

REVISITING
LABOUR HISTORY

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editor


HORIZONS

2012

First Published in 2012
by
HORIZONS
www.horizons.com.mt
E-mail: info@horizons.com.mt

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Cover Design: Outlook Coop
Setting: SETRIGHT, Haż-Żabbar, Malta
Printing: VELPRINT LTD, Żejtun

ISBN: 978-99957-38-20-4

The Labour Party and Maltese Ageing Policy: Past, Present and Future

Marvin Formosa

A lot of water has flowed under the bridge since, in their anticipation of a Turkish invasion, the Order of St. John perceived the eldest island inhabitants as 'useless civilians' and evacuated them to Sicily.¹ Malta nowadays holds a key place in the history of international ageing policy. The Maltese Government made Malta the first nation to raise the subject of population ageing as an issue of world concern. This occurred in 1969 when it successfully appealed to the United Nations for the theme's inclusion on the agenda of the 24th session of the General Assembly. This led to unprecedented awareness on the effects of population ageing. The United Nations eventually organised a World Assembly on Ageing in 1982 where, to Malta's credit, the designated chairperson was a Maltese citizen. However, as Brincat recently highlighted, the history of the modern Maltese welfare state awaits detailed study.² This is especially true with respect to policies relating to later life. Historical analyses of the development of social policies in Malta tend to focus on general health, educational, and labour issues, and hardly any attention is awarded towards the foundation of those services geared towards older persons. Given the space limitations, and specific focus of this publication, this paper does not seek to address such a lacuna. Rather, its goal is to conduct a critical overview of how

¹Cassar, Paul, *St. Vincent de Paule's Residence for the Elderly: The Medico-Social Record*, Malta, 1994.

²Brincat, Mario, 'The birth of the 'Maltese Model' of development 1945-1959', *Journal of Maltese History*, vol. 1, no. 2, 2009, 1.

the development of local ageing policy was stimulated and influenced by the values and judgements of the Labour Party in Malta.

Introduction

There is a longstanding close connection between ageing and social policy. Indeed, part of the activities carried out by the Order of St. John was providing assistance, in both cash and kind, to older vulnerable persons.³ Moreover, in 1885 the first-ever state sponsored benefit for Maltese citizens consisted in setting a pension scheme for the Police Force, and some years later, the Civil Service. The introduction of self-government in 1921 was another important catalyst for the improvement of ageing policies. In eight years, self-government succeeded in establishing the 'Widows and Orphans Pensions Act' and the 'Workmen's Compensation Act', both providing much-needed financial assistance to older persons and families supporting older relatives. However, it is the 'Old Age Pensions Act', brought into effect by a Labour Government on the 1st of August 1948, and which provided for the payment of pensions to persons over the age of 60, that ageing policy measures as we know them today owe their origin to.

The 'Old Age Pensions Act' was very timely indeed as the second half of the Twentieth Century witnessed unprecedented demographic changes to the extent that this period is referred to as the 'age of ageing'. As a result of declining fertility and mortality levels, all countries throughout the world registered an improvement of life expectancy at birth, and subsequently, a growth in the number and percentages of older persons. Malta was no exception to international trends and its population structure has evolved out of a traditional pyramidal shape to an even-shaped block distribution of equal numbers at each age cohort except at the top.⁴ Whilst the life expectancy of men and women,

³Cassar, 1994.

⁴Formosa, Marvin, *Class Dynamics in Later Life: Older Persons, Class Identity and Class Action*, Hamburg, 2009.

as reported by the 1948 Census, reached only to 56 and 58 years respectively, the last Census in 2005 found such figures to have risen to 78 and 82 respectively.⁵ Table 1 provides the percentage distribution by broad age groups during the second half of the Twentieth Century to-date. It is noteworthy that the percentage of the cohort aged 65 years and over increased steadily from 5.8 to 13.7 per cent in half a century, whilst the percentage of future workers (0-14) decreased from 34.9 to 17.0 from 1948 to 2005. This change in the distribution of age groups will have immense impact on the future allocation of ageing-related financial and care services.

It was within such a post-war demographic scenario that the Labour Party constructed and deconstructed its contributions towards ageing

Table 1 – Percentage distribution of population by broad age groups, Malta & Gozo, 1931-2005

Census year	0-14	15-64	65+
1931	32.1	62.1	5.8
1948	34.9	59.4	5.7
1957	37.4	55.8	6.8
1967	29.8	61.8	8.4
1985	24.1	66.0	9.9
1995	21.8	66.7	11.5
2005	17.1	69.2	13.7

Source: Camilleri, Reno, *A Demographic and Socio-Economic Profile of Ageing in Malta*, United Nations International Institute on Ageing (United Nations - Malta), Malta, 1993. Central Office of Statistics, *Census of Population and Housing Malta 1995: Volume 1 Population, Age, Gender, and Citizenship*, Central Office of Statistics, Malta, 1997. National Statistics Office, *National Office of Statistics, Census of Population and Housing: Volume I: Population*, Malta, 2007.

