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Nations: In Search of a Conceptual Framework**

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Welfare State Programming in the Least Developed Nations: In Search of a Conceptual Framework

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Abstract

While the welfare state is a phenomenon in the developed world, welfare state programming is not unique to the developed nations. Nations in the developing world possess and operate diverse forms of welfare state programs. However, the ways in which those programs are initiated, designed, financed, and administered largely differ from the practices in the developed world. A good number of theories and models are employed to understand and explain welfare state programs in the developed nations. How may we understand welfare state programs in the least developed nations? To what extent are the Western welfare state theories and models useful in this regard? Based on a case study of Bangladesh, a least developed nation, this article problematizes the dominant welfare state literature. It identifies nine unique features of welfare state programs in the least developed nations which limit automatic fit of mainstream welfare state theories and models in the contexts of those nations. The article also sheds lights on how the mainstream welfare state theories and models could be adjusted to incorporate developing nations in welfare state analysis.

Keywords: The welfare state, Welfare state programming, Developing nations, Welfare state theory, least developed nations

Introduction

A dominant view among the welfare state scholars is that the least developed nations do not have welfare states because they do not possess the economic capabilities to do it. From the perspective that the welfare state involves a nation's commitment to ensure a decent living for *all citizens*, the justification of this view cannot be denied (Olsen, 2002). Of course, the least developed countries practically cannot make such a commitment for all of their citizens. Despite this, these nations intervene in the social matters in many ways and operate diverse programs targeting the social contingencies that affect the well-being of their citizens. Many of those nations participate in global initiatives such as Millennium Development Goals (MDGs), Sustainable Development Goals (SDGs) or the Education for All campaign to promote positive changes in certain areas of their citizens' lives. What explains such motives of these nations? How do these nations design, finance, administer programs associated with those initiatives? Can the mainstream welfare state theories and model be applied in understating those programs? Based on a case study on Bangladesh, this paper attempts to address these questions. The paper begins with a brief review of the mainstream welfare state theories and models. Then it accounts for the methodologies applied in this investigation. The paper then presents the results followed by a brief discussion where it shed lights on the common features of welfare state programs in the least developed countries and how they differ from those in the developed nations. It concludes with some suggestions about how the mainstream theories and models should be modified to incorporate the welfare state programs in the least developed nations into welfare state analysis.

Welfare State Programming and the Welfare State: A Brief Review of the Concepts and Theories

Welfare state programs generally refer to social programs initiated or mandated by the state to protect the citizens from various contingencies and promote citizens' well-being. Historically, they reflect the state's more active involvement in social matters to address and mitigate social adversities associated with capitalist industrialization and modernization, such as industrial injury, job insecurity, old age, and unemployment. The announcement of the Imperial Decree of 1881 by Chancellor Otto von Bismarck and the introduction of programs for sickness (1883), accident (1884), and old age and invalidity insurance (1889) in Germany is generally considered the marker the beginning of modern welfare state programming. These "radical" initiatives by Bismarck was a shift from traditional practices of poor relief-type voluntary provisioning by the state to a more institutionalized system of compulsory insurance and right based entitlement to social benefits (Kuhnle & Sander, 2010: 64). As this idea of programming spread across European countries, the nation states came

up with similar programs to address the similar issues that they were then experiencing in their own countries (Kuhnle & Sander, 2010).

In the early decades, welfare state programming largely revolved around workplace accident, sickness, and old age. After the First World War, unemployment and family income insecurity were included in programming considerations. Thus, up to the Second World War, welfare state programs largely developed around five “social questions” associated with capitalist industrialization (Kuhnle and Sander, 2010: 66). The primary targets of the programs were the working class, and the programs commonly took the form of social insurance. Accidental insurance, sickness insurance, old age pensions, unemployment insurance, and family income support came to be known as the five “pillars” of social insurance. Nations possessing those programs were labeled as the social insurance states (Kuhnle and Sander, 2010).

The modern welfare state as we see it today is mostly a post-War development. In light of new the ideas such as universal human rights and social citizenship, nations came up with the commitment to promote the well-being of *all citizens*, not just the working class or any segment of the population, through a more right based approach to social protection. The evolution from the social insurance state to the modern welfare state is informed by a shift from working class-focused programming to citizen-focused programming and a transition from a *voluntary* to a *more institutionalized* social policy role for the state. As Olsen (2002: 27) defines the welfare state “as the institutionalization of the state’s responsibility for the well-being of its citizens.” Kaufmann (2001: 817) suggests that we can speak of a welfare state “only if social services are linked to normative orientations so that political actors assume a collective responsibility for the well-being of the entire population.” Similarly, Leisering (2003: 179) declares that “a welfare state emerges when a society or its decision-makers become convinced that the welfare of the individual is too important to be left to customs or to informal arrangements and private understanding, and is therefore a concern of government.”

