lo Vuolo, 2013).

The decline and unsustainability of the private systems reinforced the more statist nature of the Justicialist government. The federalist and fragmented nature of the forms of social protection, with consequences for coverage and access, also had a significant impact on this decision, given that elections for state governments were to be held in 2009. The regional nature of Argentinian politics is no less important, and was a relevant factor in the *Jefes y Jefas* program, with clear consequences for the PJ's clientelist and hegemonic machine. At the same time, the

loss of seats in the Senate and Chamber of Deputies during the mid-term elections reinforced the need to extend non-contributory policies, due to greater electoral competition (Pribble, 2013b).

During the Menem governments, there was a profound regression of the health system with the deregulation of the *obras sociales* program and the decentralization of hospital administration. Despite attempts to reform it, opposition from the unions hindered the change in funding, which would have consequences for the public health system, which began to treat affiliated and privately insured patients (McGuire, 2011; Murillo, 2001). The transfer of hospitals to regional administration established greater segmentation in the quality and supply of the public system (Levitsky, 2003; Murillo, 2001; Pribble, 2013b).

In the Brazilian case, the idea of universalization in the provision of services and resources played an important role in the process of democratic transition (Melo, 2014). This debate was shaped by the failure of the policies of the 1980s. In the field of health, the Sarney government (1985-1990) created the single decentralized health system, along with reforms to cover the poorest population. Despite some incentives created over the course of almost two decades, the SUS would continue to see non-continuous use, in parallel with private services and alongside segmentation in the quality of services and especially unequal access (Gragnotati et al., 2013; Melo, 2014). The governments of Fernando Henrique Cardoso (1994-2002) and Lula da Silva (2003-2010) significantly increased health spending, with the latter playing a crucial role in funding primary care and family health units (Melo, 2014). As in Argentina, Brazil began a process of decentralization, which highlighted the segmentation of responses. At the same time, the Lula governments established public-private partnerships for hospital management (Melo, 2014).

Regarding pension funds, the Cardoso government initiated reforms to state benefits for civil servants, while keeping private schemes intact. This parametric reform made it possible to make the system more equitable by bringing civil servants and formal workers (Melo, 2014). However, it would be the Lula governments and the first Rousseff government (2011-2014) that would introduce ceilings on the public pension system, but also make the Public Servant Pension Fund effective (Melo, 2014).

Table 8.

Party fragmentation, electoral volatility and majorities: Argentina and Brazil (1990-2015)

	Fragmentatio n	Volatility	Senate majority	Lower house majority
Argentina (1990-95)	3.35	13.2	1995 - Yes	1989 - No 1991 - No 1993 - No 1995 - Yes
Argentina (2010-15)	5.10	25.1 (2010)	2011 - Yes 2013 - Yes	2011 - Yes 2013 - Yes
Brazil (1990-95)	8.42	27.7	No	No
Brazil (2010-15)	11.79	18.2 (2010)	No	No

Sources: IFES – *Election Guide*, Dirección Nacional de Elecciones (Argentina) and Tribunal Superior Eleitoral (Brazil). Roberts e Wibbels, 1999, Mainwaring, España e Gervasoni (2009), Concha, 2014.

In this context, the debate on the sustainability of the pension system and the segmentation of public and private protection systems would continue (Melo, 2014). Also, in the field of social protection, the PT governments did not innovate in terms of coverage for informal workers and non-contributory responses, proliferating conditional transfer program such as *Bolsa Família* (Hunter, 2010; Lavinas, 2013). The first efforts to standardize these responses were still observed in the 1990s, along with the expansion of their coverage in the face of the growing informal market, as is the case with *Bolsa Família* (Arza, 2013; Campello and Neri, 2013; Mcguire, 2011).

