

Social Protection in Poland Compared to Selected Member States of the European Union

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Abstract: **Background:** Social policy is an essential element of action for every state. To assess the activities of states in this area, one should look at social protection from a multi-criteria perspective. Such assessment makes it possible to compare the effectiveness of the social policies in the surveyed countries and weigh the social policies in Poland against those in the other surveyed EU member states.

Research objectives: The article aims at designing a measure to assess and compare the social protection policies of selected European countries, and to juxtapose them with the social policies of Poland and develop a ranking of the studied countries. Moreover, the article tries to establish if there is a relationship between public spendings on social protection and the assessment of social policies by citizens.

Research design and methods: The research involved a multidimensional comparative analysis and the TOPSIS method. We analyzed the variables related to social protection and used them to build a synthetic measure for social protection assessment. Based on the obtained ratings, we created a comparative ranking of the EU member states. The examined Polish indicators underwent a comparison with the average for the other studied EU countries. The analysis covered the years 2015 and 2021.

Results: The research produced a ranking of social protection scores for the years 2015 and 2021, with France and Luxembourg in the first two places. Poland ranked 18th.

There is a strong correlation between the social situation assessment and the average equivalent net income per capita in PPS, as well as the average expenditure on social protection in euros per capita.

Conclusions: The countries that scored top positions in the social protection ranking have a higher GDP than the others. Despite large transfers for social protection, Poland's position in the ranking remained unchanged. One needs further research on social protection assessment to identify an effective model of social protection policy.

Keywords: social protection, TOPSIS method, EU, Poland

JEL Codes: H53; I38

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1. Introduction

Social policy is an essential element of action for every state. It influences the welfare of citizens, leads to the inclusion of marginalized and poverty-threatened individuals, improves the situation of citizens, and ensures that every vulnerable individual receives care and is safe in their own country. States undertake various activities in this area in many fields such as housing, education, health care, or the labor market. The country's economic development is crucial because, among other things, it increases the citizens' employment rate and income.

Development also improves the country's infrastructure and the living conditions of its inhabitants. Economic growth results in a larger public budget and therefore wider assistance and a broader scope of the state's care for citizens. Economic development can positively impact social protection by increasing the financial resources allocated to this purpose. To assess the activities of states in this area, one must view social protection through multiple criteria. The aim of this article is an attempt to create a synthetic measure enabling the assessment of the social protection level. A series of factors describing this phenomenon provides for the assessment of Poland and other selected European countries in this respect. This assessment allows for a comparison of the effectiveness of Poland's social policy with those in selected European countries.

2. Social Protection: The Concept

There are many definitions of social protection in the literature. These definitions approach the issue from different perspectives. Some emphasize the goals and functions of social protection, while others focus on the recipients of these systems. Certain researchers concentrate on the financing of social protection or on the types of programs typically associated with protection (Midgley, 2022, pp. 2–4). However, most scholars agree that it encompasses social policy aimed at supporting individuals throughout their lives in various adverse circumstances. These circumstances may relate to the individual only, including poor health, job loss, or old age; or they may involve the entire communities, as in the case of economic downturns or extreme weather conditions (Yemtsov et al., 2018, pp. 4–5). Therefore, "social protection can be defined as policies and programs designed to reduce poverty, increase resilience to downturns, improve human capital, and raise productivity" (Yemtsov et al., 2018, p. 4).

It is the duty of the state to provide every citizen with social protection, which includes social insurance and social assistance. Social insurance covers pensions, sickness benefits, disability pensions, and unemployment benefits. The funds for these purposes come from contributions and serve to guarantee income security in the future. Social assistance consists of both cash and social transfers in kind to poorer individuals. The financing of such services relies on taxes collected from everyone, and their purpose is to protect the minimum income of less fortunate people. The provision of this type of assistance utilizes income criteria (Piotrowska, 2008, pp. 211–212).

States implement various strategies in the field of social policy, and thus many classifications of social policy models have emerged. Table 1 outlines examples of social policy models.

Over the years, as a result of analyses and discussions, new models have emerged to address the new developmental challenges of countries, which did not fit into the above-mentioned classification. For example, the liberal-social model has appeared. This model is present in Great Britain and relies on motivating, supporting, and assisting an individual entering the labor market, where work shall meet with an appropriate reward. Social services have become the responsibility of private companies (Golinowska, 2018, pp. 37–40).

The social-democratic-liberal-conservative model functions in the Netherlands. Dutch citizens have access to guaranteed health care services, including long-term care. Funds for these services come partly from mandatory income contributions and flat-rate contribution. Patients cover the costs themselves if they exceed a set limit. The labor market policy relies on employing highly skilled workers. In such a country, employers are responsible for the rehabilitation of incapacitated employees as well as the system of preventive and therapeutic rehabilitation.

