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AND THE MARKET

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ABSTRACT

There is a widespread belief that when significant market failure occurs, there are strong incentives for non-market institutions to develop which go at least part of the way to remedying the deficiency. We demonstrate that this functionalist position is not in general valid. In particular, we examine a situation where insurance is characterized by moral hazard. We show that when market insurance is provided, supplementary mutual assistance between family and friends (unobservable to market insurers) - a form of non-market institution - will occur and may be harmful. This example suggests that non-market institutions can arise spontaneously even though they are dysfunctional.

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## Dysfunctional Non-Market Institutions and the Market\*

There is a widespread belief that when significant market failure occurs, there are strong incentives for non-market institutions to develop which go at least part of the way to remedying the deficiency. This functionalist<sup>1</sup> view is supported by Arrow [1965] who argues not only that "when the market fails to achieve an optimal state, society will, to some extent at least, recognize the gap, and non-market institutions will arise attempting to bridge it" (p. 18), but also that such institutions will normally be ameliorative. We agree with the first part of this position - that market failure will tend to spawn non-market institutions. But it is our contention that there is no a priori presumption that equilibria with voluntary non-market institutions deal better with the problems arising from market failure than the market alone. That a non-market institution arises to fill some perceived need does not mean that it in fact serves that need.

The incongruence between intentions and consequences has been much remarked. In a celebrated statement, Adam Smith [1937, p. 423] argues that individuals pursuing their own self-interest may promote the social good:<sup>2</sup>

"-- every individual -- endeavours as much as he can to direct [his capital] that its produce may be of the greatest value -- He generally intends only his own gain -- [but by labouring to render] the annual revenue of the society as great as he can -- is -- led by an invisible hand to promote an end which was no part of his intention -- to promote the public interest."

The obverse of this observation is that harm may derive from well-intentioned actions.<sup>3</sup> Smith goes on to argue [1937, Bk. IV, Ch. II] that, because of unforeseen consequences, most government regulation, however benign in intent, is either useless or hurtful. In a similar vein, we shall argue that in the

presence of market failure, equilibrium may be characterized by spontaneous, non-market institutions which are completely dysfunctional; by "spontaneous", we mean arising from the decentralized and uncoordinated actions of atomistic economic agents; and by "completely dysfunctional", having the opposite effects to those intended.

This paper illustrates this important principle with an example which is of interest in its own right. The literature over the past fifteen years has directed attention to the ubiquity of moral hazard and incentive problems. One of the ways the market responds to moral hazard is to provide incomplete insurance, since with incomplete insurance individuals still have some incentive to take actions which reduce the probability of the insured-against event occurring. But they must then bear more risk than they would like. A principal function of many non-market institutions, meanwhile, is to help those who have suffered some misfortune, which entails the provision of insurance: The marriage vows formalize and sanctify the mutual insurance aspects of the family; the acid test of a friend is his willingness to help in times of need; charity is regarded as meritorious and is subsidized by the government; and many government social assistance programs, such as unemployment insurance and workmen's compensation, have a strong insurance component. The importance of non-market insurance is illustrated by what happens if an individual catches pneumonia as a result of going on a hiking trip with inadequate rain gear: His employer gives him compensated sick leave; part or all of his medical expenses are reimbursed by his insurance policy or the state; uncovered medical expenses may be partially deductible from his income tax; and family and friends rally round to provide other forms of support. Such extensive support, while directly helpful, deleteriously affects individuals' care to avoid accidents. In terms of the example,

had the individual borne all the costs of catching pneumonia himself, he might have taken the trouble to carry adequate rain gear. Thus, it is not obvious that the insurance provided by non-market institutions is always beneficial, or, more specifically, whether non-market insurance institutions, when they supplement market insurance, improve the economy's ability to handle the moral hazard tradeoff between risk-bearing and incentives.

We address this issue by enquiring whether the reciprocal provision of insurance within families and between friends, which we term non-market insurance,<sup>4</sup> is welfare-improving when it supplements market insurance. We show that non-market insurance will always be provided. Such insurance can, but need not, be welfare-improving if the non-market insurer is better able to observe the insured's accident-prevention activity than market insurers. In the extreme case, where the non-market insurer has no more information than the market insurer, the provision of non-market insurance is unambiguously harmful; non-market insurers are less efficient providers of insurance than the market and the insurance they provide crowds out the market insurance. Our analysis therefore indicates that dysfunctional non-market social institutions can arise spontaneously. Relatedly, in designing public insurance, the government should consider the interaction between public insurance, market insurance, and non-market insurance.

