

Capítulo 14. Social policy expansion and fragmentation in recent decades in Portugal: a bumpy road towards the defamilisation of welfare provision in old age

Expansión y fragmentación de la política social en las últimas décadas en Portugal: un camino accidentado hacia la defamilización de la protección social en la vejez

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Abstract: Portugal is one of the three countries with the highest old-age dependency ratio in the European Union. Given this scenario, there is a need to reflect on the role of the country's social protection policies in promoting healthy longevity. Information, drawn mainly from the *Mutual Information System on Social Protection* (MISSOC), was analysed and compared with the main European trends. Overall, although Europeanisation is pushing the country to introduce new and continuous efforts in its policies towards greater defamilisation, their implementation has proved to be inconsistent, which in itself limits the expected achievements and, consequently, the opportunities for promoting healthy ageing among Portuguese citizens.
Keywords: social protection policies, defamilisation, healthy ageing, Portugal.

Resumen: Portugal es uno de los tres países con mayor tasa de dependencia de la tercera edad de la Unión Europea. Ante este panorama, es necesario reflexionar sobre el papel de las políticas de protección social del país en la promoción de una longevidad saludable. Se ha analizado la información, extraída principalmente del *Sistema de Información Mutua sobre Protección Social* (MISSOC), y se ha comparado con las principales tendencias europeas. En general, aunque la europeización está empujando al país a introducir nuevos y continuos esfuerzos en sus políticas hacia una mayor defamiliarización, su aplicación ha demostrado ser inconsistente, lo que en sí mismo limita los logros esperados y, en consecuencia, las oportunidades de promover un envejecimiento saludable entre los ciudadanos portugueses.
Palabras clave: políticas de protección social, defamiliarización, envejecimiento saludable, Portugal.

1. Introduction

The first 'steps' taken by democracy in Portugal were marked by a recognised expansion of social protection policies. It was from this point, that the state took on the responsibility of supporting and protecting its most socially and economically vulnerable citizens in terms of health, education and labour. Despite the fact that this role has been assigned to the state, which has progressively become more comprehensive and complex over the years, the family has remained one of the main sources of social welfare to this day (Branco, 2022).

Focusing our analysis on four key areas of Portuguese public policy development, we will highlight and explore the developments that have marked each of these areas over the last two decades, as well as placing them in the context of the main European trends. Furthermore, we also intend to promote reflection on the potential impact that these developments could have, directly or indirectly, on the quality of the ageing process of older citizens, taking into account the most recent findings in this field of study (e.g. Sieber et al., 2022).

2. Theoretical framework

Historical traits of the Portuguese welfare state model

The development process of the Portuguese welfare model is essentially marked by four important historical milestones: the dictatorship period (1933-1974); the country's political transition to democracy (1974 revolution); the Portugal's integration into the European Economic Community (EEC)/European Union (EU) (1986) and; the 2007/2008 financial crisis. Although all relevant, it was with the beginning of the democratic regime, more precisely with the 1976 Constitution, that we witnessed the country's transition from a *protection state* to a *welfare state*, characterised by greater coverage and generosity in the protection of social risks and an expansion of citizenship rights (Belchior-Rocha et al., 2020). Since then, these rights have been guaranteed by a model that combines both *Bismarckian* and *Beveridgian* elements (Branco, 2022).

It was in the period after the 1974 revolution that the state took the responsibility of protecting its citizens in situations of 'sickness, old age, invalidity, widowhood and orphanhood, as well as unemployment and all other situations of lack or diminished means of subsistence or ability to work' (Article 63 of the Constitution of the Portuguese Republic). Various public social support organisations were created (e.g. 'Sistema Nacional de Saúde') as well as subsidies and pensions, including non-contributory pensions (Rodrigues, 2010). Although during the dictatorship period the state had already taken on some of the functions previously performed by the Church in supporting the most vulnerable social groups, it was with democracy that social assistance became an integral part of its intervention (Belchior-Rocha et al., 2020). In turn, Portugal's accession to the EEC/EU not only favoured the country's economic growth, but also allowed it to expand, diversify and strengthen the functions of its welfare model (Branco, 2022).

Despite these advances, this process of social policy development in Portugal was also marked by periods of 'deceleration'. The financial crisis of 2007/2008 and the resulting austerity measures brought with them severe and significant social impacts that were felt at various levels, namely in the coverage and level of generosity of public policies (Rodríguez et al., 2016). Although this scenario has improved considerably, since 2015 in terms of the level of austerity measures implemented (Calado et al., 2019), the expansion of policies to date has been very shy. Clear efforts to mould national elements into supranational ones are evident, but there are still visible 'legacies of backwardness, segmentation and inequality left by the Estado Novo' (Branco, 2022: 23). In this process of change, expansion and recalibration of public policies, civil society, particularly the Private Social Solidarity Institutions, and the family have remained central figures in the social assistance of Portuguese citizens, a situation that may, however, condition the expected achievements in this context of protection and reduction of social inequality. Familism is, then, one of the main historical features of the Portuguese welfare model, which, even in the face of increased state power and responsibility in solving social problems, has maintained its position and role practically unchanged (Belchior-Rocha et al., 2020).

