

Social policies and social welfare models: fragilities of the Brazilian case

Políticas sociais e modelos de bem-estar social: fragilidades do caso brasileiro

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ABSTRACT The article analyzes the Brazilian welfare model according to elements central to the emergence and to the development of social protection systems. It is intended to discuss to what extent the absence or incompleteness of those elements weaken the model built in the 1988 Constitution. The general precepts of social protection are initially presented to characterize and discuss those issues as for the Brazilian case. It is argued that the pattern inaugurated in the 1988 Constitution timidly altered structural elements of the dynamics of social welfare states, such as de-commodification of social relations and values concerning social protection, making it fragile in face of retrenchment measures.

KEYWORDS Public policy. Social welfare. Brazil.

RESUMO O artigo analisa o modelo de bem-estar brasileiro a partir de elementos centrais à emergência e ao desenvolvimento dos sistemas de proteção social. Pretende-se discutir em que medida a ausência ou a incompletude desses elementos fragilizam o modelo construído na Constituição de 1988. Apresentam-se os preceitos gerais da proteção social para posteriormente caracterizá-los e discuti-los no caso brasileiro. Argumenta-se que o padrão inaugurado na Constituição de 1988 alterou de forma tímida elementos estruturais da dinâmica dos estados de bem-estar social, como a desmercantilização das relações sociais e os valores relativos à proteção social, tornando esse padrão frágil frente a medidas de retração.

PALAVRAS-CHAVE Política social. Seguridade social. Brasil.

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Introduction

The analysis of the emergency and, mainly, of the development of welfare regimes in Latin America (LA) deals with three distinct periods. The first period concerns the emergence and formation of welfare regimes and its relation to the specificity of the capitalism in the region, characterized by the import substitution model of industrialization, resulting in Bismark type models with stratification of clienteles and benefits and the exclusion of large parts of the population (FILGUEIRA, 2011). The second, a period of neoliberal reforms, when the systems had undergone significant changes in several countries during the decades of 1980 and 1990, tending to the disruption of the regimes, being Colombia the most radical experience, but also including alternatives to universalization, the case of Brazil.

The third period, the most recent one, is identified by the introduction of the so-called 'new developmentalism' model, which focus on countercyclical economic policies along with the broadening of social policies. In many LA countries, the tendency was the entrance of poverty eradication in government agenda through the creation or expansion of income transfer programs and the enlargement of education, health, and social security systems. The result was the significant reduction of inequality – as far as the historical pattern of the region is regarded –, in addition to an economic growth above that registered in other parts of the world (DRAIBE; RIESCO, 2011).

A fourth period may be outlining, characterized by economic downturn, political and economic crisis and growth of conservative governments, whose agenda includes significant changes in social policies. Although the analysis of such moment is premature, it is possible to identify that, again, social systems play a central role.

In the European case, which has experienced neoliberal policies since the 1970s, the

changing process of social protection systems is characterized by retrenchment or restructuring, since the regimes were not changed significantly. More or less radical, changes focused on the lesser growth of social public spending, the introduction of new public management mechanisms (POLLITT; BOUCKAERT, 2002), variations in the pattern of benefits, the inclusion of co-payment mechanisms, and increased participation of private services (COUSINS, 2005; ALSPATER, 2003). These changes begin to show their consequences regarding more inequity and inequality, but they indeed did not break the backbone of social systems. However, no signs of a return to periods of expansion can be envisaged.

As the European model is still the primary reference to comprehensive social policy systems, it is important to emphasize the inflection Latin American registered in the neoliberal path – or the third period of expansion mentioned above –, even after the radicalism of the retrenchment on the immediately preceding period. Given the outline of a new wave of retraction on LA social policies, apparently as or more radical than the previous one, it is reasonable to assume that the period of expansion could explain, at least in part, the current process.

This article discusses specifically the case of Brazil. The aim is to explore some factors of our welfare state during its most recent period that indicate a chronic instability and cause its weakness before retraction measures. To this end, we take some characteristics that explain the emergence and expansion of social welfare regimes, precisely the degree of decommodification and values.

