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SYSTEM MUNICIPAL SOCIAL SERVICES:
ANALYSIS CASE OF MURCIA-SPAIN**

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Analysis and Impact of the Economic Crisis and Regulatory Changes in the Needs and Benefits System Municipal Social Services: Analysis Case of Murcia-Spain

Enrique PASTOR SELLER¹, Margarita SANCHEZ MILLAN²

Abstract

This paper presents the results of an empirical longitudinal analysis of the needs and welfare of people seeking support from the community social services in the municipality of Beniel (Murcia, Spain) over the period between 1996 and 2011. These results are compared with regional and state research, focusing on a cross-sectional dimension and projection of future trends. The methodological and technical route of collecting and analyzing data place the actors in the system as in the research, their temporal extent (1996-2011) and coverage of the study population (total counts) provides reliable information, contrasted and extrapolated, besides ourselves with elements of benchmarking and trend of greater significance. This is considered the population of people who used services during the period, accessed by a mixed method of data collection from primary and secondary sources. The results allowed us to verify the hypothesis that the changes in the profile and needs of the users and the services/resources that they required from the basic structures of the municipal social services is linked to the social and economic crisis, as well as developments in institutional policy of social policies related to social services. The results also present objective data on the current and future situation, allowing recommendations for political and organizational improvement.

Keywords: crisis, social needs, social welfare, social services, social policies.

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Development and regulatory framework of social services at a local level in Spain

The current model of Public Social Services System in Spain was established by the enactment of the Spanish Constitution (1978), which involved the democratization of institutions. This was a late addition to social protection systems considering that in 1948 the Universal Declaration of Human Rights United Nations marked the rights to “necessary social services” (art. 25) and in 1961 the European Social Charter instructed that people have the “right to the benefits of social services” (art. 14). In the present constitutional text concept implied by the term social services is vague (Roldán and García, 2006), as the term is used only to refer to a system that should ensure that public authorities promote the welfare of their citizens during the “third age” (art. 50). This referred to the generic welfare of certain sectors, such as the unemployed, people with physical, sensory and psychological deficits, family and children (arts. 39, 41 and 49); each with their own access to Social Services. In terms of responsibility, the article 148.1.20[§] contemplates “welfare” as one of the powers of the Autonomous Communities. Thus, the Constitution gives full rights for the construction of new social services to the individual regions (Casado, 2007). These tasks are taken in the Organic Laws of the Statute of the Autonomous Communities.

The analysis of the regulatory development of the regional laws can be split into three periods: (1) From 1982 to 1993, when the social service systems were set up through the adoption of the respective laws; (2) From 1993 to 2006, when second generation laws were passed in the regions of Galicia, Cataluña, País Vasco, Comunidad Valenciana, La Rioja, Asturias, Madrid, Murcia and Aragón; (3) From 2006 to the present day, as things changed in 2006 primarily as a result of the enactment of Law 39/2006 (14th of December) on the Promotion of Personal Autonomy and Care for Dependent Persons. This most recent set of changes arose as a collection of social services laws known as “third generation” laws, characterized by things such as the individual’s right to benefits and services, expansion and consolidation of the rights and obligations of users of social services and benefit recipients, the presence and quality assurance of both the public and the private services, the introduction of the concept of rights and its application to social services and the creation of catalogs / portfolios of benefits and services (Casado, 2008; Alemán, 2010; Pastor 2012a; Vila, 2012, among others). This act has recently undergone significant changes, particularly in the areas of realization of the right to benefits, system incompatibility, calendar grade protection, degree recognition, catalogue service protection strength, quantities, retroactivity provision, regime for special agreements for informal caregivers in the Social Security system and the budgetary allocation of Central Government, as well as other issues that would adversely impact on the rights of citizens and how their benefits might be regulated (Ramirez, 2012). In 1988 the Concerted

Plan for Development of Basic Social Services Local Authorities was implemented, which is embodied in the signing of agreements that establish programs of economic cooperation, technical agreements and management between the Central Government, the Autonomous Communities and Local City Government. Its purpose is to guarantee safeguards for all citizens in need and coordinate basic provision in the financing of public social services; this development has led to the universalisation of primary care social services in Spain (Gutierrez, 2001; Las Heras, 2002; Subirats, 2007; Roldan and Garcia; 2006; Alemán, 2010).

The public system of municipal social services in Spain

The Public Social Services System in Spain comprises of services and benefits aimed at promoting the full and free development of individuals within society, to obtain greater social welfare and quality of life whilst also preventing and eliminating the issues that lead to social marginalization. The system is composed of all structures and utilities of the state, regional and local government, properly coordinated and under the responsibility and competence that each has been assigned. It is based on the principles of universality, public accountability, decentralization, participation, integration, solidarity, equality, standardization, and planning and coordination.

Identifying elements of this region-based configuration include a specific field of reference for social needs (social rights guarantees), a specific offer of benefits, separate network equipment, rules, and the ability to plan their own budgets. Social services are structured: Community services (which constitute the primary care level and are universal) and specialized services (which constitute the secondary care system and show sectoral characteristics).

General Community Social Services, also known as (according to their universality) primary care (according to the levels of intervention that can be provided) provides response to any demand or need raised by citizens. There are many definitions of the different regional laws of social services that have been provided by different authors, yet all are similar in content based on their purpose (Garcia, 1987, Garcia and Ramirez, 1992), highlighting the programming role of social services policy (Corral, Diaz, Sarasa, 1988) and its relationship to social rights (Subirats, 2007; Alguacil, 2012; Roldan and Castaner, 2012, Pastor, 2012a). We consider community social services as the basic structures and provisions of the Public Social Services, designed for regional populations, which guarantees basic services to citizens either as individuals or in collective groups. Public services can provide from their own resources or act as a means of access to other social services.

Community social services are organized geographically by the Centers of Social Services, which are universal and versatile; they are developed locally, in close contact with people, and form the basic structure of the network of Public Social Services in Spain. Public bodies are intended to protect the coverage of citizens in important dimensions such as access to social protection resources, support to enable the minimum dependent living situations or to prevent exclusion processes. The Public Social Services System in Spain has its first reference in the provision of a specific field of social needs on the basis that that social services should show the following characteristics: mutable (as the development of societies affects their configuration), relative (in that services should respond to the specific context, i.e. the population group or sector, to which they belong), they are not empirical facts, they involve value judgments and are generated socially (Fernández, 2009).