Recent trends in the European space that push towards defamilisation

Based on Esping-Andersen's (1990) theoretical model, presented in *The Three Worlds of Welfare Capitalism* and subsequent developments (e.g. Lewis, 1992; Daly and Lewis, 2000; Saraceno, 2016), Portugal has often been categorised in the *Mediterranean* or *Southern* European welfare system (e.g. Pöder and Kerem, 2011; Begega and Guillén, 2022). This classification, like that of other countries, has been, however, the subject of successive in-depth scientific and

academic debates. According to experts in the field, the architecture of the Portuguese regime must be considered hybrid (Branco, 2022). The short history of the development of social protection policies; the economic, social and cultural particularities that characterise the country, but also the influence exerted by the European context in this process of (re)formulating national public policies (e.g. *Social Policy Agenda*, Eurofound, 2020), have contributed to the presence of mixed characteristics in the Portuguese social protection regime. Globally, EU member states, including Portugal, have been 'pressured' to mobilise their efforts towards greater defamilisation of their policies, promoting greater social justice and inclusion as a whole and, consequently, promotion of a more balanced, sustainable and robust (supra) national economy (*idem*). Despite the efforts made in this direction, the realisation of these European goals has remained a challenge, given the diversity of welfare states, which aggregate economic, social and cultural particularities that are unique to them.

Two particularities already allow us to place the country in this context of influences and 'pressures': 1) the fragmentation of social protection (Branco, 2022) and 2) the duality of the labour market (Valadas, 2017). The fragmentation of the social protection system, although moderate (Marí-Klose and Moreno-Fuentes, 2013; Branco, 2022), is reflected in the lack of solid social protection in situations of high social and economic vulnerability, which can entail increased social risks. It is in the face of this limited scope of public policies that the family is 'called upon' to intervene, since it has, both socially and legally, the responsibility of 'looking after' its most vulnerable members (e.g. Article 2009 of the Portuguese Civil Law). With regard to the duality of the labour market, although there is 'pressure' for states to find ways of organising and regulating both their labour markets and their social support systems, enabling citizens to activate in the labour market without, however, disengaging from their family roles (Furmańska-Maruszak and Suwada, 2021), what we see is still a clear difficulty for Portuguese citizens in reconciling their family and professional roles (Rueda, 2014; Valadas, 2017). Furthermore, although women's participation is increasing in the Portuguese labour market, they continue to dominate the unpaid labour context (Furmańska-Maruszak and Suwada, 2021), a fact that has contributed to the misalignment of national policies with European parameters (e.g. degenderisation, Finch, 2021).

Labour activation and the reconciliation of family and professional roles are two central and recent 'movements' of pressure exerted at European level in the process of developing national public policies. Northern European countries such as Denmark are clear examples of political arrangements that guide the global market and individual and collective actions in this direction (Alves, 2015; Laschinski, 2024). Whether in terms of social risk coverage or the measures applied to healthcare and social support, Portugal has characteristics that align it with European trends, but also others that distance it from a possible and total Europeanisation of its Social Welfare Model.

Key domains of public policy development

As the main purpose of this article is to identify and frame the main developments that have taken place in Portugal in terms of social protection in the European context, but also to reflect on the potential contribution of the policies implemented to promote *healthy ageing*, the following four areas were analysed: 1) the guarantee of minimum resources (GMR); 2) formal/informal care; 3) the childcare plan and 4) policies for (adequate) housing.

GMR is one of the key areas to address, not only because of the relevance of its developments and its close relationship with what are considered to be the main challenges facing

the Portuguese older population (e.g. poverty and social exclusion, Observatório Nacional de Luta contra a Pobreza, 2024), but also because it is one of the classic areas for studying *intergenerational solidarity* (e.g. Verbist et al., 2020; Fragoso et al., 2023). *The formal/informal care* provided to the ageing population is equally important in this field of analysis. In 2024, according to Eurostat data (2025), Portugal had, along with Italy and Bulgaria, the highest old-age dependency ratio (38.2%). This position prompts us to reflect on who will be the main carers of these citizens, under what conditions care will be provided and what the impact of this reality will be on the well-being of those involved. We also intend to analyse developments *in childcare and housing policies*, which although not directly or exclusively aimed at the population group under analysis, are two complementary or likely to compete areas with the potential to influence, even if indirectly, the quality of citizens' ageing process.

3. Methods and data

This article is based on data from the MISSOC, although other sources were also consulted as a complement (e.g. Eurocarers). The analysis was carried out between May and December 2024. Data was analysed from 14 European countries (Austria, Belgium, Denmark, Finland, France, Germany, Greece, Ireland, Italy, Luxembourg, Spain, Sweden, the Netherlands and Portugal), with a particular focus on the 'Portuguese case', concerning the four key domains mentioned above. The policies were classified in terms of their *level of generosity*, but also in terms of their *degree of defamilisation* (in this case, in the field of *care*), using the classification created by Leitner (2003), who distinguishes between four types of familism¹³. Table 1 not only provides an overview of these two issues, but also allows the country under analysis (Portugal) to be placed in the European context.

