THE TURKISH WELFARE REGIME: AN EXAMPLE OF THE SOUTHERN EUROPEAN MODEL? THE ROLE OF THE STATE, MARKET AND FAMILY IN WELFARE PROVISION

This article focuses on the division of social responsibilities among the state, market, and family in Turkey. This issue has nowadays been high on the agenda in Turkey due to recent social security reforms. This article puts the debates into perspective by highlighting the key characteristics of and trends within the Turkish welfare regime and offering its classification through cross-national comparison.

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At the beginning of the 21st century, Europe is actively discussing whether Turkey should become a full member of the European Union. This article aims to advance the ongoing debate by focusing on a neglected aspect of Turkey: its welfare regime, simply understood as the division of social responsibilities among the state, market and the family.

Turkish society today is challenged by the socio-economic consequences of urbanization, unemployment and an increasing life expectancy. State institutions and traditional mechanisms of welfare such as the family, show a growing incapacity to protect Turkish citizens from the challenges of modern society. In April 2008, the parliament passed a social security reform, which was accompanied by a heated public debate. While the AKP government stressed the need to consolidate the budgets of the state institutions mandated to provide social security, labor unions criticized the bill for reducing workers' rights. As this article will show, it remains questionable if the recent legal changes, which will come into force on October 2008 will be able to tackle Turkey's tremendous social problems.

To highlight the distinct features of welfare provision in Turkey, this article employs the *regime approach* which argues that industrialized countries cluster around certain *ideal types* of welfare regimes. The main hypothesis is that Turkey matches the characteristics of the so-called *Southern European Model* of welfare and falls within one group with Spain, Greece, Italy and Portugal. While various scholars emphasize the similarities between the Turkish and the Southern European welfare arrangements, a comparative classification of the Turkish welfare regime has not been offered so far.[1] Attempting to address this shortcoming, this article consists of three parts. The first part delineates the measures of social protection organized by the central state, the family and other relevant actors in welfare provision. The second part outlines the impact of the recent social policy reforms and their political context. The third part investigates to what degree Turkey resembles the criteria of the Southern European Model of welfare via cross-national comparison. The third part is based on the findings of contemporary scientific literature on welfare development in Southern Europe.

Accordingly, the ideal type of the Southern European Model is characterized by five traits: First, a polarized social security system, which privileges certain groups in society and leaves others unprotected. Second, a universalistic and tax funded health system. Third, a low level state penetration into the social sphere and the lack of means-tested social assistance schemes. Fourth, the prevalence of a high public-private mix and a high degree of decentralization in the realm of social policy. And fifth, the state's endorsement of the family as the main element in welfare provision by modeling its social policies after a *Family and Kin*

[1] Ian Gough, "Social Assistance in Southern Europe," *Southern European Society & Politics*, Vol.1, No.1 (1996), pp.1-23; Ayşe Buğra and Çağlar Keyder, *Poverty and Social Policy in Contemporary Turkey* (Istanbul 2005), http://www.spf.boun.edu.tr/docs/WP-Bugra-Keyder.pdf.

Solidarity Model that differs in specific traits from the *Male Breadwinner Model* predominantly found in Continental Europe.

It has to be emphasized that over the last decades Southern European countries have shown a remarkable performance in increasing their social expenditures and have included a high number of citizens into the social security systems. Political decision makers in Turkey still do not perceive social security as a core responsibility of the central state. Without a cognitive change leading to more political awareness of matters of social policy, even higher numbers of citizens will be exposed to the risk of poverty and illness in the future.

The Turkish Welfare Regime

This section focuses on the existing actors of welfare provision in Turkey. First, social security organized by the central state, most importantly the social insurance institutions, are described. Second, the significant social function of the family is illustrated. Third, the impact of other relevant actors in welfare provision, namely municipalities, non- Governmental Organizations (NGOs) and private insurance schemes is displayed.

It will be shown that the predominance of the state and family in social provision is striking. The market, civil society and municipalities still play a minor role. The defining trait of the state's social provision is its unequal character. While some groups are covered by social legislation and institutions, others, such as those working in the informal market remain unprotected. Social protection outside the social insurance system basically consists of medical care for the poorest and benefits in the form of in-kind aid. The Turkish family takes an outstanding importance in protecting its individual members from social risks. This role is marginally supported by the state, which takes very few responsibilities for those social services that have traditionally been provided by the family.

Social Security Organized by the Central State

Only certain groups in Turkey benefit from mechanisms of welfare organized by the central state. 41 percent of the population, people who are above the age of 65 years, are entitled to an old age pension, while 22 percent are entitled to a means-tested minimum pension. 37 percent have no pension income at all. The health system covers 67 percent of the Turkish population. In particular, 50 percent of the Turkish labor force working in the informal market and their relatives are excluded from social protection. The only chance for this group to benefit from social security organized by the central state is to be co-insured by a relative or entitled to a means-tested social assistance scheme.[2]

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[2] OECD Economic Surveys. Turkey, (Paris: OECD, 2006 I), OECD, p.130.

Under the current legislation, three social security institutions offer health and pension insurance schemes to employees in the formal labor market. The *Social Insurance Institution* (Sosyal Sigortalar Kurumu) provides services to more than 35 million blue and white-collar workers and their families in the private sector. The *Pension Fund* (Emekli Sandığı) covers more than 10 million white-collar workers and their families in the central government. Finally, the *Social Security Institution for the Self-Employed* (Bağ-Kur) provides compulsory insurance for 15 million self-employed and artisans, as well as their families. Since 2003, workers insured with the Social Insurance Institution are also covered by an unemployment insurance organized by the *Turkish Labor Agency* (İş-Kur).