As we have seen, the Argentine and Brazilian cases present greater political fragmentation, with consequences for the formulation of public welfare policies. In the case of the PJ, where a shift to the left is visible, pragmatism grants greater decentralization, along with a greater focus on direct resource transfer policies, leaving the health and education sectors almost untouched, where greater institutional fragmentation makes changes difficult. In the case of the PT, where the influence of social movements and unions loses weight due to greater government and legislative fragmentation, programmes such as *Bolsa Família* have reached the poverty pockets more universally (Lavinas, 2013). The PT would gradually achieve a catch-all party structure with hints of a cartel party, a path that the PJ had already taken since the 1990s. None of this would be possible without the high political fragmentation that generates incentives for the continuous negotiation of public policies, as well as generating fewer incentives for the reversal of the institutional process, since the beneficiaries of the institutional process reinforce this same framework. However, both present a framework of policy legacy, where the institutional reaction occurred in a moderate manner, with a full integration of the continuity of policies from the 1990s, this time in a pragmatic and tendentially inclusive manner in the face of greater political fragmentation.

COLOMBIA AND MEXICO: THE PRODUCTIVIST CONTRAST

In addition to the reduced party fragmentation in the early 1990s, Colombian pension and health systems underwent a profound process of decentralization and segmentation of their responses and forms of administration (Mesa-Lago, 2012). In this sense, it seems to us that this party fragmentation is an important factor in the definition of public policies, not because of its greater dispersion in the political-party struggle, but especially because it is part of the continuity of the hegemony of the centrist political vision in the management of the welfare regime.

Colombia has decentralized its services more effectively, along with complementary and competitive private services. This decentralization corresponds to the establishment of municipal governments during the Gaviria government (1990-1994), along with the structural reforms proposed by international organizations and implemented during the 1990s. In the health sector, decentralization was more pronounced, with municipalities gaining responsibility for the administration of primary care and preventive medicine (Cruz-Saco, 2002; Mesa-Lago, 2012).

The Gaviria government also began a reform of the social security system in 1993, separating the pension system from the health system (Cruz-Saco, 2002). Still in the area of pensions, Colombia would establish two parallel selective systems, with the formal worker choosing which system to choose. However, these reforms did not significantly change the levels of coverage, since the share of the informal workforce gradually increased between the 1990s and 2000s (Cruz-Saco, 2002). This first reform would completely transform the system by

establishing a competitive private sector, with a clear majority of the Liberal Party in the Chamber of Deputies and the Senate. This reform would maintain the various protection schemes for civil servants and oil sector workers (Mesa-Lago, 2012). The same happened in 2002 during the second reform of the system, this time with the introduction of new civil servants and oil sector workers into the general system, and changing the pension schemes for teachers, military personnel and former presidents (Mesa-Lago, 2012). At the same time, and as Mesa-Lago (2012) considers, the incentives to remain in the public sector would eventually diminish from 2003 onwards, since the private sector would produce greater income for beneficiaries. The third reform attempt in 2006 sought to end the public system altogether. However, the greater fragmentation in the legislature would prevent this reform, followed by the institutionalization of a publicly-traded system, *Colpensiones*.

In the health sector, decentralization reached its zenith, with a multiplicity of forms of response, between national, regional and municipal public models and, in the private sector, with the segmentation of forms of protection between civil servants, military personnel, teachers and other sectors (Mesa-Lago, 2012).

Also relevant in the Colombian case are the profound inequality in income distribution and the ongoing military conflict (Draibe and Riesco, 2007). The war climate became a structuring factor in the welfare regime. This is demonstrated by the *Familias en Acción* and *Agro Ingreso Seguro* programmes, which provide conditional income transfers and access to credit, and incorporate the agricultural sector, with a clear productivism vision.

In the face of President Uribe's neo-populist stance, the presidency of Juan Manuel Santos (2010-2018) demonstrated a greater capacity for dialogue and openness, in a more fragmented political scenario (de la Roche, 2015). President Santos' pragmatic vision led to the Rural Development with Equity program. This program aimed to support the agroexport sector in light of the design of the Free Trade Agreement with the United States, demonstrating a clear productivism commitment by the regime (De la Roche, 2015).