As directed by theory and human developmental needs (Doyal & Gough, 1994; Heller, 1996, Max-Neff, 1986, 1994, 2007; Nussbaum & Sen, 1998; Nussbaum, 2002, 2012; Sen, 1987, 2000) social needs have to be responded to adequately by the public system: (1) Information about access to resources: the need for information that enables people to access and use resources of the Public Social Services and other social protection systems, preventing inequalities; (2) Adequate living provisions for individuals and/or families: the need for a suitable living environment, including a decent hosting space in which to develop the most elementary aspects of social life, motivated mainly by a wish to prevent unhappy home situations, limitations to personal autonomy, loneliness and isolation; (3) Social integration: the need to educate the social staff in acceptance and integration in order to avoid and/or prevent social exclusion and its causes; (4) Economic provision for the care of basic needs: the need to have the means necessary to ensure individuals and/or households can cover their basic primary needs. The community social services aim to promote participation by citizens in community life and recognize the need to organize and coordinate the participation of private and public entities in solving social problems. Meanwhile, social resources that make up the Social Services System in Spain are characterized by the fact that they are aimed at satisfaction of needs (whether on an individual, group or community basis) in order to provide instruments for transforming problem situations and therefore to enable change. Social resources available to the system to fulfill social care needs are classified into (Aleman & Garcia, 2005): (1) Technical Services: Professional actions taken to address needs raised by users of the Public Social Services; (2) Economic benefits: cash delivery, either periodically or as a lump sum awarded to individuals and/or families in order to help alleviate temporary situations of need, ensure minimum subsistence support care for dependent persons and so on. To obtain access to these, the person is required to demonstrate that they meet user requirements; (3) Performance materials: those whose technical or economic content is replaced, in whole or in part, by the

equivalent material - service or equipment - home care, residential care, telecare, aids, food.

The municipal social services system is configured to manage the following basic benefits: (1) Information and Guidance: packages and professionalized activities that facilitate citizen and community knowledge, access, use and enjoyment of social resources, publicizing the available alternatives in a situation of social need, enhancing their personal resources and ensuring their rights at all times. This includes dissemination of information, along with guidance, counseling, assessment, and referral; (2) Support Unit and Home Help: provision of personal care, psychosocial, educational, technical and domestic families and support groups that allow an improvement in quality of life by promoting personal autonomy and enable people to remain in their usual environment. This includes benefits such as home care, telecare, assistive technologies, personal support outside the home, social and educational support, support for the family structure and dynamics. It also includes in-house services under the Law of dependency; (3) Alternative Accommodation: set of actions aimed at providing alternative forms of family life in cases where this is not feasible for lack of family unity or because the family situation presents a deteriorating psychological or emotional impact and/or prevents socioeconomic development and welfare of people. This includes benefits such as housing temporarily and/or permanently aimed at the elderly, disabled, children and women; (4) Vulnerability and Social Integration: preventive measures aimed at encouraging community involvement and strengthening people's social networks, as well as actions aimed at individuals or groups at risk of marginalization and social exclusion, aimed at facilitating their social integration and, where appropriate, establishing processes for social inclusion. Includes community support, primary prevention, secondary prevention and inclusion programs (social, work and school); (5) Promotion of Social Solidarity and Social Cooperation: set of actions aimed at promoting cooperation and social participation of individuals and groups in a community, to respond more effectively to the promotion and care of social needs, promoting solidarity and social responsibility. This includes programs of collaboration with social initiatives, promotion and organization of voluntary and self-help groups as well as community interventions.

Territorial and organizational context of the investigation

The empirical research described here was implemented in the municipality of Beniel, located in the eastern part of the Region of Murcia (Spain), with a population of 11,068 inhabitants and a population density of 1,095 inhabitants/km² (INE, 2012). The data were from a longitudinal analysis (1996-2011) and are comparative on a regional and national level. Municipal Social Services Beniel

(Murcia, Spain) was established in 1989, following the signing of an agreement between the city and the Autonomous Community of the Region of Murcia. In late 1991, with the creation of the Center of Social Services of the Commonwealth of the Eastern Region of Murcia, Beniel was integrated into this local structure. The Social Services Centre of the Commonwealth of the eastern region is made up of the Headquarters, Technical Support Unit, Administrative Unit and Social Work Units. The latter are the main component of the structure that are embedded in the community and provide access to the public social services system (ensuring basic services). They act directly and comprehensively with the population throughout the region, specifically channeling relations between the population and Social Services Centre and developing, among others, programs for the elderly and elderly dependency care, support for families in special situations, drug prevention, support for social inclusion, day care centers for elderly dependents and services for immigrants.

Design, dimensions and nature of the investigation

This study aimed to provide a systematic understanding of the structure and dynamics of the social service system in terms of analysis, characterization and screening of targets, demand, supply/coverage and alternatives. Our results show significant elements that we believe should drive organizational and programmatic changes, both in terms of general social context and the current needs and trends in research. The methodological and technical route of collecting and analyzing data place the actors as main characters of the research. Its temporal extent (1996-2011) and subjects (total count) of the study provide reliable and valid information, which could be extrapolated to all citizens of the municipality of Beniel. It also provides us with elements of comparative analysis and main trends.

This study constitutes an investigation of the hypothesis that the profile and needs of service users in Beniel over the past sixteen years, as well as the resources applied to them by the basic structure of Social Services, has been changing because of development in social and institutional context policy.

In response to previous research, our hypothesis was twofold. First, we looked at the evolution and trends of the profiles and needs of the users and, second, we analyzed institutional responses offered to them by the municipal social services. We believe that both goals are inseparable aspects of the same line of analytical research, which is dialectically related to the social, structural and institutional contexts of each historical moment.

The objectives that guided this empirical research were: (1) To characterize the evolution of the demographic profile of the users of the municipal social services; (2) To analyze the evolution of the social needs of the users of the municipal

social services; (3) To analyze the evolution of resources applied to the users by the structure of the municipal social services; (4) To describe the profile, needs and current resources and future projections for the municipality.

With regard to the dimensional (variable and indicator) analysis that guided the approach to social reality, we gathered data concerning: (1) The profile of the users of social services in primary care: gender, age, nationality and residency; (2) Development of the social needs of the users (number – four year development) breakdown by type: information and guidance to access the social services system and other social protection systems, disturbance of adequate personal/family by convivial imbalances, limitation of personal autonomy and/or situations of dependency, social integration, employment and/or school, lack of means to cover basic needs due to lack of proper income; (3) Development of applied resources (number of people receiving benefits – four year development) breakdown by type: information, guidance, assessment, resource mobilization and processing system of social services and other social protection systems, social unit support, home care, telecare, performance of the national agency, alternative accommodation, actions of prevention and social and economic benefits; (4) Current status, future projection and perception of social services from the municipality’s strategic actors: the users’ profiles, needs, allocated resources and proposals for action.