⁵National Office of Statistics, *Census of Population and Housing: Volume I: Population*, Malta, 2007.

policy, a process that this paper attempts to discuss in four different parts. The first discusses the party's role during the establishment of age-based retirement through the legislation of social security benefits. The second part explores the Labour Party's contribution to social and health welfare as the 1970s and 1980s saw increasing requests for medical and community care by older citizens. The third part follows the party's policy on ageing during the past two decades as it oscillated from negative to positive constructions of ageing. The final part outlines the possible role of the Labour Party in enacting empowering and sustainable policies for older persons and later life.

The birth of the welfare state

A key feature of the evolution of post-war social policy with regard to older persons across Europe was the establishment and consolidation of national pension systems with universal coverage. Malta did not experience a 'big bang' welfare resettlement in post-war times. Change, on the other hand, was characterised by a gradual expansion in the provision of health and social services. The origins of pension policy in Malta can be traced to the 'Old Age Pensions Act', which was brought into effect by Boffa's Labour government on the 1st of August of 1948, and which provided for the payment of pensions to persons over the age of 60 years without any financial means test. The introduction of this Act was not without problems. This emancipative and eagerly awaited measure became the target of the anti-direct taxation lobby, as well as the Nationalist Party who questioned the sustainability of its non-contributory element:

... the great majority of Catholic Maltese, as good sons and daughters, obey the fourth commandment and willingly support their father and mother when the time and necessity arises; as it does for the great majority ... at first sight [the scheme] appears to be an open invitation not to work and not to save.⁶

⁶*Times of Malta*, 7 June 1948, quoted in Pirota, M. Joseph, *Fortress Colony: The Final Act 1945-1964*, Malta, 1987, 121.

...for a pension scheme to be built on a sound and just foundation the exchequer shouldn't be burdened with the whole cost.⁷

Today, of course, the Nationalist Party does acknowledge the tremendous positive implications of these Acts, as evidenced by the elaborate celebrations marking their 50th anniversary. On the occasion, and in a clear tribute to the welfare state, the then Minister of Family and Social Solidarity, Dolores Cristina, remarked that:

Maltese and Gozitan society is one built on the concept of solidarity and social inclusion, values we are very proud of. Difficulties can be encountered by anybody, in any walk of life, and it is the Department of Social Security that must meet individuals' needs.⁸

Public pension coverage was strengthened even further when, in 1972, Mintoff's Labour Government introduced for the first time the payment of an annual Bonus to all Social Security pensioners and recipients of Social Assistance. Seven years later, in 1979, a new contributory scheme for wage-related retirement pensions was introduced within the ambit of the 'National Insurance Act', also accompanied by a pension scheme for widows calculated on their deceased husband's wage. As a result of this Act, a Two-Thirds Pension was introduced where the pensionable income was calculated by taking the average yearly salary on which the relevant contribution had been paid of the best three consecutive calendar years during the last ten years prior to retirement. Furthermore, a National Minimum Pension was introduced whereby any person claiming a contributory pension would not fall below a certain rate of pension provided one had a full contribution record to his or her credit. In January 1987, one final policy action by Mifsud Bonnici's Labour government was to consolidate all social

⁷*Patria!*, 5 June 1948, quoted in Pirotta, 122.

⁸The Malta Independent. "50th anniversary of enactment of National Insurance Act". Available at <http://www.independent.com.mt/news2.asp?artid=32178> (updated 5 May 2006).

security measures and legislation in one Social Security Act. This Act incorporated a number of new benefits, including disability pension and gratuity, marriage grants, maternity benefits, and family allowance, to mention some. It aimed to establish a scheme of social security and to consolidate with amendments existing provisions concerning the payment of insurance benefits, pensions and allowances, social and medical assistance, non-contributory pensions, and the payment of social insurance contributions by employees, employers, self-employed and the State. Admittedly, the 1987 Act included a number of discriminatory measures, eventually corrected by subsequent Nationalist governments.

In retrospect, the establishment of these Acts served to consolidate retirement as a social and economic institution. Basically, the reforms extended rights and entitlements to older pensioners. Following the classic Beveridge model, publicly financed pensions were rightly considered by successive Labour governments as the means by which the emerging welfare state would guarantee a minimum income for its older citizens. Thus, the chief objective of these Acts was to alleviate poverty during later life by providing adequate income, and minimising possible adverse effects on the labour market. Although this pension programme had significant economic impact on the labour market – as it was usually funded by employer and employee contributions, so that it added to labour costs – it provided workers with much needed incentives to remain in the work force, to properly declare earnings, and to work less in the informal sector.