In Mexico, the model of integration through privileged trade relations with the United States, which defines the productivism scheme of its regime, would be maintained (Brachet-Márquez, 2004; Franzoni, 2007). Despite the lower party fragmentation, Mexico also proceeded to decentralize and segment its health and social protection systems. The continuity of the Mexican regime is also due to the element of segmentation and stratification. The system maintained specific schemes for different corporate sectors, and in the public sector, several parallel schemes would remain (Mesa-Lago, 2008, 2012; Murillo, 2001). Resisting changes to the pension system, Mexico would be one of the last to continue with its replacement reform (Mesa-Lago, 2012). This occurred in a climate of systemic collapse, demonstrating the importance that stratification and segmentation represented for the PRI's own political and governmental structure, along with the party's liberal shift in the 1980s and 1990s. This reform, initiated during the Zedillo government (1994-2000) with broad majority support in the legislature, would establish an individual capitalization regime with private administration of certain plans and state supervision. As in Colombia, the coverage of this system showed only marginal changes of around 30% (Cruz-Saco, 2002).

Table 9.

Party fragmentation, electoral volatility and majorities: Colombia e Mexico (1990-2015)

	Fragmentatio n	Volatility	Senate majority	Lower house majority
Colombia (1990-95)	2.45	10.2	1990 – Yes 1994 - Yes	1990 – Yes 1994 – Yes
Colombia (2010-15)	5.32	15.9 (2010)	2010 – No 2014 - No	2010 – No 2014 - No
Mexico (1990-95)	2.66	14.8	1991 – Yes 1994 - Yes	1991 – Yes 1994 – Yes
Mexico (2010-15)	3.19	21.0 (2010)	2012 – No 2015 – No	2012 – No 2015 - No

Sources: *Registraduría Nacional* (Colombia) and *Instituto Nacional Electoral* (Mexico). Roberts e Wibbels, 1999, Mainwaring, España e Gervasoni (2009), Concha, 2014.

As in Colombia, the Mexican health system maintained a degree of segmentation between formal, self-employed and informal workers, with very limited coverage for the latter two (Mesa-Lago, 2012). In health, a decentralized system followed, with the public sector fixed for workers without a contract, alongside private schemes for formal workers, a specialized family insurance for rural workers and specific schemes for public employees of the central administration, and others for employees of regional and local administrations (Mesa-Lago, 2012; Murillo, 2001). These reforms would be initiated by the Gortari government (1988-1994), after the most contested elections to date, resulting from some splits in the PRI elites (Greene, 2007; Murillo, 2001). The victory of Vicente Fox (2000-2006) marked the introduction of democratic alternation and the establishment of a bipolar system, along with a deep economic crisis during the Zedillo government (1994-2000). President Calderón (2006-2012) reformed *PRONASOL* by creating the *Oportunidades* program with a multidisciplinary view of poverty, with incentives for education, access to health care and food, along with the food support program to support families in accessing basic food baskets (Levy and Schady, 2013).

As Haggard and Kaufman (1995) point out, catch-all and cartel parties are better equipped to manage the structural adjustments imposed by the international economy, as in Argentina, Colombia or Mexico. Colombia and Mexico did not experience military dictatorships, which did not prevent traditional parties from managing the crisis and obtaining electoral gains for a certain period (Greene, 2007). At the same time, it is also from the traditional parties of these party systems that greater electoral competition has been generated.

While in the Colombian case, the traditional bipolar system gives rise to greater political-institutional fragmentation, in Mexico we also observe a lower capacity for institutional reaction and greater levels of adaptation, without, however, this adaptation occurring first through the political hegemony of the PRI, and second through the continuity of policies even after the break of this hegemony (Greene, 2007).

In Colombia, the liberal matrix of the welfare regime is maintained, although fragmentation occurs especially within the elites of the liberal and conservative parties. The Colombian regime assumes itself in this political scenario, with a productivism tone, more focused on competition, but with lower results than Chile, due to the massification of the informal workforce and the lower redistributive capacity.

The particularist, clientelist and corporatist aspects were clearly shaped by the format of the political system. The state of war in Colombia and the political hegemony of the PRI would continue to define social welfare schemes, with less political-institutional fragmentation and a residual presence of the institutional left. Multi-challenged poverty and the exponential growth of informal work, combined with the productivism vision of the State, profoundly mark these welfare regimes.