In terms of the geographical and temporal sampling decisions, the units of analysis were the citizens of the municipality of Beniel – Murcia (Spain) who were brought to the attention of the social services system in the period between 1996 and 2011. This group totaled 4,562 people, but future visions of social services in the area were also constructed from identified needs and the information provided by the local strategic actors. Therefore this research is linked to the entire population and not a sample of it, when both the individual users and their households are considered, and this is linked to the needs presented/identified and the services/resources offered. The relational dimensions that were studied are systematized in the following table and graph.

Table 1. Distribution of relational dimensions studied in the period from 1996 to 2011

DIMENSIONS	USERS				
	1996-1999	2000-2003	2004-2007	2008-2011	TOTAL
USERS	683 (15%)	814 (18%)	970 (21%)	2095 (46%)	4562 (100%)
SOCIAL NEEDS	850 (14%)	1075 (18%)	1306 (22%)	2804 (46%)	6035 (100%)
RESOURCES	1066 (12%)	125 (14%)	1572 (18%)	4961 (56%)	8894 (100%)

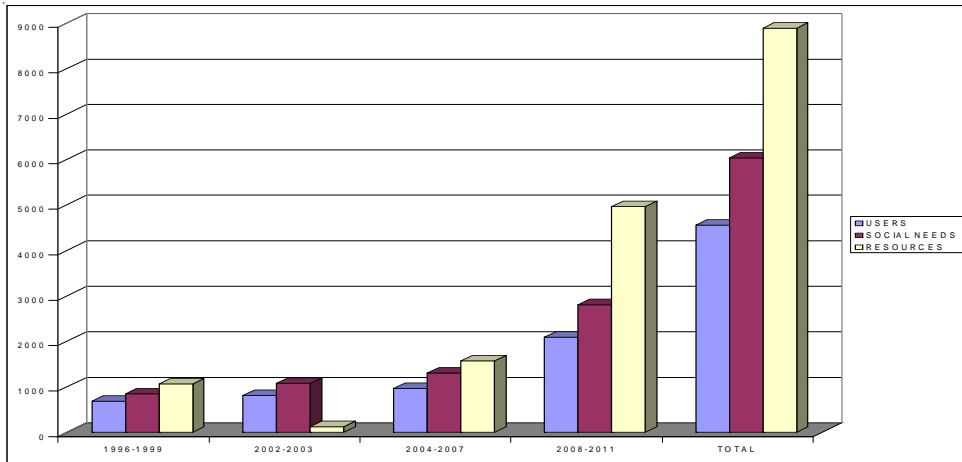


Figure 1. Distribution of relational dimensions studied in the period from 1996 to 2011

The research is explanatory, comparative and mixed, using techniques for collecting quantitative and qualitative data from three dimensions: longitudinal (1996-2011), and cross-sectional projection of future trends from the construction of future scenarios (linked in a two-year time frame ensuring a projected scenario equally understood by all players). In conclusion, this research examined the evolution of the past, present and future of social services in the municipality

Furthermore, in consideration of the complexity of the phenomenon under study, various techniques were used during data collection in order to increase the efficiency of the triangulation, namely the social profile of the participants and in-depth interviews with strategic informants for cross-analysis and projection/trends contrasted with data from the social information. This methodologically differentiated approach to the study subjects allowed achievement of the set objectives as well as testing of the research hypothesis.

The social profile is a validated, nationally accredited working tool that records the demographic information, needs and resources of all users of social services in primary care. It therefore meets criteria of authenticity, credibility, representativeness and meaningfulness of data and also allows access to a large volume of information, enabling a comparative longitudinal and cross-sectional analysis. The most appropriate instrument for data collection that guides the empirical work is therefore to have reliable information about each and every member of the study population, in terms of the dimensions and variables under study, across the entirety of the period to be studied. These methods provide uniform, homogeneous and verified data, which enables compliance with research objectives with maximum reliability and scientific validity, whilst making use of all the information from that source that match the object of this investigation. Based on

the temporal scope of the investigation (16 years), it seemed appropriate to group data by quadrennial stratification (1996-99/2000-03/2004-07/2008-11), so that each interval covers the same length of time. This decision was also relevant in relation to the study hypothesis as the time periods were linked to temporary outages that occurred when substantial changes in the social and policy context affected social policies in Spain (e.g. the Aliens Act, the Dependency Act, the economic crisis). Moreover, the use of in-depth interviews enables qualitative analysis focused on the current situation and trends of social services (profiling of needs and resources) from the key players in that area. We analyzed interview responses from a population of strategic stakeholders and key informants to ensure that the sample included the many various elements of the population in proportions that reflected reality. The sampling design adopted followed a strategic quota that was stratified according to the different categories/characteristics of the populations: politicians, service providers from all areas (general social services, as well as job placement specialists) and associations representing the social initiative sector (general care, women and the elderly).

Data collection from in-depth interviews was carried out simultaneously with the social profiling process in order to avoid possible “contamination” in speeches. For analysis of data from the social profiles, multivariate analysis, quantitative techniques and comparative descriptive statistics were made use of, for example frequency distribution tables and percentages and measures of central tendency and dispersion. For analysis of the information gathered by in-depth interviews, qualitative techniques were used that allowed content analysis through identification of similarities and differences among stakeholders (both between subjects and by category).

Longitudinal analysis (1996-2011), cross-sectional analysis (2012) and trends/projections

Below are the analyses of longitudinal data (1996-2011) and cross-sectional dimensions of analysis gathered through social profiling and from qualitative content analysis of in-depth interviews with key informants. This joint research methodology allowed us to produce longitudinal, cross-sectional and trend-comparing quantitative and qualitative data that bring us greater understanding of both the present and likely future reality.

During the period from 1996-2011 the number of users of municipal social services amounted to 4,562 people and 3,325 households, representing a ratio of 1.4 user / family attended; this number remained constant throughout the study period. It should be noted that the longitudinal analysis showed an uneven distribution, as 46% of people attending from 1996 to 2011 were users in the last period (2008-11), which represents an increased of 22 points over the preceding period (2004-07). A similar effect was seen for households, with 44% presenting in the

final four-year period (a differential of 22% over the previous period). In 2011 the number of users rose to 961 and the number of households hit 708, representing 21% of all the people and households served during the period 1996-2011 and 46% of those who accessed services between 2008-2011.

The data demonstrate that Social Services are consolidated and standardized among the population, considering the progressive increase in the number of people served, which increased exponentially in the most recent period (and within this in the last year) in line with the context of social and economic impact of the crisis.