The Brazilian case carries distinctions and similarities also as for the European case as the Latin-American one. Here, the intention was to build a welfare apparatus similar to the European welfare states, having as legal framework the 1988 Constitution. This construction, however, was late compared to European countries, and occurred exactly during the breach period of the 'welfare

consensus' and prevalence of the 'Washington consensus', when social policies were being retracted. In the late 1980s, Brazil presented a context of deep economic crisis, common to all LA, along with a lasting political transition to democracy. The Country was also offered the proposals of international agencies to reform social policies to cope the crisis. But instead of following the reforms undertaken in LA, the rights defined in the Constitution were not breached; on the contrary, they were mostly implemented.

In this sense, Brazil followed the retrenchment process of original welfare policies rather than the radicalism of Latin America reforms. However, a corrosion of these structures over the following decades generated a complex dynamics of segmented rights, substantial poverty-focused policies with weak connection to universal ones, scarce connection between social and economic policy causing severe constraints to financing, and privatization 'within' social systems, i.e., preference for purchasing services from the private sector instead of enhancing public owned network.

The Brazilian Path

Social policies in Brazil were heavily dependent on economic development projects of different political regimes, leaving to a secondary plan the adoption of strategies for the effective improvement of living conditions and creating minimum standards of social equality. Citizenship was based on the need of legitimizing different regimes, causing social rights to develop in a fragmented and uneven way. As known, the general pattern followed the 'regulated citizenship' (SANTOS, 1987), a Bismarck type model with rights restricted to the urban formal labor market workers essential for the industrialization process.

In a model similar to that of many other LA countries, large public structures for social security and health care were developed,

based on payroll contributions. However, rural, informal labor market and domestic workers, which have always represented an important portion of the workforce in the country, were not covered by those systems. Social welfare, in turn, had always been strongly connected to traditional mechanisms of interest intermediation, such as patronage, and was also an essential element for the legitimacy of successive regimes. As a consequence, social assistance policies reinforced favoring instead of guaranteeing rights (PEREIRA, 2001; SPOSATI ET AL., 1992).

Another important element regarding social policies development was its undemocratic character. It is meaningful that, from 1923 to 1985, social systems experienced greater development during the authoritarian periods, leaving a legacy of high centralization, low interference of the population and little transparency, in addition to bureaucratized organizations. Although the 30 years of democracy since the end of the military regime, many of those features still permeate the structures of social policy.

Despite the power of the social policy institutional structure built last century, it either failed in changing the exclusion of broad social sectors or the large income concentration that has always characterized the Country. The long lasting democratic transition which started still in the mid-1970s and went throughout the 1980s brought back the voice of society. Democratization had as its institutional pinnacle the 1988 Constitution. The notion of citizenship was the construction basis of that new model expressed in the constitutional text.

The 1988 Constitution establishes a particular chapter to social order and recognizes as social rights the access to health, social security, welfare, education, and housing – in addition to public safety, leisure, work. The Constitution institutionalized a model of social protection similar to the original welfare states, including universal access, state responsibility, reserved budget, and an

innovative policy dynamics based on federative integration and social participation.

The Constitution represented a legal rupture based on notions that were not yet robust in the Brazilian social structure, such as citizenship, democracy, and social solidarity. A new social pact became constitutional, although on weak foundations. It imposed a new form of State in a society carrying low levels of social organization, undemocratic in its state and social institutions and profoundly unequal. From the organizational standpoint, social policy presented till then a great structure of supply and guarantee of social goods, although at low coverage, restricted to middle layers and formal labor market, bureaucratized, pervaded by particularism, and subjected to a high degree of corruption. The model institutionalized in the Constitution of 1988 has had to live with the past of social policies, with the following government projects and with the values of the society that adopted it. And that resulted in the incomplete and insufficient pattern of our social welfare state.

In the almost 30 years since the Constitution, it can be affirmed that social policies progressed in crucial aspects, like the political-organizational apparatus and the conception of the social problem. From the political-organizational apparatus standpoint, it is to highlight the building of national systems such as in health and social assistance, the expansion of decentralized and unified public bureaucracies, the unprecedented participation of the three spheres of government, and the construction of participation and social control mechanisms. From the standpoint of the social conception, it is to note the elements of ‘constitutionalization’ – incorporation of legal rights (COUTO, 2008; FLEURY, 2006), ‘scope’ –, publicizing and integration of new social issues in the public agenda, and ‘enlargement’ – recognition of social production and interrelation of social problems (LOBATO, 2009).