BOLIVIA AND VENEZUELA: THE FAMILY-PROTECTIONIST EVOLUTION

Compared to the 1990s, Bolivia began to stand out in terms of tax effort and social investment in the social protection and education sectors, compared to other countries with low GDP per capita (Cecchini et al., 2014). In 1996, the country began its process of reforming its social security system (Cruz-Saco, 2002). As would happen in Colombia and Mexico, this reform would end up separating health from the contributory pension system. However, the Bolivian social security reform would follow a model identical to that of Chile, with the total replacement of the public pension system by a private system, with the State maintaining minimum pensions and primary health care. Bolivia would be the only country to universalize its pension system, including military and police personnel in the new general system, as well as to establish the *Bonosol* for non-contributory social pensions (Filgueira, 2005; Mesa-Lago, 2012; Mcguire, 2011).

With support from the World Bank, the first social emergency fund in Latin America was launched in 1987, which later gave way to microcredit schemes and social investment funds (Mcguire, 2011). However, its scope was limited (Mcguire, 2011). It would be in 1996, with the creation of the *Bonosol*, a program established as compensation for the privatization of public companies, that Bolivia achieved, twenty years later, a non-contributory coverage well above the Latin American average (Mesa-Lago, 2012; Mcguire, 2011; Rofman, 2005).

The reforms in the health sector would follow the reforms in the social security system initiated by the Sánchez de Losada government, with little or residual integration of the different coverage schemes, with less decentralization and small population coverage (Mesa-Lago, 2012). Due to its “family” nature, the system would end up including a greater concern for families with dependent parents and siblings (Mesa-Lago, 2012). In Bolivia, the structural reforms met with an institutional reaction with the election of President Evo Morales of the MAS. Contrary to the cases of Argentina, Mexico and Colombia, where institutional continuity was generated from political splits within the traditional party elite that managed the liberalization process, in Bolivia the reaction occurred through the gradual fragmentation and erosion of the competitive structure of the party system. The Morales governments (2006-2019) managed to increase pension coverage, especially through the *Bonosol* reform (Arza, 2013). With the renationalization of the hydrocarbons sector, his first government not only increased coverage but also benefits through the *Renta Dignidad*, lowering the eligibility age and granting two types of subsidies: one for non-contributory pensioners and the other, of a supplementary nature (Arza, 2013).

Through the new constitution, Bolivia institutionalized the Unified Health System, a tripartite system between the public sector, the private sector and the social security system, increasing public spending and focusing on primary care.

Breaking the *punto fijo* political system, Hugo Chávez won the 1998 presidential elections (Mainwaring, 2012). As in Bolivia, the political and institutional reaction came from the left, since

the previous political party system did not generate continuity in policies due to the intra-elite fragmentation of traditional parties. In 1988, Venezuelan social security covered only 35% of the total working population. However, Venezuela maintained its public system, amid a complex implementation of structural reforms, greater political fragmentation and the multiplication of social protests (Mesa-Lago, 2012). A new attempt at reform took place at the end of Caldera's term (1994-1999), in line with the Venezuela Agenda negotiated with the IMF. The Asian crisis of 1997 and the first Chavista government suspended the reform, pointing to the integration of all schemes into a general scheme, excluding the military (Mesa-Lago, 2012; Pribble, 2013).

Table 10.

Party fragmentation, electoral volatility and majorities: Bolivia and Venezuela (1990-2015)

	Fragmentatio n	Volatility	Senate majority	Lower house majority
Bolivia (1990-95)	3.81	27.6	1989 – No 1993 - Yes	1989 – No 1993 - No
Bolivia (2010-15)	1.88	35.9 (2009)	2009 – Yes 2013 - Yes	2009 – Yes 2013 - Yes
Venezuela (1990-95)	3.51	20.9	1988 - No 1993 - No	1988 - No 1993 - No
Venezuela (2010-15)	1.88	34.5 (2010)	-	2010 - Yes 2015 - No

Sources: *Tribunal Supremo Electoral* (Bolivia) and *Consejo Nacional Electoral* (Venezuela). Roberts e Wibbels, 1999, Mainwaring, España e Gervasoni (2009), Concha, 2014.