The modern welfare state, in terms of its more concrete form, can be defined as a sum of *public* allowances, benefits, programs, services, and legislations aimed at ensuring a decent living for all citizens. It comprises “an intricate web of income security payments, social insurance, universal and targeted cash transfers, a wide range of in-kind goods and social services (including housing, education, and healthcare), and several related laws and regulatory measures (such as employer liability legislation)” (Olsen, 2002: 22).

Gøsta Esping-Andersen (1990) has identified three streams of welfare state programs: social assistance (means-tested, targeted cash transfer or in-kind service benefits, generally meagre and stigma attached, to provide ‘basic security’), social insurance, (contribution-based programs targeting the working people to provide earning replacement against the risk of low income in old age, illness, and periods of unemployment) and universal programs (programs that cover all citizens irrespective of economic conditions). Esping-Andersen asserts that all welfare states deploy these three types of welfare provisions; however, their relative preferences vary across nations. In other words, welfare state programs related to

particular contingencies considerably vary in terms of goals, coverage, access criteria, benefit levels, wait time, and duration.

In the developed world, a number of theoretical approaches are employed to understand cross-national differences in welfare programming. These include the functionalist perspective, the culturalist perspective, the pluralist perspective, the institutionalist perspective, and the power resources perspective. The functionalist perspective sees the development of welfare state programs as the nations' adaptive responses to the changes associated with industrialization and urbanization (such as the destruction of pre-industrial modes of social reproduction such as family, church, *noblesse oblige*, and guild solidarity and the emergence of new social forces such as individualism, market dependence, and social mobilization) (Mishra, 1973; Pampel and Williamson, 1988). This relationship between industrialization and welfare state programs, as this perspective suggests, is mediated by economic capacity. That is, how well a nation can respond to the changes brought about by industrialization depends on its economic affluence. This perspective assumes a linear, positive association between national economic advancement and welfare state program development (Wilensky, 1975; Furniss, 1992).

The culturalist perspective offers a comparative framework and uses values, traditions, and attitudes in understanding cross-national variations in welfare state programming. According to this perspective, in societies where people are collectively oriented and class conscious, welfare state programs are more generous, comprehensive, and egalitarian. Conversely, in societies where values such as individualism, meritocratic competition, achievement orientation, and libertarianism are dominant, social policies and programs tend to be less generous and less egalitarian (Trägårdh, 1990).

Pluralists scholars see modern capitalist societies as 'polyarchies,' where power is widely diffused among variety of competing interest groups (Dahl, 1961). Therefore, they view welfare state programs as results of the state's balancing efforts in response to demands of various lobbies representing different interest groups (Olsen, 2002; Olsen & O'Connor 1998).

The institutionalist perspective assumes that the differences in programming practices among nations is a function of variations in institutional arrangements of the states, such as bureaucracy or administrative apparatus (Alfred Stepan, 1973; Ellen Kay Timberger, 1978; Hugh Hecllo, 1974; Theda Skocpol, 1985), constitutional structures (federal or unitary, fragmentation or centralization of power), and party system (Olsen, 2002). Nations characterized by a parliamentary system, strong party discipline and executive dominance, a permanent, low profile, independent and experienced civil service, and a long history of interventionist social policy are likely to have more comprehensive and generous welfare state programs than nations which are characterised by constitutional separation of power, a weak tradition of party discipline and interventionism, and impermanent and diffused bureaucratic structure (Boase, 1996; Steinmo, 1994).

Finally, the power resources perspective views welfare state programs as results of relative power between the capitalist and the working class. This theory assumes that variations in the power resources (defined as attributes

[capacities or means] of actors – individuals or collectivities – which enable them to reward or to punish other actors.) between classes have significant consequences for distributive processes, levels of aspirations, and pattern of conflict, as well as institutional structures and for the functioning of the state and various state organs (Korpi, 1998). In countries where labour is more powerful, welfare provisions are more extensive, and there are lower levels of social inequalities (Olsen, 2002).

Besides the theories, a number of comparative models are also employed to understand welfare state programs in the developed nations, such as Harold Wilensky and Lebaux's (1958) dual model (residual versus institutional states), Richard Titmuss's (1976) tripolar model (residual, achievement-performance, and institutional), and Furniss and Tilton's (1977) tripolar model of welfare states (the positive state, the social security states, and the social welfare state) and Esping-Andersen's (1990) tripolar model (liberal, conservative, and social democratic). Among these models, Esping-Andersen's tripolar welfare state typology has been dominant in comparative welfare state analysis in the recent decades. Esping-Andersen identifies three major sources of livelihood – state, market, and family- and suggests that welfare state programming involves a state-market-family nexus in terms of the supply of resources. He identifies three major indicators of variations in welfare state programming: (a) relative preference among social assistance, social insurance, and universal programs; (b) relative emphasis on state, market, and family as sources of welfare, (c) and commitment to promote social equality. His classification of welfare regimes into liberal, conservative, and social democratic is largely based on these three forms of variations in welfare state programming. These theories and models developed over the last five decades form a rich welfare state literature. However, as indicated earlier, they are grounded in the West and are primarily used to understand and explain welfare state programs in the developed nations. As a result, very little is known how well they fit in the non-Western contexts.