Guarantee of minimum resources

The GMR (Guarantee of Minimum Resources) domain, introduced in 1996 in the Portuguese social protection system, currently includes various programmes and measures to combat poverty and social exclusion. Considering the period and the target population under analysis, we would highlight the creation of the *Solidarity supplement for older adults* ('Complemento solidário para idosos' [CSI]) in 2006 (Decree-Law no. 232/2005 of 29 December) as the measure that has had the most positive impact on the lives of older adults. This supplement, aimed at citizens aged 66 years and 4 months, is granted through the application of a 'means test' (MISSOC, 2024), with a view to ensuring that support is only given to people in a situation of economic need. According to Correia (2022: 238), the CSI is 'an example of a monetary supplement that has contributed to improving the guarantee of meeting the needs of older people'. Despite this inference, citizens aged 75 and over continue to represent one of the groups most vulnerable to poverty and social exclusion (22%) (Observatório Nacional de Luta contra a Pobreza, 2024). Various constraints have been pointed out regarding access to and the reference value of this benefit, which may partly explain the reality witnessed among the Portuguese ageing population.

¹³ *Explicit familism*: the family is given the obligation to provide care for their dependent family members, and there are not many alternatives (public support) to family care. *Optional familism*: individuals have the choice of whether or not they want to be involved in providing care. A generous formal support network is available. *Implicit familism*: although public support, in cash and/or kind, is available, its limited scope means that the family has to provide care for their dependent member. *De-familism*: very generous public support is available, so that the family does not have to look after its dependent members (Leitner, 2003).

Table 1. Degree of fulfilment of social indicators in the key domains covered (Source: Eurocarers, 2024; MISSOC, 2024).

Welfare regimes (Esping-Andersen, 1990)	CENTRAL EUROPE						NORTH			AS	SOUTHERN			
European countries	AT	BE	FR	DE	LU	NL	DK	FI	SE	IE	EL	ES	IT	PT
Domains/Indicators														
Guarantee of Minimum Resources (GMR)														
1.'Universal old age pension', in addition to the 'Contributory old age pension'.	X	X	X	X	X	•	•	•	•	X	X	X	X	X
2. GRM: generous financial support ¹⁴ to older adults.	○	○	○	○	•	•	•	•	•	○	X	○	X	X
3. Measures are in place to protect older unemployed, socially and economically.	○	•	•	X	•	•	○	•	X	X	•	•	•	X
4. There is the possibility of requesting early retirement (<i>old age pension</i>).	•	•	•	•	•	X	•	○	X	X	•	•	•	•
Formal and informal care														
5. Universal access to LTC that are supported by the state.	•	•	•	•	•	•	•	•	•	○	X	○	X	X
6. Financial support (or equivalent) for costs associated with LTC: no MT ¹⁵ .	•	○	•	○	•	•	•	•	•	○	NA	○	○	○
7. No cost-sharing in access to benefits in kind.	○	○	○	○	○	X	•	○	○	○	○	○	○	○
8. Informal carer, legally recognised and supported.	•	•	•	•	•	○	○	•	○	•	X	○	○	•
9. Paid carer's leave or allowance (or equivalent) ¹⁶ .	•	•	•	•	•	•	•	•	•	•	X	•	•	•
10. Legal provisions support flexible work practices for informal family caregiving.	○	•	•	•	•	INA	○	○	○	•	•	•	INA	INA
11. Time dedicated to CI counts for contribution purposes.	•	•	•	•	•	X	•	X	X	•	X	○	○	X
12. Paid benefit or leave ¹⁷ to care for sick adult family members.	•	NA	○	INA	○	•	NA	NA	NA	○	○	INA	•	NA
Child care plan														
13. Generous parental leave ¹⁸ and promoting gender equality.	•	○	○	•	•	X	○	•	•	X	X	X	X	X
14. Flexible and transferable leave (to the other parent or family member).	○	○	○	○	○	○	•	•	•	○	○	○	○	○
15. Free and/or subsidised responses applied to childcare/education.	NA	•	•	•	•	○	•	•	•	•	X	X	•	•
Housing policies														
16. Integrative and inclusive policies ¹⁹ .	•	X	X	○	•	•	•	•	•	○	X	X	X	X

Caption • criterion fulfilled | ○ criterion partly fulfilled | X criterion not fulfilled. AS: Anglo-Saxon | MT: mean test | NA: not applicable | INA: information not available (or unspecified) in the sources consulted.

Countries: AT (Austria); BE (Belgium); FR (France); DE (Germany); LU (Luxembourg); NL (The Netherlands); DK (Denmark); FI (Finland); SE (Sweden); EL (Greece); ES (Spain); IT (Italy); PT (Portugal).