Social assistance takes the form of material aid such as food banks and monetary aid. Benefits depend on the plan to overcome difficulties and speedy re-entry into employment (Golinowska, 2018, pp. 48–49).

Table 1. Examples of Social Policy Models

Author	Model	Features
Richard Titmuss	Marginal	• Individual is the source of social problems • Individuals can satisfy their needs on their own or with the support of family or charitable organizations • The state only takes care of those citizens who have problems • State actions remain limited • Low social benefits and social security • Social assistance takes into account the income criterion Examples of countries: Great Britain, Denmark, Switzerland
	Institutional and redistributive	• Social tasks are part of the state's activity • It encompasses all citizens • Achieving equality of the highest standards rather than equalizing minimum needs Examples of countries: Norway, Sweden, Finland, partly Denmark
	Conservative and corporate	• The state meets social needs • Private insurance and supplementary employment benefits are of little importance • Social rights arise from the insured person's situation • It reinforces the traditional family model and family benefits, and encourages having more children Examples of countries: Austria, France, Germany
Harold Wilensky, Charles Lebeaux	Residual	The family satisfies the individual's needs
	Institutional	• An extensive system of social services • The state provides assistance at least at a minimum standard of living
Gøsta Esping-Andersen	Liberal	It provides modest social transfers and social protection. Social benefits are for individuals with low incomes. The social policy aims to support those entering the labor market and counter the situations where individuals' incomes come from social benefits. The state guarantees only the minimum or subsidizes private social security schemes.
	Corporate (Conservative)	Social insurance usually does not cover non-working spouses, and family benefits encourage motherhood. Childcare institutions remain undeveloped. The state intervenes only when the family proves helpless.
	Social democratic	The state provides broad access to social services, and working citizens have the right to these services. The state arranges transfers directly to children, and high social spending aims not only to help families, but also to facilitate employment.
Mirosław Książkowski	Corporate	• It relies on social insurance • The state guarantees social security at a basic level • Social programs should strengthen the economy • All the insured individuals are the primary persons to receive social benefits Examples of countries: Germany, the Netherlands, Belgium, Austria, Finland, partly France and Italy

Author	Model	Features
	Residual	• Citizens satisfy their needs independently through family or free market • The state should teach people how to live without state's support • The state provides mandatory social insurance, access to health care, and family benefits at a minimum level • Social problems appear rare • Social policy aims to reduce poverty Examples of countries: Great Britain
	Rudimentary	• The guarantee of minimum social income awarded according to citizens' needs • Nongovernmental organizations play a significant role • Assistance provided by family, neighbors, and local or religious organizations Examples of countries: Portugal, Spain, Greece, Ireland, partly Italy
	Protective	• High social benefits • Access to benefits and services for all citizens, i.e., universal and rather free access to health care and education, pensions, and social benefits • Family allowances for each child • A wide range of services for older people and persons with disabilities • There is a belief that the entire society bears the responsibility for meeting the needs of every citizen Examples of countries: Sweden, Denmark, and the Netherlands

Source: own elaboration based on Mitreġa, 2017, pp. 384–388; Księżopolski, 1999, pp. 59–60; Esping-Andersen, 2010, pp. 44–47; Wilensky & Lebeaux, 1958, p. 158; Titmuss, 1974, pp. 145–147.

The social protection policy of a country depends on a range of factors, including political, institutional, and economic ones. Wealthy countries function within political and institutional factors. These countries adjust their social policy to economic goals, reforming their social systems to adapt them to changing social situations. Economic factors have an impact on social protection in developing countries, which cannot afford to offer a public social insurance system.

Social protection is thus a combination of social insurance and social assistance, and spans a range of programs addressed to specific social groups. Table 2 contains the examples of such programs.

Social protection, and especially social assistance, arouses many controversies. There is an ongoing discussion between the advocates and opponents of social assistance on the impact of such support on the society. The opponents believe that social transfers discourage efforts to find employment, while the advocates argue that transfers are necessary because it is the state's duty to ensure an adequate standard of living for every citizen.

