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PERSONAL SOCIAL SERVICES

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סדרת ניירות מדיניות

שירותי הרווחה האישיים

ג'וני גל

נייר מדיניות מס' 2010.07

הפרק דן בשירותי הרווחה האישיים בישראל – השירותים המוסדיים והשירותים בקהילה המיועדים לאוכלוסיות מודרות. ההוצאה על שירותי הרווחה האישיים, המסופקים על-ידי משרד הרווחה והשירותים החברתיים, באמצעות המחלקות לשירותים חברתיים וגורמים לא-ממשלתיים רבים, נמוכה לעומת מרכיבים אחרים של מדינת הרווחה בישראל ומהווה כששה אחוזים מסך ההוצאה החברתית. בשלוש השנים האחרונות חל גידול בתקציב המופנה אל השירותים לאחר דריכה במקום באמצע שנות האלפיים (2002-2006); במקביל חלו שינויים במדיניות משרד הרווחה והשירותים החברתיים, כמתבטא בהרחבת מגמת ההפרטה, מעבר לשירותים שניתן להעניקם בקהילה. בנוסף לכך, לאחרונה סיימה את עבודתה ועדת רפורמה, אשר המליצה על שינויים משמעותיים במערך השירותים החברתיים האישיים, וביניהם ההצעה לחקיקת חוק שירותי הרווחה.

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ג'וני גל הוא ראש תכנית מדיניות רווחה חברתית במרכז טאוב לחקר המדיניות החברתית בישראל ופרופסור בבית-הספר לעבודה סוציאלית ולרווחה חברתית ע"ש פאול בארוולד באוניברסיטה העברית. כל הטעויות הן של המחבר. הדעות המובאות להלן הן של המחבר ואינן בהכרח משקפות את דעות מרכז טאוב לחקר המדיניות החברתית בישראל.

מותר לצטט קטעי טקסט קצרים – שאינם עולים על שתי פסקאות – ללא הסכמה מפורשת, ובלבד שיינתן אזכור מלא למקור הציטוט.

Personal Social Services

John Gal*

Abstract

This chapter deals with personal social services in Israel – institutional services and communal services designed for marginalized populations. The expenditure for personal social services provided by the Ministry of Social Affairs and Social Services and many non-governmental entities is lower compared to other components of the welfare state in Israel, representing six percent of the social expenditure. After a period of stagnation during the mid-2000s (2002-2006), there was a growth in the budget directed to these services in the past three years; at the same time changes took place in the Ministry of Social Affairs and Social Services' policy, as reflected in expanding the privatization trend beyond services that can be provided in the community. Furthermore, as of late, a reform committee completed its deliberations and recommended substantial changes in the array of personal social services, including legislating a Social Services Law.

Personal social services provide assistance to a range of deprived population groups. Services are provided both within the community by local social welfare departments, and institutionally, by and under the supervision of the Ministry of Social Affairs and Social Services. Overall,

* Special thanks to Yulia Cogan from the Taub Center for her assistance in data analysis and for preparation of the figures in the chapter.

personal social services are a relatively small fraction of the total expenditures on social services in Israel.

Recent decades have seen marked changes in the provision of personal social services in Israel. These include a severe lack of adequate resources (particularly during the first half of this decade), an accelerated privatization process, increasing involvement of the third sector (non-profit) and for-profit firms as service providers, and changing employment patterns of social workers in local social welfare departments from direct to indirect employment.

The past three years saw signs of a shift in policy toward the personal social services. While privatization of services has continued unabated, there was a significant increase in funding after a period of stagnation in the mid-2000s (2002-2006), and a committee for reform in the social services established by the Ministry of Social Affairs and Social Services, recommended significant changes in personal social services as well as the legislation of a Social Services Law.¹

Personal social services provide assistance for a wide range of population segments including the weakest and most vulnerable elements in the Israeli society: at-risk children, teens and youth; isolated and dependent elderly; families in distress or in crisis, including single-parent and immigrant families; persons with intellectual, developmental and/or physical disabilities; people with issues of substance abuse; and the homeless.

Administrative responsibility for these services and for their funding lies with the Ministry of Social Affairs and Social Services as well as local authorities (social services departments). Increasingly, delivery is being delegated to non-governmental organizations (non-profit and for-profit) with state and local government engaging in regulation.

This chapter reviews changes in expenditure for the personal social services system and its various service areas, as well as the reform

¹ This is a recommendation made repeatedly by the Taub Center over the past ten years.

committee recommendations (State of Israel, 2009). The chapter also presents recently published findings about characteristics of personal social service users and the perspectives of those employed in the system – social workers – regarding various aspects of its activities.