While the welfare state may not exist in the least developed nations (especially, in the conventional sense), welfare state programming has existed there since long before, same as that in Europe before the emergence of the modern welfare state. A study by Bhuiyan (2014) suggests that in terms of conventional social security programming (i.e. programming for accident, sickness, old age, unemployment, disability, family allowance) the current state of welfare state programming in the developing world is more advanced than that in the developed world in the immediate post-WWII period, when the literature on the welfare state and social programming started to flourish in the developed world. Moreover, as part of their commitment to different global and international initiatives, such as The Human Rights Convention, The Millennium Developmental Goals (MDGs), Sustainable Developmental Goals (SDGs), and the Education for All Campaign, the least developed nations operate many programs to promote the well-being of their citizens. What are the features of these programs? How are these programs initiated, designed,

administered, and financed? Can they be understood deploying the mainstream welfare state theories and models? The rest of the paper addresses these questions.

Methodological Notes

A case study was conducted focusing on Bangladesh, a least developed South Asian nation, to address the above questions. The study examined the programs in nine social policy areas/domains in Bangladesh – education, health, food, elderly, disability, women, child, housing, and labour market – in terms of programming practices, coverage, eligibility criteria, and benefit levels. Social policies of Bangladesh, books, policy papers, journal articles and reviews on social policy and programming, national development plans, budget speeches in the parliaments, websites of concerned ministries and departments of the nation, websites and publications by the site offices of development partners such as the World Bank, ILO, UNICEF, UNESCO were consulted as sources of data for the study. In addition, a research field trip was made in 2015 to consult with national policy makers and local scholars to understand their views and understanding about social programs in Bangladesh as a means of data triangulation.

Findings of the investigation are presented in the next section. A comparative approach has been adopted in reporting them considering that it might be useful for a better understanding of the observed unique features of welfare state programming in the least developed nations and the ways in which the programs of these countries are different from those of the developed nations. It is assumable that observations based on a single nation cannot be generalized about all least developed countries. However, they may guide scholars to reorganize their expectations while investigating similar issues in some other jurisdictions in the developing world.

Distinctive Features of Welfare State Programs in the Least Developed Nations: The Case of Bangladesh

The study identifies nine distinctive features of welfare state programs in Bangladesh that separate them from those in the developed nations. This section briefly shed lights on these features. First, social security systems in developed nations are generally organized around some standard social contingencies: industrial accident, sickness, maternity, old age, disability, unemployment, and low family income. While these standard risks are increasingly being incorporated in social welfare programming in Bangladesh, the risks of hunger and poverty are the major priorities of social welfare programming in that country. This reflects in the fact that food programs, which are not typically viewed as a social policy domain in the developed nations, are an important form of public support in Bangladesh. There is a large number of income maintenance and service provisioning programs within the

food policy domain of Bangladesh which are designed to ensure that the extreme poor and those vulnerable to seasonal and geographical poverty have access to food grains and nutrient-rich food. Together these programs make food security the single most dominant social policy domain in Bangladesh (Bhuiyan, 2015).

Second, developed nations operate largely standardized sets of programs to address different social contingencies. For example, for industrial accidents, sickness, and maternity, nations in the developed world generally respond through provisions of accidental insurance, sickness insurance or medical benefits, and maternity leave (insurance) respectively. Risks associated with old age are addressed through multi-layered income support provisions such as flat rate cash benefits, tax financed pensions (generally on pay-as-you-go basis), and/or private schemes and services such as home care, personal care, and special hospital care. The problem of unemployment is commonly addressed through unemployment insurance, employment assistance and active labour market programs such as vocational training, job placement, and labour mobility programs. Family income poverty is addressed through child benefits, child tax benefits, day care subsidies or services, and income assistance for lone mothers. Table 1 summarizes the income support and services provisions typically seen in the developed nations. However, while there are increasing efforts in Bangladesh to address similar contingencies, the programs the nation operates across the social policy domains are largely unfamiliar in the developed world.

Table 1. Standard Welfare State Programs in the Developed Nations

Policy domains	Income components	Service Component
<i>Disability/acci-dent</i>	a. Accident insurance b. Disability allowance	a. Disability services (special care; special education; special communication) provisions
<i>Old age</i>	a. Old age allowance b. Public Pension schemes c. Private pension schemes	a. Seniors' Residence b. Personal care home
<i>Sickness</i>	a. Sickness insurance b. Maternity insurance c. Parental Leave d. Medical allowance	a. Healthcare (service or insurance)
<i>Unemployment/la-bour market</i>	a. Unemployment insurance b. Unemployment assistance	a. Training programs b. Employment generation program c. Labour mobility program
<i>Family</i>	a. Child benefit b. Child tax benefit c. Lone mother allowance	Child care/day care
<i>Housing</i>	a. Housing allowance b. Housing loan c. Subsidized housing	a. Cooperative housing b. Public housing

Table 2 presents the income support and service programs operated to address health, housing, elderly, and disability policy domains in Bangladesh. It is seen that while some social insurance provisions such as sickness benefits and old age pensions are common with the developed nations¹, other programs such as Essential Service Delivery and Urban Primary Healthcare Services (primary healthcare support in rural and urban areas respectively targeting primarily the low income people) in the health policy domain, Housing allowance (monetary benefit for public employees), urban Residential Area and Flat Development Programs (urban public housing initiatives targeting the politicians and professionals), Slum.

