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## Summaries in English

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### Summaries

#### The prestige of ministerial departments

by Uriel Rosenthal a.o.

The prestige of ministerial departments is good for much and intense debate in the Netherlands, but till now it has not been the subject of empirical research. This article presents a conceptual framework for the study of departmental prestige and offers the results of a survey among high-ranking bureaucrats with regard to the attribution of prestige to the ministerial departments.

In this article prestige is conceptualized in terms of a diffuse reputation of influence. It pertains to highly subjective orientations. In addition, it is as difficult to trace the specific factors leading to prestige as it is to specify its pay-offs. In the conceptual framework prestige is presented as a linking pin between two potentially differing sets of resources.

For instance, prestige may be the result of observable or reputed charisma; it may produce an increase in quite different resources.

The survey yields revealing opinions on the prestige high-ranking bureaucrats ascribe to close and distant 'colleagues'. The Treasury, Agriculture, and Housing & Environmental Affairs are the top three on the prestige ladder; the Treasury and Housing & Environmental Affairs have been very successful in gaining prestige. At the bottom of the ladder one finds the Ministries of the Interior, Health & Welfare, and Commerce. Commerce and especially Health & Welfare have suffered a loss of prestige.

The prestige scores and the attendant arguments suggest the following idealtypic high-prestige ministerial department: clientele-oriented, with political leverage and an effective mix of good internal and external management. Low-prestige departments seem to fail in producing substantive policies; they are lacking strong political and bureaucratic leadership.

## The moulding of minds and avoidance or effectiveness and coherence: an intermediate evaluation of developments in the planning of health care facilities

by Arnold J.A. Godfroij

In the field of health care a new system of planning and budgeting has been designed and is – at the moment – in the phase of its implementation. The new planning system aims at creating respectively maintaining, in an efficient way, an effective and coherent system of health care institutions. Until 1980 the governmental policy in this field was characterized by claims of 'holistic system control', bringing all relevant parameters simultaneously and consistently under control: volume of health care services, quality, prices, claims and rights of the insured and the system of financing, as well as coherent planning by means of decentralization and cooperation between governments (central, provincial and local governments) and democratic participation by institutions, professionals and consumers (patients). After 1980 governmental policy became more and more dominated by the principles of territorial and functional decentralization, deregulation, and control and reduction of expenditure. The resulting involvement of a great variety of interested parties made the planning system to become a real 'policy network' or 'policy arena'. The pluralism of interests in policy networks causes that a lot of energy is devoted to the 'mutual curtailing of influence'. Such a network is characterized by avoidance and bureaucratization. The new designed planning system in the field of health care presents the characteristics, and is judged as ineffective because its decision making capacity is low relative to the required inputs. In order to become effective, these policy networks have to develop a 'regional health care philosophy', the parties involved must learn to recognize the entropic dynamics of policy arena's, and the tasks and responsibilities have to be defined in a complementary and clear way.

### Personal problems and politics

by F. Heunks

A democratic system pretends to equalize the chances and to care for the interests of all its citizens. This pretension is only confirmed to a minor extent. A touchstone for this are the problems the citizens have to deal with. Our study investigates to what extent politics have some meaning for the the solution of these problems and how the citizens react to this. In this study we use data from the second wave of the *Political Action* study in the Netherlands, i.e. a fresh representative sample interviewed at the end of 1979.

Our study reveals that most citizens have to deal with problems. Their number is even increasing, from 39% in 1971 (as reported by S. Verba) to 62% in 1979. In

contradiction to what we expected, people from lower social classes do not mention more problems and do not claim more governmental aid than people from higher social classes. In accordance with Inglehart's hypothesis, quality of life problems are more often mentioned by people with a higher level of education, while health and safety problems are mostly mentioned by lower educated people.

Because of the economic recession and the decline of the welfare state we expected an emphasis on very personal problems instead of social diseases, as well as a tendency to selfhelp. And indeed, three out of every four problems refer to a very personal or family situation, and only one out of four has to do with the larger community. So far as one claims to be aided in solving one's problem, governmental aid is mentioned less often than in an earlier study. A decrease from 31% of all respondents in 1971 to 13% in 1979. About 40% of the respondents in 1979 think they have to care for their own problem.

In contradiction with Sennett's idea, personal problems do not cause political passivity. Rather the reverse seems to be true. One might also expect people who are unsuccessful in solving their own problem to become politically more active. At least, this is our translation of Hirschmann's hypothesis of shifting involvements. Actually, those people who solve their own problems are also politically the most active ones. This seems to refer to simultaneous involvements.

According to several theories, the citizens may react in various ways when the claimed governmental aid is not forthcoming. They may become more active, more passive or react not noticeably. Actually, we observe indeed hardly any difference between disappointed and satisfied people. Only their political attitudes are negatively influenced by default of governmental aid. This personal dissatisfaction is more detrimental to the political trust of the citizens than the more general dissatisfaction with governmental policies is. It also diminishes the political interest of Dutch citizens. Our study leads to the conclusion that the government contributes very little to the solution of the citizen's everyday problems, whereas the citizens hardly react to the obtainment or the default of governmental aid. Apparently, politics are not very important for the citizen and his or her problems.