However, there was also a dark side to such positive developments. First, the establishment of such Acts led a widespread number of older persons to experience economic dependency. The aforementioned Acts encouraged a view that past a certain age an individual's social worth was diminished. This was reinforced by the view that older people needed less income than 'economically active' individuals so that public pensions were set at rates considerably below average earnings. Moreover, a strict adherence to a wide range of 'masculinist' policies up to the 1970s, that functioned to institutionalise and reinforce women's exclusion from social security and work, rendered incoming older women especially vulnerable and dependent. Second, the Acts also encouraged

the view that older workers have a lesser need to be employed. Local trade unions and employers have always been strongly in agreement on this issue, arguing that older workers should receive generous state and occupational pensions to leave the work force. Both groups see this as a mechanism for expanding the routes to more senior jobs and for increasing the supply of younger workers. This, in practice, fuels the view that older workers are simply less efficient and less productive, whilst also contributing towards age discrimination since mandatory retirement was simply premised on the achievement of one's 60th or 61st birthday (and irrespective of the skills and wishes of workers). Third, the argument that public pension coverage had virtually eliminated poverty in later life was always, at best, a political myth. Beveridge's assertion that "it is dangerous to be in any way lavish in old age [until] adequate provision has been assured for all vital needs, such as prevention of disease, and the adequate nutrition of the young" stands awkwardly in modern, and especially, consumer and post-industrial societies.⁹ Related to this issue is that it is rare for Governments to acknowledge poverty amongst older Maltese citizens. As recently as 2007, the Report on the *National follow-up to the UNECE Regional Implementation Strategy of the Madrid International Plan of Action on Ageing* emphasised that:

By and large one does not find evidence in Malta of conditions of poverty relating to older persons. Following the Welfare State ideology, the Maltese government is expected to guarantee an acceptable standard of living and provide the basic needs for all the Maltese citizens from the cradle to the grave. It provides a comprehensive system of basic security and income-related benefits...¹⁰

⁹Phillipson, Chris, *Reconstructing Old Age: New Agendas in Social Theories and Social Practice*, London, 1998, 68.

¹⁰Troisi, Joseph, "National follow-up to the UNECE Regional Implementation Strategy of the Madrid International Plan of Action on Ageing". Available at http://www.unece.org/pau/_docs/age/2007/AGE_2007_MiCA07_Cntr_RprtMLT_e.pdf (downloaded 12 May 2010).

However, national statistics on income and living conditions for survey year 2010 revealed that as much as 19 per cent of the 65 plus cohort are currently situated below the 'at-risk-of-poverty' line. More specifically, 21 and 18 per cent of males and females aged 65 plus are 'at-risk-of-poverty' respectively.¹¹ Interestingly, Malta is the only European Union country in which more older men than women are situated below the 'at-risk-of-poverty' line.

The consolidation of the welfare state

A second feature of social policy across Europe during the Post-War years was an expansion of health and social care services for older people. In Malta, proposals to reform the system of care for older persons emerged with two separate and interrelated Acts. On 7 May 1956, the Labour Government introduced the 'National Assistance Act' which provided social and medical assistance (the latter, both in cash and in kind) to heads of household who were unemployed and either in search of employment, or unable to perform any work because of some specific disease – always provided their family's financial resources fell below a certain level. However, those who suffered from a chronic disease were allowed medical assistance free of charge and irrespective of their family's financial resources. In addition to social and medical assistance, this Act also provided for free institutional care for the aged, free hospitalisation and treatment in all Government-run institutions/hospitals. Five days later, 'The National Insurance Act' came into being. It provided for an inclusive scheme of social insurance financed through contributions paid by the employee, the employers and the State. This compulsory scheme covered various contingencies including sickness, employment injuries and diseases, unemployment, widowhood, orphan-hood and old age pensions. Although this Act is usually criticised for not covering self-employed persons, in reality it

¹¹National Office of Statistics, *Statistics on Income and Living Conditions: Salient Indicators*. News Release 5 January 2012, Malta, 2012.

gave them the option to become 'voluntary contributors'.¹² Voluntary contributors became entitled to the receipt of old age and widows' pension as well as guardian's allowance and marriage grant.

In the 1980s, Health and Environmental Services were the responsibility of the Department of Health, with older persons making use of the primary medical care and the acute hospital services available to the whole population. Drugs were free in hospitals but chargeable elsewhere except for patients in low income groups (as determined by means test) and for those with certain scheduled diseases¹³ (e.g. diabetes, hypertension etc.). Moreover, the Health Department offered specific health and social care services to older persons:¹⁴

Domiciliary Nursing. Domiciliary nursing services were awarded by the Government to a private nursing association. In 1985, this service employed thirty-two Community Nurses, with cars and drivers provided by the Department of Health and administered privately. Requests for services came from private and polyclinic General Practitioners and hospital doctors on the patient's discharge. The service did an average of 850 visits daily.