Table 2. Income and Services Provisions in Health, Housing, Elderly, and Disability Policy Domains in Bangladesh

Policy Domain	Income Support	Service
Health	<ol style="list-style-type: none"> 1. Sickness Benefit 2. Medical Benefit 3. Work Injury Benefits 4. Assistance for Cancer, Kidney, and Liver Cirrhosis Patients 	<ol style="list-style-type: none"> 1. Essential Service Delivery (ESD) 2. Urban Primary Healthcare Services (UPHCS) 3. The National Nutrition Service (NNS) 4. Expanded Program of Immunization (EPI) 5. Vitamine-A capsules distribution (VAC) 6. Voucher Program for Maternal Health.
Housing	<ol style="list-style-type: none"> 1. Housing Allowance 	<ol style="list-style-type: none"> 2. Urban Residential Area and Flat Development Program 3. <i>Bustee</i> Rehabilitation Program 4. Slum Upgrading Program 5. Subsidized urban housing financing 6. <i>Ghore Fera</i> Program 7. <i>Adarsha Gram</i> Program 8. <i>Ashrayan/Abason</i> Program 9. <i>Sorkari Ashroy Kendro</i> 10. <i>Grihayan Tohobil</i>
Elderly	<ol style="list-style-type: none"> 1. Pension system for public employees 2. Old Age Allowance 3. Honorarium for insolvent Freedom Fighters 4. Honorarium and medical benefit for injured Freedom Fighters 	
Disability	<ol style="list-style-type: none"> 1. Allowance for distressed persons with disabilities 2. Educational stipends for students with disabilities 	<ol style="list-style-type: none"> 1. Fund for Rehabilitation of Acid Burned Women and Physically Handicapped 2. The Child Development Centre (CDC) 3. Integrated Education for the Visually Impaired Program 4. Schools for the Visually Impaired 5. Vocational Training Centre for the Blind Employment Training and Rehabilitation Centre for the Physically Handicapped (ERCPH) 6. Institution for Persons with Mental Disability

¹ Although the national pension system covers only public employees.

Upgrading (increasing facilities in urban slums), Ghore Fera/Ashrayan/Adarsha Gram programs (public housing initiatives for the rural homeless) in the housing policy domain, educational stipends for students with disabilities (allowances covering tuition fee and residence for students with disabilities living in the disability centers) and Fund for Rehabilitation of Acid Burned Women in the disability policy domains are unique to the welfare state programming in Bangladesh. These observations suggest that if one intends to investigate social programs in the least developed nations with the mindset to discover programs that are typical or standardized in the developed nations, one may be only partially successful. There may be other programs in the social policy domains in the least developed nations which are unknown or unfamiliar in the developed world.

Third, in developed nations, specific risks are addressed through specific programs. For example, disability allowances are designed to provide income support to persons with disabilities who are unable to engage in the labour market effectively. Similarly, child care subsidies are provided to low income parents to allow them to continue their jobs. In Bangladesh, we find that a particular risk is often addressed through multiple small or medium scale programs, and again individual programs are designed to address multiple risks. For example, there are more than a dozen monetized and non-monetized programs addressing the single risk of food and nutrition deficiency among the poor. Conversely, the school stipend programs are designed to address food insecurity, child labour, household poverty, right to education, and gender and spatial inequality. Therefore, the programs are not necessarily risk specific.

Fourth, social security systems have developed in the developed nations primarily around the risks and needs of the working class, particularly those caused by temporary or long term income loss (ILO, 2015). Programs usually are restricted to workers in the formal economy. In Bangladesh, social welfare programs mostly target the non-working people, the poor, and those who are involved in the informal sector of the national economy.² The nation has four social insurance programs in the public welfare system: old age pensions, maternity benefits, sickness benefits and work injury benefits. Among them, the national pension, which is a tax financed provision, covers only public employees. Maternity insurance, sickness insurance, and work injury insurance are employer liabilities and cover employees in the formal economy (SSA, 2015).

Except for a few universal and comprehensive programs in the education and health policy domains,³ other programs across the social policy domains in

² The International Labor Organization defines the unorganized or informal sector as “broadly characterized as consisting of units engaged in the production of goods or services with the primary objective of generating employment and income to the persons concerned. These units typically operate at a low level of organization, with little or no division between labor and capital as factors of production and on a small scale. Labour relations – where they exist – are based mostly on casual employment, kinship or personal and social relations rather than contractual arrangements with formal guarantees” (quoted in Pawar, 2012: 36).