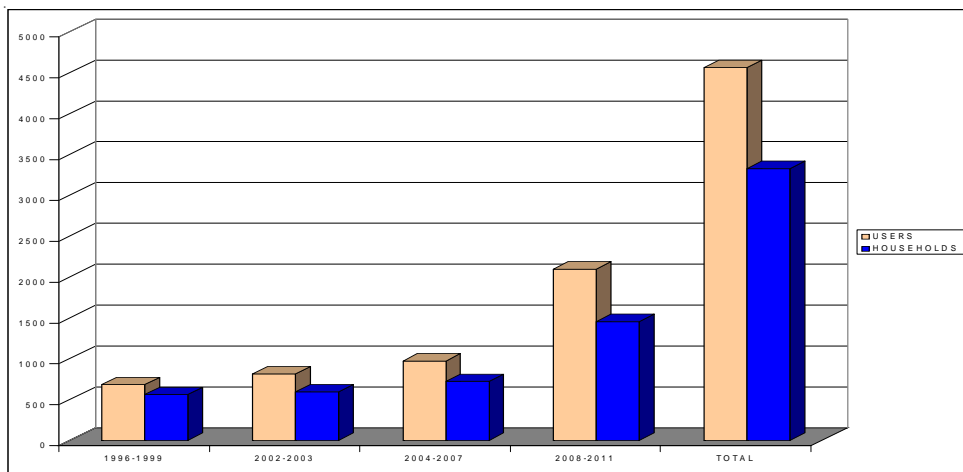


Figure 2. *Distribution of households and people who used social services in the period from 1996 - 2011*

Profile of the people and families using services

The 61% of the people served were women and 39% were men, a distribution that remained constant over the study period (1996-2011) with the exception of the interval from 2008 to 2011 where we noticed a reduction of 5% in the number of women, showing a change trend in the gender profile of the users of social services. These data are in line with information obtained from in-depth interviews that although service users are predominantly female at present and this is expected to continue in the future, there is also a perception that men are using the system more frequently.

“Mainly and, especially at first, usually women, [...], the attending [...] with claims of their own, or a member of the family [...].” (E9)

"[...] We have found, though to a lesser degree, an increase in men [...] who have lost their jobs." (E7)

This change in recent years responds to an increase in the number of immigrants (mostly men) and locals who need personalized attention after being affected by unemployment in the context of the recent economic crisis. It should be further noted that the progressive normalization of social service use and increasing female employment are variables that also affect this change in trend. Regarding the variable of age, in 2011 26% of the beneficiaries were aged between 30 and 44, 18% were aged over 75, 15% 0-14 years, 15% 45-59, 14 % between 15 and 29 years and 12% between 60 and 74 years.

Table 2. *Distribution of people using sex and age in 2011*

AGE	WOMEN (%)	MEN (%)	TOTAL (%)
0 – 14	13.7 %	17.1 %	15.2 %
15 – 29	11.6 %	16.7 %	13.7 %
30 – 44	23.7 %	29.9 %	26.3 %
45 – 59	14.5 %	16.2 %	15.2 %
60 – 74	13.6 %	9.1 %	11.7 %
more than 75	22.9 %	11.0 %	17.9 %
TOTAL	100 %	100 %	100 %

Key informants said that people in adulthood (in the groups aged between 30 and 60 years) and youth (López, 2012) are the age groups where people are more likely to be people using services, both today and in the future, because the current specific circumstances that affect them more. Issues that multiple informants particularly stressed included the perception of a greater trend towards young people using the system in situations of difficulty (unemployment, job insecurity, economic collapse, etc.).

"An increasing number of young people who need help." (E2)

"I also believe that younger people attend [...] without academic or professional qualification." (E8)

Regarding nationality it was found that the proportion of users of Spanish nationality has decreased since 2004. In 2011, 60% of the people served were Spanish and 40% came from other countries, especially African countries. The data show a gradual decrease of users of Spanish nationality and an increase in foreign nationals, for example people from Morocco, Ecuador, Ukraine and Mali, consistent with patterns of migratory flow in Spain. Key informants report that those that access and make use of the municipal social services are now primarily immigrants and predict that this will continue in the future.

“The immigrant population has a significant presence.” (E6).

This perception contrasts with the objective data on the social profile of registered users, where Spanish nationals still predominate over foreign nationals, but it appears that there is a progressive trend towards an increased need for attention from social services by those of other nationalities. To conclude the profile of the users, in-depth interviews tend to produce the opinion that maintaining the current context of economic recession, along with the structural changes expected from the various administrations that have implied a decline in social spending, will produce a change in the number and, therefore, in the profile of the users of the social service system. This has become known as the “democratization of poverty”.

“I think people who have never sought help from social services before will now have to go. He who is not seen out of the crisis [...] is going to be poor.” (E3)

“[...], But if the situation does not improve, it is possible that the population groups served may expand to include individuals and families who so far have not been users of social services.” (E6)

Claims and social needs

In the period 1996-2011, the number of users requiring a professional review due to their situation of need totaled 6035, assuming a ratio of 1.32 reviews per user per year. The greatest concentration of needs (46.5%) of the entire period was found for the years 2008-11.

Table 3. *Distribution of users by reference category in the period from 1996-2011.*

REFERENCE SECTOR	USERS				
	1996-1999 (%)	2000-2003 (%)	2004-2007 (%)	2008-2011 (%)	TOTAL (%)
Families	23.4 %	16.3 %	9.3 %	12.1 %	13.9 %
Infants	2.8 %	11.3 %	6.6 %	1.4 %	4.5 %
Youths	0.0 %	0.6 %	0.1 %	0.7 %	0.4 %
Women	1.9 %	4.8 %	3.2 %	6.4 %	4.8 %
Senior citizens	28.5 %	20.6 %	42.4 %	34.6 %	32.8 %
Persons with disabilities	35.3 %	41.9 %	34.8 %	22.3 %	30.4 %
Prisoners	0.1 %	0.1 %	0.1 %	0.1 %	0.1 %
Ethnic minorities	0.3 %	0.0 %	0.1 %	0.0 %	0.1 %
Socially-excluded individuals	3.8 %	1.9 %	0.0 %	0.0 %	1.0 %
Drug addicts	1.0 %	1.2 %	0.6 %	0.2 %	0.6 %
Refugees and Asylum seekers	0.1 %	0.0 %	0.0 %	0.0 %	0.0 %
Emigrants	0.1 %	0.1 %	0.1 %	0.0 %	0.1 %
Psychiatric patients	0.1 %	0.1 %	0.0 %	0.0 %	0.0 %

Terminal patients	0.1 %	0.3 %	0.1 %	0.0 %	0.1 %
Others	2.5 %	0.5 %	0.1 %	0.5 %	0.7 %
Immigrants	0.0 %	0.3 %	2.5 %	21.7 %	10.5 %
TOTAL	100%	100%	100%	100%	100%

Over the period 1996-2011, 33% of users required services addressing a major need related to the reference category elderly, followed by 30% people with disabilities, 14% family, 10% immigrants and 5% women. Longitudinal analysis found that the disability sector grew significantly in the period 2000-2003 and the elderly over the period 2004-2007 and immigrants in the period 2008-2011. The latter ranked third in 2008-2011, immediately after people with disabilities. This increase in needs associated with immigration marks a trend that matches the profile discussed above. It should also be noted that the increase in needs of people with disabilities between 2000 and 2003 coincides with the implementation of policies such as the family allowance for dependent children. Meanwhile, the number of cases dealing with issues with the elderly increased between 2004 and 2007 (when it doubled), presumably in relation to the implementation of Law 39/2006 for the promotion of personal autonomy and care for dependents.