That progress got along with significant

restrictions, thoroughly analyzed by the literature. However, no prognosis predicted the u-turn that reaches social policies in the current situation, after the impeachment of President Dilma Rousseff. This u-turn can be resumed on the proposal of Constitutional Amendment #55, already approved by National Congress, which impede the increase of social expenditures for the next 20 years to control the public debt. Many other initiatives of the present government oppose the 1988 Constitutional pact, reduce social rights and the role of the State role in its warranty.

Until now the restrictions to social rights occurred through constraints on financing, maintained by successive governments. The systematic reissue of the Union Revenues Untying (DRU) withdraws significant part of the budget of social areas. The Fiscal Responsibility Law restricts investment, warming up the dispute for resources among federated entities. Also, there were different political projects regarding the scope of social rights and the extent of State intervention, such as in the governments of President Fernando Henrique Cardoso and President Lula da Silva regarding the welfare policy, anti-poverty programs or policies for racial equality, for example. Still, there have been disputes within the social areas for resources or guidance in the formulating and implementing of policies defined in the Constitution, as with the scope of the Unified Social Assistance System (Suas), or the decentralization in the Unified Health System (SUS). Although problematic for social rights, these disputes are part of the political scenario.

Even if it was the intention, there was not, till now, a political project explicitly intended to broadly reconfigure the Constitution and the social rights. That project is now being carried out amidst a severe political crisis, is not grounded on an elected program and has never been presented as such to the society. And, astonishingly, counts with the

support of a significant part of the middle class. It is indeed a project that disrupts the trajectory of welfare state predicted in the Constitution. In this sense, it is worth discussing some elements of that path.

Contradictions and permanence of the welfare state in Brazil

The literature of welfare states selected elements of its emergence and development that, from historical explanations, become theories with more economical (WILENSKY, 1975) or institutional approaches (CASTLES, 1989) (AMENTA, 2003; ARRETICHE, 1995). Regardless the theoretical approach, there are common elements that operate, to a greater or lesser degree, in the configuration of social policies and, in that sense, serve as categories for the analysis of particular cases. Among those elements, are to be noted the degree of de-commodification, the compromise between capital and labor, the relations between the market and the public sector, the role of bureaucracy and central authority, and the role of middle classes. Those elements are all well known in the Brazilian literature, but only the role of bureaucracy and central authority is extensively applied to empirical research on social policies.

The de-commodification, a category developed by Esping-Andersen (1990), refers to the autonomy that individuals have from the labor market to accomplish their basic needs. The social systems, by providing goods and services regardless the individual insertion in the market, guarantee that autonomy, making welfare states being labor market regulators par excellence. Besides, the more social relations are de-commodified, the more employees are empowered to claim rights (ZIMMERMANN; SILVA, 2009), which means that de-commodification involves economic and political aspects. In the

Brazilian case, social policies post the 1988 Constitution did not create social relations entirely de-commodified. More impactful on de-commodification were measures such as pensions for rural workers and the definition that no benefit can be paid less than the minimum salary.

The Continuous Cash Benefit (Benefício de Prestação Continuada – BPC), an important benefit for seniors and people with disabilities, has a high positive impact on the life of those segments. However, it has rigorous eligibility criteria that exclude many people in need, mainly the per capita family income (up to 1/4 of the minimum wage) and the rigid biomedical norms for those with disabilities. This rigor was recently weakened with the inclusion of social ambiance and necessities as new criteria, admitting not only the biomedical impediments but also the social ones (LOBATO; BURLANDY; PEREIRA, 2016). The impact of this measure is not yet fully known. However, when combined with the income cap and the rules for family composition, it does not appear that the access can be significantly expanded.

BPC reaches significant coverage for the elderlies in extreme poverty, but there is a large not eligible contingent of poor people with disabilities, mostly children and individuals with mental disorders, whose limitations make unlikely their insertion in the labor market. The insufficiency of health and social assistance services as so as a lack of schools for children and young people with disabilities hampers their social inclusion and their future. The complexity of those disabilities increases family commitment with home care, restraining the access to the work of family members, mostly women, who remain dependent on low-skilled and irregular activities.

Employment growth during President Lula da Silva government was significant when 22 million new jobs were created, being 90% of them formal jobs. But they were low-skill jobs, mainly in the service

sector, where 95% of employees received up to two minimum wages (POCHMANN, 2014). The increase in employment in the service sector is related to the intense process of deindustrialization since the early 1990s. Formal jobs are less precarious and entitle workers to benefits such as unemployment insurance, but are in the majority low-skill jobs not accepted by better positioned and educated middle class, therefore maintaining 'bottlenecks' in qualification for work (MONTALI; LESSA, 2016).