Our treatment will be illustrative rather than exhaustive. We shall assume that: i) the total quantity of market insurance purchased by the insured is observable; ii) an individual can obtain non-market insurance to supplement this market insurance from only one source; and iii) a market insurer cannot observe the non-market insurance obtained by a client and cannot therefore write insurance contracts contingent on it. We shall consider two cases; in the first, the non-market insurer (like market insurers)

cannot observe the insured's level of precaution, while in the second case he can.

### 1. The Basic Model

We first describe the canonical moral hazard model without non-market insurance (Arnott and Stiglitz [1988a]). There is a single accident; the probability of its occurrence,  $p$ , depends on the individual's efforts at accident avoidance,  $e$ . The accident-avoidance function is convex:

$$p' \leq 0, \quad p'' \geq 0.$$

The individual's wealth is  $w$ , and  $d$  is the damage caused by the accident. The individual purchases all his market insurance from one insurance firm in a competitive insurance market.<sup>5</sup> The insurance policy pays  $\alpha$  (the (net) payout) if the accident occurs, and the individual pays the insurance firm  $\beta$  (the premium) if it does not. Then, the individual's consumption if an accident occurs is

$$y_1 = w - d + \alpha, \tag{1a}$$

while if no accident occurs, it is

$$y_0 = w - \beta. \tag{1b}$$

For simplicity, we assume a separable, event-independent utility function,

$$U = u(y_0)(1-p) + u(y_1)p - e. \tag{2}$$

with  $u' > 0$ ,  $u'' < 0$ .

When individuals purchase all their market insurance from a single insurer and no non-market insurance is provided, it is well-known (Pauly [1974]) that the competitive equilibrium insurance contract will typically provide only partial insurance and will typically ration the amount of insurance the insured individual can buy at the equilibrium price (the premium-

payout ratio, denoted as  $q$ ). This is depicted in Figure 1. The equilibrium contract occurs at the point of maximum utility (point  $\Omega$  in the Figure) on the insurance firm's zero profit locus (ZPL):  $(1-p)\beta - p\alpha = 0$ . The slope of the zero profit locus is

$$\left. \frac{d\beta}{d\alpha} \right|_{ZPL} = \frac{p + (\alpha + \beta)p' \frac{\partial e}{\partial \alpha}}{(1-p) - (\alpha + \beta)p' \frac{\partial e}{\partial \beta}}, \quad (3)$$

while that of an indifference curve is

$$\left. \frac{d\beta}{d\alpha} \right|_{\bar{v}} = \frac{u_1' p}{u_0' (1-p)} > 0. \quad (4)$$

Because of moral hazard, as long as effort remains positive, the individual expends less effort as more insurance is provided, so that  $\frac{\partial e}{\partial \alpha} < 0$  and  $\frac{\partial e}{\partial \beta} < 0$ .

Since  $\Omega$  is at a point of tangency of the zero profit locus and an indifference curve,  $\left. \frac{d\beta}{d\alpha} \right|_{ZPL} > 0$  at  $\Omega$ . And since the numerator of (3) is positive,

the denominator must be positive at  $\Omega$ . Hence, at  $\Omega$ ,  $\left. \frac{d\beta}{d\alpha} \right|_{ZPL} = \left. \frac{d\beta}{d\alpha} \right|_{\bar{v}} > \frac{p}{1-p}$ .

From (4), the latter inequality implies  $u_1' > u_0'$  - partial insurance; furthermore, since the slope of the indifference curve at  $\Omega$  exceeds the price of insurance there ( $q_\Omega \equiv \left( \frac{\beta}{\alpha} \right)_\Omega = \left( \frac{p}{1-p} \right)_\Omega$ , given by the slope of the line joining  $\Omega$  and the origin) the individual would like to purchase additional insurance at the equilibrium price - rationing.

We now consider the simplest possible extension of this model. There are two symmetric individuals (say husband (H) and wife (W)) with the same tastes and accident-prevention technologies. H and W agree that if one spouse has an accident, while the other does not, there will be a transfer of resources of  $\delta$ .