Furthermore, a number of services are offered outside the social insurance system. In 1976, a small flat rate pension for elderly above the age of 65 and disabled above the age of 18 was introduced. The *General Directorate for Social Assistance and Solidarity* (Sosyal Yardımlaşma ve Dayanışma Genel Müdürlüğü) organizes a means-tested medical assistance scheme called the *Green Card* (Yeşil Kart) in cooperation with the Ministry of Health. This program grants health services to people who are neither actively nor passively covered by the public health insurance system and earn less than one third of the minimum wage. As formal records of people in need do not exist to date, *Head of Districts* (muhtars) play an important role, as they determine the beneficiaries. In 2005, approximately 11 million Turkish citizens were holders of the Green Card.[3] Additionally the Directorate provides aid-in-kind assistance via 931 affiliated *Social Insurance Solidarity Foundations* (Sosyal Yardımlaşma ve Dayanışma Vakıfları). The *General Directorate for Social Services and Child Protection* (Sosyal Hizmetler ve Çocuk Esirgeme Kurumu) offers services and aid-in-kind assistance predominantly to women, children, elderly and the disabled.[4]

The Family

According to the World Bank, it is "difficult to overstate the importance of marriage, family and extended family ties" in the Turkish context.[5] The size of Turkish households is significantly larger than in other European countries. In 2002, the mean household size in rural Turkey was 4.3 and 4.07 in urban areas. Other Southern European households are also larger than the European average, but to a lesser extent. In 2001, an average of 2.9 persons were living in a Spanish, 2.6 in an Italian and Greek and 3 in a Portuguese household. In comparison, a German household consisted of 2.2, a Swedish of 1.9 and a British of 2.3 members.[6] A high percentage of young Turks are living with their parents. In 2003, 49 percent

[3] *Turkey: Poverty and Coping after the Crisis. Volume I: Main Report*, (Washington D.C.: World Bank, 2003), World Bank p.41; Buğra and Keyder (2005).
[4] Basri Aşkın, *Das Sozialversicherungssystem der Türkei. Rechtliche Grundlagen – Strukturen – Reformen* (Marburg: Tectum-Verlag 2004).
[5] World Bank (2003), p.33.
[6] Ibid. (ed.), *Turkey: Joint Poverty Assessment Report. Volume I: Main Report* (Washington D.C.: World Bank 2005).

of the Turkish men and 29 percent of the Turkish women between the age of 18 and 34 were living with their parents; only six percent of men and one percent of women were living alone.[7]

Similar to Southern Europe, the institution of marriage is still of fundamental importance. In 2003, the crude divorce rate in Turkey was 0.71.[8] Germany, Sweden and the UK have much higher divorce rates.[9] In 2004, the crude marriage age of Turkish women was the lowest in the OECD. This does not seem to be a trend shared by all Southern European countries. Compared to the OECD average, Greek and Portuguese women marry early. Spanish and Italian women, on the other hand, marry at similar ages as German and British women. Only Sweden stands out, with a crude marriage age for women of 31.[10]

The level of state penetration in fields traditionally left to the family is very low. While compulsory primary education includes those children between 6 and 14, only 6.9 percent of children in Turkey participate in public, private, or community-based pre-school programs.[11] In the field of care for the elderly the situation is similar. In August 2006, only 18,849 elderly people in Turkey were cared for in public institutions.[12] Although reliable data does not exist, the provision of care facilities for the disabled appears to be insufficient as well. While the United Nations estimates that there are a total of 7.5 million disabled people in Turkey, care services are basically left to the family, as few schools catering to disabled children or facilities for disabled adults exist.[13]

In 2003, Turkey's social expenditure excluding old-age coverage and health costs was 0.2 percent of its GDP. (The OECD average lay at 2.1 percent.) The Southern European countries show a less extreme but similar performance.[14] The participation rates of Turkish children in daycare and pre-school are the lowest in the

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[7] The percentage of men and women living at home at the age of 18-34 years (men/women): Spain (45 percent/34 percent), Portugal (48 percent/33 percent), Greece (39 percent/19 percent), Italy (67 percent/60), Germany (21 percent/14 percent), Sweden (12 percent percent/ten percent) and the UK (19 percent/12 percent). The percentage of young people living alone (men/women): Spain (five percent/five percent), Portugal (7 percent/5 percent), Greece (33 percent/24 percent), Italy (11 percent/6 percent), Germany (40 percent/26 percent), Sweden (44 percent/31 percent) and the UK (33 percent/14 percent). Chiara Saraceno/Manuela Olagnero/Paola Torrioni (eds.), *First European Quality of Life Survey. Families, work and social networks* (Dublin: European Foundation for the Improvement of Living and Working Conditions, 2005).

[8] *2005 Turkey's Statistical Yearbook* (Ankara: Turkish Statistical Institute, 2006), Turkish Statistical Institute, p.26, http://www.die.gov.tr/ENGLISH/yillik..pdf.

[9] Crude Divorce Rate 2003: Greece (1.1), Spain (1.1), Italy (0.7), Portugal (2.2), Germany (2.6), Sweden (2.4) and the UK (2.8).