¹⁴ Benefit amount (and/or possibility of adjusting the value to the household composition), access and supplements.

¹⁵ In some cases, there is no means test for access to the benefit, but income and assets are taken into account to determine the value of the assistance/co-payment amount (e.g. France).

¹⁶ Includes indirect financial support.

¹⁷ Classification based exclusively on the data provided by MISSOC. Indicator partially filled when limited to LTC/palliative care or to very short leaves (e.g. two days/year).

¹⁸ Considered: initial and extended parental leaves. Amount received, during the leave period, corresponding to 70% of the reference daily wage or more, over a long period (approx. 12 months or more, even if not generalised to all cases). Possibility of reconciling the leave with part-time work or flexible working hours also taken into consideration in the assigned classification.

¹⁹ Support is not limited to Social Assistance, nor are subsidies limited to rent or home heating (generous subsidy). Homeowners are also supported, and there are specific measures for older citizens or pensioners (optional criterion).

With regard to access, we would highlight the inclusion of descendants' incomes in the 'means test' (no longer considered since June 2024, Decree-Law no. 35/2024, of 21 May); the high bureaucratic and administrative complexity inherent in the process and; the high rate of 'non-take up'²⁰ of social minimums, as the main obstacles to accessing the benefit and which seem to justify, according to Carvalho and Branco (2024), the limited scope of the measure and/or the late access to this supplement by older citizens. In terms of amount, the reference value of the supplement is €600.67/month (for a single person) and €1,051.17/month (for a couple) in 2024, with the amount granted corresponding to the difference between the beneficiary's income and this value (MISSOC, 2024). Although CSI beneficiaries have access to additional healthcare benefits and a specific value is added to households living in social housing, the CSI reference value remains low considering both the country's poverty threshold (€632 in 2024, Instituto Nacional de Estatística, 2024) and the particularities that characterise this population in terms of needs. When we analyse the data as a whole (table 1), we find social minimum systems more universal, inclusive and generous. Denmark, for example, although it doesn't have specific measures aimed at older citizens (equivalent to the CSI), provides generous and easily accessible support to all who have low incomes. In Spain, in turn, a *Mediterranean country* like Portugal, when the amount of the *Non-contributory old-age pension* ('Pensión de jubilación no contributiva') is not sufficient, citizens may apply for the *Minimum living income* ('Ingreso mínimo vital'). This benefit, equivalent to the *Social integration income* ('Rendimento social de inserção' [RSI]), available in Portugal for the general population with low income, can operate in this context as a 'minimum supplement' similar to the CSI and stands out positively from the latter due to its easier access (e.g., one year of residence; the possibility of increasing the income limit in the means test) and more generous amounts, as these adjust according to the composition of the household (MISSOC, 2024).

Minimum pensions of the contributory career and social pensions are also important mechanisms for mitigating poverty. Although the rationale behind the creation of these benefits is logical and relevant, when analysing their scope, we find that they remain inadequate or insufficient (reference values below the poverty line), considering the diversity and complexity of the needs that characterise the ageing population. As a result, we are witnessing a reproduction of the social and economic inequalities that have characterised the various stages of the life cycle at advanced ages. Placing the country in the European context (table 1), we can see that certain countries, such as the northern European countries, uphold different systems that reproduce diverse but, above all, positive results (e.g. greater social equity). In addition to the 'contributory pension', these countries grant a 'universal basic pension' to all their citizens, which is independent of the contributions made during the course of their working lives (MISSOC, 2024). By guaranteeing a minimum income base to all residents, this system has contributed to reducing both socio-economic and gender inequality at older ages.

The measures applied to unemployment, specifically those aimed at the older unemployed (OU), should also be addressed. Analysing the MISSOC data, we see that the country has no specific arrangements for OU. There is, however, the possibility of requesting an early retirement when the unemployed are close to the legal age defined for normal access to the *Old-age pension* ('Pensão de velhice', 66 years and 4 months, MISSOC, 2024). Despite this possibility, this measure has a limited scope, as well as having inflexible criteria (e.g. long contribution period), the amount

²⁰ Citizens who are eligible for the benefit but do not have access to it, for example due to lack of information (Carvalho and Branco, 2024).

to be received is subject to a deduction (there are, however, exceptions, MISSOC, 2024). Although this cut has a logical and rational basis, it is important to reflect on the potential impact this reduction could have on the quality of life and health of the beneficiaries, given that the legally stipulated minimums in Portugal for the *Old-age pension* are, in themselves, quite low. On this topic, we highlight Luxembourg, which in addition to allowing early retirement at 60 years with no reductions (if 40 years of contributions are met), also enables the extension of unemployment time for those over 50 and *pre-retirement conditions* ('indemnité de préretraite') for those aged 57 or more (MISSOC, 2024).