As for future prospects, the information obtained from our in-depth interviews suggests that the system will soon find itself incorporating new people requiring professional intervention of social services; again these will be the elderly, young people and immigrants, but for reasons related to the current economic crisis.

“[...] They will be incorporated as a collective of pensioners paid by the state, unable to meet rising drug payments and generally in need of financial help from social services.” (E3)

“[...] In the next two years the population groups that will be most affected will be the young, because of the difficulty of finding a first job, as well as immigrants [...] some work without a contract and cannot ask for unemployment benefits [...].” (E4)

In terms of the categorization of needs over the period 1996-2011, 68% of the users required help to gain adequate access to information resources, 17% with adequate staff support, 9% in the absence of funds or resources to cover basic needs and the remaining 6% with social integration.

Table 4. *Distribution of services sought by users in the period from 1996-2011.*

SOCIAL NEEDS	USERS				
	1996-1999 (%)	2000-2003 (%)	2004-2007 (%)	2008-2011 (%)	TOTAL (%)
Information on access to resources	678 (79.8 %)	767 (71.3 %)	742 (56.8 %)	1894 (67.5 %)	4081 (67.6 %)
Adequate staff support	89 (10.5 %)	185 (17.2 %)	393 (30.1 %)	345 (12.3 %)	1012 (16.8 %)
Social integration	58 (6.8 %)	45 (4.2 %)	46 (3.5 %)	212 (7.6 %)	361 (6.0 %)
Lack of means to cover basic needs	25 (2.9 %)	78 (7.3 %)	125 (9.6 %)	353 (12.6 %)	581 (9.6 %)
TOTAL	850 (100 %)	1075 (100 %)	1306 (100 %)	2804 (100 %)	6035 (100 %)

Note that the consultations associated with lack of resources to cover basic needs and social integration/work and school are the ones that were above average over the period 2008-2011, in line with the economic difficulties and extra need for social services experienced by people and families in the wake of the financial and economic crisis. This increase is related to those needs, in turn, with increasing unemployment, bankruptcy and social exclusion, amongst other issues. Key informants identified lack of resources to cover basic needs (primarily economic resources), adequate home support for individuals/families (mainly dependent situations) and integration (mainly labor) as major social issues.

“Today, families and the general public are having serious difficulties in the fulfillment of basic needs [...].” (E7)

“In general, most of the people who go to social services require financial assistance, given the current situation [...].” (E6)

Benefits / resources - system responses to social needs

Over the period 1996-2011 the number of users that contacted services in situations of need totaled 8894, assuming a ratio of 1.94 applied resources per user per year, i.e. each user benefited from an average of two resources. It was found that applications for resources were mainly made in the period 2008-2011 (56% of those made throughout the study period), reaching a ratio of 2.4 applied resources per user per year. When analyzing the year 2011, it was found that the ratio of resources per user per year (1.75) dropped by 0.6 points compared to the average for the period 2008-2011, which confirms a reduction of available resources in the social service system in line with the general status of social services in Spain (State Association of Directors and Managers of Social Services, 2012). At the same time, key informants have also reported similar findings.

“[...] We have serious difficulty providing social resources to offset these shortcomings and difficulties, especially if we refer to financial benefits.” (E7)

“[...] There have been significant cuts in social resources.” (E1)

“I guess the crisis [...] will result in the overloading of the social services system, as demand rises [...] and if you keep the general trend of a reduction in services, will end leaving the UTS as a management resource without any real possibility of intervention.” (E9)

“The current situation makes no guarantee to maintain current coverage.” (E6)

As shown in the following table, over the period 1996-2011, 40% of the resources doled out involved giving information, guidance, assessment and mobilization, 26% involved social unit support and home care, 19% involved additional resources to cover basic needs and 13% involved vulnerability and social integration. Note that the related benefits alternative accommodation throughout the period of not less than 1%.

Table 5. Distribution of basic benefits received by people over the period from 1996-2011.

BASIC BENEFITS	USERS				
	1996-1999 (%)	2000-2003(%)	2004-2007 (%)	2008-2011 (%)	TOTAL (%)
Information/guidance/assessment/mobilization	560 (52.5 %)	509 (39.3 %)	633 (40.3 %)	1883 (38.0 %)	3585 (40.3 %)
Social unit support and home care	105 (9.8 %)	298 (23.0 %)	548 (34.9 %)	1371 (27.6 %)	2322 (26.1 %)
Benefits/alternative accommodation	6 (0.6 %)	13 (1.0 %)	29 (1.8 %)	11 (0.2 %)	59 (0.7 %)
Vulnerability and social integration	8 (0.8 %)	12 (0.9 %)	15 (0.9 %)	1164 (23.5 %)	1199 (13.5 %)
Resources to cover basic needs	387 (36.3 %)	463 (35.8 %)	347 (22.1 %)	532 (10.7 %)	1729 (19.4 %)
TOTAL	1066 (100 %)	1295 (100 %)	1572 (100 %)	4961 (100 %)	8894 (100 %)

Both social integration and social unit support were received at rates above average in the period 2008-2011, doubling in the first case. In contrast to this, there was a decrease of nearly 50% between the average and the period 2008-2011 for benefits covering basic needs, where we have previously found that objective need has increased over the same period by a third. This confirms that the requirement of basic needs has not been fulfilled at a rate that matches application to these resources.

Provision of information and guidance

Over the whole period of study (1996-2011), 63% of users benefited from the provision of information and guidance on system resources for social services, while 37% received information on other protection systems. Our longitudinal analysis showed that while information and guidance on recognition of the degree of disability increased over time, information on economic performance of the autonomous community of non-contributory pensions suffered a gradual decline after 2004. It is noteworthy that dependency information in the final study period represents 9.7%, after being nonexistent in prior periods. Information on financial benefits from local city government and non-profits also increased exponentially in the last interval, which was well above the average of the whole period under investigation.