[10] *Society at a Glance. OECD Social Indicators* (Paris: OECD, 2006 II). OECD.

[11] *A Gender Review in Education, Turkey 2003* (Ankara: UNICEF, 2003), UNICEF, p.6.

[12] S*ex and Power in Turkey. Feminism, Islam and the Maturing of Turkish Democracy* (Berlin/Istanbul, 2007), European Stability Initiative, p.29, http://www.esiweb.org/pdf/esi_document_id_90.pdf.

[13] Ayşe Buğra and Sinem Adar, "Social Policy Change in Countries Without Mature Welfare States: The Case of Turkey," *New Perspectives on Turkey*, Vol.38 (Coming in 2008), www.aueb.gr/deos/seminars/Bugra29-3-07.doc.

[14] Italy spent 0.8 percent, Portugal 1.4 percent, Greece, 1.5 percent and Spain 1.1 percent. Other EU countries spent more: Germany 2.2 percent, Sweden 6.8 percent and the UK 1.8 percent. OECD (2006 II), p.77.

OECD. In Turkey, the percentage of children below the age of three who are enrolled in daycare is negligible. The Southern European countries show mixed results. In Spain 20.7 percent, Portugal 23.5, Greece 7.0 and Italy 6.3 percent of the children below the age of 3 are enrolled in daycare. On average, a Turkish three to five-year-old spends 0.3 years in education. Surprisingly, in Southern Europe the pre-school attendance rates are among the highest in the OECD.[15]

While the percentage of the elderly in Turkey cared for in institutions is negligible, data on the Southern European institutions for the elderly is only available for Italy. Only 1.5 percent of Italians above the age of 65 are cared for in professional facilities. In contrast, 3.4 percent of the German, 4.2 percent of the British and 7.5 percent of the Swedish population above the age of 65 lives in institutions.[16]

Other Actors of Welfare Provision

Since the 1980s new actors emerged in the Turkish welfare regime. Especially municipalities have become more important. Initially, this role was restricted to charity and aid-in-kind poverty relief. Municipal governments opened soup kitchens, provided food, fuel and to a low degree financial assistance, i.e. in terms of rent support. Since 1986, municipalities are represented on the boards of the *Social Insurance Solidarity Foundations*. In recent years, they have come to play a more active role and offer additional social services and benefits. Providing care services for the elderly, disabled and children, municipalities are socially engaged in fields traditionally left to the family.

The role of NGOs in the Turkish welfare regime cannot be separated from the realm of civil society in general. It was not until the 1980s that a civil society emerged in Turkey. An elite-driven modernization from above, deeply intertwined with a paternalistic perception of statehood left little room for social activities outside the state apparatus. In addition, the overpowering bureaucracy continues to be a major obstacle for the development of a civil society in Turkey. It undermines individual initiative and collective pursuit of interests within autonomous domains free from state interference.[17] Hence, NGOs still play a very limited role when it comes to welfare provision. Nevertheless, a handful, such as Deniz Feneri, already show an impressive ability to respond to social needs in Turkey.[18]

Private pension and health insurance schemes still play a negligible role. Less than one percent of the Turkish population has private pension insurance. The

[15] Italy three years, Greece 1.4 years, Portugal 2.3 years, Spain 3.1 years. OECD (2006 II).

[16] Germany 3.5 percent, Sweden 7.5 percent, UK 4.2 percent. Ibid. (2006 II), p. 97.

[17] Binnaz Toprak, “Civil Society in Turkey,” in August Richard Norton (ed.), *Civil Society in the Middle East. Vol. 2* (Leiden: Bill Academic Publishers, 1996), pp. 87-118.

[18] According to a member of Deniz Feneri interviewed for this article, approximately 300 full-time employees and 40,000 volunteers, of whom 1,000 can be considered as an active core, work for the NGO. While the estimated budget of Deniz Feneri was two million US Dollars in 2000, it has since climbed to 25 million U.S. Dollars in 2005.

role of commodified health insurance in the Turkish welfare regime is similar. Although private health insurance is Turkey's fastest growing insurance branch, in 2002 less than one percent of the Turkish population was privately insured. Accordingly, the expenditure in the health sector afforded by private insurance companies was only 4.4 percent in 2000. In 2001, about 40 insurance companies provided health care for 655.703 insurants and had a premium-income of 188 Million USD.[19]

The Turkish Welfare State and its Reform

In April 2008, the Turkish parliament passed a social security bill which will lead to significant changes within the Turkish health and pension system. This section shows that the recent reform stands in line with a number of legal changes that have been implemented since the 1990s. While Turkish governments tried to reduce the expenses for the social security institutions especially in the realm of pensions, a trend towards a more universalistic health care becomes visible. Besides, the state tries to strengthen the family's role in welfare provision and supports new actors, such as private insurance companies and the NGOs.

From the first of October 2008 on, the three institutions responsible for health and pension insurance will be joined under the Social Security Institution (Sosyal Güvenlik Kurumu) which has already functioned as an umbrella institution since 2006. While state employees are excluded from the new regulations, workers in the private sector and self-employed will work longer for less pension benefits. From the year 2036 onwards, the retirement age will rise incrementally to from 60 (men) and 58 (women) to 65 years. The minimum days of contribution to the pension schemes will increase from 7,000 to 7,200 days. After a transition period of ten years, pension benefits will be calculated by multiplying two percent instead of today's three percent of a worker's final salary by the years he worked. For those workers entering the labor market after April 2008 for the first time, the rate is two percent from the beginning.