Considering the developments described, we conclude that the right to *economic security* (Constitutional Law 1/2005, Article 72) is not fully guaranteed among older adults. Policies in this area should therefore progressively become more effective and inclusive. On this topic, we would also like to emphasise that the analysis of poverty and economic/social deprivation should also extend to those close to and significant to the older citizen, particularly in countries with strong family traits, such as Portugal. Since poverty has worsened among children, young people, the unemployed and single-parent families (Observatório Nacional de Luta contra a Pobreza, 2024), the older adult may also have to bear 'other financial burdens' in order to support and protect their family members. This 'family obligation', combined with the reduced financial capacity of ageing citizens, could have considerable consequences for both their well-being and the quality of their ageing process.

Formal and informal care

Considerable progress has been made in this domain, of which we highlight the extension of the capacity of social care services (Carta Social, 2024) and the creation of cash and in-kind benefits for informal care (Gil, 2024). These developments have presented, however, some constraints that could jeopardise the quality of the ageing process for older citizens.

With regard to formal care, the social responses that have grown the most, in absolute terms, have been those that translate *residential care*, but there has not been the same public investment in other response configurations that promote ageing in the community (e.g. *ageing in place*, Fonseca, 2021). Although significant, this growth has remained insufficient, a fact clearly reflected both in the low average coverage rate of the main social responses and in their geographical distribution (Carta Social, 2024). Looking at the period under analysis, we would highlight the creation of the *National Network of Integrated Continuing Care* ('Rede Nacional de Cuidados Continuados Integrados') in 2006 (Decree-Law 101/2006 of 6 June) as the social response that has stood out most for its positive and differentiating results. As well as its recognised contribution to relieving hospital overcrowding and presenting an operational infrastructure that is adjustable to the needs of the user, this response has also distinguished itself from the others by its vocation to *discharge planning*²¹. Although it is considered to be one of the most innovative, flexible and complete responses (Lopes et al., 2018) and a growth trend is evident since its emergence, the disparity in the regional distribution of this network remains a challenge (Administração Central do Sistema de Saúde, 2024).

Concerning the access and the level of coverage of long-term care (LTC), although Portugal has fairly flexible eligibility criteria (MISSOC, 2024), access to LTC is conditioned by a lack of

²¹ Actions taken by professionals before the patient returns to the community to help them and their family adapt to the new clinical and care circumstances.

supply, with priority given to the most socially and economically vulnerable groups. In addition to its welfare-oriented nature, the system has remained limited in its scope, contrary to what we see in the countries of central and northern Europe. In these countries, access to LTC is universal and constitutes a fundamental right, and for this reason the state largely supports the costs inherent in this type of care. In Portugal, apart from the fact that coverage for benefits in kind is significantly lower (e.g. for social care, the contribution of the older citizen varies based on household income and the level of care required, MISSOC, 2024), the access of certain cash benefits is subject to the application of a 'means test' (table 1). Regarding southern European countries, we highlight Spain as the country with the most universal access.

Considering the growing number of older citizens in need of care and the legal and moral 'obligation' that the family must take care of its dependent members in the absence of other responses, *informal care* and the policies underlying this type of support should also be analysed in this document. In this context, we highlight the creation of the *Informal caregiver statute* ('Estatuto do cuidador informal') in 2019 (Law no. 100/2019) and its underlying benefits. Although the Portuguese state has legally recognised the figure of the *Informal Caregiver* (IC), the country has presented policies that are not very inclusive and with low levels of generosity. An example of this is the *Informal carer support allowance* ('Subsídio de apoio ao cuidador informal principal') which, in addition to being difficult to qualify for, its reference value is equal to the *Social Support Index* ('Indexante de Apoios Sociais' [IAS]) (€509.26, MISSOC, 2024, which is lower than the country poverty threshold, in 2024). Beyond its low amount, the beneficiary cannot cumulate this benefit with social security benefits (exception: *anticipated old-age pension* under certain conditions, MISSOC, 2024). With regard to the eligibility criteria, we would emphasise household income considered in the 'means-testing', which must be less than 1.3 times the IAS (*idem*). The Statute itself has some aspects to be improved (Gil, 2024), since being too restrictive has contributed to the low percentage of IC benefiting from this subsidy (*idem*). In this regard, some European countries (e.g. Germany) have presented more comprehensive definitions, including non-family members (Eurocarers, 2024). Along with the limited scope of the measures mentioned, the time dedicated to informal care of adult family members, generally, does not contribute to the accumulation of pension credits (table 1) and 'part-time work' or 'labour flexibility', with a view to managing family and work responsibilities in a balanced way, remains an understated reality (e.g. part-time working in 2023, 7.3% compared to 18.1% in the EU27, European Employment Services, 2023). Analysing the dataset for the 14 European countries, we identify several countries with more comprehensive, accessible and generous support for *informal care*. In Luxembourg, the care recipient can replace up to 10.5 hours/week of formal care with financial support to pay the informal carer (€25/hour); in Finland, the carer is hired and the amount is 'linked to the intensity of the care required' and; in Ireland, two types of cash support are available for specific IC, the *Carer's benefit* (carers who have made social security contributions) and the *Carer's allowance* (for carers on low incomes). This country also provides the *Carer's support grant*, which is a one-off/annual subsidy to cover extra costs associated with providing care (Eurocarers, 2024; MISSOC, 2024).