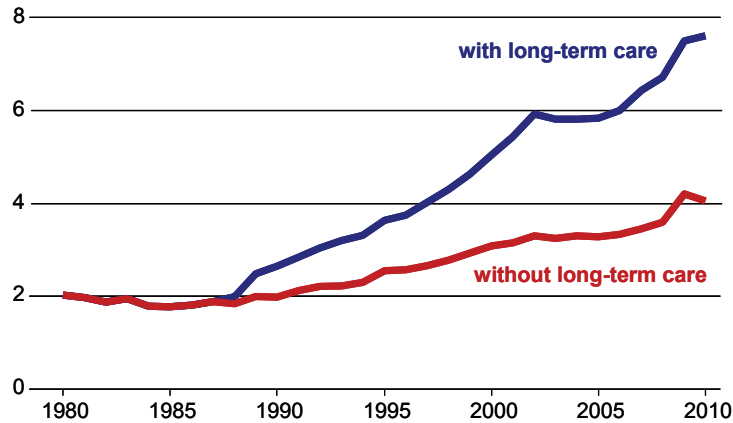
1. Personal Social Service Expenditures: Major Trends and Allocations

2008 state expenditure on personal social services totaled NIS 6.8 billion (in constant 2008 prices) and is still on an upward trajectory. The government budget for the years 2009-2010, foresees continued growth in planned expenditure to the level of about NIS 7.5 billion in constant prices. This growth is also reflected in a rise of the share in total expenditure from 4.6 percent in 2000 to about 6 percent of overall government social spending.

Expenditure on personal social services in Israel represents a relatively small part of the overall social expenditure. This expenditure funds services provided both by the local social welfare departments and through various institutions operating under the auspices of the Ministry of Social Affairs and Social Services. It also includes long-term care services, provided in keeping with the National Insurance Institute's Long-Term Care Insurance Law. The share of those services has been rising steadily since the law was first enacted in early 1988, as can be seen in Figure 1.

The rise in the share of the expenditure on personal social services of overall social spending, as well as the real increase of the resources channeled to the various service areas (and changes in the spending patterns on other components of the overall social expenditures) was especially notable in the second half of the decade. The flat pattern of the expenditures in 2002-2006 changed into a growth pattern in 2007. The government budget for the coming two years, 2009-2010, predicts a continued growth trend in those expenditures.

Figure 1
Expenditure on Personal Social Services, 1980-2010
 NIS billion, 2008 prices

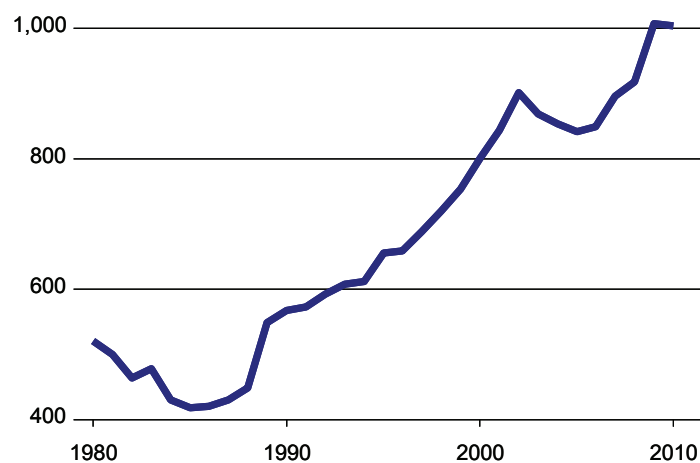


* The Long-Term Care Insurance law was passed in 1988.

Source: Taub Center for Social Policy Studies in Israel.
Data: Ministry of Finance.

It is interesting to compare the growth of expenditures on social services to other dimensions: first to population growth and second, to growth in GDP. As can be seen in Figure 2, spending on the personal social services increased at a higher rate than population growth. The average per capita expenditure for personal social services (including long-term care) was NIS 700 in 2000 and rose to NIS 896 in 2007, representing a 12 percent growth in less than a decade. If the budget is implemented as planned, this expenditure is expected to reach an average of about NIS 1,000 per capita in 2010. In a longer historical perspective, per capita personal social services grew by 76 percent since 1980.