Focusing on health care, all Turkish citizens will in theory be covered by health insurance in the future. In contrast to the tax-funded universalistic health systems of Southern Europe, the Turkish system will be based on contributions. While the contributions for the unemployed, those who do earn less than one third of the minimum wage and for all children below the age of 18 will be covered by the state, it remains to be seen how the contributions of the workers in the informal sector workers will be collected.[20]

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[19] Tuba I. Agartan, *Health Sector Reform in Turkey: Old Policies New Politics* (Binghamton 2005), p.9, http://www.cevipof.msh-paris.fr/rencontres/colloq/palier/clegg/YR_papers/ Agartan.pdf.
[20] Oğuz Karadeniz, *Social Security of Causal Agricultural Workers in Turkey* (Pamukkale 2007), http://www.issa.int/pdf/warsaw07/2karadeniz.pdf; Buğra/Adar (2008).

The recent changes stand in line with earlier reforms and represent trends in social policy development which have become visible since the 1990s. Focusing on the pension system, an increasing maladjustment in the active-passive ratio and a growing deficit of the social security institutions has forced Turkish governments to reduce public expenditure by cutting benefits and rising the retirement ages. Accordingly in 1999, minimum retirement ages were fixed (60 for Men/58 for Women), the minimum days of contribution increased from 5,000 to 7,000 days and the pension benefits were reduced.[21]

The changes in the health sector have aimed, at least to a certain degree, at harmonization and more inclusion. In 1992, the Green Card was introduced. A reform in 2004 eliminated discriminations and unequal access to treatment within the three insurance schemes and extended the services and benefits granted to Green Card holders.

While especially in the realm of pensions the AKP focuses on a reduction of state expenditure, it strives to develop the capacities of the family as the central actor of welfare provision in Turkey. The *Return to Family Project* (Aileye Dönüş Projesi) grants cash transfers to families if they integrate children who are living in state facilities. The Social Risk Mitigation Project grants conditional cash transfers to poor families on the basis of school attendance of children and regular visits to health centers.[22]

In recent years, the Turkish government has also put a lot of effort into strengthening private actors in the realm of welfare provision. In 2001, the Turkish Parliament passed the *Individual Pension Savings and Investment Law* (Bireysel Emeklilik Tasarruf ve Yatırım Sistemi Kanunu), which opened the Turkish market to private providers of pension funds. The Law on Association which passed in 2004 considerably improved the legal status of NGOs, limited government control, raised internal auditing standards and allowed the government to co-finance social projects. The state has also tried to encourage private firms and companies to finance social projects. A government project called *100 Percent Support for Education* (Eğitime Yüzde Yüz Destek) promises tax cuts to companies that donate money for educational programs.[23]

Classification of the Turkish Welfare Regime: An Example of the Southern European Model?

This section aims to present the resemblance of the division of social responsibilities among the state, market and family in Turkey with the Southern European Model of welfare. Accordingly, Gøsta Esping-Andersen's regime approach is employed to classify the Turkish welfare regime. Few studies influenced social

[21] OECD (2006I), p.134.
[22] Buğra and Keyder (2005), p.26.
[23] Buğra and Adar (2008), p.17.

policy analysis to such a degree as his pathbreaking work "The Three Worlds of Welfare Capitalism" does. Arguing that welfare is provided by a complex interaction of the state, market and the family, his work is based on the assumption that the holistic employment of ideal types of welfare regimes helps to bring different trajectories in welfare state development into focus. He defines three different ideal types of welfare regimes: the *Liberal, the Corporatist and the Social Democratic Welfare Regime*.[24]

From the early 1990s onwards, a number of scholars focused on the similarities of welfare arrangements in the Mediterranean countries.[25] Later, the contributions of feminist scholars to welfare analysis also had an impact on the examination of the Southern welfare states, stressing the role of the family as a main element of the Southern European Model of welfare.[26] Elaborating on the findings of the scholars mentioned above, the five key characteristics of the Southern European Model of welfare, as numerated in the introduction, will be employed to classify the Turkish welfare regime. Accordingly, data from Turkey and the four representatives of the Southern European Model of welfare, Spain, Italy, Portugal and Greece is compared. Also representatives of the three welfare regimes outlined by Esping-Andersen will be included in the comparison to highlight the similarities between Turkey and Southern Europe. The United Kingdom functions as references for the Liberal, Sweden for the Social Democratic and Germany for the Corporatist Model of welfare.

This section shows that in Turkey, similar to Southern Europe, the social security system is polarized and protects an occupational core, the level of state penetration in the social realm is extremely low and a safety net in form of a social assistance scheme is absent. The most significant resemblance is the importance of the family as a main institution of welfare. This status is endorsed by the state by modeling its social policies after a *Family and Kin Solidarity Model*.

[24] The term *welfare state* describes those institutionalized forms of social protection that secure its citizens from the risks of modern society on the basis of social rights. These rights granted on the basis of citizenship shape and determine the individual's position within society. In cross-national comparisons, the activities of the welfare state, the policies embraced, its level of protection, as well as its linkage to the market's and the family's role in social provision vary significantly. In relation to this definition of the term welfare state, the term *welfare regime* denotes the fact that legal and organizational features of the welfare state, the family and the economy are systematically interwoven. As a result, the term welfare regime stresses that cross-national clusters in welfare arrangements unveil not only regarding social policies but a variety of social structures. Gøsta Esping-Andersen (ed.), *The Three Worlds of Welfare Capitalism* (Cambridge: Polity Press, 1990).