The work dynamics is insecure, given the significant growth of the sickness benefit, which increased from about 30% to 55.6% of social security benefits from 2000 to 2006 (stabilizing around 45% in the following years) (FREITAS, 2013). Several factors contributed to this increase, among them, work-related sickness or accidents. Those follow particular norms and include the co-responsibility of companies in the sickness allowance. The lack of control over companies alleviates their share and push workers for the sickness benefit. However, instead of strengthening management and regulation over work-related events, the option of government was to harden the access to the sickness benefit by workers.

When analyzing income mobility in Brazilian regions, Montali and Lessa (2016) confirm that the increase in income between 2001 and 2012 'has not been accompanied by substantial improvements in other indicators, such as employment and education quality', in spite of the various policies and actions in that regard. They add up that, despite the progress in access to urban public services between 2001 and 2012, significant distance still separates income strata of the population.

Job uncertainty, low educational level, insecurity regarding access to benefits under risk, and insufficiency of universal services show the weakness of our welfare state de-commodification process. Also, it is to be taken into account that the globalization effects

on the welfare states are not yet adequately known in Brazil, mainly as for the market opening on sectors related to social services (CORTEZ, 2008). This new setting also influences the arrangement and interests of actors. In health sector in Brazil, for example, new actors, arrangements, and interests arise from changings in the market of private hospital and health plans, as so as with the recently emerged private health organizations, the so-called Social Organizations (*Organizações Sociais*).

Changes in market dynamics impact the collective action and the demand for social rights. The decommodification does not depend only on safe supplying of benefits and services alone; it needs to be recognized by collective subjects. Pochmann calls the attention to the fact that new rising of employment was not accompanied by greater participation in trade unions or associations (POCHMANN, 2014). Social policy studies need to pay more attention to the understanding of collective dynamics that results from our welfare state expansion, to identify future strategies.

The weakness of the decommodification process adds up to another important element supporting welfare states, which are the values (ROSANVALLON, 2000; ESPING-ANDERSEN, 1999). The notion of citizenship, which is the political foundation of the Brazilian constitutional model, does not seem to have achieved the grounding of social solidarity inherent to it. The prevailing notions are the right – right to education, to health etc. – and the responsibility of the State. But the notion of right does not necessarily come accompanied by the one of equality, expressed through public and collective benefit, but, rather, by the idea of individual right. Although public systems are known to be used by all, there is no linking among different segments, since the social stratification present in the society remains in the social protection systems. Examples are the access to public school and universities,

being public schools for the poor and public universities for the wealthier; the utilization of services in the public health system, were people with private health insurance use the public system for high level and expensive procedures while the majority of the people face difficulties to access to services. Also, the idea that social assistance is addressed only to the poor when violations and risks are collective and can reach everyone.

The fact that a significant portion of the population has access to private health insurance and does not use the public system regularly is not trivial and hampers the building of a culture that favors a social protection for all. The development of our social democratic welfare state, provided for in the 1988 Constitution, did not count on a social classes pact. Even the cutting-edge sectors of the working classes, which gave and maintained their support to the universal health system, include private health insurance in their collective bargaining agreements and do not defend that non-contributory benefits, for poor workers, be part of the social security. The idea of a social security based on contributors and not solidarity is still strong in Brazil. Business leaders, in turn, always resisted the expansion of public social systems for all and consequently the strengthening of State's role in the social welfare.

The phenomenon of welfare consensus breakdown is common to countries that built welfare states, and the theorists reinforce the difficulty of maintaining social solidarity in times of globalization and changing on the labor market (CORTEZ, 2008). For those countries, the issue would be how to keep social protection systems without the values upon which they were grounded. According to Cortez,

there seems to exist a growing displacement between the provision of social services and the maintenance of the pillars that would guarantee a social cohesion. (CORTEZ, 2008, P.164).

In the Brazilian case, it is possible that it applies and might be identified by the requirement of services without a corresponding relation to social solidarity.

As for social assistance, the lack of consensus is even more problematic. The construction of Suas, a national and comprehensive system of social welfare services, has evolved *pari passu* the preference of governments for income transfer benefits. The latter accounted for 86% of federal spending on social assistance in 2011, leaving little for the implementation and maintenance of the whole network of services (SPOSATI, 2015). It does not only undermines the system but reinforces the notion of social assistance for the poor and, worse, for the poor of income. Despite substantial advancements of social assistance, it is still marginal in the conformation of social welfare.