³ Such as free textbook distribution among elementary students, female secondary and post-secondary stipend program in the education policy domain, and free primary healthcare

Bangladesh are non-contributory social assistance provisions that target the poor and the unemployed. There are some programs in the food policy domain known as the monetized food-assisted programs (such as Open Market Sales Program, Fair Price Program, Essential Priority, Other Priority, Large Employers, and Floor Mills) which provide foodgrain support to the low income working people (such as third and fourth class public employees, members of defense, law and other enforcing bodies, employees of public universities and autonomous institutions, elementary and high school teachers, and factory workers) at subsidized price.⁴

There are social assistance programs for the ultra-poor and vulnerable groups. These include Food for Work, Test Relief, Food Assistance for Chittagong Hill Tract (CHT) Areas, and Enhancing Resilience to Natural Disaster and Effect of Climate Change in the food policy domain, Fund for Rehabilitation of Acid Burned Women and Physically Handicap Program in the disability policy domain, and Employment Program for the Ultra Poor, The National Service Program, Income Generation for Vulnerable Group Development, and the Rural Maintenance Program in the labor market policy domain.

Some social assistance provisions are designed to enhance employability, self-employment, and entrepreneurship among the unemployed and economically disadvantaged population. These include The Urban-Based Marginal Women Development Program, The Promotion and Expansion of Women Entrepreneurship Program, The Support for Women Entrepreneurship and Support Program, and the daycare program in the women policy domain, the Integrated Education for the Visually Impaired Program and The Deaf Education and Training Program in the disability policy domain, The *Ghore Fera* Program and *Asrayan* Program in the housing policy domain, the eradication of Hazardous Child Labour Program in the child policy domain, The Rural Social Service Program, the Urban Community Development Program, and The Rural Mother Centre Program in the labour market policy domain.

Furthermore, there are many social assistance programs in Bangladesh that provide unconditional food or income support, or services to the poor and vulnerable population. These include the Vulnerable Group Development program (VGD), Vulnerable Group Feeding (VGF), Gratuitous Relief (GR), the Emergency Relief (ER), Farmer Training and Information Services and the Farmer Field School programs in the food policy domain, Old Age Allowance and Honorarium for Insolvent Freedom Fighters programs in the elderly policy domain, Allowance for Distressed Persons with Disability and Educational Stipend for Students with Disability Programs in the disability policy domain, the Bustee Rehabilitation Camp Development Program, the *Guccha Gram*

services under the Essential Service Delivery (ESD) and Urban Primary Healthcare Services (UPHCS) programs, The National Nutrition Service (NNS), Expanded Program of Immunization (EPI), Vitamine-A capsules distribution (VAC) in the health policy domain. See Bhuiyan (2015) for details about the programs.

⁴ For descriptions of the programs see Food Planning and Monitoring Unit (1986); Koht Norbye (1993)

Program, *Adarsha Gram* Program, and the *Grihayan Tahabil* program in the housing policy domain, Maternity Allowance for the Poor Lactating Mothers, and Allowance for the Urban Low Income mothers, Allowance for Widow, Deserted, and Destitute Mothers Programs in the women’s policy domain, Grants for Residents of Government Orphanages and Other Institutions, and Grants for Orphan Students in Non-Government Orphanages in the child policy domain.

The welfare state programming practice in Bangladesh has important contextual implications. The formal economic sector of the nation is small relative to its labour force. As a result, a large majority of the workable population (87.5%) are destined to the informal economic sector (BBS, 2009). The facts that unemployment rate in Bangladesh is 4.3 percent and that 25% of the population live below the national poverty line imply that many people involved in the informal sector do not make enough earning to support themselves and their families (World Bank 2016). The state needs to intervene to promote a standard living for those people.

Given that most workers in the developed world belong to the formal sector, social security provisions covering the formal sector technically cover the entire labour force. However, since in developing nations like Bangladesh a large majority works in the informal sector, social security provisions that cover the formal sector, in fact, cover only a small portion of the national labour force. As a result, developing nations provide programs to cover workers in the informal sector. The exploration of conventional social security programs in the least developed nations probably can say little about welfare state programs in those nations.

Table 3. Matrix of Providers in the Social Welfare System of Bangladesh

Providers Policy domains	State	Market	Family	IDA	Foreign nation	UN agencies	INGO	NGO	CBO	Civil society/activist initiatives	Business	Individual initiative
Education	√	√		√	√	√	√	√	√		√	
Food	√	√	√	√	√	√		√				
Health	√	√		√	√	√	√	√				
Elderly	√	√	√									
Housing	√	√	√	√		√	√	√		√		
Women	√	√	√	√	√		√	√		√		
Child	√	√	√	√	√	√	√	√	√			
Disability	√		√	√		√	√			√		√
Labour market	√	√		√			√	√				

Fifth, in the developed nations, state, market, and family are the primary sources of welfare for the citizens. Esping-Andersen (1990), in his tripolar welfare state model has described welfare systems in the developed nation as a nexus of the state, market, and family. In Bangladesh, we find at least twelve types of welfare providers or financers. These include the state, market, family, foreign nations, international development agencies, United Nations organizations,

international non-government organizations, domestic non-government organizations, local communities or community-based organizations, business, civil society/activist organizations, and individual altruist and philanthropic initiatives.