## 2. Effort Unobservable by the Non-Market Insurer

We shall start by characterizing equilibrium for the case where an in-

dividual's accident-avoidance effort is observable by neither his partner nor market insurers. Equilibrium may entail a combination of market and non-market insurance. Subsequently, we shall investigate the efficiency properties of the equilibrium.

There are four events - neither the individual nor his partner has an accident, the individual has an accident but his partner does not, etc. Let  $e$  denote the individual's effort and  $\tilde{e}$  his partner's. Then the probability that neither the individual nor his partner has an accident is  $(1-p(e))(1-p(\tilde{e}))$  and the individual's utility in this event is  $u(w-\beta)$ , etc. Thus, an individual's expected utility is

$$EU = u(w-\beta)(1-p(e))(1-p(\tilde{e})) + u(w-d+\alpha)p(e)p(\tilde{e}) + u(w-\beta-\delta)(1-p(e))p(\tilde{e}) + u(w-d+\alpha+\delta)p(e)(1-p(\tilde{e})) - e, \quad (5)$$

which may be written more succinctly as

$$EU = u_0(1-p)(1-\tilde{p}) + u_1p\tilde{p} + u_2(1-p)\tilde{p} + u_3p(1-\tilde{p}) - e, \quad (5')$$

where  $u_0 \equiv u(w-\beta)$ ,  $u_1 \equiv u(w-d+\alpha)$ ,  $u_2 \equiv u(w-\beta-\delta)$ , and  $u_3 \equiv u(w-d+\alpha+\delta)$ , and  $\tilde{p} \equiv p(\tilde{e})$ .

We assume that H and W are smart, and take into account how the other will adjust effort in response to a change in  $\delta$ .<sup>6</sup> But both assume that the market contract will be unaffected by their actions.

In deciding on his own level of effort, given  $\alpha$ ,  $\beta$ , and  $\delta$ , the individual treats his partner's effort as fixed. Thus, the equation characterizing his level of precaution (assumed strictly positive) is

$$(-u_0(1-\tilde{p})+u_1\tilde{p}-u_2\tilde{p}+u_3(1-\tilde{p}))p' - 1 = 0, \quad (6)$$

which gives

$$e = e(\alpha, \beta, \delta), \quad (7a)$$

and by symmetry

$$\tilde{e} = e(\alpha, \beta, \delta). \quad (7b)$$

The individual and his partner perceive expected utility to be related to  $\delta$  in the following way:

$$\begin{aligned} \frac{\partial EU}{\partial \delta} = & (-u_2'(1-p)\tilde{p} + u_3'p(1-\tilde{p})) + (-u_0(1-\tilde{p}) + u_1\tilde{p} - u_2\tilde{p} + u_3(1-\tilde{p}))p' \frac{\partial e}{\partial \delta} \\ & + (-u_0(1-p) + u_1p + u_2(1-p) - u_3p)\tilde{p}' \frac{\partial \tilde{e}}{\partial \delta}. \end{aligned} \quad (8)$$

In so doing, they neglect that, since other couples too behave in this way, insurance companies adjust  $\alpha$  and  $\beta$  in response to a change in  $\delta$ . Combining (6), (7a), (7b), and (8), and noting that the equilibrium is symmetric, gives

$$\frac{\partial EU}{\partial \delta} = (-u_2' + u_3')(1-p)p + (1 + (u_2 - u_3)p') \frac{\partial e}{\partial \delta}. \quad (9)$$

Furthermore, from (6),

$$\frac{\partial e}{\partial \delta} = - \frac{(u_2'p + u_3'(1-p))p'}{\frac{p''}{p'} + (p')^2(u_0 + u_1 - u_2 - u_3)} < 0, \quad (10)$$

where the denominator is negative by the concavity of  $u$ .