Two mechanisms present in Bolsa Família, the massive conditional cash transfer which is the flagship of social protection to the poor, hinder decommodification: the conditionalities and the so-called 'exit door,' the promotion of opportunities to the poor enter the labor market and leave the benefit. Common notions in workfare theory, these mechanisms understand social needs as episodic and risks as restricted to families or individuals. The conditionality, even when the soft type, reinforces the liberal classical notion of control over the poor. The 'exit door' is more wicked since it deals with processes of various extents – poverty or extreme poverty – in the same level of the reception of a given qualification and subsequent entry into the labor market. If the idea had not significant effects in countries with better education and working conditions, one could imagine here, in Brazil.

The constitutional model also lacked a party-political coalition of support. Welfare states can be less dependent on political parties, trade unions and social movements when they are consolidated, starting to count on the support of users and services

professionals. In the Brazilian case, coalitions were made sectorially, as in health and social assistance, formed mainly of professionals and public officers, and lesser of parties. Those coalitions joined efforts in the construction of public systems mostly through the public policy arena and inside the state bureaucracy.

Such strategy was successful, because, even without the strong support from parties and being marginal to macroeconomic policy, social protection systems were core preoccupations to different governments. Either for the State ‘modernizing’ project of President Fernando Henrique Cardoso or the ‘new developmentalism’ project of President Lula da Silva and part of President Dilma Rousseff’s. However, public policy showed its limit against the structural weaknesses of social protection, apart from macroeconomic outlines, with a low degree of decommodification, not grounded in equal values, and with small support from political parties.

The priority to institutionalization through public policies was extremely active to build a new legal apparatus and support the creation and implementation of the national social systems. But this path was not so successful in state and local spheres. Decentralization of social policies was one of the most innovative principles of the Constitution of 1988. From a strategy to strengthen democracy against the centralized tradition, decentralization has been a core issue of public systems effectiveness, for technical, political and economic differences among states and municipalities. The creation of innovative bodies for negotiating social policies within the federation has not been able to cope with federative conflicts and our model of party competition.

Conclusion

The social order laid down by the 1988 Constitution inaugurated an advanced

model of welfare state, so far exerting a substantial impact on the population living conditions. But structural elements to support such a model could not be changed. Given the successive contexts unfavorable to the consolidation of the model, its development prioritized the state dynamic, mostly at the federal level, using sectorial policies, services, and benefits, which does not propitiate the strength needed to face retraction situations.

The priority to state dynamics was also a kind of ‘barricade strategy’ in defense of social policies against their detachment from the economic models successively adopted, particularly in health. Even the so-called neo-developmentalism found no room for the broadening of universalization in the social area, being more active in encouraging jobs and prioritizing income transfer programs. Not even in that conducting moment, health, despite its importance as an industrial sector, received a prominent place, on the contrary, deepened its dependence on the external market. This path was also adopted in other Latin American countries, where the ‘new developmentalism’ model failed to change the legacy of economic policies inherited from the preceding liberal period. Despite the advances of the ‘new developmentalism,’ the barriers currently experienced are also to be charged to the antinomy between broadening expansion of welfare and macroeconomic policies.

The positive and successful relation between the expansion of social policies and democracy in Brazil, expressed during the democratic transition, in the 1988 Constitution and, subsequently, in the design of social policies, has to be reinvented to face the setback we will be facing ahead. It is known that democracy and social policies do not necessarily work along together, and the Brazilian history is a good example. The efforts undertaken in the last 30 years to link them both authorized the assumption that some steps had been overcome and

would not be changed, but recent measures of the present government weaken this assertive. How to re-create the democratic sense of social rights and social citizenship? Which democracy can give full meaning to social policies? What social policies effectively strengthen democracy? Brazil and Latin American countries challenge the literature on the welfare state to answer these questions.

The Brazilian Center for Health Studies (Cebes) has indicated the need for deepening

deliberative democracy; for welfare insertion as a mechanism of economic development; for valuing social manifestations still barely visible, as the movements for housing and land, of culture, slums, women, blacks, homosexuals, where social policy is less institutional and more an identity one, where access to services is the result of substantive rights and not the other way around. Answers are still to come, but, in its 40 years of existence, Cebes embodies the youth to start again, if needed. ■

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