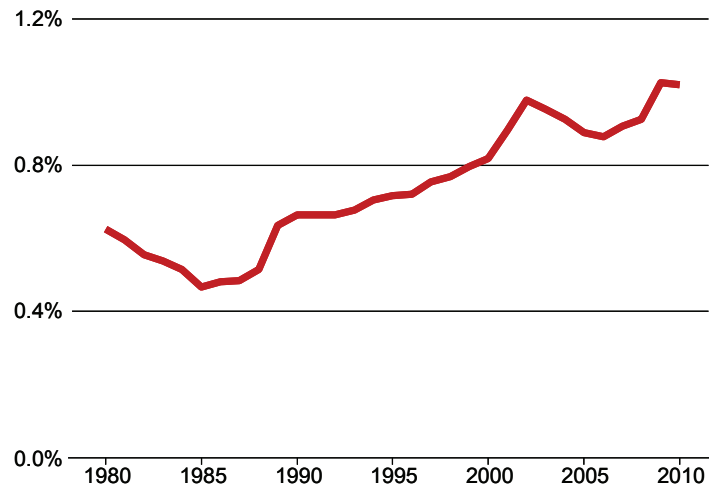
Figure 2
Per Capita Expenditure on Personal Social Services, 1980-2010
NIS, 2008 prices



Source: Taub Center for Social Policy Studies in Israel.
Data: Ministry of Finance, Central Bureau of Statistics (CBS).

When compared to changes in GDP, a similar trend emerges. In 2000 this expenditure represented 0.82 percent of GDP, in 2004-2007 it fluctuated between 0.88 and 0.93 percent, and in 2009 it was projected to top one percent of the GDP (see Figure 3).

Figure 3
Personal Social Services, 1980-2010
 as a percent of GDP



Source: Taub Center for Social Policy Studies in Israel.
Data: Ministry of Finance, CBS.

2. Principal Areas of Expenditures

Personal social services are provided for a wide range of target populations, of which some are especially prominent. The largest share of this expenditure is intended, as mentioned, to fund services for the elderly, mainly long-term care services, but also other locally provided services. Another share is devoted to rehabilitation and various assistance services for special needs populations – people with intellectual, developmental or physical disabilities, and delinquent youth and young adults. Additional services, designed to provide care for a variety of population segments – individuals, families, children and communities – are under the responsibility of local authorities' social welfare

departments and take various forms and can be found in diverse community settings.

Spotlight: Data on Service Users

Recently published data (Sabah, Eaglestein, Cohen-Feldman and Zadka 2000a; 2000b) provide an initial, albeit partial, view of users of the personal services. The published data cover 270,455 families registered as beneficiaries of services provided by the social welfare departments in 2006. The data indicate a number of attributes of social services users:

- Wages: the average monthly wage of clients of the personal social services is half the average monthly wage in the economy, i.e. close to minimum wage.
- Age: over half (53.7 percent) of those registered in the social welfare departments are of working age.
- Elderly: About one-fifth (19 percent) of those who apply to social welfare departments are elderly, whereas they comprise only 10 percent of the general population.
- Arabs: nearly one-fourth (23 percent) of applicants registered in social welfare departments are from the Arab sector, more than their share in the general population – 19.7 percent.
- New Immigrants: the share of new immigrants registered in social welfare departments is 40.0 percent, while their share in the general population is only 31.6 percent.
- Grounds for Application: 24.2 percent of applications to social services departments relate to a disability; 16.3 percent present poverty and income problems; and 1.9 percent due to poor social and emotional functioning.
- Socioeconomic Differences of Localities: the volume of applications to social services departments is much higher in poorer localities – 239.1 per thousand persons in the poorest localities in Israel versus 123.4 per thousand in and 82.1 per thousand in the most affluent localities.

2.A. Personal Services for the Elderly

Elderly services constitute a central component of personal social services, especially since a significant portion of the service is provided as part of the long-term care services – in-kind services provided under the Long-Term Care Insurance Law and implemented under the auspices of the National Insurance Institute. The delivery method of these services, as well as the continual rise in their utilization rates, transformed them into an important element in the overall personal services expenditures (see Figure 1 at the beginning of chapter).