In 2003, the government launched the *Misiones Bolivarianas*, in the context of the pre-campaign for the regional elections. It is important to highlight that despite the victory of the Chavista coalition in the 1998 presidential elections, there was a fragmentation of parties in the Venezuelan parliament, making it even more urgent to ensure hegemony in the political system (Pribble, 2013). The first program launched by Chávez was the *Misión Merval* (2003), with supermarkets financed by the State to provide access to basic goods at affordable prices (D'Elia and Queiroz 2010). Another program that follows the central role of the President is the welfare program *Madres del Barrio Adentro*, with conditional income transfers and support in situations of extreme poverty (Pribble, 2013). Also in 2007, and also as a presidential initiative, the decree extending pensions to women who reach retirement age was issued. In Venezuela, these segmented policies correspond to the family and community structure of the welfare regime. As Pribble (2013) concludes, Chávez would establish up to nine social policy programmes, none of which would achieve a universal character. It is also important to highlight that these purely presidential policies were initiated after the resounding victory in the 2004 gubernatorial elections and after two consecutive majorities in the Chamber of Deputies.

In health, there is still a low degree of integration between the public, private and social security systems, with lower coverage than in other cases (Mesa-Lago, 2012). Segmentation is also visible, with the richest regions obtaining the best medical infrastructures (Mesa-Lago, 2012).

While Venezuela deepens the continuity of its institutional scheme, indicating specific programmes that especially support the “Family” axis and community structures, Bolivia presents less segmentation, with programmes that tend to universalize access. In both cases, the

legacy of policies had much less influence on the consolidation of their welfare regimes. On the one hand, this can be explained by the charismatic leadership of the two leaders, as seen in Evo Morales' *Renta Dignidad* initiative or in the presidential decrees of the Chavista missions (Pribble, 2013). On the other hand, the reduced party fragmentation, together with the establishment of a new bipolarization, also allowed the institutional role of the State to change. Finally, the greatest innovation in these countries is related to the deep financial interconnection between the export sectors and redistribution, guaranteed in periods of international expansion. In these cases, indirect social support guaranteed through price controls in the energy sector is of vital importance (Levy & Schady, 2013).

Discussion

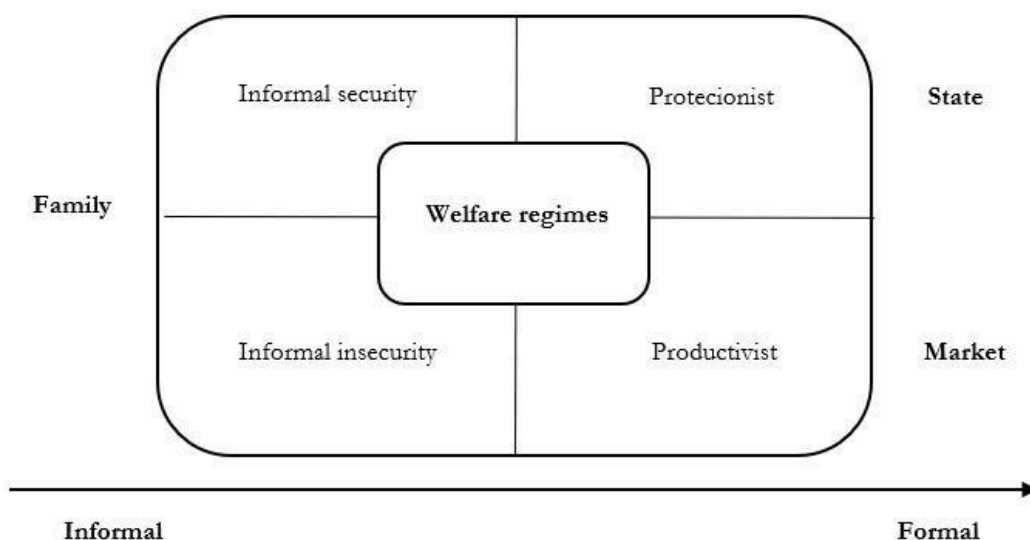
What characterizes the social welfare system in Latin America? First of all, the informality-formality axis. Greater informality in the labor market will represent a regime with greater insecurity and dependence on family and community relations, where clientele phenomena, female unemployment and social conflicts play a relevant role (Cantu, 2015; Cortés, 2008; Gough, 2004, 2013; Gough and Wood, 2004; Rudra, 2005). These regimes will also be those where the market and the State were belatedly incorporated into a formal scheme of protection and incentive for certain professional sectors (Mesa-Lago, 1994, 2012), becoming exclusionary due to the structural inability to redistribute (Filgueira, 1998, 2004), but also family-based (Cortés, 2008; Franzoni, 2007, 2009). In this group we can include as examples the cases of Venezuela and Bolivia, among the informal-secure/insecure regimes (Gough, 2004; Gough, 2013; Gough and Wood, 2004).