At  $\Omega$ , the competitive equilibrium in the absence of non-market insurance,  $\delta=0$ ,  $1 + (u_2 - u_3)p' = 0$  (eq. (6)), and  $-u_2' + u_3' > 0$  (incomplete insurance), so that from (9)

$$\frac{\partial EU}{\partial \delta} = (-u_2' + u_3')(1-p)p > 0. \quad (11)$$

Thus, at the competitive equilibrium in the absence of insurance, the partners perceive a mutual insurance pact to be beneficial and would therefore provide one another with non-market insurance to supplement their market insurance. The intuition for this result is as follows: At  $\Omega$ , the partners are rationed in the amount of insurance they can purchase at the price  $q_\Omega$ . They perceive that by entering into a mutual insurance pact, they can acquire additional insurance at this price, contingent on one and only one of the partners suffering an accident. More specifically, at  $\Omega$ , since  $\frac{\partial EU}{\partial \alpha} = pu_3'$  while  $\frac{\partial EU}{\partial \beta} = -(1-p)u_2'$ , so that

$$\frac{\partial EU}{\partial \delta} = (1-p) \frac{\partial EU}{\partial \alpha} + p \frac{\partial EU}{\partial \beta}, \quad (12)$$

an individual regards a unit increase in  $\delta$  as equivalent to a unit increase

in  $\alpha$  with probability  $(1-p)$  (the probability that his partner is not sick when he is) combined with a unit increase in  $\beta$  with probability  $p$  (the probability his partner is sick when he is not); or, equivalently, as an expected increase of  $(1-p)$  in the amount of insurance,  $\alpha$ , obtained at the price  $q_\Omega$  (i.e., the movement from  $\Omega$  to  $\phi$  in the Figure). As already noted, in reasoning in this way, individuals neglect that when everyone enters into such a pact, which reduces effort (eq. (10)) and increases the probability of accident, market insurers are forced to offer a less attractive contract in order to maintain zero profits.

H and W choose  $\delta$  to maximize their expected utilities, taking  $\alpha$  and  $\beta$  as given. From  $\frac{\partial EU}{\partial \delta} = 0$ ,  $e = \tilde{e}$ , and (6), one obtains  $\delta = \delta(\alpha, \beta)$ . By observing how the probability of accident responds to changes in  $\alpha$  and  $\beta$ , market insurers will implicitly take into account that  $\delta$  responds to  $\alpha$  and  $\beta$  according to  $\delta = \delta(\alpha, \beta)$ . Competition, meanwhile, will continue to result in the equilibrium market contract maximizing expected utility subject to zero profits. Thus, in the presence of non-market insurance, the equilibrium market contract maximizes

$$EU = u(w-\beta)(1-p)^2 + u(w-d+\alpha)p^2 + u(w-\beta-\delta)(1-p)p + u(w-d+\alpha+\delta)p(1-p) - e \quad (13)$$

$$\text{s. t.} \quad \begin{array}{l} \text{i) } \beta(1-p) - \alpha p = 0 \\ \text{ii) } e = e(\alpha, \beta, \delta(\alpha, \beta)), \end{array}$$

where ii) is obtained by combining (7a) and  $\delta = \delta(\alpha, \beta)$ .

Given the assumed information technology, it can be shown that the non-market insurance is unambiguously harmful and dysfunctional. The line of proof is straightforward: Welfare is at least as high if the market insurer chooses  $\alpha$ ,  $\beta$ , and  $\delta$  as if he chooses just  $\alpha$  and  $\beta$ , with  $\delta$  being chosen by the non-market insurer. And if the market insurer chooses  $\alpha$ ,  $\beta$ ,