Long-Term Care Services

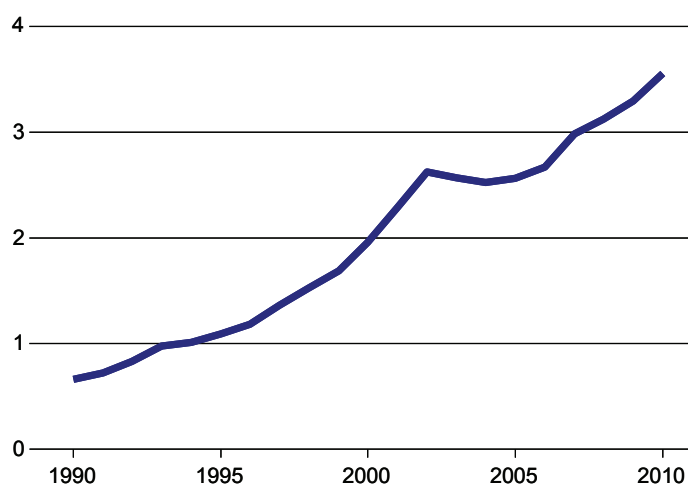
Long-term care services are intended for those elderly whose everyday functioning is limited, and who continue to reside in their own homes. These take the form of in-kind services, and are operated as an insurance-based, National Insurance Institute program, in keeping with legislation enacted in 1986. The benefit varies according to the degree of dependence of the elderly on others in performing everyday functions. The benefit covers approximately 10 to 18 care-hours per week.

Assistance given to the elderly under the Long-Term Care Insurance Law is provided by private companies as well as non-profit organizations. In many cases the Law funds part of the cost of care, which translates into more hours of care by foreign care givers (due to their lower wages). To encourage engaging more Israeli employees under the Long-Term Care Insurance Law, the National Insurance Institute recently began paying an additional three to four care-hours per eligible person who hires an Israeli care giver.

More than 131,000 elderly received assistance under the Long-Term Care Insurance Law in 2008, and this number rose to 135,000 by the middle of 2009. This represents 15 percent of the elderly in the overall population. The number of elderly receiving care under the Long-Term Care Insurance Law has increased continually ever since the law was enacted. In 1988 services were provided to only 21,000 elderly people, while one decade later their numbers reached 85,000 (Katan &

Lowenstein, 1999). In the early 2000s the number of elderly receiving care topped 100,000 and in 2005 it was approximately 115,000. Figure 4 below traces the evolution of expenditures on long-term care for the elderly, which was over NIS 3 billion in 2008 and is expected to grow to NIS 3.5 billion in 2010. It is worth noting that this expenditure represents almost half (47 percent) of the overall expenditure on personal social services.

Figure 4
Expenditure on Long-Term Care Insurance
NIS billion, 2008 prices

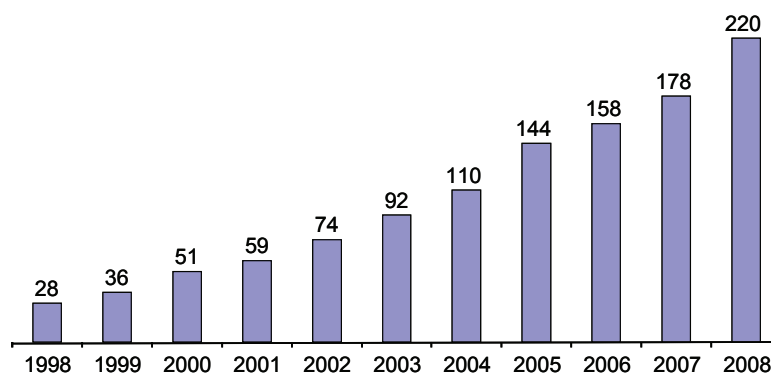


Source: Taub Center for Social Policy Studies in Israel.
Data: National Insurance Institute.

Services Provided by the Ministry of Social Affairs and Social Services' "Elderly Services" Program

The "Elderly Services" program is responsible for providing care in nursing homes currently housing 9,000 elderly people, as well as various care activities within the community. The expenditure for operating the service in 2008 amounted to NIS 245 million which has remained level in recent years is expected to maintain this course over the next two years (in 2010 the expenditure is expected to reach NIS 254 million). Elderly Services oversee the elderly care provided in nursing homes and participates in the funding for approximately one-third of the elderly in these nursing facilities. Expenditures for the elderly in nursing homes amount to about two-thirds of the overall expenditure in this area. Nevertheless the largest population of elderly receiving this service is made up of those who utilize the variety of services offered within the community. These include day care centers, clubs and supportive communities, some of which receive financial subsidies from the Ministry and are subject to its supervision. The development of supportive communities located in areas with a high proportion of elderly in the population has become of special interest in the field of elderly services in the past decade. Elderly people who live within such communities receive distress buttons, assistance from a communal janitor, emergency medical care when necessary, and participation in social activities. Such communities were developed as an initiative of *Eshel* (JDC) during the years 1995-1996 (Tien, 2004) and they are operated with help from the Ministry of Social Affairs and Social Services. As shown in Figure 5, the number of these communities grew rapidly over the past decade, from just 28 in 1998 to 220 in 2008. While 6,400 elderly households were part of the supportive communities at the beginning of the decade, the number reached approximately 30,000 towards the end of this decade.