The presence of providers varies across policy domains. While there is a greater concentration of welfare providers in the education, food, and health policy domains, only few providers are active in elderly and labour market policy domain. Table 3 presents the types of welfare providers active in different social policy domains in Bangladesh.

While the state, market, and family play important role in the national welfare system of Bangladesh, foreign agencies and organizations (such as foreign nations, international development agencies, United Nations organizations, and international non-government organizations) play a very organized and coordinated role in welfare state programming in Bangladesh. Foreign donors form a platform called the Bangladesh Development Forum (BDF) through which they influence welfare programming in the nation as a part of aid administration.⁵ Moreover, there is a Local Consultation Group (LCG) of the donors, which has 24 sector-specific groups. Among them are agriculture, fisheries, water management, environment, power, rural infrastructure, railways, urban sector, water supply and sanitation, education, health and population, NGOs, poverty issues, good governance, food aid, technical assistance to coordination, micro finance, private sector development, and women and gender equality. Various donors are responsible for the sub-group activities. The sub-groups meet frequently, sometimes once a month, to identify potential areas of policy and program development (Sørvald et. al., 2005).

International actors affect welfare state programming in Bangladesh in three ways: first, through project-based financing; second, by controlling policy and program frameworks in the name of technical support; and third via monitoring the implementation of programs funded fully or partially by donors. Foreign donors often introduce projects in certain policy areas in partnership with the government or local NGOs. They do so as a means to highlight a problem area which is yet to gain national attention. Later, they influence the government to incorporate these pilot projects as sectoral programs. For example, World Food Programme piloted the School Feeding Program (to promote school enrollment and child nutrition) from 2002 to 2008. In 2009, school feeding was adopted as a national program for primary school attending children, based on the World Food Program (WFP) model. Similarly, the ROSC (Reaching-out-of-School Children) Program in the education domain was introduced in 2004 as a non-formal education project by the World Bank to cover children who did not go to elementary school or who had dropped out from formal elementary education. The World Bank provided funding and

⁵ The government of Bangladesh prepares a Country Economic Memorandum for BDF annual meetings, which addresses macro and micro economic performance and assesses the need for future external aid for the following fiscal year. Members of the BDF review and coordinate donor policies, the micro and macro-economic performance of Bangladesh, and make pledges for official development assistance to Bangladesh for the following fiscal year.

technical support for the project and NGOs as implementation partners operated it while the Ministry of Primary and Mass Education administered the project. Once the World Bank's ROSC project was closed in 2013, the program and The Second Chance and Alternative Education (SCAE) Program (developed following the ROSC model) were adopted by the government in the ongoing PEDP-III (Primary Education Development Program –III) (MoPMEB, 2011).

In recent years, development partners have promoted a sector-wide programming (SWP) approach in Bangladesh. Until now, health and food policy domains have been brought under SWP. Since 1998, the World Bank, a leader of the aid consortium (now BDF), has dominated a consortium of multilateral and bilateral donors in lending sector-wide reforms, such as the Health and Population Sector Programme 1998-2003 and The Health, Nutrition, and Population Sector Programme 2005-2010. The Bangladesh Development Forum contributes about 27.5 percent of the total cost of the ongoing Health, Population, Nutrition Sector Development Program (HPNSDP) (2011-2016) (MoHFWB, 2011). Similarly, the National Food Policy Plan of Action 2008-2015 was the brainchild of concerned staff of FAO who contributed to formulation of the Plan of Action through policy review and drafting the entire content of the Plan of Action. The Bangladesh Country Investment Plan (CIP) 2011 for agriculture, food and nutrition was also developed through the technical and methodological support from Food and Agriculture Organization (FAO) and the International Food Policy Research Institute (IFPRI) and financial support from USAID. About one third of the cost of CIP is financed by development partners. Both the SWP in the health domain and the Plan of Action and CIP in the food domain include monitoring and evaluation components (Food Planning and Monitoring Unit, 2008, 2013; MoHFWB, 2011). An analysis of the welfare system of Bangladesh without accounting for the role of these foreign actors must remain incomplete.

Sixth, social security provisions in developed nations are generally right-based and supported by legislation. In Bangladesh we find a dual practice in social security programming. While social security provisions for workers in the formal sector are statutory, those concerning the informal sector are *ad hoc* and project-bound and time-bound. For example, the four social insurance programs in the country that cover workers in the formal sector are backed by legislations.⁶ Provisions targeting the informal sector are primarily based on executive decisions. The reasons may be that, due to economic uncertainties and unstable foreign financing, the government does not want make any commitments to support those involved in the informal sector or the poor. Additionally, the *ad hoc* nature may be a political strategy to limit legislative obligations.