Table 6. *Distribution of information resources and Social Services Systems accessed in the period from 1996-2011.*

SERVICES AND BENEFITS	USERS				
	1996-1999 (%)	2000-2003 (%)	2004-2007 (%)	2008-2011 (%)	TOTAL (%)
Home care	13 (4.0 %)	1 (0.2 %)	2 (0.4 %)	1 (0.1 %)	17 (0.8 %)
Family unit support	13 (4.0 %)	1 (0.2 %)	2 (0.4 %)	7 (0.7 %)	23 (1.0 %)
Alternative accommodation	4 (1.2 %)	2 (0.5 %)	3 (0.6 %)	5 (0.5 %)	14 (0.6 %)
Social integration	1 (0.3 %)	0 (0.0 %)	3 (0.6 %)	2 (0.2 %)	6 (0.3 %)
Noncontributory pension	70 (21.6 %)	97 (24.9 %)	88 (16.2 %)	108 (10.9 %)	363 (16.1 %)
Economic benefits from the Institute for Social Action Murcia (IMAS)	74 (22.8 %)	86 (22.0 %)	78 (14.4 %)	127 (12.8 %)	365 (16.2 %)
Economic benefits from Beniel City Hall	24 (7.4 %)	10 (2.5 %)	5 (0.9 %)	63 (6.3 %)	102 (4.5 %)
ONG	5 (1.5 %)	2 (0.5 %)	1 (0.2 %)	56 (5.6 %)	64 (2.9 %)
Dependency	0 (0.0 %)	0 (0.0 %)	0 (0.0 %)	96 (9.7 %)	96 (4.3 %)
Another benefits from the Social Service System	13 (4.0 %)	5 (1.3 %)	15 (2.7 %)	26 (2.6 %)	59 (2.6 %)
Tax exemption	8 (2.5 %)	2 (0.5 %)	4 (0.8 %)	16 (1.6 %)	30 (1.3 %)
Large family allowances	30 (9.2 %)	15 (3.9 %)	5 (0.9 %)	6 (0.6 %)	56 (2.5 %)
Family and child protection	0 (0.0 %)	4 (1.0 %)	7 (1.3 %)	12 (1.2 %)	23 (1.0 %)
Thermal bath program	13 (4.0 %)	28 (7.2 %)	61 (11.2 %)	66 (6.6 %)	168 (7.5 %)

REALITIES IN A KALEIDOSCOPE

Seniors' vacation program	0 (0.0 %)	6 (1.6 %)	66 (12.1 %)	14 (1.4 %)	86 (3.8 %)
Recognized degree of disability	57 (17.5 %)	131 (33.5 %)	201 (37.1 %)	384 (38.6 %)	773 (34.3 %)
Women's services	0 (0.0 %)	1 (0.2 %)	1 (0.2 %)	6 (0.6 %)	8 (0.3 %)
TOTAL	325 (100 %)	391 (100 %)	542 (100 %)	995 (100 %)	2253 (100 %)

The provision of information and guidance for other social protection systems was primarily related to justice (49%), followed by social security (30%), health (8%), education (5%), housing (4%) and employment (3%), broken down as detailed in table below.

Table 7. *Distribution of people using the Social Protection Systems for basic provision of information on access and other resources over the period from 1996 to 2011*

SERVICES AND BENEFITS	USERS				
	1996-1999 (%)	2000-2003 (%)	2004-2007 (%)	2008-2011 (%)	TOTAL (%)
SOCIAL SECURITY (30.4 %)					
Disability pension	24 (15.3 %)	8 (9.4 %)	5 (14.3 %)	13 (10.2 %)	50 (12.4 %)
Widow's pension	16 (10.2 %)	12 (14.1 %)	1 (2.9 %)	11 (8.7 %)	40 (9.9 %)
Retirement pension	17 (10.8 %)	6 (7.0 %)	3 (8.6 %)	7 (5.5 %)	33 (8.2 %)
Orphan's pension	2 (1.3 %)	3 (3.6 %)	0 (0.0 %)	9 (7.1 %)	14 (3.5 %)
Pension for family	30 (19.1 %)	1 (1.2 %)	2 (5.7 %)	4 (3.1 %)	37 (9.1 %)
Disabled child benefit	30 (19.1 %)	43 (50.6 %)	6 (17.1 %)	48 (37.8 %)	127 (31.4 %)
Others	38 (24.2 %)	12 (14.1 %)	18 (51.4 %)	35 (27.6 %)	103 (25.5 %)
TOTAL SOCIAL SEC.	157 (100 %)	85 (100 %)	35 (100 %)	127 (100 %)	404 (100 %)
JUSTICE (49.1 %)					
Administrative resources	14 (70.0 %)	2 (66.7 %)	0 (0.0 %)	18 (2.9 %)	34 (5.2 %)
Access to legal aid	4 (20.0 %)	1 (33.3 %)	7 (100 %)	26 (4.2 %)	38 (5.8 %)
Civil Administration Documentation	2 (10.0 %)	0 (0.0 %)	0 (0.0 %)	580 (92.9 %)	582 (89.0 %)
TOTAL JUSTICE	20 (100 %)	3 (100 %)	7 (100 %)	624 (100 %)	654 (100 %)
HEALTH (8.3 %)					
Health system benefits	26 (89.7 %)	14 (70.0 %)	30 (93.8 %)	27 (90.0 %)	97 (87.4 %)
Health care centers	3 (10.3 %)	6 (30.0 %)	2 (6.2 %)	3 (10.0 %)	14 (12.6 %)
TOTAL HEALTH	29 (100 %)	20 (100 %)	32 (100 %)	30 (100 %)	111 (100 %)

EDUCATION (5.3 %)					
Scholarships	22 (95.7 %)	4 (80.0 %)	3 (100 %)	23 (57.5 %)	52 (73.2 %)
Education system benefits	1 (4.3 %)	1 (20.0 %)	0 (0.0 %)	17 (42.5 %)	19 (26.8 %)
TOTAL EDUCATION	23 (100 %)	5 (100 %)	3 (100 %)	40 (100 %)	71 (100 %)
HOUSING (3.9 %)					
Application for social housing	4 (80.0 %)	1 (25.0 %)	0 (0.0 %)	1 (3.0 %)	6 (11.5 %)
Housing benefit	1 (20.0 %)	3 (75.0 %)	10 (100.0 %)	32 (97.0 %)	46 (88.5 %)
TOTAL HOUSING	5 (100 %)	4 (100 %)	10 (100 %)	33 (100 %)	52 (100 %)
EMPLOYMENT (3.0 %)					
Regional employment service (SEF) economic benefits	1 (100 %)	1 (100 %)	1 (25.0 %)	22 (64.7 %)	25 (62.5 %)
Training benefits	0 (0.0 %)	0 (0.0 %)	3 (75.0 %)	12 (35.3 %)	15 (37.5 %)
TOTAL EMPLOYMENT	1 (100 %)	1 (100 %)	4 (100 %)	34 (100 %)	40 (100 %)
TOTAL	235 (100%)	118 (100%)	91 (100%)	888 (100%)	1332 (100%)