Table 2. Examples of Social Protection According to Social Group

Recipients	Social assistance	Social security	Others
Working age population	Social transfers based on needs; public works programs; subsidies, i.e., food, energy, or housing benefits	Unemployment benefit; sickness benefit; insurance against accidents at work	Minimum wage; health and safety; separation allowance
Children	Family benefits based on income criteria; school meals; conditional cash transfers	Family benefits; maternity benefits	Child labor law

Recipients	Social assistance	Social security	Others
Non-working older people	Transfers based on needs; social pensions	Pensions based on a contribution system	Regulations regarding retirement age
People with disabilities, ethnic minorities, HIV-positive people, orphans, refugees, migrants, and displaced persons	Transfers	Pensions	Equal rights for minorities; programs to promote tolerance in the workplace

Source: own elaboration based on Piotrowska, 2018, pp. 214–215.

One should also note that social protection is a guaranteed human right. It appears in international documents such as the Universal Declaration of Human Rights. When an individual's life becomes threatened, this right guarantees a minimum standard of living, not necessarily income (Norton, Conway, & Foster, 2002, p. 541). Another document is the 2030 Agenda for Sustainable Development, adopted by all UN members in 2015. It sets 17 goals, including those that commit states to pursue policies that ensure social protection for every social group and create conditions enabling everyone to benefit from economic achievements.

Social Protection in Poland

The social protection system in Poland is regulated by the Act of March 12, 2004, on social assistance (Journal of Laws of 2004, No. 64, item 593, as amended). The state and local government authorities organize social assistance together. Article 3(1) specifies its tasks as follows: "Social assistance supports individuals and families in their efforts to meet essential needs and enables them to live in conditions consistent with human dignity." Article 7 of the Act stipulates who is eligible for social assistance. Accordingly, the state provides assistance to individuals and families in the following situations: poverty; orphanhood; homelessness; unemployment; disability; long-term or severe illness; domestic violence; the need to protect victims of human trafficking; the need to protect motherhood or large families; helplessness in caregiving and household management, especially in single-parent or large families; difficulties in integrating refugees; difficulties in adapting to life after release from prison; alcoholism or drug addiction; accidents and crisis situations; and natural or ecological disasters. The assistance that those in need can receive includes:

- cash benefits such as: permanent allowance, periodical allowance, purpose-specific benefit, special purpose-specific benefit, benefit and loan for economic empowerment, assistance in empowerment and continuing education, cash benefits for living and expenses connected with learning the Polish language for foreigners, and remuneration granted by the court to the guardian for providing care (Article 36(1));
- non-monetary benefits such as: social work, credit ticket, health insurance contributions, social security contributions, material assistance, funeral arrangements, specialist counselling, crisis intervention, shelter, meal, necessary clothing, specialist care services, stay and services at a social welfare facility, assistance in obtaining appropriate housing conditions, assistance in obtaining employment, assistance in kind for the development of people who are becoming independent (Art. 36(2)).

The Act divides these tasks between the state and the local government bodies.

3. Social Protection in Europe: Empirical Research

Which systems are more effective? What kinds of social protection systems operate in the EU countries? The present article aims at addressing these questions. How does one assess the actions taken by different states regarding the effectiveness of social policy, including social protection? The effectiveness in question needs measurement by the social policy's effects in various areas of human life, not by expenditure on social protection. One should pay attention to indicators describing the situation on the labor market, with particular focus on the groups of younger and older people. The indicators of risk or exclusion and those related to medical care and housing situation are also important. Social protection expenditure remains inextricably linked to the assessment of the social policy quality. The evaluation and comparison of the situation in the analyzed countries needs a measurement metric created using a set of variables considered when assessing the phenomenon. Building this measure allows for the assessment and comparison of the situation in the surveyed European countries. It also becomes possible to check whether the states appropriately spend their social assistance funds, and thus to assess the effectiveness of social policy. Based on substantive and formal criteria, we proposed the following variables for the study:

X1 – Percentage of people at risk of poverty: the percentage of people whose equivalized disposable income – after social transfers – is below the at-risk-of-poverty threshold, that is, 60 percent of the national median equivalized disposable income after considering social transfers. This indicator does not measure wealth or poverty but low income compared to other inhabitants of a country, which does not necessarily mean a low standard of living.

X2 – Inequality of income distribution: the ratio of the total income received by 20 percent of the population with the highest income to the total income received by 20 percent of the population with the lowest income. Here, income means equivalized disposable income.

X3 – Long-term unemployment rate: this indicator expresses the number of long-term unemployed people aged 15–74 as a percentage of the economically active population at that age. Long-term unemployed people (12 months and more) include people who are over 15 years of age, do not live in collective households, will remain unemployed in the next two weeks, will be able to start work in the next two weeks, and either have actively been looking for a job in the last four weeks or have already found a job that can start later.

X4 – Unemployment rate among people up to 24 years old.

X5 – Average relative income of older people: quotient of the median equivalized disposable income of people aged 65 and over to the median equivalized disposable income of people aged 0–64.