In this domain, we would also like to highlight two cash benefits applied to situations of extreme dependency, the *Dependency supplement* ('Complemento por dependência') and the *Third-person assistance allowance* ('Subsídio por assistência de terceira pessoa'). In the event of the beneficiary's incapacity or when integrated into a formal support structure, the benefit is

attributed to the carer or the institution (MISSOC, 2024). Although there is no ‘means test’ for access to the supplement (it cannot, however, be combined with certain benefits, Instituto da Segurança Social, 2025a) and its value varies according to the beneficiary’s degree of dependency (grade 1 or 2, MISSOC, 2024), the reference value does not seem to fit the diversity and complexity of each case. The same seems to apply to the reference value of the allowance, apart from the fact that a mean test is required (Instituto da Segurança Social, 2025b).

Finally, we turn our attention to the support available in situations of illness and/or ‘temporary’ dependence on adult family members. In Portugal, labour legislation (Article 252 of the Portuguese Labour Code) allows absence of up to 15 days/year (plus 15 days in the case of disability or chronic illness) without any *paid sickness benefit* (table 1), and *partial* or *flexible working* are not common labour practices. In addition to implementing policies that ensure greater protection of the labour bond (e.g. Ireland) and benefits that compensate for loss of income, it would also be important to make work organisation more flexible. In addition to Austria, the Netherlands and Italy, which offer paid leave to care for sick adult family members (table 1), we would also highlight the ‘Crédits de temps’ measure in Belgium, which makes possible to reorganise work in this type of situation (Eurocarers, 2024; MISSOC, 2024). In this context, we also underline the Spanish case’ that protects self-employed workers to maintain the continuity of their business in situations where they need to provide assistance to a child under the age of seven or another dependent family member. The self-employed must hire an employee (full or part-time, for at least three months) and will received a ‘paid leave’ of up to 12 months, which corresponds to 100% coverage of their social security contributions (or proportional for part-time) (Eurocarers, 2024; MISSOC, 2024).

Portugal should therefore strengthen its efforts in the future to make the LTC system more integrated, comprehensive and accessible to all citizens. Although efforts to follow the main European trends are evident, the developments described still reflect an *implicit Familism* (Leitner, 2003), as the country continues to implement or reformulate policies that ‘put pressure’ on the family, particularly women, to provide care/assistance to their most dependent members. The limited scope of financial support and the lack of support and flexible working practices when the need arises to care for sick or dependent adult family members (e.g. ageing parents), even temporarily, also stand out as aspects to be improved. In this brief reflection, we would once again highlight the support created in the field of informal care, which although recognised as an important step towards the protection of carers and care recipients and towards greater defamilisation of public policies, can also be seen as a double-edged sword, given the limited scope of this support and its potential to reinforce the familist principle. Furthermore, considering the phenomenon of ‘social sandwiching’²², common among middle-aged adults (Albertini et al, 2024), the constraints mentioned above, applied to informal care, could have a negative impact on several levels: making it difficult to manage family and professional life in a balanced way; favouring greater impoverishment of the households involved; causing considerable damage to well-being and health; making the task of greater economic growth in the country more arduous. The state should therefore increase its public spending on LTC and the European public opinion itself seems to be aware of this need and state responsibility as demonstrated by the research carried out by Simmons et al. (2024), concerning *upward intergenerational solidarity*.

²² Providing assistance for two or more generations (Albertini et al., 2024)

Child care plan

As mentioned in the theoretical framework of this article, the current 'European Agenda' proposes, in addition to greater professional activation of citizens of working age, that conditions be created for an adequate reconciliation between life contexts or, if absence from work is necessary for reasons of caring for a family member, that the employee be guaranteed the appropriate professional and financial protection. However, this scenario will only be possible by adopting an 'integrated approach to economic, fiscal, employment and social policies' (European Commission, 2024b: 10). Portugal has seen some developments in childcare that seem to incorporate this European premise.

As part of the policies applied to parenthood, we would highlight *Extended parental leave* ('Licença parental alargada'), which can be granted to the mother, the father or both, alternately, and taken consecutively or in alternate (MISSOC, 2024). Besides an *Initial parental leave* ('Licença parental inicial') with a duration of 120 or 150 consecutive days, and whose benefits correspond to 100% or 80% of the average daily wage, respectively, the *Extended parental leave*, with a duration of three months, corresponds only to 30% of the reference pay. In addition to the reduced value of this leave, it is not legally permitted to accumulate the rights of one parent for the other (there are, however, exceptions); to transfer it to grandparents or other family members or to share it with grandparents; nor are grandparents entitled to absences to care for grandchildren (in the latter case, only in specific cases) (*idem*). *Childcare leave* ('Licença para assistência ao filho'), the *Leave to care for children with disabilities or chronic illnesses* ('Licença para assistência a filhos com deficiência ou doença crónica') and the *right to breastfeed* are other rights granted to parents with a view to favouring a better balance between their family and professional lives. Although the importance of these measures is recognised, their level of generosity has remained far below what we have seen in other European countries, particularly in northern Europe (table 1), where the duration of parental leave is significantly longer and the amounts of benefits more generous, as is the case in Sweden (Furmańska-Maruszak and Suwada, 2021). This country has also stood out for the *flexibility* and *transferability* of its leave (e.g. parental benefit granted to other carers for 45 days, Försäkringskassan, 2024). This measure, in addition to favouring more efficient management work and family responsibilities, has made it possible to maintain a basic income for the carer and reinforced the importance of the carer's role.

