Esping-Andersen’s welfare regime typology.

**Esping-Andersen (E-A)**

E-A’s typology proposed in ‘The three worlds of welfare capitalism’ is the most well-known and has been criticised and modified by many [e.g. 18, 35]. Eighteen Organisation of Economic Cooperation and Development (OECD) countries were categorised into ideal clusters of welfare states based on principles regarding unemployment, sickness and pension benefits [36]. The clusters of countries are classified according to three principles:

- **Decommodification**: the extent to which an individual’s welfare is reliant upon the market, particularly in terms of pensions, unemployment benefit and sickness insurance.
- **Social stratification**: the role of welfare states in maintaining or breaking down social stratification; and the
- **Private-public mix**: the relative roles of the state, the family, the voluntary sector and the market in welfare provision.

The operationalisation of these principles was based mainly on decommodification indexes and led to three ideal welfare regime types [19, 36]:

- **Liberal** countries where policies are based on the idea that people are responsible for their own welfare. In other words, state welfare provision is minimal, benefits are modest and the criteria for entitlement are often strict, and recipients are usually means-tested and stigmatised. The countries in the liberal regime type are Australia, Canada, Ireland, New Zealand, UK and the USA.
- **Conservative** countries where access to social support is often earnings-related and administered through the employer. It is distinguished by its “status differentiating” welfare programmes which tend to maintain existing social patterns. These regimes are usually shaped by historical church traditions and the role of the family is emphasised. The countries in the conservative regime type are Finland, France, Germany, Italy, Japan and Switzerland.
- **Social Democratic** countries which belong to the smallest regime cluster and are quite the opposite of liberal and conservative welfare regimes in that there is a public responsibility for welfare and that access to services and benefits is universal. Welfare provision is characterised by comparatively generous benefits, a commitment to full employment and income protection, and a strongly interventionist state used to promote equality through a redistributive social security system. The countries in the social democratic regime type are Austria, Belgium, Denmark, the Netherlands, Norway and Sweden.

This typology has offered an influential typology that has encouraged much research. E-A’s main goal was to describe relationships between states, labour markets, and families and his typology is based on characteristics that refer to both institutions and outcomes [37]. It is important to remember that it was not developed to account for cross-national differences in health or health inequalities [5] and one must therefore bear in mind that it does not necessarily mean that this typology should have an immediate and direct effect on health and health inequalities.

**Modified version**

Castles and Mitchell (1993)

Castles and Mitchell [35] have built on E-A’s typology and focus on welfare state differences in redistribution of social transfers and provision of welfare services [31]. Different countries levels of aggregate expenditure and degree of benefit equality were examined [36] and based on this analysis they argued that Australia, New Zealand and the UK made up a targeted welfare state, the Radical welfare state.