X6 – Housing cost overburden rate: the percentage of the population living in a household where the total housing costs excluding housing benefits constitute more than 40 percent of the household's total disposable income excluding housing benefits.

X7 – Total replacement ratio: average gross individual pension income of the population aged 65–74 compared to the median individual gross earnings from work of the population aged 50–59, excluding other social benefits.

X8 – Healthy Life Years (HLY) for people aged 65: an indicator measuring the number of years of remaining in good health for a person aged 65, calculated separately for women and men.

X9 – Percentage of people reporting dissatisfaction with the health service related to waiting too long for medical assistance.

X10 – Percentage of children under 18 at risk of poverty or social exclusion. People at risk of poverty are those whose equivalized disposable income remains below the poverty risk threshold, which is 60 percent of the national median equivalized disposable income after considering social transfers. People in severe economic or social deprivation have living conditions severely limited by lack of resources, and experience at least seven of the following 13 elements of deprivation, namely they cannot afford to: i) pay rent or utility bills; ii) keep their home adequately warm; iii) cover unexpected life expenses; iv) eat meat, fish, or equivalent protein every other day; v) spend a week away from home; vi) have access to a car/van for personal use; vii) replace worn-out furniture; viii) replace worn-out clothes; ix) have two pairs of properly fitting shoes; x) spend a small amount of money on themselves every week (“pocket money”); xi) practice sports regularly; xii) meet friends/family for a drink/meal at least once a month; and xiii) have an Internet connection. Persons living in households with very low work intensity are persons aged 0–64 living in households where adults, namely people aged 18–64, worked 20 percent or less of their total work potential in the last year.

X11 – Impact of social transfers on poverty reduction: percentage reduction in the at-risk-of-poverty rate as a result of social transfers, calculated by comparing at-risk-of-poverty rates before social transfers with rates after transfers; this indicator does not take pensions into account.

X12 – Overcrowding rate in households: the percentage of the population living in overcrowded households. An overcrowded household is one that does not have a minimum number of rooms equal to: one room in the household; one room for a couple in the household; one room for each single person aged 18 or over; one room for a pair of single same-sex people aged 12–17; one room for each single person aged 12–17 not included in the previous category; one room for a pair of children up to 12 years of age. One presents this indicator by gender.

X13 – Gini coefficient: the ratio of the cumulative shares of the population ordered by the level of equivalized disposable income in relation to the cumulative share of the equivalized total disposable income they receive.

X14 – Pensioners’ at-risk-of-poverty rate: the percentage of pensioners whose equivalized disposable income is below the at-risk-of-poverty threshold.

X15 – Percentage of young people who are neither employed nor participating in education or training within this age group, namely the percentage of the population aged 15–29 who are neither employed nor participating in education or training.

X16 – Percentage of people in severe economic or social deprivation who meet at least seven of the following 13 conditions of deprivation, namely they cannot afford to: i) pay rent or utility bills; ii) keep their home adequately warm; iii) cover unexpected life expenses; iv) eat meat, fish, or equivalent protein every other day, v) spend a week away from home; vi) have access to a car/van for personal use; vii) replace worn-out furniture; viii) replace worn-out clothes; ix) have two pairs of properly fitting shoes; x) spend a small amount of money on themselves every week (“pocket money”); xi) practice sports regularly; xii) meet friends/family for a drink/meal at least once a month; and xiii) have an Internet connection. The indicator relies on the Statistics on Income, Social Inclusion, and Living Conditions (EU-SILC).

We built a measure for the assessment of social situation (SSA) in the selected European countries. The choice stemmed from the availability of statistical data obtained from the Eurostat database. We examined 26 countries for the years 2015 and 2021. To assess the social situation, we used multidimensional comparative analysis tools: the Technique for Order Preference by Similarity to an Ideal Solution (the TOPSIS method). When selecting the research method,

the focus was on the ability to analyze individual factors influencing social protection, and the ability to compare countries both over time and with one another.