Social unit support and home help

Throughout the entire period, 26% of the people using the system benefited from social unit support and home help. It should be noted that in the most recent period, enforced dependency benefits are higher than the social unit support and home help offered by a “traditional” system of social services. Recently there has been an exponential increase in social unit support proceedings, which were most recently at 92%, highlighting that legal and family intervention, family support from UTS and psychological support are on the increase in the face of declining aid benefits at home (6%). The trend is that current benefits of telecare and home care will be increasingly replaced by that granted from the dependency system, which means that it will only be provided to dependents, with no room for another profile.

This is in agreement with the information provided by key informants, which highlights the relevance of applied resources in situations of dependence, as well as when social support workers become involved.

“In times of economic and personal crisis, people flock to social services looking for socially and psychological aid.” (E4)

“The use of services by more average families and even families with a medium-high educational level, will have to be coordinated to not only provide economic aid but also support the whole person and family-level relationships [...].” (E8)

Provision of alternative accommodation

63% of users who were beneficiaries of this alternative accommodation provision were elderly, 20% youths, 12% disabled and 5% women. Longitudinal analysis showed there has been a decrease in resources provided since 2008.

Provision of vulnerability prevention and social integration

An analysis of the vulnerability prevention and social integration services revealed that 83% of the actions are related to immigrants, especially in terms of integration, and 11% related to the preparation of technical reports/social reports designed to promote the integration of people in difficulty (to insert foreign reports, court reports, etc.).

Table 8. Distribution of users utilizing services for the purposes of vulnerability prevention and integration in the period from 1996-2011

SERVICES AND BENEFITS	USERS				
	1996-1999 (%)	2000-2003 (%)	2004-2007 (%)	2008-2011 (%)	TOTAL (%)
Technical reports /social reports/court reports	4 (50.0 %)	4 (33.4 %)	10 (66.7 %)	114 (9.8 %)	132 (11.0 %)
Foreign information documentation	0 (0.0 %)	0 (0.0 %)	0 (0.0 %)	578 (49.7 %)	578 (48.2 %)
Foreign documentation procedures	0 (0.0 %)	0 (0.0 %)	0 (0.0 %)	424 (36.4 %)	424 (35.4 %)
Social Integration	1 (12.5 %)	1 (8.3 %)	1 (6.7 %)	8 (0.7 %)	11 (0.9 %)
Labor integration	1 (12.5 %)	6 (50.0 %)	4 (26.6 %)	29 (2.5 %)	40 (3.3 %)
School integration	2 (25.0 %)	1 (8.3 %)	0 (0.0 %)	11 (0.9 %)	14 (1.2 %)
TOTAL	8 (100 %)	12 (100 %)	15 (100 %)	1164 (100 %)	1199 (100 %)

Longitudinal analysis found that 97% of the actions of the whole period were made between 2008 and 2011, which may correspond with increasing social problems that require professional assessment and intervention oriented integration/inclusion in social situations in accordance with the context of social exclusion as described by the current research literature (Amnesty International, 2011; Laparra and Perez, 2011; Lopez, 2012b; Garcia and Ramirez, 2012). Our key informants also perceived this as important, both now and in the future in terms of resources for job placement and expectations of increased beneficiaries.

“Due to the lack of jobs people need more resources that promote integration and job training.” (E4)

Economic benefits

In terms of financial benefits, 56% are handled by the Autonomous Community of the Region of Murcia and 44% by the city. Regarding the former, 50% are one-off payments to support the purchase of equipment for personal and domestic use, rental housing and urgent needs, followed by non-contributory pensions (38%), IMI or Basic Income and regular aid with 12%

Table 9. Distribution of people accessing economic benefits (by type) in the period from 1996-2011

ECONOMIC BENEFITS	USERS				
	1996-1999 (%)	2000-2003 (%)	2004-2007 (%)	2008-2011 (%)	TOTAL (%)
AUTONOMOUS COMMUNITY OF THE REGION OF MURCIA (56.0 %)					
Noncontributory pension	212 (73.9 %)	47 (31.1 %)	53 (25.1 %)	59 (18.5 %)	371 (38.3 %)
Basic Income / IMI	7 (2.4 %)	0 (0.0 %)	0 (0.0 %)	61 (19.1 %)	68 (7 %)
Regular aid (IMAS)	18 (6.3 %)	20 (13.2 %)	9 (4.3 %)	1 (0.3 %)	48 (5 %)
Single payment aid (IMAS)	50 (17.4 %)	84 (55.7 %)	149 (70.6 %)	198 (62.1 %)	481 (49.7 %)
TOTAL A.C.R.M.	287 (100 %)	151 (100 %)	211 (100 %)	319 (100 %)	968 (100 %)
GRANTED BY THE CITY (44.0 %)					
Municipal regular aid	10 (10 %)	1 (0.3 %)	0 (0.0%)	139 (65.2 %)	150 (19.7 %)
Social emergency aid	45 (45 %)	233 (74.7 %)	101 (74.3 %)	60 (28.2 %)	439 (57.7 %)
Dining scholarships	1 (1 %)	77 (24.7 %)	34 (25.0 %)	13 (6.1 %)	125 (16.4 %)
Benefits in kind	44 (44 %)	1 (0.3 %)	1 (0.7 %)	1 (0.5 %)	47 (6.2 %)
TOTAL CITY HALL	100 (100 %)	312 (100 %)	136 (100 %)	213 (100 %)	761 (100 %)
TOTAL 1729 (100 %)					

In relation to municipal services, 58% are social emergency aid, 20% regular aid, 16% dining scholarships and 6% in-kind aid. Key informants considered economic benefits as the most important and necessary service provided, both today and in the future. With spending cuts affecting those who make use of the system, this highlights the benefits that must be applied in the face of economic downturn.