[25] Stephan Leibfried, *Towards a European Welfare State? On Integrating Poverty Regimes into the European Community* (Bremen: Zentrum für Sozialpolitik der Universität Bremen, Arbeitspapier No. 2, 1991); Francis G. Castles, "Welfare Development in Southern Europe," *Western European Politics*, Vol.18, No.2 (1995), pp. 291-313; Maurizio Ferrera, "The 'Southern Model' of Welfare in Social Europe," *Journal of European Social Policy*, Vol.6, No.1 (1996), pp. 17-37; Gough (1996).

[26] Rossana Trifiletti, "Southern European Welfare Regimes and the Worsening Position of Women," *Journal of European Social Policy*, Vol.9, No.1 (1999) pp. 49-64; Manuela Naldini, *The Family in the Mediterranean Welfare States* (Portland: International Specialized Book Services, 2003); Lluis Flaquer, *Family Policy and Welfare State in Southern Europe* (Barcelona: Institut de Ciències Politiques i Social, Working Paper No. 185, 2000), http://www.recercat.net/bitstream/2072/1280/1/ICPS185.pdf; LuisMoreno, *The model of social protection in Southern Europe: Enduring characteristics?* (Madrid: Unidad de Politicas Comparadas, Working Paper 06-07 2006), http://www.iesam.csic.es/doctrab2/dt-0607(En).pdf.

Nevertheless, to some regards Turkey does not match the ideal type of a Southern European Model of welfare. The level of universalism in the health sector is low, as is the impact of civil society, the market and regional authorities in Turkey.

It has to be emphasized that over the last decades the Southern European countries have shown a remarkable performance in social policy development. Hence, as the comparative analysis will show, the Southern European *real types* in some aspects do not match the criteria of the Southern European ideal type of welfare regime displayed above. Nevertheless, the similarities between Turkey and the Southern European EU-member states in welfare provision are still remarkable.

Polarization and Peaks of Generosity

The Turkish pension system based on contributions currently covers only 41 percent of the population above the age of 65. About 22 percent are entitled to the tax-funded minimum old-age pension and 37 percent have no pension income at all.[27] While occupational groups in the formal labor market are covered, other groups are unprotected. About 98.5 percent of the workers receiving their income from seasonal agricultural work do not have old-age insurance.[28] Those entitled to the means-tested old-age pension which equals six percent of the average income are not even protected from the risk of food poverty. In 2005, the pension was equivalent to 65 YTL (approximately. 40 Euros), while the food poverty line was fixed at 85 YTL.[29] While a large number of the elderly is excluded from the pension system, those covered are insured under a wide range of conditions. Especially civil servants receive higher pensions, pay less contribution and are granted special privileges, such as additional benefits and family allowances.

The high polarization of the Turkish pension system becomes visible in international comparison. The Pension Gini Coefficient of Turkey is fixed at 25.1, while the OECD average is 17.2.[30] The other Southern European countries also vary widely with regards to pre and post-retirement earnings.[31] Sweden's Pension Gini Coefficient is comparably high at 23.7, as is Germany's at 20. The UK stands out with only 5.1. A similar picture emerges when focusing on the Progressivity Index.[32] Turkey's index is 7.8, while the OECD average is 37.5. The Southern European countries fall into one group with Sweden (12.9),[33] while Germany (26.7) and especially the UK (81.1) are closer or above OECD average.[34]

[27] OECD Economic Surveys. Turkey (Paris: OECD, 2006 I), OECD.

[28] Oğuz Karadeniz, *Social Security of Causal Agricultural Workers in Turkey* (Pamukkale 2007)

[29] Turkey: *Public Expenditure Review* (Washington D.C.: World Bank, 2006), World Bank, p. 146.

[30] The OECD Pension Gini Coefficient measures the inequality of public pension incomes and general earnings. A high Coefficient indicates an unequal distribution between high pension and low general earnings.

[31] Greece (26.5), Italy (26.4), Portugal (22.1) and Spain (22.1)

[32] The OECD Progressivity Index measures the earning-relatedness of a pension system. The higher the index, the more does the pension income depend on the pre-retirement earnings.

[33] Greece 2.6, Italy 3.1, Portugal and Spain 18.8.

[34] Verband Deutscher Rentenversicherungsträger (ed.), *Renten auf einen Blick: Staatliche Politik im OECD-Ländervergleich* (Berlin: Verband Deutscher Rentenversicherungsträger, 2005).

Turkey's replacement rates of 125 percent for an average earner are the highest in the OECD.[35] Again, Turkey falls into one cluster with the other Southern European countries. In all four Southern European countries average earners have higher replacement rates than the OECD average of 70.2 percent. While Southern Europe's replacement rates are among the highest in the OECD, its minimum protection schemes for the elderly vary. Italy does not offer a basic or a minimum pension and Turkey, with six percent of the average income, has the lowest minimum pension in the OECD. Greece's minimum pension equals 34 percent, Portugal's 33 percent and Spain's 30 percent of the average income.[36]

Universalistic Health System

Under the current legislation, Turkey's health insurance and health services appear as polarized and dependant on occupational status as the pension system. While official data suggests that 84.5 percent of the population is covered by health insurance, the World Bank estimates that only 67 percent of the Turkish population is covered by public health care programmes, including the non-contributionary Green Card.[37] Like the pension system, health insurance in Turkey is linked to occupational status. About 80 percent of seasonal agricultural workers are not entitled to any kind of health protection at all.[38] In addition, the fact that 27.6 percent of the total health expenditure are covered by of out-of-pocket payments suggest insufficient coverage by the social security institutions.[39] Poor people in particular are excluded from access to health care. About 58 percent of the poor and 68 percent of the extremely poor did not have any kind of medical protection in 2002.[40] These numbers demonstrate the incapacity of the state to include the poor in the health system via the Green Card.

