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Joan Costa-Font (ed.): Reforming Long-Term Care in Europe

Chichester 2011: John Wiley & Sons, 176 pp.

Long-term care (LTC) reforms have been at the core of public debates in many European countries recently, triggered by concerns over the future affordability of LTC, the fairness of funding systems currently in place, and the question of whether LTC can be regarded as a 'new social risk' or remains subject to family responsibilities and social assistance-oriented public support. How should welfare states cope with the rising need for LTC? How should LTC be financed, provided, and regulated? The book addresses these questions from the perspective of European welfare states and

their recent efforts to improve LTC systems, based on contributions from renowned experts in the field such as Adelina Comas-Herrera, Blanche Le Bihan, Heinz Rothgang, August Österle, and many others.

The book starts out with a discussion of arguments in favour of and against long-term care insurance, exemplified by the experiences of a number of countries: the first part arches from 'quasi-universalistic' states such as the UK where the idea of an insurance-based system is rather new, via France—characterised by a 'policy learning' process in LTC in recent years—to the Netherlands and Germany, where public LTC insurance has been introduced successfully already. In some cases, such as the chapter on the Netherlands, the description remains very broad, giving detailed figures on LTC in this country, yet failing to provide a clear focus on the most relevant reform efforts in recent years.

The first section builds on the theoretical concepts and tools introduced by Nicholas Barr in the first chapter. Barr points to the differences between private and social insurance (p. 12) and the reasons for market failure in a private insurance market for LTC (p. 4ff.). Private, actuarially fair LTC insurance fails because the risk of a need for LTC in the future may be too uncertain, problems of asymmetric information (i.e. cream-skimming and moral hazard) arise, and individual risks may not be independent from each other. Social insurance, by contrast, makes membership compulsory and thus breaks the link between the amount of insurance premiums and individual risks. Second, social insurance coverage is able to deal not only with risks, but also uncertainty, as the conditions for coverage are less narrowly defined.

While much of the book's content focuses on the specific design of LTC systems in each country, the first section of the book also conveys a solid impression of the political debates surrounding the possible in-

introduction of (social) insurance schemes for LTC: How much of the need and costs for care should be met by the state? How much is left in the realms of families and informal carers? After all, legal concerns may also come into play once a social insurance system has been introduced. For instance, in the Netherlands a court ruling confirmed the right of people to care services, leading to a substantial rise in public spending on LTC between 2000 and 2003, from 3.5% to 4.0% of GDP (p. 59). Also, cultural considerations may play a major role in the question of whether or not systems are 'carer-blind' or not (i.e. entitlement for benefits depends on the availability of informal care). In France, it was shown that private insurance was taken out in order to financially protect relatives in the event of disability and reduce the burden on potential informal caregivers (p. 40). England's system, which is not carer-blind, has been facing criticism recently (p. 22).

Challenges may, however, also occur after the introduction of a social LTC insurance system, as the example of Germany demonstrates: adjusting contribution rates in a timely manner, ensuring full coverage, and—as in the case of the Dutch public LTC insurance—finding sustainable cost containment strategies, to name only a few. In the Netherlands, the introduction of personal care budgets (provided in cash), not subject to the same budget constraints as in-kind services covered by LTC insurance, led to a vast increase in cash benefit entitlements (p. 61) as well as (partly undesired) substitution effects of paid for unpaid informal care (p. 64). In fact, shifting policy paradigms, such as 'from a logic of assistance to universalism' (in France, p. 42) may well underlie some of the reform efforts in the countries described.

Concerns over the role of informal carers in the family are also at the forefront of LTC reforms in Central and South-Eastern European (CSEE) countries, and this book features one of the few comprehensive con-

tributions on that region in international comparative LTC literature. While informal long-term care provision is still slightly higher in CSEE countries compared to the EU average and family obligations are culturally more entrenched, it is unlikely that informal networks will continue to compensate for the lack of available LTC services in the future, partly due to increasing employment levels and a relatively large burden of chronic illness. By and large, however, LTC has so far been widely ignored as a social risk in the post-communist countries described (Croatia, Czech Republic, Hungary, Romania, Serbia, Slovak Republic, and Slovenia). Also, decentralisation efforts in the social care sector have had little positive spill-over effects on the provision of adequate LTC structures and innovation in community care in the CSEE region. Similarly, private actors still play a minor role in both residential and community care, despite the increasing importance of non-profit organisations recently. In addition, pluralisation has been hampered by the lack of public funding and weak civil society structures. The CSEE region as a whole is thus portrayed as family-oriented, characterised by means-tested benefits, limited availability of LTC services skewed towards residential care, and with huge regional disparities (p. 117). It remains to be seen whether reform efforts in some countries such as the Czech Republic and Slovenia are sufficient to tackle these challenges in the near future.

The question of organisational reforms in LTC is addressed in the second section of the book. Joan Costa-Font provides an introduction to some of the major implications of decentralised systems for welfare reform: Regional devolution of LTC policy may lead to path dependence, which means that institutional obstacles for welfare reforms increase with the number of decision-makers (or 'veto points'). At the same time, decentralisation may contribute to 'catalysing' reforms by diffusing the fi-

nancial blame in times of reform to other government levels (p. 124f.).