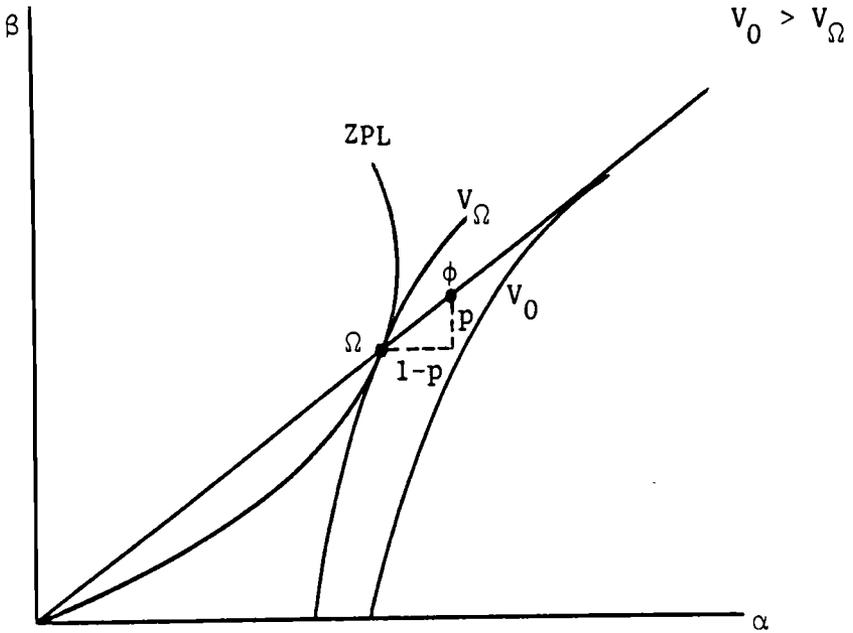


Figure 1: The individual perceives that he can obtain additional insurance at the market price by entering into a mutual insurance pact.

and  $\delta$ , he will set  $\delta=0$ .

The equilibrium without non-market insurance cannot be improved upon, and, if it were possible, it would be desirable to outlaw the provision of non-market insurance. The intuitive rationale for this result is as follows: The provision of non-market insurance does not enhance the risk-sharing capabilities of the economy. Rather, such insurance crowds out market insurance. Not only is it less effective than market insurance since it randomizes an individual's event-contingent consumption, and is provided by a risk-averse agent (see Marshall [1976]), but also the simultaneous provision of market and non-market insurance violates exclusivity (see Arnott and Stiglitz [1986]).

The government may be able to influence the amount of non-market insurance provided. First, in designing its own insurance, it should take into account the effect on non-market insurance; second, it can tax or regulate the assistance provided by charitable organizations, where such benevolence interferes with the efficient provision of market insurance; and third, it can institute a host of second-best policies to influence the amount of non-market insurance provided, such as the taxation of complements to non-market insurance. But in many contexts, such as the mutual assistance provided by friends and family in times of need, the extent to which the government can and should intervene is circumscribed by social custom and civil libertarian concerns. Furthermore, no intervention is warranted if the costs of intervention exceed the benefits.

The above analysis was predicated on the assumptions that a market which provides insurance against the accident in question exists and that there are no transactions costs associated with the provision of insurance. If market insurance against a given accident does not in fact exist, non-market insur-

ance is unambiguously beneficial. And when transactions costs are taken into account, non-market insurance may be beneficial if it is provided at lower transaction cost than market insurance. Taking these considerations into account, our analysis can be interpreted in terms of the historical evolution of insurance institutions. In traditional societies, non-market institutions develop to provide insurance, which are unambiguously beneficial and functional. As time proceeds and the economy becomes more developed, the set of insurance markets becomes more complete and the transactions costs associated with the markets for insurance fall. Concomitantly, the non-market insurance institutions remain, but are partially displaced by insurance markets. In the limit, as the transactions costs associated with the provision of insurance go to zero, the non-market institutions remain and are harmful; they become not only vestigial, but also dysfunctional.

### 3. Effort Observable by the Non-Market Insurer

This case is more interesting since there appear to be two offsetting effects. On the one hand, because individuals have information on their partner's effort, which an insurance company does not, the provision of non-market insurance has the potential of enhancing the risk-sharing capabilities of the economy. On the other hand, the provision of insurance by a risk-neutral agent is typically more efficient than by a risk-averse agent, if they have access to the same information. Furthermore, the simultaneous provision of market and non-market insurance, by violating exclusivity, typically creates uninternalized externalities. This line of reasoning suggests that the provision of non-market insurance in this case may be beneficial in some circumstances and harmful in others.