Figure 5
**Number of Local Supportive Communities
for the Elderly, 1998-2008**



Source: Taub Center for Social Policy Studies in Israel.
Data: Eshel, *“The Aged in Israel.”*

2.B. Services for Special Needs Populations: People with Intellectual, Developmental or Physical Disabilities and Correctional Services

The second largest expenditure on personal social services is designed for special needs populations and is under the responsibility of the Ministry of Social Affairs and Social Services. Most of these resources are directed to persons with intellectual and developmental disabilities. The expenditure for this segment of the population has grown consistently in recent years and is expected to continue growing over the next two years. A major part of activities in this area is devoted to care in residential facilities, mostly private, such as sheltered housing units, hostels etc. Currently this population encompasses more than 10,000 residents (10,020) in all institutions combined, compared with 9,200 in 2004 (Ministry of Finance, 2009).

Regarding services provided to persons with intellectual and developmental disabilities, in recent years there is a dual trend. One trend is to privatize the services by reducing government involvement in operating institutions in this area and handing their funding and oversight to private entities. The other trend is to transfer more residents to hostels and other residential facilities functioning within the community. The reduction of governmental involvement in providing care for this population is clearly visible in Table 1 below, indicating a significant decrease in the number of residents in government-run residential facilities, from 2,107 in 1996 to 1,838 in 2008. At the same time there was an increase in the number of residents in for-profit facilities (from 2,900 in 1996 to 5,110 in 2008) as well as in non-profit facilities (from 1,550 in 1996 to 2,700 in 2008). Another expression of this trend can be seen in the fact that currently there are 2,400 residents in housing units in the community compared to only 1,300 in 2003 (Ministry of Finance, 2003).

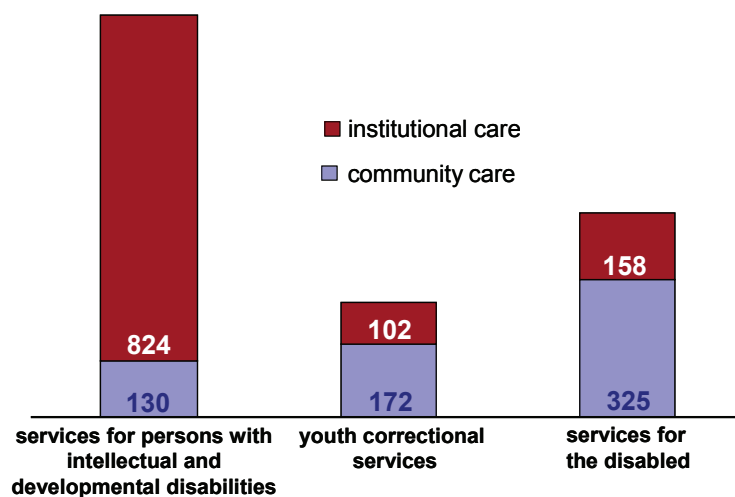
Table 1. **Residents in Homes for Persons with Intellectual and Developmental Disabilities.** 1996 and 2008, by ownership.

	1996	2008
Government homes	2,107	1,838
Public homes	1,550	2,700
Private homes	2,900	5,110

Source: Ministry of Finance, Budget Proposal for 2004 and 2009-2010.

Unlike other areas of caring for special needs populations, services for persons with intellectual and developmental disabilities are still provided predominantly in institutions, as is shown in Figure 6.

Figure 6
Services for Special Needs Populations, 2008
institutional and community care, NIS million



Source: Taub Center for Social Policy Studies in Israel.
Data: Ministry of Finance.

Most of the resources of the Rehabilitation Department are allocated for operations within the community – professional diagnosis, vocational training and the operation of various rehabilitation systems. Here, too, the privatization trend is very prominent, both in the area of vocational training in the community and in the operation of residences for people with disabilities. Only a small minority of residents are in government-run facilities, whose operations are also intended to be transferred to non-governmental organizations.