“More financial resources are needed to support people in need.” (E1)

Conclusions

The results of this empirical work confirm the hypotheses that guided the research, namely, that evolution and trends of the profile and needs of the users and the current and future institutional responses to the basic structure of social services in the municipality have been modified because of the social and institutional context and regulatory development of regional and national social policies related to social services. During the past 16 years the services in this region have served 4,562 people and 3,325 family units, representing 41.2% of the population registered in the municipality, which verifies that the municipal social services are consolidated and standardized among the population, both from the citizen's perspective and that of the institutions and social resources. Moreover, the data provide a greater understanding of the needs and resources that should be offered by the system, which is demonstrated by a progressive decrease of needs and related interventions (derived) from other social protection systems.

This research shows that the number of people in need of care and provision of social services increased gradually, confirming an exponential increase caused by the economic crisis. So just one year, namely 2011, accounted for 21% of all the users dealt with over the 16-year period, and 50% can be accounted for in the last four years. This data is indicative of the impact the crisis has had on the citizens of the municipality, describing a situation that is also happening in the social services on a national level according to other studies on the subject (Amnesty International, 2011; Gallego and Subirats, 2011, Lima, 2011, 2012; Barriga, 2012; Garcia and Ramirez, 2012; Roldan and Castaner, 2012; Pastor, 2012a, 2012b, and the Managers Association of Directors of Social Services, 2012, among others). It should not be forgotten that when we refer to users, we are also talking about families and couples, meaning that we can assume that the total number of people affected is greater than what we have described here. Thus, it appears that the increase in the number people who use social services has increased as a result of this temporary economic and financial crisis.

The typical profile of a user is would be a woman, a Spanish national residing in the village and aged between 30 and 60 years. This profile is far from static dynamic, however as it is changing and shows a tendency to a progressive, albeit slow, gender equality in access, use and enjoyment of social benefits. There are multiple reasons for this, among others, the increase in the number of immigrant users, mostly men, and men with increased needs in general. In addition to these factors we must add that men have been more affected by unemployment situations than women, so it is them who go to social services to apply for benefits and assistance, especially in consideration of the increased numbers of working women. Furthermore, as noted above, the progressive normalization of social services has started to ensure that they are not perceived as “degrading”, “shame-

ful” or “marginal” for those who “use” them, but are instead a resource of the municipality for any citizen in a state of hardship. It can be imagined how this change might affect men who gradually begin to access services. We must not forget that, usually, the user presents an often difficult situation that is not only directly linked to them individually, but with their household and relationships.

Research also shows that the number of cases presented has been affected by the economic crisis, which caused a substantial increase in the number of users. But by deepening the scope of needs, we found that the main need that motivates interventions has been changing over time. Immigrants, the elderly and the disabled are the groups that have the most contact with, diagnosis by and intervention from the social services, although the priority of these groups has changed over time. Immigrants have made up the group primarily seeking out social services in recent years, which relates to the current context, since they are suffering the effects of the economic crisis more acutely as they were already in situations of increased vulnerability (precarious labor situations, insufficient family support, housing deficits, unstable income, etc.) and exist on the borders of social protection systems. In the current economic crisis and progressive disinvestment of protection systems, people at the margins seem to be doomed to the abyss of poverty, exclusion and social vulnerability. This is stated, in turn, to highlight that most needs are related to a lack of means to cover basic needs, or to problems with social integration. These issues seem key today, commensurate to the increase in cases of unemployment, personal bankruptcy and social exclusion. Furthermore, longitudinal analysis of the reference population shows also a direct link to it on the implementation of services and benefits designed to, which reveals its relation to policy development.

The number of resources/benefits applied in situations of need amounted to 8894, representing 1.94 applied resources per user per year, i.e. each user benefited from an average of two resources. It should be noted that in the current crisis this ratio fell to 1.75 applied resources per user per year (having reached an average of 2.4) due to the progressive decline in the range of services offered effectively to people. Services concerning vulnerability prevention and social integration, as well as coverage of basic needs, are those that have suffered a considerable increase that matches the timeline of the current crisis. The former are essentially technical in nature and we confirm the increased needs of people linked to their social integration. By contrast, the second – economic – benefits linked to previous techniques have been substantially depleted, which must at some point have an impact on the effectiveness of the actions of these techniques. This situation contrasts with the decline over the past year of 50% of the benefits related to the provision of basic needs, which seems to be happening precisely when these needs are at their greatest level. This leads us to say that the crisis is affecting people two-fold, on one hand, by putting them in situations of exclusion and deprivation and, on the other, through the absence of protection policies for such situations, situations capable of causing “deep” and “structural violence”. Therefore,

we have a system with human capital that is currently under funded in terms of current and future social needs. This system of public disinvestment and rampant increase of needs means that many users are having to attend non-profit initiatives to meet their most basic subsistence needs through benefits in kind, charity and alms. This situation reveals a system that is very quickly becoming weakened by public spending cuts, which negatively affect the development of social services, putting at risk, as noted by Pastor (2011), the sustainability of the system.

This situation not only affects the welfare system of the municipality but is linked to a context of degradation of public social services on a grander scale in the Autonomous Community of the Region of Murcia. Thus, the Report on Development of Social Services (Garcia & Ramirez, 2012) points out that the region of Murcia is ranked number 14 (of 17 regions) in the development of social services, with a rating of “irrelevant” and an overall score of 3.6 out of 10. The indicators examined in that study highlighted a lack of a catalog of rights, a lack of planning and management of the sector, expenditure per capita below the national average, and so on. The situation of marked weakness of the regional social services puts us in a very precarious situation in the context of public spending cuts in social protection systems in general and social services in particular.

But beyond figures, the fact is that inadequate/insufficient satisfaction of present needs impacts negatively on the quality of life of future generations, affecting social development. Analyzing the application of benefits along time, we see clearly that it is closely linked to the specific implementation of these sectors and target population, being particularly significant the matters related to the dependency system. These benefits decrease as the system of social services itself does. There is, as in the studies concerning the application of dependence (Rodriguez, 2011; Association of State Directors and Managers of Social Services, 2012; Observatory Unit, Ramirez, 2012), a belief that most of the resources applied by the system correspond to economic benefits of care in the detriment of home help and/or residential services, a general trend that was proposed in the application of Law 39/2006. In this sense, the changes introduced by such laws in the recent budget year are directly affecting the welfare system and in turn household economies.

In summary, the results of the research confirm the hypothesis and indicate that the evolution and trends of the profile and needs of the users and the current and future institutional responses to the basic structure of social services of the municipality have changed in the social and institutional context of social policy development related to social services at both regional and national levels. Therefore, given the current crisis and public spending cuts, we must revitalize the system by enacting laws to protect social services and therefore the rights of citizens; we should strive to maintain and increase the budgetary effort to increase both coverage and amount of benefits associated with provision of basic needs.

Locally these proposals are also applicable in the form of micro-developments and the organization of more efficient use of scarce resources.

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