We continue with the same model. When effort is observable within the

family but not to the insurance firm, and when, as we have assumed, individuals are identical, family members will effectively choose the level of precaution to take cooperatively. Each will take  $\alpha$  and  $\beta$  to be fixed, and choose  $\delta$  and  $e$  to maximize

$$EU = u_0(1-p)^2 + u_1p^2 + u_2(1-p)p + u_3(1-p)p - e. \quad (14)$$

This yields the following first-order conditions:

$$e: (-2(1-p)u_0 + 2pu_1 + (1-2p)(u_2 + u_3))p' = 1 \quad (15a)$$

$$\delta: (-u_2' + u_3')p(1-p) = 0. \quad (15b)$$

Eq. (15b) implies that

$$\delta = \frac{d-\alpha-\beta}{2}. \quad (15b')$$

Because the partners can observe each other's effort and treat  $\alpha$  and  $\beta$  as fixed, they perceive there to be no moral hazard problem associated with the insurance they provide and hence provide (as) full insurance (as possible). This stands in contrast to the previous section where, as a result of the inability of each partner to observe the other's effort, only partial non-market insurance was provided (see (9)).

The insurance firm effectively chooses  $\alpha$  and  $\beta$  to maximize expected lity, subject to (15a), (15b) and the zero profit constraint. The competitive equilibrium with non-market insurance is characterized by the constraints and first-order conditions of this program.

We now investigate the welfare properties of the equilibrium. To do this, we assume that the planner chooses  $\alpha$ ,  $\beta$ , and  $\delta$ , knowing that individuals choose  $e$  according to (15a), which takes account of the fact that  $\delta$  is chosen with effort observable, and subject to the break-even constraint on market insurance.

Substituting the zero profit constraint into (14) gives

$$EU(\beta, \delta) = u(w-\beta)(1-p)^2 + u\left(w-d + \frac{\beta(1-p)}{p}\right)p^2 + u(w-\beta-\delta)p(1-p) + u\left(w-d + \frac{\beta(1-p)}{p} + \delta\right)p(1-p) - e. \quad (16)$$

The corresponding first-order condition for  $\delta$  is

$$\frac{\partial EU}{\partial \delta} = (-u_2' + u_3')p(1-p) - \left(\beta u_1' p' + \frac{\beta(1-p)}{p} u_3' p'\right) \frac{\partial e}{\partial \delta} = 0. \quad (17)$$

From (15a)

$$\frac{\partial e}{\partial \delta} = \frac{(1-2p)(u_3' - u_2')}{\Delta}, \quad (18)$$

$$\text{where } \Delta = \frac{\beta p'}{2} (2pu_1' + (1-2p)u_3') - 2p'(u_0 + u_1 - u_2 - u_3) - \frac{p''}{(p')^2}.$$

Substituting (18) into (17) gives

$$\frac{\partial EU}{\partial \delta} = \frac{(u_3' - u_2')}{\Delta} \left\{ \beta u_1' p' - 2p'p(1-p)(u_0 + u_1 - u_2 - u_3) - \frac{p''}{(p')^2} p(1-p) \right\}. \quad (17')$$

$\Delta$  is unambiguously negative, as is the expression in curly brackets, and hence

$\frac{\partial EU}{\partial \delta} = 0$  only when  $u_3' = u_2'$ , i.e. when  $\delta = \delta^* \equiv \frac{d-\alpha-\beta}{2}$ . Furthermore,  $u_3' > u_2'$

for  $\delta < \delta^*$  and  $u_3' < u_2'$  for  $\delta > \delta^*$ , and so  $\delta^*$  is the utility-maximizing  $\delta$ .

Thus, when effort is observable by the non-market insurer, the equilibrium is constrained efficient.

The results of the two cases analyzed above lead naturally to the conjecture that in intermediate situations in which non-market insurers observe their partners' effort imperfectly, but better than the market insurer, a super-optimal amount of non-market insurance will be provided that may or may not be better than no non-market insurance at all. The analysis could be extended to compare the optimal and equilibrium number of members in a non-market insurance group; in a large group, there is greater diversification of risk, but more imperfect observability.

In the above analysis, we took the observability of one partner's accident-prevention effort by the other as exogenous. In fact, however, the de-

gree of such observability is a function of the indirect monitoring system - the system whereby one partner observes the other's effort - as well as the incentive each partner has to observe the other, which is determined by the extent of interdependence - the dependence of one partner's utility on the other's effort. These considerations suggest a neglected feature of contract design. A principal with many agents can reduce moral hazard either by directly monitoring his agents or by setting up an indirect monitoring system with interdependence. While the literature has given considerable attention to direct monitoring, it has largely ignored the design of indirect monitoring systems o interdependence.<sup>7</sup>

#### 4. Conclusions

Elsewhere we have argued that moral hazard and incentive problems are pervasive, not only in insurance markets, but in labor, capital, and product markets as well. In these circumstances, competitive market economies are generally not constrained Pareto efficient -- there are interventions which respect the costs of information (and other transactions costs) that are welfare-enhancing (Arnott and Stiglitz [1986]).