With respect to early childhood education and/or the provision of childcare for children under the age of three, there have been recent advances in Portugal that seem to be helping to alleviate familist principles, such as the implementation of the recently updated *measure of the free nursery* ('medida da gratuitidade de Creche', Ministerial Order no. 198/2022). By allowing free access to childcare and, considering the constraints pointed out, within the scope of parental leave (duration and transferability), this measure has not only favoured the professional reactivation of Portuguese parents, but has also promoted the 'relief' of responsibilities associated with childcare within the family. In this regard, it should be noted that although grandparents are important sources of support, the literature has shown that the effects of this intergenerational solidarity are not always positive and favour the health of the older citizen (Chan et al., 2023). According to the 2023 report (Carta Social, 2024), there has been a significant increase in the number of children attending nursery (8.1% in 2023), which may be partly due to the introduction of this measure. However, this provision, like those aimed at the older population, has remained insufficient in

terms of demand (*idem*). In France, the policy of extending the duration of 'paid parental leave', in situations where there are no places at a nursery or kindergarten (MISSOC, 2024), although reinforcing the familist principle, constitute a functional and protective measure for all those involved in this situation, in opposition to what happens in Portugal (simultaneous family dependency and lack of financial support). It should be noted, however, that the extension of parental leave in France, requires specific criteria to be met (*idem*).

Considering the developments highlighted in this section, we can conclude that some policies seem to be moving towards a greater defamilisation, contributing, to a certain extent, to a more balanced management of family and professional responsibilities, but additional developments are still needed (Ferreira et al., 2024). Although social protection applied to childcare shows signs of an emerging defamilisation, public support remains insufficient and family intervention is still necessary in the absence of alternatives (Leitner's *implicit familism*, 2003).

Housing policies

Making housing affordable and sustainable is one of the European policy goals for the 2024-2029 period (European Commission, 2024a). According to Eurostat data (2024), in 2022 Portugal would be the second EU country with the highest percentage of people living in precarious housing conditions²³. The data lead us to reflect on the potential impact that the state of one's accommodation will have on the health of citizens, particularly older people, since the literature is clear in showing a significant association between these two dimensions (Yang and Fu, 2019). Other aspects inherent to housing, such as the *ownership regime* (Herbers and Mulder, 2017) and the *meaning/perceived control over the housing environment* (Eriksson et al., 2023) also seem to have an impact on resident well-being.

Focusing our analysis on the social protection policies applied to housing and how they can contribute to the healthy ageing of Portuguese citizens, we now turn to the developments that have marked this key domain over the last two decades. Although the financial crisis of 2007/2008 culminated in a substantial reduction in public investment in housing, the period in question was also marked by important reforms, including two recent measures that seem to reflect an effort by the Portuguese state to reposition the sector among its priorities: the introduction of the *New Generation of Housing Policies* ('Nova Geração de Políticas de Habitação' [NGPH]) in 2018 and the *Basic Law on Housing* ('Lei de Bases da Habitação [LBH]) in 2019. Despite these efforts to make housing accessible to all, the housing sector still has several weaknesses that have contributed to its high level of fragmentation, and is even considered the 'weak pillar of the Portuguese welfare state' (Allegra and Di Giovanni, 2024: 61).

Analysing the information provided by MISSOC, we can see that in Portugal, support has almost exclusively served very specific social groups (citizens and/or households with scarce economic resources and high levels of effort associated with renting), and this support is still limited housing rent (e.g. *Extraordinary rent support* ['Apoio extraordinário à renda'] and the *House rent subsidy* ['Subsídio de renda de casa'], MISSOC, 2024). In contrast to this reality, we find countries, particularly in northern Europe, with more generous, integrative and inclusive policies (table 1), such as the *Individual housing support* ('Individuel boligstøtte') in Denmark and the *Housing allowance* ('Bostadsbidrag') in Sweden, whose benefits are not limited to social

²³ Dripping from the roof, walls, floor or damp foundations, or rot in window frames or on the floor (Eurostat, 2024).

assistance and tenants and homeowners can be supported as long as they have low economic resources (*idem*). Also noteworthy in the Danish scheme is the granting of loans to homeowners who receive specific pensions (e.g. *old age pension*, MISSOC, 2024) as well as the development of preventive policies to increase the country's stock of age-friendly housing (Eurocarers, 2024) and, in the Swedish scheme, the subdivision of housing benefit to meet the needs of families with children and young adults (MISSOC, 2024). Both countries are clear examples of governance models characterised by high multi-level coordination.