A comparison brings to light the particulars of the contemporary Turkish health system: while the Turkish public system only covers 66 percent of the total population, the Southern European, Swedish and British universalistic health systems cover the total population. In Germany 90.9 percent are covered by the public system.[41]

The recent reforms reflect a development of Turkey towards the Southern European health systems. However, as the Turkish health system will still be based on contributions, tremendous differences remain. While the coverage, especially of all children under the age of 18 by the state appears to be a major step towards the Southern European EU member states, it remains to be seen in how far those working in the informal market can be included in the health system.

[35] Replacement rates measures the ratio of pre- and post-retirement incomes.
[36] *Pensions at a Glance. Public Policies Across OECD Countries* (Paris: OECD; 2007 I), OECD, p.24f.
[37] World Bank (2006 I), p.130.
[38] Karadeniz (2007).
[39] World Bank (2007).
[40] Ibid. (2003).
[41] *Private Health Insurance in OECD Countries: Benefits and Costs for Individuals and Health System* (Paris: OECD, 2004 I).

Low Level of State Penetration and the Lack of Social Assistance Schemes

Turkey spent 11.6 percent of its GDP on measures of social protection in 2003.[42] The biggest share, 5.5 percent of the GDP, was spent on old-age coverage and 4.8 percent on health expenditures.[43] The Southern European countries are above the OECD average of 20.7 percent. Greece spent 21.3 percent, Portugal 23.5, Spain 20.3 and Italy 24.2 percent. While the UK (20.15 percent) spent less than average, in Germany (27.6 percent) and Sweden (31.3 percent) expenses were higher. Focusing on the 2003 expenditure for old-age in the OECD, Turkey spent 5.5 percent, while the EU average was at 7.1 percent. The Southern European countries (Italy 13.8 percent, Greece 12.3, Spain 8.2 and Portugal 23.5 percent) were above the average. Germany spent 11.5 percent, Sweden 8 percent and the UK 5.6 percent on old-age benefits and services. With regards to the expenditures in health, Turkey spent 4.8 percent, while the OECD average lays at 5.9 percent. The Southern European countries show mixed results. While Italy (6.2 percent), Greece (5 percent) and Spain (5.2 percent) had similar expenses, Portugal spent only 1.4 percent of its GDP on health. Germany (8 percent), Sweden (7.1 percent) and the UK (6.7 percent) were slightly above OECD average.[44]

The low level of state protection becomes apparent when considering the minimal capacity of social transfers to alleviate the risk of poverty. While 31 percent of the Turkish population is at risk of poverty before receiving social transfers, 26 percent are still at risk of poverty after social transfers. In the Southern European countries state assistance also does not lead to a significant reduction of the risk of poverty. In Greece the percentage decreases from 23 percent to 20 percent, in Spain from 24 percent to 20 percent, in Italy from 24 percent to 19 percent and in Portugal from 26 percent to 20 percent. In contrast, social assistance in Germany reduces the percentage from 24 percent to 13 percent, in the UK from 31 percent to 18 percent and in Sweden from 29 percent to 9 percent.[45]

Public-Private Mix and High Level of Decentralization

The capacity of the market as an actor in the Turkish welfare regime is marginal when compared with Southern Europe. The coexistence of public and private providers is so far only characteristic of the Turkish health service sector, while it is negligible in the care sector. Private services are essentially only available to the upper class. For the majority of the Turkish population they are unaffordable. Private pension and health insurance schemes play a negligible role. People covered by private health and pension insurance represent less than one

[42] Data excludes education expenditures.
[43] Ayşe Buğra and Sinem Adar, *An Analysis of Social Protection Expenditure in Turkey in a Comparative Perspective* (Istanbul: Social Policy Forum Working Paper, 2007).
[44] OECD (2006II), p.77; Buğra and Adar, (2007).
[45] Eurostat, http://epp.eurostat.ec.europa.eu

percent of the population.[46] The OECD average spent by private health insurance is 6.3 percent. Turkey (4.4 percent) and the Southern European countries, owing to their universalistic health systems, are below the average. In Italy and Spain, 0.9 percent and 3.9 percent respectively of the total health expenses are covered by private insurance companies.[47]

NGOs still play a very limited role when it comes to welfare provision. Nevertheless, a handful of organizations already show an impressive ability to respond to social needs in Turkey and filling the gap created by the growing incapacity of the family to protect its individual members.

Also in its level of decentralization Turkey clearly stands apart from the other Southern European countries. While the Turkish government has begun to emphasize the role of municipalities, some of which have been engaged in poverty alleviation since the 1980s, their function in not based on legal grounds. To this day, the benefits and services provided by municipalities have been based on charity. Nevertheless, it has to be emphasized that recent social policy reforms and the initiatives of the AKP-government show a trend towards strengthening private actors as well as local authorities.