Within economics, there is a long-standing view that when there are such market inefficiencies, individuals will get together to develop institutional arrangements that alleviate these market failures.<sup>8,9</sup> In this paper, we have presented a counter-example. In our stark model, though the market response to imperfect information (the rationing of insurance) did indeed give rise to a non-market response, whether the non-market response was welfare-enhancing turned out to depend on whether the non-market institution was informationally advantaged relative to the market institution. More specifically, if non-market insurers were no better-informed than the market, then the non-market

insurance crowded out the more efficient market insurance and welfare was unambiguously lowered; if, however, non-market insurers were better-informed, the non-market insurance might or might not be beneficial.

How the government should respond to this type of non-market failure depends on context. At the least, government should take into account the response of non-market insurers to the insurance which it provides. More generally, our paper suggests that non-market institutions may arise spontaneously and persist, even though they are dysfunctional.<sup>10, 11</sup> The importance and scope of this possibility, as well as the appropriate policy response to such non-market failure, merits considerable further investigation.

#### FOOTNOTES

- Financial support from the National Science Foundation, the Olin Foundation, and the Social Sciences and Humanities Research Council of Canada is gratefully acknowledged.
1. In anthropology there is a functionalist tradition of long standing which attempts to explain social institutions (political, economic, sociological, cultural, and psychological) as functional adaptations to a society's environment or ecosystem. Functionalist theories differ in their degree of subtlety and sophistication and in their emphasis, but none seem to make a sharp distinction between equilibrium and optimum. In most theories, however, there seems to be a presumption that institutional adaptation to the environment is efficient. See Keesing [1981] for an informative discussion of contemporary traditions in anthropology.
  2. This conjecture, appropriately formalized - the Fundamental Theorem asserting the Pareto efficiency of market economies - is the central result in the Old Welfare Economics.
  3. Smith [1937, p. 423]: "By pursuing his own interest [the individual] frequently promotes that of society more effectually than when he really intends to promote it".
  4. The term "social insurance" is perhaps more appropriate, but is used in some countries to refer to social security. The term "informal insurance" is appropriate for the example, but the phenomenon we identify arises in formal, non-market institutions as well.
  5. See Arnott and Stiglitz [1988b] for a discussion of the rationale for this exclusivity provision.
  6. We would obtain the same qualitative results if we assumed instead that H and W ignore that the other will adjust effort in response to a change in  $\delta$ .
  7. One exception is Carmichael [1988]. He considers peer review in the university setting, which is a form of indirect monitoring system, and argues that the institution of tenure is needed to make peer review incentive-compatible.
  8. In our example, the market by itself is constrained Pareto efficient. However, there is perceived market failure, and the non-market institution (the provision of supplementary non-market insurance) arises in response to this perceived market failure.

In an expanded version of our model in which there are many kinds of accidents and many commodities, the market is not constrained Pareto efficient; there is genuine potential market failure (Arnott and Stiglitz [1986]). Our result concerning the possible dysfunctionality of spontaneous non-market institutions carries over to this more realistic setting.

9. The conjecture that the resulting equilibria are efficient is often attributed to Coase [1960]. He seems, however, to have been more concerned with small group externalities than with more generalized "atmospheric" externalities.
10. In one sense, this result should come as no surprise, since it is by now well-recognized that, even in large economies, Nash equilibria are Pareto efficient only under special circumstances. One of the great achievements of modern economics was to identify a special set of assumptions under which competitive economies are Pareto efficient.
11. Akerlof [1980] has argued that inefficient social customs may persist as Nash equilibria, and that there can be an arbitrarily large set of social customs sustainable as Nash equilibria.

The point in our paper is related but different. Akerlof considers the possible persistence of inefficient institutions, but does not investigate how the institutions came into being. We show not only that an inefficient institution can persist, but also that it can arise spontaneously. Furthermore, while in the Akerlof model, there are multiple equilibria of which some may be efficient, in our model there is a unique equilibrium.

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