Determining the measurement metric consisted of five stages: selection of indicators, normalization of features, establishing a system of weights for features, determining the coordinates of model units – pattern and anti-pattern, and calculating the value of a synthetic feature. In the first stage, we verified the set of potential diagnostic variables due to the variables' discriminatory ability and information potential (Panek, 2009, pp. 19, 23). The verification due to the discriminatory ability and the rejection of variables with low differentiation relied on the classic coefficient of variation. The verification in terms of the information potential followed the inverted correlation matrix method. The second stage was the normalization of features using the zeroed unitarization method. The use of unitarization formulas provided the standardized feature values with a differentiated arithmetic mean and standard deviation but a constant range (Wysocki, 2010). The third stage established a system of weights for the features. We determined weight factors for each feature using the CRITIC method – Criteria Importance Through Intercriteria Correlation (Wysocki, 2010, pp. 156–157). The fourth stage involved determining the coordinates of the model units: the A^+ pattern and the A^- anti-pattern:

$$A^+ = (\max_i(x_{i1}), \max_i(x_{i2}), \dots, \max_i(x_{iK})) = (x_1^+, x_2^+, \dots, x_K^+)$$

$$A^- = (\max_i(x_{i1}), \max_i(x_{i2}), \dots, \max_i(x_{iK})) = (x_1^-, x_2^-, \dots, x_K^-)$$

Then, we calculated the Euclidean distances (d_i^-, d_i^+) of each assessed commune from the A^+ pattern and the A^- anti-pattern. The fifth stage was the calculation of the synthetic feature's value:

$$SSA_i = \frac{d_i^-}{d_i^+ + d_i^-}, \quad i = 1, 2, \dots, 26$$

The smaller the distance of a given commune from the pattern, and therefore the greater the distance from the anti-pattern, the closer the value of the synthetic feature is to 1.

We determined synthetic measures for each of the studied countries and then compared them with social protection expenditure. The following variables served this purpose:

W1 – Pension expenditure as a percentage of GDP, namely the sum of social benefits: disability pension, early retirement due to limited work capacity, retirement pension, expected retirement, partial pension, survivors' pension, the early retirement due to the labor market.

W2 – Average equivalized net income per capita in the purchasing power standard (PPS).

W3 – Social assistance expenditure as a percentage of GDP.

W4 – Social security revenues as a percentage of GDP.

W5 – Average social protection expenditure in euros per capita.

W6 – GDP per capita in PPS.

We determined correlation coefficients between the designated measures and the W1–W6 variables for the years under study.

4. Research Findings

The established measure allowed for the assessment of social protection in the European countries in the years 2015 and 2021. As a result of the analysis, we obtained the following ranking of the selected European countries, presented in Table 3. A higher SSA rating indicates better social protection.

Table 3. Ranking of Countries in Terms of Social Protection Rating

Year: 2015			Year: 2021			
Rank position	Member state	SSA	Rank position	Member state	SSA	Change of rank position compared to 2015
1	France	0.729	1	France	0.709	0
2	Luxembourg	0.689	2	Luxembourg	0.686	0
3	Netherlands	0.685	3	Finland	0.674	4
4	Denmark	0.679	4	Austria	0.672	1
5	Austria	0.666	5	Belgium	0.661	3
6	Germany	0.646	6	Germany	0.648	0
7	Finland	0.635	7	Denmark	0.645	-3
8	Belgium	0.635	8	Spain	0.629	1
9	Spain	0.587	9	Netherlands	0.616	-6
10	Ireland	0.579	10	Slovenia	0.615	2
11	Portugal	0.568	11	Ireland	0.612	-1
12	Slovenia	0.562	12	Czechia	0.594	2
13	Malta	0.552	13	Italy	0.586	3
14	Czechia	0.550	14	Cyprus	0.577	1
15	Cyprus	0.535	15	Malta	0.575	-2
16	Italy	0.532	16	Hungary	0.574	1
17	Hungary	0.515	17	Portugal	0.559	-6
18	Poland	0.488	18	Poland	0.510	0
19	Greece	0.480	19	Slovakia	0.491	1
20	Slovakia	0.453	20	Greece	0.489	-1
21	Lithuania	0.433	21	Estonia	0.420	1
22	Estonia	0.419	22	Lithuania	0.417	-1
23	Romania	0.405	23	Bulgaria	0.379	2
24	Croatia	0.396	24	Croatia	0.362	0
25	Bulgaria	0.372	25	Latvia	0.332	1
26	Latvia	0.337	26	Romania	0.331	-3

Source: own elaboration.

When comparing the year 2021 with 2015, one should note that the situation in the studied countries was at a similar level and had not changed much compared to other countries under study. Both in 2015 and 2021, the best social protection system existed in France and Luxembourg. The leaders were: Finland, Austria, Belgium, Germany, Denmark, and the Netherlands, while the lowest-ranking countries included Croatia, Bulgaria, Romania, and Lithuania.

The analysis of the above scores shows that the greatest decline took place in the Netherlands and Portugal, by as many as six positions. In 2021, compared to 2015, both in the Neth-

erlands and Portugal, there was a decrease in percentage terms (X11) in the social transfers aimed to reduce poverty and an increase in the percentage of retirees and pensioners whose equivalized disposable income was below the poverty risk threshold (X14). However, the largest increase occurred in Finland, by as many as four positions, and in Belgium and Italy, by three positions, where there was an increase in social transfers aimed to combat poverty.