Family and Kin Solidarity Model

Since the end of the 1990s, the contributions of feminist scholars to welfare analysis also had an impact on the examination of the Southern welfare states. A growing number of scholars stress the role of the family, highlighting its importance as a main element of the Southern welfare regime itself.[48] Based on these findings this article argues that the state in Southern Europe endorses the role of the family by modeling a Family and Kin Solidarity Model which differs from the *Male Breadwinner Model* predominantly found in Continental Europe.

In short, the *Male Breadwinner Model* prescribes the role of the father as the breadwinner for the nuclear family and the role of the mother as the housekeeper and carer. This division of duties is encoded in the social security system and the full-employment tradition in the labor market. Entitlement to social benefits is based on premiums. Only workers who actively contributed to the social security schemes are entitled to benefits and services. Full entitlement to pensions is based on a full-employment career and lifelong contributions. The social protection of the nuclear family, i.e. mother and children, is based on "dependency". The role of the male breadwinner as the provider of the household income is awarded by the state via family allowances. Furthermore, within the tax system, the family is considered as one unit and tax cuts are granted to families. Women

[46] World Bank (2006 I), p.130.
[47] *Benefits and Wages: OECD Indicators* (Paris: OECD, 2004 II)
[48] Moreno (2006), Flaquer (2000); Trifiletti (1999); Naldini (2003).

are encouraged to fulfill their traditional roles within the family through long maternal leave periods with high benefits and gendered insurance schemes, such as widow pensions, which treat surviving men and women differently. If women enter the labor market, they are given the opportunity to combine employment with their traditional family role by taking advantage of special regulation for part-time employment. Women working part-time often do not pay into the social security system and therefore retain their dependency status with regards to insu-rance. The level of state penetration in the policies traditionally left to the family is low and care services for children and the elderly are left to the family in accordance with the principle of subsidiarity.

While the *Family and Kin Solidarity* Model is based on similar gender roles and also includes the concept of dependency, it differs from the *Male Breadwinner Model* to the extent that social insurance schemes also cover the extended family. The labor market is not based on the ideal of full employment. Instead, the state tolerates informal strategies of family income maintenance. In exchange, the family is marginally supported by family allowances and tax assessments are made on an individual basis. Tax cuts for married couples or families with children do not exist. While women are traditionally perceived as the housekeeper and carer, the state does not endorse this role through paid paternal leave periods. If women enter the labor market, they have to combine full employment with their duties in the family, as regulations for part-time employment do not exist. Finally, care services for children, the elderly and disabled are almost inexistent and left to the women. While in the *Male Breadwinner Model* care work is left to the mother in particular, in the *Family and Kin Solidarity Model* care work is shared by female family members. Furthermore, the state does not act according to the principle of subsidiarity as it does not intervene in the private realm if the individual or the family is incapable to act independently.[49] Accordingly, public social assistance schemes and safety nets are non-existent and the family functions as the only safety net.[50]

In the case of Turkey, in correspondence to the Male Breadwinner Model of Continental Europe, the Turkish social security regime is based on a normative family model according to which women and unmarried daughters are dependent on the status of the male head of the family. This ideal type of a male breadwinner is also reflected in the survivor pension, which favors female over male survivors. Accordingly, women left without a male breadwinner are protected by the state, until they get (re)married. The Turkish state also encourages women to (re)marry by additional payments. Hence, marriage is perceived as the "real social security mechanism for women".[51]

[49] The principle of subsidiarity, as a part of Catholic social teaching, argues that political authorities should only interfere in the private sphere if individual or small communities like the family are incapable to act independently. Joya Misra/Stephanie Moller, *Familialism and Welfare Regimes: Poverty, Employment, and Family Policy* (Massachusetts 2004), p.6 http://www.masspolicy.org/pdf//working/WP2004_5.pdf.

[50] Comp.: Naldini (2003).

[51] For a comprehensive analysis of the gendered social security legislation see: Azer Kılıç, *Gender Discrimination and Social Policy in Turkey: Positive Discrimination or a Second-Class Female Citizenship* (Istanbul 2006) unpublished Master Thesis.

Nevertheless, Turkey stands apart from the *Male Breadwinner Model* and resembles the Southern European *Family and Kin Solidarity Model* as spouses, children and the parents of the insurant are dependently health insured and entitled to survivor pension and health care. This coverage of the extended family in health insurance is unique in Europe. With regards to survivor pension, Turkey resembles other Southern European countries, i.e. dependency status is granted to parents and siblings in Spain and Italy and in Portugal to parents.[52]

Furthermore, Turkey does little to support families in terms of benefits or tax cuts. Social expenditures in form of family cash benefits were negligible in 2003. Again, Turkey falls within the clusters of Southern European countries, which are below OECD average. Spain spent less than 0.5 percent of its GDP on cash benefits for families and Italy, Greece and Portugal between 0.5 percent and one percent. Germany spent 1.2 percent of its GDP, Sweden 1.6 percent and the UK 2.2 percent.[53] Moreover, Turkey does not grant any tax cuts to families. The other Southern European show mixed results. Greece (0.3 percent) and Spain (3.3 percent) give small tax breaks to families, while Portugal's (9.7 percent) and Greece's (6.1 percent) breaks are higher. Germany (16.3 percent) gives much higher tax cuts to families than Sweden (6.1 percent) and the UK (9.7 percent).[54]