Greater formality in the labor determines that the regimes as either state-protectionist or state-productivist (Franzoni, 2007, 2009); however, stratification through greater protection of certain sectors and professional groups, produces greater dependence on the market – in sectors dependent on international insertion – or on the State. These cases are also those where the State initiated social policies earlier (Mesa-Lago, 1994, 2012) and where the conflict is established between the adoption of policies of a productivist or protectionist nature, with Chile assuming itself as paradigmatic of the first and Uruguay of the second. It is along the protectionist-productivist axis that Latin American cases have moved since the 2000s with the rise of protectionist policies, namely in Argentina, Brazil, Bolivia and Venezuela, in contrast to the productivist policies implemented in the 1980s and 1990s.

Finally, political fragmentation appears as the index capable of establishing a rupture in social welfare regimes, altering their protectionist or productivist nature, as is the case in Argentina, Brazil, Bolivia and Venezuela.

Figure 1.

Welfare regimes in Latin America: informal-formal and productivist-protectionist axes



Concluding remarks

Latin American welfare regimes hang on a balance between more advanced welfare states and developmental contexts. In this case, there is no room to undertake an effortless attempt at conceptualizing a “Latin America Welfare State”. Latin America is characterized by fragmentation and divergence; on one hand, fragmentation categorized by historical and political institutional contexts, on the other hand divergence between ideological projects and public policy.

The vulnerabilities observed during the period of democratization are in line with the process of liberalization and the progressive growth of the informal workforce (Abel & Lewis, 2002). Informality began to have a significant impact not only in cases where it already occupied a large part of the workforce, such as in Bolivia, Colombia and Mexico, but also in cases where it saw exponential growth during the 1990s and 2000s, such as in Brazil, Argentina and Venezuela. Specifically, the harmful effects of the crises of the late 1990s and early 2000s can be observed in Argentina, Uruguay and Mexico. While in the Argentine case, we observe an approximation to a regime of statist content, as is the case in Brazil, in the Mexican and Chilean cases, we observe the continuity of their productivist regime. Uruguay, Brazil and Argentina, on the other hand, reinforced the protectionist tendency of their regimes. At the beginning of the 2000s, we observe a gradual reduction in poverty, with the exception of Argentina and Uruguay, which returned to levels close to those of the early 1990s.

As pointed out, the disparities between Latin American regimes are due to different welfare mixes, but also to different levels of investment and results. To a lesser extent than in “familiar” regimes, others with productivist or protectionist characteristics have high proportions of the active population inserted in the informal labor market, which, in parallel with the liberalization of the welfare scheme, characterizes all Latin American regimes emerging from the 2000s. This cross-cutting characteristic determines the greater propensity for the development of welfare policies. While in protectionist and productivist regimes, individuals are able to obtain greater support from the labor market and/or the State, in familiar regimes the multiplication of family and community strategies that allow access to informal goods and services prevails as we see in the Venezuelan public policy strategies.

In the timid process of universalization of social policies and programmes, the focus would remain on initiatives to combat poverty, especially understood as a structural element where it comes to access to social protection, health and education. Structural poverty would not be fully absorbed during the periods of economic growth of the 1990s and 2000s, accompanied by the hegemony of the informal and seasonal labor market and the reduced organization of workers due to the loss of formal ties. It is in this context that grew the interest in implementing responses to combat poverty, motivated and sponsored by international organizations; however, there was a growing appetite for highly segmented programmes, both in terms of target audiences and in the content of the response, alongside the processes of unification of social security systems and the segmentation and decentralization of the health and education sectors initiated in the 1990s. The “new” social policies of the Latin American 21st century would include conditional income transfer programmes, literacy child and maternal support, as ways to overcome the social inefficiencies of the 1990s.