The third area of special services is that of correction services, which deal with treatment, supervision, rehabilitation, and prevention among those who violated the law (usually after the intervention of the judicial system). Expenditures for this area have gradually increased in recent

years to NIS 273 million in 2008. About half of the expenditure is dedicated to funding residential facilities for compulsory treatment of youth sent to delinquent shelters, but most of the correctional services target population is being treated within the community.

The Juvenile Probation Service handles juvenile delinquents and provides evaluations as well as treatment. The number of young people who go through this service declined somewhat over the past decade and in 2008 they totaled 20,291. The service for adult criminals provides reviews for the courts and implements probation orders and community service orders.

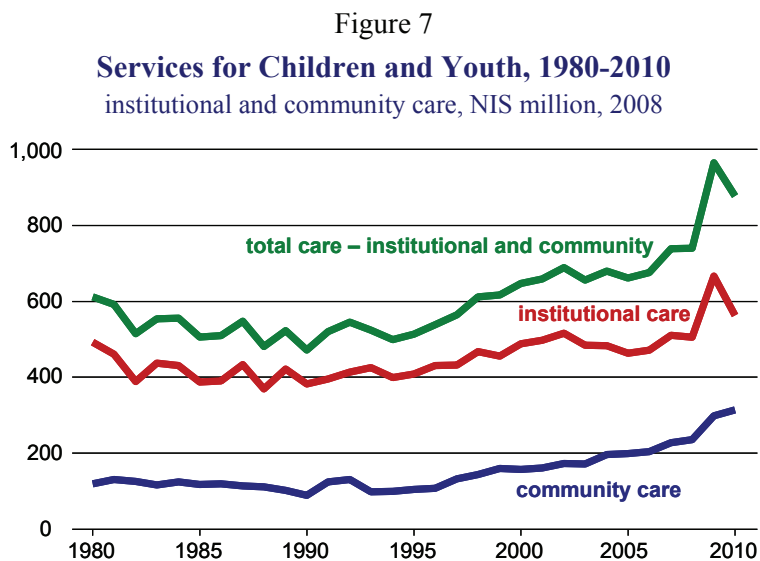
Over the years the correctional system has also been responsible for day rehabilitation facilities for youth (*Miftan*). Over the last decade, however, there seems to be a tendency to reduce the number of such facilities: whereas in 2002, 2,450 young people were treated in 31 facilities across the country, in 2008, 2,600 young people were treated in only 23 facilities (Ministry of Finance, 2002).

2.C. Child and Youth Care

The Ministry of Social Affairs and Social Services provides care for children and youth through the Child and Youth Service, a unit of the Personal and Social Services Department. At-risk children are at the center of this service which is operated mostly by social workers and includes an array of residential services in boarding schools and foster care, as well as services within the community, and diagnostic and treatment services in different settings.

The budget for at-risk children and youth services in 2008 amounted to NIS 761 million and is expected to grow to about NIS 1 billion in 2009 (representing approximately 23 percent of overall personal social services). The planned increase for the next two years is related to some extent to the government's decision to adopt the recommendations of the public committee to examine the situation of at-risk children and youths, which was headed by Prof. Hillel Schmid (State of Israel, 2006). The

majority of the budget for children and teens is still dedicated to the funding of residential facilities for them. In recent years, however, the process of shifting the emphasis to activities within the community (“with the face to the community”) has been accelerated. The shift consists essentially of transferring some of the children currently in residential settings to the community and refraining from sending any more children to residential institutions, while prioritizing community-centered services for their care. Concurrently, various settings are being developed within the community, designed to diversify and expand the care given to at-risk children and youths. These include *mishpahtonim* (day care in family settings), day care centers, non-residential (outpatient) care centers, day foster-care, multi-purpose care centers, club houses and parents-children centers. For example, 14,500 children are in day care centers and family care centers provided by the At-Risk Toddlers Law. Figure 7 shows the shift in budgetary preferences and the transition to care-giving within the community. The figure illustrates the gradual decline in spending for institutional care compared with the funding of services within the community. The share of expenditures directed to institutional care, which in 2000 was 71.6 percent, declined to 66.3 percent in 2008 and is expected to drop as low as 60.1 percent in 2010. Concurrently, the expenditures on services in the community rose from 23.1 percent in 2000 to 33.8 percent in 2010.



Source: Taub Center for Social Policy Studies in Israel.
Data: Ministry of Finance.

2.D. Care for Families

Funding for services specifically intended for at-risk or in-crisis individuals and families constitutes a relatively small part of the overall expenditure on personal social services. The expenditure for this area in 2008 was NIS 84 million and is expected to grow slightly in real terms and reach a level of approximately NIS 100 million over the next two years.