Seventh, in the developed world, expenditure on education is not generally considered in welfare state analyses. The International Labour Organization (ILO), for example, does not include expenditure on education in its

⁶ The national pension program is based on *The Public Servant (Retirement) Act 1974* and accidental insurance, maternity leave, and sickness insurance are supported by Labour Law of 2013.

measurement of national public social security expenditure considering that such expenditure does not fit its concept of income security (ILO, 2015). In Bangladesh, several programs in the education policy domain are designed as income support provisions. For example, the food for education program and the stipend programs for secondary level female students are primarily designed to provide income support to the families of school age children to prevent child labour and so children do not drop out of schooling and to prevent child marriage. Such an amalgamation of income security provisions with public expenditure on education in Bangladesh is distinctive from the conventional separation between educational expenditure and income security. This implies that general frameworks of social policy analysis applied in the developed world may not automatically fit the context of developing nations.

Eighth, in the developed nations, a particular policy orientation may explain more or less the overall welfare system. That is, national social welfare programming is thought of being guided by a particular redistributive ideology. As discussed above, one strong element of Esping-Andersen's (1990) tripolar welfare state model is ideology, where he attaches a distinctive programming ideology to a particular nation, in terms of either liberal, conservative, or social democratic. In Bangladesh, there are significant variations in programming across the policy domains. To state from Esping-Andersen's typological perspective, there are universalistic, social democratic, tendencies in the education and health policy domains where there is a good number of universal, comprehensive and generous programs. The elderly and women policy domains largely resemble a conservative policy orientation with features such as the dominance of social insurance and tradition-driven provisions and a lack of commitment to equality. The housing, disability, child, and labour market policy domains are largely underdeveloped and dominated by social assistance programs which reflect a residual (liberal) policy orientation.⁷ Such inconsistencies in programming across the policy domains indicate an absence of commitment to a redistributive ideology in Bangladesh. One reason for this may be dependence on foreign assistance for social programs. Since programming decisions in many instances are initiated by different development partners, nations agree to comply with the conditionality associated with external cooperation, probably, compromising their own ideologies if there is any. This may explain why there is more focus on education and health in Bangladesh (because there is more foreign funding available for these sectors) while issues related to housing, old age, disability, gender, and childhood are largely unaddressed. Therefore, there is a risk of overgeneralization if a conclusion is drawn about welfare programming in a least developed nation based on the examination of only a few policy domains.

Finally, in the developed world, the extent of a welfare state is commonly understood in terms of decommodification. That is, relative emphasis between the state and market is seen as a marker of the level of the welfare state. In the case of Bangladesh, defamilization, instead of decommodification, seems to be a more important marker of welfare state development. Since the size of the

⁷ For detail analysis of the policy domains, see Bhuiyan (2015).

formal labour market is generally big in developed nations, the formal labour market can accommodate most of the national labour forces. As a result, decommodification is a major marker of the extent of welfare state. In Bangladesh, in absence of a developed labour market, the family, as the traditional institution, still plays the central role as the provider of welfare support. In terms of all major areas of social welfare – health, disability, aging, gender, childhood, and education – the contributions of families supersede the contributions of the state and market (Bhuiyan, 2015). Therefore, in the context the least developed nations, it may be more appropriate to see welfare state development in terms of how and to what extent the state takes over responsibilities from families (and possibly from other agencies such as local and international NGOs) in providing welfare support to the citizens.

Thus, it seems that there are significant differences between welfare state programming practices between the developed and the least developed nations. The unique features of welfare state programs in Bangladesh that the study has identified suggest that welfare programming in the least developed nations can differ from the common programming practices in developed nations in terms of covered social contingencies, financing, legal bases of programs and their stability, target populations, and programming goals and designs.

Discussion: Implications of the Findings for Welfare State Program Analysis

What do these distinctive features of welfare state programs in the least developed nations tell us about the welfare state literature today? In other words, what are the implications of these distinctive features in regards to the mainstream welfare state theories and models? It seems that we have a lot to think about when it comes to applying welfare state theories and models in the contexts of developing nations. As discussed above, all welfare state theories primarily focus on domestic forces and actors such as industrialization, urbanization, demographic change, changes in social institutions and economic growth (structural-functionalist), interest groups (pluralist), autonomous state (neo-institutionalist), and working class (power resources perspective). Esping-Andersen's tripolar welfare state typology also sees welfare programming as a nexus of nexus of state, market, and family. None of these theories and models takes into account the role of international actors such as foreign donors, multinational companies, international agreements, and international non-government organization in analyzing welfare state programs.

As it has been found in the context of Bangladesh, diverse domestic and foreign actors are involved in initiating, financing, and executing welfare programs in that nation. Social issues are often problematized through foreign lenses – framed in terms of how the foreign actors see the state of social affairs of developing nations. The perspectives and priorities of domestic actors are shaped (through training public officials and public opinion mobilization through media) to be congruent with the expectations of foreign actors. As a result, social policies are often rooted in their commitment to multilateral

conventions or agreements and suggestions and advice of staffs of international donor agencies. The nature and development of welfare state in the nation seems to be a synergy of the effects of both domestic and international factors.