This section investigates organisational structures in LTC in particular from the perspectives of Portugal, Sweden, Italy, and Spain. The political and institutional trajectories of the latter two countries, dubbed by Costa-Font as the 'Latin Rim', are heterogeneous, although responsibilities for LTC are highly devolved to regional governments and local authorities in both countries. Spain approved the introduction of a national system of LTC in 2006, with reforms to be fully implemented by 2015. This had been possible under the favourable political conditions of 2003, when the socialist party had regained power and received support not only from trade unions but also from the autonomous regions of Catalonia and Galicia, governed by a leftist coalition at the time. Economic expansion, high public acceptance, and support from both the conservative opposition (which had launched the reforms during their time in government) further contributed to Spain's success in reforming the system. In Italy, by contrast, regional governments have been unable to push for national LTC reforms, and instead limited their efforts to obtaining maximal resources for their regional health care services. LTC reform proposals have thus far failed to gain attention in the Italian policy arena—partly due to the political costs that would arise from revising the current system of LTC cash benefits, partly compensating for the lack of support in other social policy fields.

An interesting approach to the topic of universalism in decentralised systems is provided in the chapter on Sweden. The existence of 'welfare municipalities' in Sweden, or in other words the co-existence of diverse welfare arrangements within national borders, suggests that the universalistic principle of equal access to services for all may be threatened by local variation. However, in their contribution Trydegaard

and Thorslund show that municipalities have become more uniform in their distribution of care services since 2006, despite an initial tendency in the 1990s for geographical dispersion. Generally, however, the coverage of both home care and residential care has become less generous in Sweden, and services have been concentrated to persons with greatest needs, which could be interpreted as a sign of weaker universalism (p. 148f.).

The final chapter of the book touches upon another important aspect: the question of ensuring and assessing the quality of LTC services. Yet, the issue of quality and quality assessment in LTC is a highly complex one and can be dealt with only at a very superficial level. Also, it is surprising that Portugal was selected as a case to highlight quality assurance, as this country is characterised by comparatively low availability of services, relatively high user co-payments, and heavy reliance on informal care (p. 157). Therefore, it is mainly user satisfaction surveys which are cited in the text. The quality model of the recently established national LTC network (RNCCI) model is based on the Minimum Data Set (used in the US for nursing home assessments), while the model of the Portuguese Institute for Social Security (ISS) was derived from the ISO 9001 standard and the European Foundation for Quality Management (EFQM). As is frequently the case with user satisfaction surveys, the results in Portugal have shown high levels of satisfaction with LTC services: 39% classify home care services as 'good' (slightly below the EU 27 average), and 52% declare the quality of nursing homes as good (substantially above the EU 27 average). However, access to LTC services is shown to be severely limited, with 56% of users of home care, and 72% of nursing home users indicating that these services are 'unaffordable'.

Overall, the book allows for an up-to-date analysis of the features and developments of long-term care in Europe, and

thus provides an overview of recent reform efforts and debates in a number of European countries. It remains to be seen, however, what will become of the reform efforts mentioned in the book beyond the implementation of austerity measures and financial crisis in Europe.

However, the book's biggest strength—that it covers a large multitude of topics in this field—is also its main weakness. The supposed 'leitmotif', i.e. the experiences in implementing welfare reforms in LTC, partly undermines the coherence of the different chapters by touching on a variety of topics but not being able to provide a comparative in-depth analysis of these themes. For example, while a detailed account is given of the economic arguments for social insurance in the first chapter, the very last chapter does not live up to its promise of discussing the multidimensional character of quality in LTC. The book provides data on less studied regions, such as the CSEE countries, on the one hand, and new perspectives on well-studied countries, like Sweden, on the other hand. This makes it a valuable addition to the existing literature on one of the key policy priorities in the next years in Europe.

Andrea Schmidt

European Centre for Social Welfare Policy
and Research, Vienna
schmidt@euro.centre.org

Andreas Hoff (ed.): *Population Ageing in Central and Eastern Europe. Societal and Policy Implications*

Farnham 2011: Ashgate Publishing,
260 pp.

Population ageing is a global phenomenon and the countries of Central and Eastern Europe are not an exception here, although population ageing in these countries rarely attracts the attention of scholars who explore this phenomenon. This book is the

first comprehensive account of the topic of population ageing in this region and aims to fill in the existing information gap. It consists of 14 chapters written by a large international team of researchers, most of whom work in the countries of Central and Eastern Europe, so they take advantage of local sources of data on population, living arrangements, and social support systems. This book covers various aspects of population ageing and provides a detailed description of this process for nine countries in the region. All these countries have similarities in the major driving forces and trends of population ageing. Fertility decline, which accelerated during the economic transition, remains the main driving force of population ageing in this region. In contrast to Western Europe, increasing longevity makes no significant contribution to population ageing of Eastern Europe. And effects of out-migration are relatively high in most Eastern European countries although this kind of migration has a tendency to fade over time.

Despite the similarity of the major demographic trends across Central and Eastern Europe, each chapter of the book describes the problem of population aging from a different angle. As a result, all the chapters are different. For example, Eva Frątczak pays special attention to intergenerational family relations in Poland. Using macrosimulation models she estimates the expected length of time spent by women in different marital statuses and analyses the changes to this indicator over time. The models presented in this chapter help to estimate the expected years of adult life spent with responsibility for children or older parents. It is interesting that by 2002, the expected number of years devoted to responsibility for family actually had declined compared to 1988–1989, which is explained as a consequence of decreasing fertility.

The chapter by Sarmité Mikulionienė provides information on attitudes to popu-