In Portugal, housing is still not seen as a primary social need (Lima and Xerez, 2023). The low level of public investment; the sector's high level of financialisation (*idem*); the state's subsidiary and regulatory role (Pinto and Guerra, 2013); the lack of coordination between different sectors; the absence of a comprehensive and integrated planning system (Tulumello et al., 2018) and inclusive policies (Table 1); the discrepant regional distribution of subsidies (Lima and Xerez, 2023), as well as the inadequacy of housing models, considering the prevailing social and demographic context (Pinto and Guerra, 2019) clearly reflect the current state of housing policies in Portugal. It should also be emphasised that although this sector has grown in recent years, the prices applied have also increased, thus compromising the right of citizens 'to decent housing at affordable prices' (Alves and Guimarães, 2024: 18).

The housing crisis has thus persisted, affecting various social groups, including older citizens. Given the lack of comprehensive, inclusive and generous public support, family solidarity can also be 'triggered' to intervene in this area (Pinto and Guerra, 2019), with a view to guaranteeing decent housing. As in the previous domains, although this intergenerational support can contribute to the fulfilment of needs associated with housing, negative effects can also emerge from this solidarity (e.g. 'potential' pressure exerted by this type of support on the quality of the intergenerational relationship), consequently impacting the well-being and health of the various elements involved in this dynamic of intergenerational support. In addition to changes in housing policies, and focusing our attention on the particular housing conditions in which Portuguese older citizens live, it would also be interesting for the country to invest in collaborative housing models (e.g. *cohousing*), as we have already seen throughout Europe, including in neighbouring Spain (Moreno, 2022), as well as in alternative financing models (e.g. *reverse mortgage*, Nakajima and Telyukova, 2017).

4. Conclusion

From our analysis of the main policies that have marked the last two decades, we conclude that although there has been a noticeable increase in state intervention in the four domains analysed, with a view to greater protection for citizens in situations of high vulnerability, developments remain inconsistent and their scope limited. We are therefore faced with policies that are not very ambitious in breaking with the dependence on family solidarity. The family remains a vital element in this context of social protection, complementing the support provided by the state (García-Faroldi, 2015; Furmańska-Maruszak and Suwada, 2021). Although the circumstances justify the importance of family support (lack of alternatives), it doesn't always bring positive results. Considering the assertion of Craveiro (2017) that close and meaningful intergenerational relationships influence the adult health and well-being, this family dependence, when excessive and realised in specific circumstances (e.g. provision of support to two generations and simultaneous

lack of public support), can result in considerable damage to the well-being of the caregiver (Albertini et al., 2024) and their dependents.

In light of what has been said throughout this document, as well as the future projections that point to a worsening of the old-age dependency ratio, it becomes urgent to introduce more generous, defamilialised policies, taking also into account the particularities that characterise genders in terms of health at advanced ages (Chen et al., 2021). This does not imply that the solution will be to replicate what is happening in northern Europe, but rather that change should be inspired by international best practices and that the policies to be implemented should be gradually adjusted to the social and cultural particularities that characterise the country. Making policies more 'fair', generous, a collective good, involves integrating the entire cultural repertoire of current exchanges into the reflective process that precedes this step, while at the same time trying to understand how and why they are applied and how they are interpreted by the main social actors (Adloff and Mau, 2006). The success of the 'new' welfare policies will thus largely depend on their alignment with citizens' moral expectations of what they believe to be socially just (Mau, 2004; Taylor-Gooby et al., 2019). Another aspect to highlight, closely related to the above, and which should be taken into consideration in this reflective process, it is that greater investment in social protection policies does not always guarantee better health in old age, as certain policies may perpetuate or amplify social and/ or economic inequalities in later life (e.g., disability pensions and social stigma, Sieber et al., 2022).

We conclude that although the guarantee of the 'dignity of the human person' is considered a 'fundamental and normative principle' (Correia et al., 2022: 14), underpinning the creation and expansion of social protection policies, it is still one of the major challenges facing the Portuguese social protection system. In order to meet the current and forthcoming challenges, arising from the growing demographic ageing, change in public policies is imperative. In addition to greater investment in prevention and health promotion policies, more inclusive and generous social protection policies and more *community engagement* (World Health Organization, 2025), the *Silver Economy* must also be rethought (Roszko-Wójtowicz et al., 2024). A restructuring of the wealth redistribution system has already been considered in some of the work carried out on this issue (e.g. Westerhout et al., 2024), since the solution will not involve simply 'recalibrating' the public investments allocated to each of the domains. Although this has been suggested as a possible solution (specifically, to maintain the sustainability of the pension system), it is a complex process that entails some risks (*idem*).

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