Turkey, Spain, Portugal and Greece are also similar as they do not offer any paid parental leave periods. Italy offers 12 weeks, but only pays 30 percent of the allowances. While unpaid parental leave periods do not exist in Turkey, Portugal offers 24, Greece 28, Italy 24 and Spain 156 weeks. In comparison, Germany grants 104 weeks of parental leave with 11 percent allowance, Sweden 51 weeks with 80 percent allowance and the UK offers 26 weeks of unpaid parental leave.[55]

Part time labor is insignificant in Turkey. The percentage of female employees who work less than 20 hours per week lies below five percent, while close to 60 percent of women in the formal labor market work more than 45 hours. The percentage of employed women who work less than 20 hours per week is also low in Greece, Portugal and Spain. All three countries are below the OECD average of 20 percent. Only in Italy, with approximately 26 percent, more women are in part-time employment. In contrast, Germany (37 percent) and the UK (39 percent) show very high and Sweden (20 percent) average numbers of part-time employment of women.[56]

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[52] MISSOC (Mutal Information System on Social Protection in the Member States of the European Union) http://ec.europa.eu/employment_social/soc-prot/missoc98/english/f_main.htm.

[53] *OECD Family Database: Public Spending on Family Benefits*, available at: http://www.oecd.org/dataoecd/45/46/37864391.pdf

[54] *OECD Family Database: Key Characteristics of Parental Leave Systems*, available at: http://www.oecd.org/dataoecd/45/26/37864482.pdf

[55] Parental leave is long-term leave available to parents to allow them to take care of an infant or young child a period of time. This is usually granted in addition to maternity/paternity leave. http://www.oecd.org/dataoecd/45/26/37864482.pdf

[56] OECD (ed.), *Women and Men in OECD Countries* (Paris: OECD, 2007 II).

In this context, the role of the informal labor market in Turkey also needs to be emphasized. While the state established social security mechanisms for certain occupational groups, it accepts that large groups in society develop their own mechanisms of protection. Women play an active role in the informal market. As described by Luis Moreno, in the Southern European context, a form of *super-women* emerged in Turkey, who were able to combine employment with their work in the family.[57] Domestic labor in particular gained significance in the last decade.

As shown earlier, Turkey also matches the Family and Kin Solidarity Model, as the state does not act according to the principle of subsidiarity but leaves entire policies, as elderly care to the realm of the family. In sum, Turkey clearly matches the criteria of the Family and Kin Solidarity Model predominantly found in Southern Europe.

Conclusion

The classification of the Turkish welfare regime clearly shows that Turkey fits the key characteristics of the ideal type of the Southern European Model. The cross-national comparison unveiled only a few deviations from the Southern European Model, such as the low impact of civil society, market actors and regional authorities in Turkey and its non-universalistic health system.

Besides, the similarities are remarkable. The Turkish social security system strongly protects an occupational core, the level of state penetration in the social realm is extremely low and a safety net in form of a social assistance scheme is absent. The most significant common trait of the welfare regimes in Turkey and the rest of Southern Europe is the importance of the family as a main institution of welfare. This status is also endorsed by the state through modeling its social policies after a Family and Kin Solidarity Model. For a significant part of the Turkish population the family is the main and often the only safety net and provider of social services.

Focusing on the impact of the recent social policy reforms it becomes obvious that Turkey on the one hand follows the path of Southern European welfare. On the other hand, differences remain when it comes to sustain the state's role of welfare provision. While the AKP government tries to back out of the pension system and delegates more responsibilities to the market, the Mediterranean EU-member states have shown a remarkable performance in increasing their social expenditures towards European average. Without a doubt, some of the recent changes in Turkey, i.e. the fact that the state pays for the health contributions of all citizens under the age of 18 years, are of fundamental importance. Nevertheless, if a contribution based health system has the capacity to protect the Turkish citizens from health risks appears questionable.

[57] Moreno (2006), p.4.

What Turkey needs is a cognitive change that leads to a new perception of social security as a core responsibility of the central state. In a modern society, welfare cannot be left to the realm of the family and private actors only, but has to be based on citizenship and guaranteed by social rights. Without this change in attitude Turkey will not be able to tackle the tremendous social challenges of the 21st century.

The "welfare state" in these countries is then a system of social protection rather than a scheme operated by government. This section of the website is mainly concerned with the provision of welfare in different countries. If you would like to read more on the idea of the "welfare state", including arguments for and against welfare provision, you should begin with the section on social policy. Comparing welfare states. Deborah Mitchell [1] identifies five main approaches to the comparison of welfare systems: Comparison of policy, comparing the explicit terms in which actio Gender and Welfare State Regimes is an organizing concept that focuses a country's traditional social welfare policies in terms of how it influences employment and general social structure. Gender in terms of the welfare state regime varies based on how a nation perceives and acts on the value of gender. Within gender and welfare state regimes there are three central perspectives. The first perspective is the liberal welfare state, which is utilized in the United Kingdom and Ireland. This regime This article focuses on the division of social responsibilities among the state, market, and family in Turkey. This issue has nowadays been high on the agenda in Turkey due to recent social security reforms. This article puts the debates into perspective by highlighting the key characteristics of and trends within the Turkish welfare regime and offering its classification through cross-national comparison. Please click here to read the text in full. CONTRIBUTOR. Daniel Grutjen. The Premium Corporate Sponsor of TPQ. Tpq sponsors. From the desk of the editor.