Poland ranked 18th both in 2021 and 2022. In 2015, the impact of social transfers on poverty reduction was much lower than the average in other countries (X11), and the overpopulation rate in households (X12) was higher than the average in the remaining countries. Also, the percentage of people reporting dissatisfaction with the health care system due to lengthy waiting periods in Poland (X9) was higher than the average levels of patients' dissatisfaction in other surveyed countries. In turn, the at-risk-of-poverty rate for pensioners (X14) and the percentage of people in significant economic or social deprivation (X16) in Poland exceeded the average in other countries. Figure 1 illustrates the comparison of Poland's remaining variables with the average in the surveyed countries in 2015.

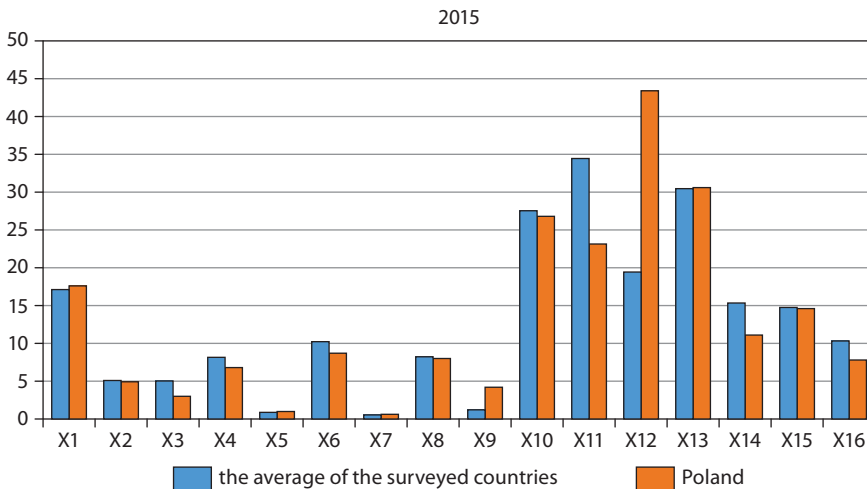


Figure 1. Comparison of Variables for 2015

Source: own elaboration.

In 2021, indicators such as household overcrowding (X12), the percentage of young people who are neither employed nor participating in education or training in general in this age group (X15), the percentage of people reporting dissatisfaction with the health care services due to lengthy waiting periods (X9), were also higher in Poland than the average in the other surveyed countries. Moreover, the percentage of people in severe economic or social deprivation (X16), the impact of social transfers on poverty reduction (X11), the percentage of people at risk of poverty (X1), and the percentage of children under 18 years of age at risk of poverty or social exclusion (X10) were much lower than the average for other countries. The comparison of all Polish variables with the average for the other surveyed countries for 2021 appears in Figure 2.

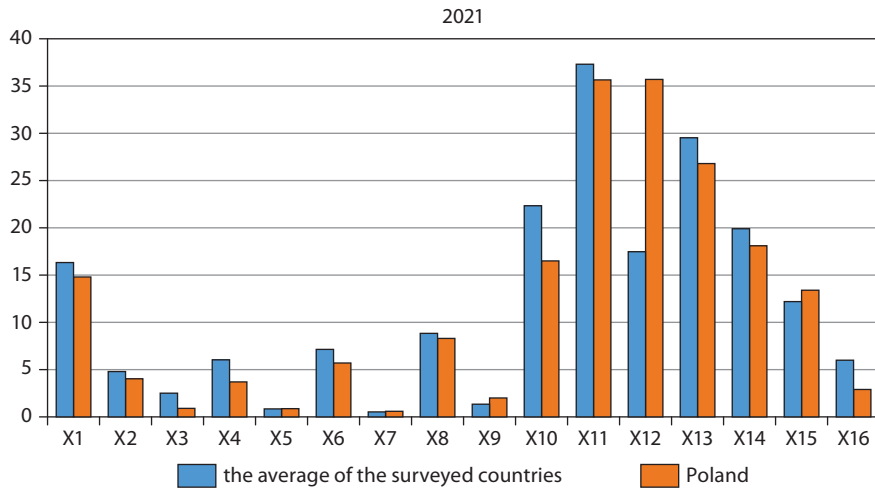


Figure 2. Comparison of Variables for 2021

Source: own elaboration.