In other words, while we observe the emergence of “social emergency” policies to fight poverty creating fragmented responses, there continues to subsist a clear segmentation of social security systems through the protection of certain social classes (coming from the 1960s) and/or economic sectors integrated in the international economic strategy of each state.

In parallel, there is the continuity of the agroexport structure and the dependence on the fluctuation of commodity prices on the international market. In the case of welfare regimes, much of the social protection would be maintained for a set of professional sectors between the 1970s and 1990s - stratification; comparatively, the weak incorporation of the informal sector of the labor market in social protection policies would remain throughout the 2000s and 2010s. In this milieu, the different Latin American social welfare regimes present a response to the problems posed international insertion strategies, that is, they included both a vision of interaction/substitution via the State (protectionist), or a focus on the privatization of resources and protecting certain economic sectors (productivist).

The intertwining between segmentation, on one hand, and fragmentation on the other hand is relevant because (1) they refer to the fact that social policies initiated in 1940/1950 continued to have relevant weight until the mid-1990s; (2) the professional groups and classes that, broadly speaking, benefited from these policies, especially social security systems, continued to enjoy them during retirement periods between the 1960s and 1980s; and (3) the changes brought by the establishment of “new” social policies in the first half of the 2010s did not alter the region's welfare scheme. In response, social policies in Latin America either constitute a strategy to protect or enlarge segmented past policies in a clear path-dependent model; or constitute a strategy to counter socioeconomic or professional classes that are seen as privileged.

In conclusion, Latin American social welfare regimes present themselves as a clear reaction to the problems posed by political and social conflicts generated by international economic insertion models. In this case, they followed one another in an institutional reaction either against the protectionist initiative or against the market via the protection of certain economic sectors. As there is not a universalizing tendency of public policies, Latin American social regimes are highly dependent on political cycles, which generates segmented political initiatives, reinforcing stratification strategies.

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APENDIX

Indicators, 1990-1995 and 2010-2015

IPW									LS			
PSAgg (%)		Pens (%)		Stud (%)		HospB		PrivSS		PrivHlth		
	90-9 5	10-1 5	90-9 5	10-1 5	90-9 5	10-1 5	90-9 5	10-1 5	90-95	10-15	90-9 5	10-1 5
Argentina	9.26	11.6 3	70	90.7	83.4	95.4 6	4.60	4.72	2	1	76	35.6
Bolivia	6.5	11.2 6	80.7	90.5	45.3	93.5	1.38	1.10	5	4	40	35
Brazil	11.5	15.1 3	83.7	86.3	70.3	96.1 1	3.42	2.30	1	1	57.8	55.7
Chile	11.5 8	14.2 5	63	74.4 9	78.7	99.0 2	3.13	2.13	5	4	46.4	40.1
Colombia	3.5	11.8 1	13.8	22.9 7	54.2	84.3 1	1.33	1.48	4	3	21.8	30.9
Mexico	4.9	8.05	10.0 3	25.2 1	71.6	94.8 3	1.15	1.56	3	3	58.3	48.4
Uruguay	8.96	13.1 5	62	68.1 7	92.3	99.1 6	4.47	2.40	2	2	54.4	32.8
Venezuela	8	14.0 2	40.5	50.1	85.7	91.1 6	2.63	0.85	1	1	59.1	54.6