This picture of welfare state programming in Bangladesh suggests that mainstream welfare state theories and models are poorly suited for welfare state analysis in developing nations. Given their focuses only on domestic factors, these theories and models cannot account for the complex interplay between domestic and international forces and actors in shaping and implementing welfare state programs in the least developed nations. Therefore, to make these theories and models more useful in developing country contexts, they need to be adjusted to accommodate the role of both domestic and foreign factors and actors.

Moreover, the findings seem to have several methodological implications. First, in order to investigate social welfare programs in the least developed nations, one should look for programs beyond the standard social contingencies. There may be many welfare state programs in the least developed nations focusing on poverty and hunger, which are largely absent or not generally included in welfare state analysis in the developed nations.

Second, while investigating social programs in the least developed countries, it may be insufficient to inquire to standard programs familiar in the welfare state literature or in developed nations. As we have seen in the case of Bangladesh, there are many programs across the policy domains which are largely unfamiliar in the developed world. These programs are often linked to local contexts (such as the monetized and non-monetized food-assisted programs) or are initiatives of international NGOs and organizations (such as the Food for Education Program was initiated by WFP and the ROSC program was initiated by the World Bank). Therefore, one has to be open to find both familiar and unfamiliar programs while examining welfare state programs in the least developed nations.

Third, legislation-focused examination of social programs is a popular practice in the developed world. For example, the *Social Security Program Throughout the World* surveys administered by the United States Social Security Administration primarily consider social security legislations across the nations. However, as it has been seen in the case of Bangladesh, social welfare programs are mostly project-bound and time-bound, rather than being right-based supported by legislations. Therefore, traditional, legislation-focused examination of social programs may be inadequate in the contexts of developing nations. In cases of developing nations, it may be more appropriate to focus on programs themselves, rather than focusing on legislations.

Fourth, a project-bound approach to social programming (instead of rights-based statutory social programming) may account for the patron-client relationship in the social protection system in developing nations (Schurmann and Mahmud, 2009). Citizens, without statutory rights over the provisions and in the absence of standard and adequate provisions, depend on favour, knowledge or attention of the patrons. This may also reflect the political will of the policy makers who may see welfare provisions as means of distributing to

vote banks, “not according to needs established through epidemiological and demographic data” (Schurmann and Mahmud, 2009: 541).

Fifth, while investigating welfare state programs in the least developed nations, one may be required to search for programs designed for workers in both the formal and the informal sectors of the economies. As we have seen in the case of Bangladesh, unlike in developed nations, workers are not covered by uniform legislations and provisions. Instead, workers in the formal and informal sectors are covered by separate provisions. The national pension scheme, and other social insurance provisions cover workers only in the formal sector. There are separate, largely *ad hoc* provisions to support workers in the informal sector. Therefore, for a fuller understanding of welfare provisions for workers in the least developed nations, one need to examine programs that exist in both the formal and the informal economic sectors.

Finally, the findings challenge the dominant idea that the least developed nations cannot have welfare state programs. These nations are economically poor does not mean that they cannot have welfare state programs. In fact, the least developed nations do have welfare state programs. In the developed nations, welfare state programs are mainly tax financed. In the least developed nations, in addition to the state, several non-state and supra-national actors, such as the United Nations organizations, Bretton Woods institutions, donor nations, and international non-government organizations play important role in financing welfare state programs. Mainstream welfare state theories are not framed to capture the role of these diverse actors in welfare state programming in the least developed nations. However, a recent theory called world society theory developed by Meyer et al. (2008) seems to capture this gap, which focuses on the role of international organizations in social policy programming in the least developed nations. This theory sees the involvement of international actors in developing nations as supporting those nations since they lack adequate capacity to develop a 'standard' social welfare system for their citizens. World society theory, of course, is not recognized in the mainstream welfare state literature. However, it may be useful to incorporate this perspective in welfare state program analysis in the least developed nations.

Conclusions

Welfare state programs in the least developed nations have long been ignored in welfare state literature. These programs have been overshadowed by a dominant idea that poor nations cannot have welfare states. Welfare state theories and models, therefore, have been primarily employed to examine welfare policies and programs in the developed nations. However, the fact is that welfare state programs have existed in the least developed nations for a long time with contributions from both domestic and foreign actors. As we have found from the current study, these programs have several distinctive features which limit the automatic fit of mainstream theories and models in analyzing them. Welfare state theories and models need modifications to make

them more applicable in the contexts of developing nations. They have to be more flexible to incorporate both domestic and international actors. Again, researchers may need to modify their modes of investigation while studying welfare state programs in the least developed nations. They have to be open to explore both conventional and unconventional social policy domains, both familiar and unfamiliar programs, programs designed for workers in both the formal and informal sectors of the national economies, and programs targeting the poor, the ultra-poor, and the vulnerable populations who are largely unconnected to the national labour market. Moreover, researchers have to give up the conventional legislation-focused mode of investigation and adopt a more program-focused mode of inquiry since programs in the least developed nations are mostly project-bound, time-bound and largely unsupported by formal legislations. Hopefully, through adopting the above measures one can gain a more comprehensive and fuller understanding of welfare state programs in the least developed nations.

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