When comparing the examined variables in Poland, one clearly notices that the value of the following indicators increased in 2021 in relation to 2015: the impact of social transfers on poverty reduction (X11), the percentage of people reporting dissatisfaction with the health care services due to lengthy waiting periods (X9), and the percentage of young people who are neither employed nor participating in education or training in general in this age group (X15). The value of the other indicators decreased. The comparison appears in Figure 3.

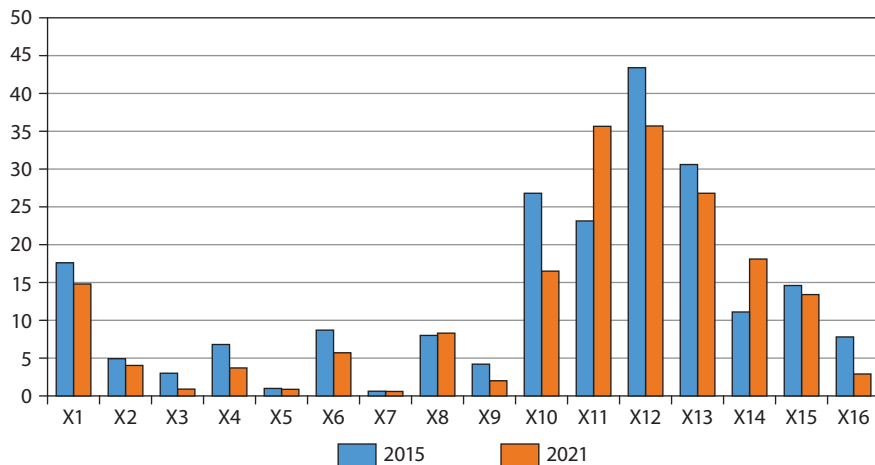


Figure 3. Comparison of Variables in Poland for 2015 and 2021

Source: own elaboration.

By examining the relationship between the social protection assessment represented by the SSA measure and pension expenditure as a percentage of GDP, average equivalized net

income per capita in the PPS, social assistance expenditure as a percentage of GDP, social security expenditure as a percentage of GDP, average social protection expenditure in euros per capita and GDP per capita in PPS, we obtained the following correlation coefficients as presented in Table 4.

Table 4. Correlation Coefficients Between SSA and Variables W1–W6

	W1	W2	W3	W4	W5	W6
2015	-0.05661	0.876292	0.111826	0.757988	0.857596	0.623683
2021	-0.0434	0.745044	0.068042	0.57035	0.750406	0.547212

Source: own elaboration.