LS (cont.)				VMI						FRAG		
PrivEduc (%)		EL (%)		Pov (%)		InfW (%)		VulEmp (%)		ConstStr		
	90-9 5	10-1 5	90-9 5	10-1 5	90-9 5	10-1 5	90-9 5	10-1 5	90-95	10-15	90-9 5	10-1 5
Argentina	20.5 2	24.9 4	68	55.0 1	19.5	6	21.8	49.7	24.73	19.52	5	5
Bolivia	8	24.9 3	56.8	48.7	75.6	29.7	65.6	75.1	67.45	61.58	3	5
Brazil	8.5	15.7 8	51.4	56.8 3	57.9	17.7	37.8	42.2	33.25	26.83	7	7
Chile	41.9 4	60.2 9	71.2	78.2	51	10.5	18.2	25.6	27.95	21.47	2	4
Colombia	16.9 6	18.7 2	64.5	68.9 1	72.7	29.8	35.1	59.6	47.71	47.77	2	4
Mexico	6.26	8.48	63.1	66.9 3	48.2	51.3	27.1	53.7	38.32	28.38	4	4
Uruguay	16.3	17.1 3	62.5	69.5	21.3	5.2	35.2	39.8	23.59	22.83	2	3
Venezuela	15.0 1	18.0 7	59.8	36.5 8	51.7	41.9	30.8	47.5	31.75	32.64	6	4

FRAG (cont.)			LFT					
PartFrag			LFTGov (%)		LFTParl (%)		UDens	
	90-95	10-15	90-95	10-15	90-95	10-15	90-95	10-15
Argentina	3.35	5.1	12.5	45	36.5	68.5	22.3	30
Bolivia	3.81	1.88	0	100	19.5	81.9	8.7	39.1
Brazil	8.42	11.79	16.66	36.66	22.4	37.5	23.8	17.4
Chile	1.99	2.13	66.55	42.85	54.5	50	16.2	16.56
Colombia	2.45	5.32	0	12.5	1.2	6.1	12.1	9.66
Mexico	2.66	3.19	0	0	15.6	25.8	25.6	13.68
Uruguay	3.33	2.65	0	100	32.3	52.5	16.3	29.05
Venezuela	3.51	1.88	12.5	100	32.5	67.8	13.5	0.2

Labels:

PSAgg – Public spending by functions (government);
Pens - *Proportion of persons above retirement age receiving a pension (%)*;
Stud - *Pupils starting grade 1 and reaching the last grade of primary school (%)*
HospB - *Hospital beds (per 10 000 population)*;
PrivSS – *Private social security systems*;
PrivHlth - *Private expenditure on health as a percentage of total expenditure on health*;
PrivEduc - *Private schools enrolment (%)*;
EL - *Economic liberalisation*;
Pov - *Poor and extreme poor (% of population)*;
InfW - *Informal sector as a percentage of total workforce*;
VulEmp - *Vulnerable population in the labor market (%)*;
ConstStr – *Constitutional structure*;
PartFrag – *Party fragmentation*;
LFTGov – *Left in government*;
LFTParl – *Left in parliament*;
UDens – *Union density*.

Sources: Private health (PrivHlth) calculated as a percentage of total private national spending on health by the total spending on health (Author, ECLAC, WHO).

Private social security calculated on a scale from 1 to 5 (where 5 corresponds to total privatization) for the first set of data (1990-1995), and calculated on a scale from 1 to 4 for the second set of data (2010-2015) (De la Torre e Rudolph, 2018; Filgueira, 1998, 2005; Kritzer, 2000; Mesa-Lago, 2014; Rofman, 2005).

Constitutional structure (ConstStr): Lijphart (1984), taking into account the qualitative data found on Huber, Ragin & Stephens (1993), and Cheibub, Elkins & Ginsburg (2011).

Party fragmentation (PartFrag) from data obtained by Gallagher & Mitchell (2005) and the author from various electoral data for the lower house of Parliament: Argentina (1989, 1991, 1993, 1995/2009, 2011, 2013, 2013), Bolivia (1989, 1993/2009, 2014), Brazil (1994/2010, 2014), Chile (1989, 1993/2009, 2013), Colombia (1990, 1994/2010, 2014), Mexico (1991, 1994/2012, 2015), Uruguay (1994/2009, 2014), and Venezuela (1993/2010, 2015).

Left in government (LFTGov): data from presidential elections, taking into account governmental coalitions with leftist parties: Argentina (1989, 1995/2011, 2015), Bolivia (1989, 1993/2009, 2014), Brazil (1989, 1994/2010, 2014), Chile (1989, 1993/2009, 2013), Colombia (1990, 1994/2010, 2014), Mexico (1991, 1994/2012, 2018), Uruguay (1989, 1994/2009, 2014), and Venezuela (1988, 1993/2012).