The level of expenditure for family care in 2010 is expected to be greater than over the past decade. Services for individuals and families are provided primarily in the community and include individual and family care, provided by social workers for both individuals and families experiencing a crisis or danger within the family, and treatment of traumatic events (risk of suicide or bereavement), other intra-family processes (such as violence and incest), and the like. The service also

operates domestic violence prevention and treatment centers, treatment centers for the homeless, family and marriage counseling centers, and provides welfare agents in compliance with the Youth Law.

2.E. Personnel in Social Services Departments

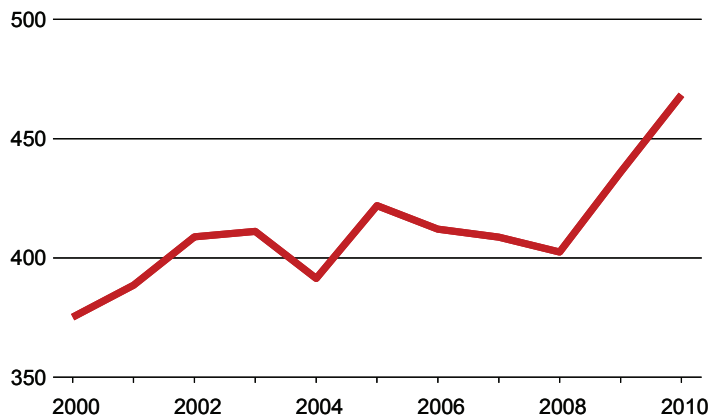
Social workers and other professionals working within social welfare departments in local authorities constitute the foundation that sustains personal social services in Israel. The burden of funding the social worker positions in social services departments falls primarily (75 percent of the cost of funding) on the Ministry of Social Affairs and Social Services, with the balance resting with the local authorities.

For many years, the prevailing mood among social workers, service recipients and other professionals has been troubled (see detailed discussion in Katan, 2009: *Resource Allocation to the Social Services 2008*, pp. 182-186). The general sentiment is that the number of available personnel working in social welfare departments is insufficient for the size of the in-need population and the various tasks imposed on them under the relevant laws. The frustration of workers in social services departments concerning the overload they experience and their inability to provide adequate responses to applicants was exposed during the long social workers strike in 2008. This frustration was also articulated in views expressed by social workers and directors of social services departments in a survey conducted by Ofek (2009), some conclusions from which are presented below.

The long strike led to readiness by the Ministry of Social Affairs and Social Services as well as the Ministry of Finance to increase the number of social work positions in social welfare departments. It also brought about the establishment of a committee to make recommendations for reform of social services departments (for discussion of the committee's interim conclusions, see section 3).

Data pertaining to the funding of positions in social services departments validates the sense of insufficient personnel. The growth rate of positions funded by the Ministry was 16 percent between the years 2000-2008, during which time the number of families supported by these departments rose by 28 percent, and the number of individuals registered by the departments rose by 29 percent. The estimate of the committee to reform social services departments is, therefore, that 500 additional positions are required merely to bridge the gap created since 2000 and to bring the service back to that level (Israel, 2009). Figure 8 indicates a moderate (but not uniform) increase over time in funding for personnel. It also shows that spending is expected to grow more significantly over the next two years (by about 6 percent per year). The increase is expected to result in 221 additional positions in social service departments (Finance Ministry, 2009), but, as stated, this addition is less than half of the number required to return to the accepted level of service from the beginning of the decade.

Figure 8
**Expenditure on Manpower in
 Local Welfare Departments, 2000-2010**
 NIS million, 2008 prices



Source: Taub Center for Social Policy Studies in Israel.
Data: Ministry of Finance.

What do social workers think about the personal social services?

A research report presented in early 2009 to the Ministry of Social Affairs and Social Services by Prof. Avraham Ofek (Ofek, 2009) sheds light on the mind-set of social workers and department directors in 48 social services departments across the country. It is based on interviews conducted with the social workers and department directors in social welfare departments. The report examined issues relating to the day-to-day performance of departments and their employees and it presents an interesting perspective on the functioning of the personal social services system from the vantage point of those working in it. Here are some of the research findings:

- Reports of personnel shortage: 69 percent of the directors of social welfare departments and 71 percent of their social workers reported considerable or serious shortage of positions in their departments. The most severe reports of personnel shortage were from the Arab and Haredi (ultra-Orthodox) sectors.
- Target populations coverage of social welfare departments: one-third (32 percent) of the departments surveyed reported full coverage of their target populations, while some two-thirds (68 percent) reported that they do not provide adequate response to their target populations.
- 42 percent of personnel reported that due to their heavy work load, they engage greatly or very greatly in "putting out fires."
- 67 percent of the social workers and 82 percent of the social welfare department directors described their professional self-image as high or very high.
- In 30 of the 48 social welfare departments sampled (62 percent of the sample) privatization processes were being carried out in various areas.
- Impact on policy: 92 percent of study participants defined the level of participation of department directors in shaping the Ministry's policy as moderate or less.
- Handling poverty: 68 percent of social welfare departments reported an absence of policy and programs to cope with the phenomenon of poverty.
- Handling the unemployed: 76 percent of departments in the Jewish sector and 89 percent of departments in the Arab sector reported a mediocre level of handling the problems of unemployment and the unemployed.

3. The Reform Committee

Following the social workers strike in the first half of 2008, a public committee was established on behalf of the Minister of Social Affairs and Social Services, headed by Yekutiel Sabah. The public committee was asked to recommend a reform of personal social services.

The committee's recommendations refer to a long list of difficulties and obstacles typical of this system (State of Israel, 2009). Among the key problems of the social services system, are:

- The ongoing lack of resources, which translates into providing only a partial response to the needs of the target populations of social welfare departments.
- Inequality in the scope and level of services provided to target populations between localities particularly manifest in the comparison between Jewish and Arab communities.
- Outdated and deficient legal foundations: since the Social Services Law was enacted in 1958, the statutory basis for social welfare departments has become obsolete (Yanay, 2006).
- A lack of empirical knowledge and evidence-based practice.
- An over-emphasis on specialization rather than higher level generic training.
- Inefficient service environment and complex relationships between clients and social services departments due to their partial privatization and the multiplicity of providers (Katan, 2007).
- Insufficient participation of service users and civil society organizations in shaping the policy of social welfare departments.
- Limited involvement of social welfare departments in major social problems such as poverty and unemployment – the main sources of their clients' distress (Katan, Gal & Weiss-Gal, 2009).

The conclusions submitted by the committee to the Minister of Social Affairs and Social Services cover: (1) the legal structure of the departments' functioning; (2) resource allocation for their operation; (3) goals for the departments' functioning and their target populations; and (4) a variety of organizational aspects regarding the performance of the departments and their professionals.

The committee recommended maintaining the existing division of responsibilities and distribution of funding between the Ministry of Social Affairs and Social Services and local social welfare departments. It also called attention to the need for sufficient funding for this system. The committee supported the adoption of a Social Services Law to replace the existing law and provide a suitable statutory structure for the departments. It suggested focusing the departments' operations on their main target populations as well as those to which they have legal commitments. The committee advocated strengthening the family as a unit and putting it at the center of the departments' activities. It urged strengthening the efforts to reduce poverty and unemployment and enhancing social workers involvement in the process of social policy design.

The committee also recommended limiting the departments' role in providing material resources and endorsed the idea of "managed care." It urged them to collaborate with other parties, private and public, in promoting common objectives, and supported greater autonomy and discretion for the departments in managing their internal budgets, as well as involving the general public in the policy design process.

The committee's recommendations to reform the social services system constitute a comprehensive attempt to assess the personal social services system, its diverse characteristics and limitations, while outlining a new and coordinated policy for the coming years. While the interim conclusions do call attention to many of the system's shortcomings, what is visibly absent is a timetable for implementation of its recommendations and the allocation of budgets and resources. The question of what role these conclusions will play in helping the welfare system cope with its

myriad problems depends on outlining a clear course for their implementation.

Another element missing from the committee's interim conclusions is its recognition of probable negative implications of the on-going process of partial privatization within local social services. While noting the difficulty of monitoring operations of combined public and private providers and increasing financial and operational dependence of some local authorities on non-governmental organizations, the committee did not suggest an explicit policy on this matter, nor has it recommended any limitations.

Insufficient discussion was devoted to the controversial and difficult issue of funding local social services operations and their relationship with the Ministry of Social Affairs and Social Services. This is a particularly challenging problem, raising issues of disparities between different communities, notably between Arab and Jewish communities and between the center of the country and the periphery. Though service recipients are concentrated in poorer communities, no suitable budget structure was found to provide affirmative action for localities with limited resources. In this situation, the gaps between Jews and Arabs are becoming steadily wider.

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