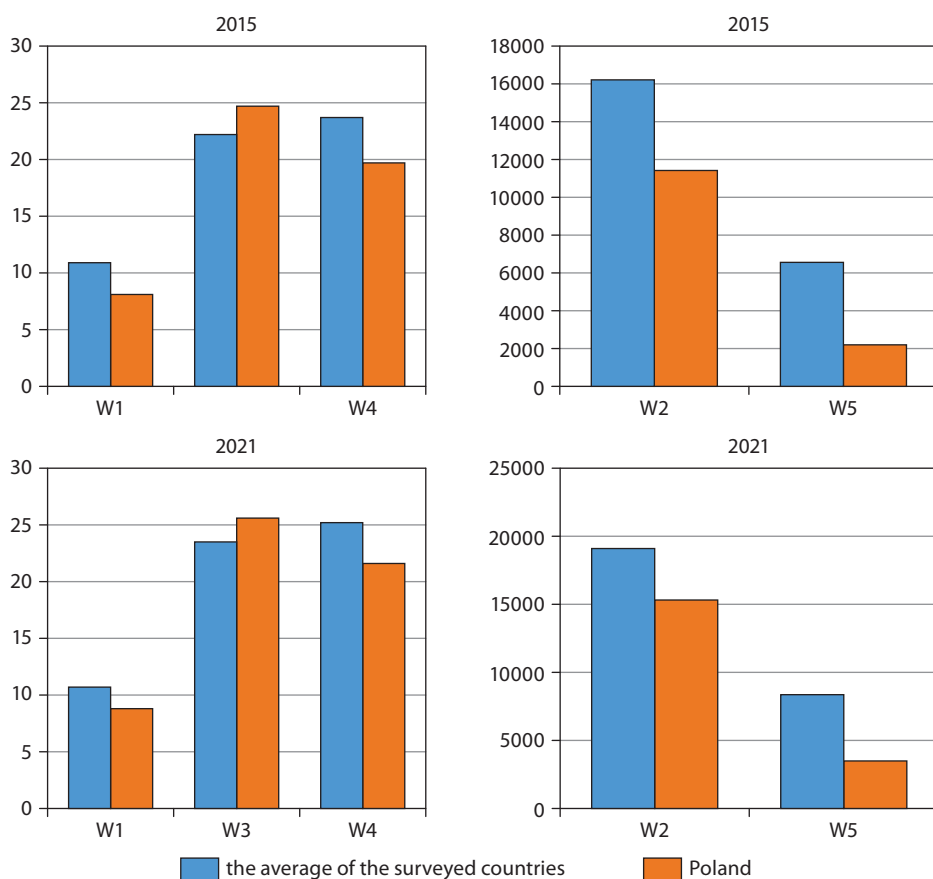


Figure 4. Comparison of Social Protection Expenditure in Poland With Other European Countries in 2015 and 2021

Source: own elaboration.

In Poland, pension expenditure as a percentage of GDP (W1), average equivalized net income per capita in PPS (W2), social assistance expenditure as a percentage of GDP (W3),

social security expenditure as a percentage of GDP (W4), average social protection expenditure in euros per capita (W5) and GDP per capita in PPS (W6) were at a similar level in 2021 as in 2021 when compared to other countries. Social assistance expenditure as a percentage of GDP (W3) was higher than the average value of this indicator for other countries, while other indicators were lower. The comparison appears in Figure 4.

The research has shown a strong relationship between the social situation assessment and the average equivalized net income per capita in the PPS, as well as the average social protection expenditure in euros per capita. The relationship between the social situation assessment and the impact on social insurance as a percentage of GDP, as well as GDP per capita in the PPS, is also significant. However, there is no connection between the assessment and pension expenditure as a percentage of GDP and social assistance expenditure as a percentage of GDP.

5. Conclusions

Social protection is an important element of the state's activities, but its level largely depends on the allocated funds. The countries that top the ranking are those which have higher GDPs. The research confirmed the correlation of both GDP and average net income per capita with the synthetic measure built for assessing the studied phenomenon. This relationship remains strong, although it decreased in 2021 compared to 2015.

The evaluation of social protection in Poland for 2015 was low when compared to other European countries. Poland took the 18th position in the ranking among the 26 countries surveyed. Despite large social transfers, this assessment has not changed significantly in 2021 and remains low in comparison to the other countries. In 2021, Poland still ranked 18th. The analysis of the social system in Poland provokes the question whether the significant increase in social transfers, including the 500+ program, had a significant impact on improving the quality of the social system in Poland. We believe that such an assessment is possible by comparing the effectiveness of the social system in Poland with similar systems in other countries. The analysis provided in the article proves justified. Despite improvements in most indicators, Poland's ranking position has not changed. The high costs incurred for social transfers did not improve its position when compared to other countries. Therefore, further research is worthwhile to determine whether the high level of social transfers weakens other social protection measures, such as the construction of nurseries or kindergartens, or improvements in health care quality.

The results of the analyses indicate that social transfers are worthy of continuation. However, they should proceed with different strengths and in different forms. These activities should target various social groups and lead to the independence of people, especially those in difficult life situations. The structure of social assistance should serve to eliminate negative phenomena and not to reinforce them. It is advisable to utilize solutions that have proved effective in the countries that top the presented ranking, while considering the specific cultural and social circumstances in Poland.

It is of utmost importance to use social transfers in the most cost-effective and efficient manner possible. This is essential to gain the public's acceptance and willingness to finance the system by paying taxes and social contributions (Bierbaum & Schmitt, 2022, p. 24).

The article proposes an indicator for assessing the quality of social protection. Since social protection is a multidimensional concept, its evaluation remains difficult. We have proposed a wide range of variables associated with social protection. Naturally, this group of variables can expand depending on the changing economic and political environment and unforeseen

circumstances such as wars or pandemics. The developed metric measure allows one to compare the country's position with others, and to compare policies in order to improve them. Comparing social systems in different countries provides valuable information, such as the application of proven solutions from other states. Importantly, social protection may be influenced by the electoral calendar or by modifications in social policy resulting from changes in political options (Lavers, 2022, p. 8), so the analysis should cover the longest period possible.

The costs of social protection are very high, so it is important to assess its effectiveness. One needs to verify the good use of the funds allocated for this purpose. Thus, the construction of a measure enabling the assessment of social protection is crucial. The article proposes an evaluation model using the TOPSIS method, but the model has certain limitations. Those result from the availability of data and the omission of qualitative variables that are difficult to measure and are not widely available. Therefore, it seems justified to conduct further research leading to the identification of an effective model of social protection.

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Conflict of Interest

The authors declare that the research took place without any commercial or financial relationships that could be construed as a potential conflict of interest.

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