Scheme II. The scope of this service was to assist those older persons who could not look after themselves or obtain regular help from relatives and others. To be eligible for this service, one had to be house bound or nearly house bound, and deprived of any familial assistance. The scheme was provided by five health assistants and two health auxiliaries coordinated by a senior nurse. In 1985, there were 90 persons on the books for the service. In addition to periodical house cleaning (for example every fortnight), this service consisted of daily

¹²Pirotta, 1987.

¹³Abela, Nathalie, 'Enabling the needs of the elderly to be met in the community: The required roles of government and voluntary agencies', unpublished dissertation, Diploma in Applied Social Studies, Faculty of Arts, University of Malta, 1988.

¹⁴Cachia, John, 'Care of the Elderly in Malta', unpublished dissertation, Master in Science in Community Medicine, London School of Hygiene and Tropical Medicine, University of London, 1985.

visits by Community (Paramedical) Services staff to give some or all of the following services in accordance with the medical needs of the patient – such as bathing, shaving and foot toilet; helping patient out of bed and to get dressed; bed making; walking and other exercises; tidying up and other light domestic work; shopping; preparation and giving of simple meal; taking prescription to chemist; drugs distribution at patient's home; and preparation of laundry bundle. This service was available daily during normal working hours except on Saturdays, Sundays and Public Holidays. Except for the periodical house cleaning visits, the daily visits were not expected to exceed 45 minutes.

Convalescence. In 1985, Boffa Hospital had 108 beds, 20 in the infectious disease department, and with the rest shared between radiotherapy, terminal care, dermatology and convalescence for older persons. The policy for admission for convalescence was short-term, for not more than three months, and then either back to one's home or into long term care.

Geriatric Institution. The *Has-Serħ Residence*, or as we know it today St. Vincent de Paule Residence, included 950 geriatric beds, 107 psycho-geriatric beds, and 39 beds in sheltered flatlets in 1985. Nurse-patient ratio was 1:4.6. Amongst the geriatric wards there was a fixed complement of bed-ridden, semi-independent, and in the terminology of the day, 'walking cases'. In sheltered flatlets, only those with minimal disability were allowed. If problems arose they were transferred into geriatric wards. During the 1980s there was a steady flow of admissions with government statistics reporting 385 and 352 admissions in 1982 and 1989 respectively.¹⁵

Residential Homes. In 1985, the Government offered 60 places at the *Haż-Żmien Residence* in Mtarfa which opened in 1979. There were strict admission criteria and only those who needed minimal care were kept.

¹⁵Cassar, 1994.

If their levels of dependence increased to the extent that they became confined either to their chairs or beds, they were transferred to *Has-Serh*. The Labour government is also to be credited for initiating the setting up and coordination of the first community residential homes for older persons, – namely, the ones in Floriana and Zejtun which opened on 20 April 1987 and 5 May 1987 respectively.

Social Services and Welfare. Patients admitted to *Has-Serh* and *Haz-Żmien* forfeited a large percentage of their public pensions to the Welfare Committee of the Social Services Department, with the rest being given to them as pocket money. All the money went into a common fund from which residents benefitted in several ways. Outings and parties were organised on a regular basis, and every month they were given a large food hamper together with other necessities – soap, towels, dresses, shoes, shampoo, etc.

In September 1985, the Labour government proposed to the Secretary-General that a United Nations [UN] International Institute on Ageing should be established in the island to help developing countries prepare for the inevitable consequences of a dramatic increase in their older populations.¹⁶ The UN reacted favourably and conducted a feasibility study which was subsequently examined by an inter-governmental expert group. As a result, the UN Economic and Social Council in 1987 recommended to the Secretary-General the establishment of the International Institute on Ageing (INIA). On October 9, 1987, the UN signed an agreement with the University of Malta to establish the International Institute as an autonomous body under United Nations auspices. The Institute was inaugurated on April 15, 1988, by UN Secretary-General Javier Pérez de Cuéllar.

The positive impacts of such policies were various, as such services functioned to increase the degree of satisfaction and happiness of older persons, enabling them to live their lives in context, whilst ensuring a

¹⁶Camilleri, Reno, 'A demographic and socio-economic profile of ageing in Malta', International Institute on Ageing (United Nations – Malta), Malta, 1993.

relatively good quality of care. However, services available to frail elders included too little, if any, by way of rehabilitation, and all that was offered was, in actual effect, custodial care. Moreover, such a situation only served to 'biomedicalise' ageing in Maltese society. Two dimensions are noteworthy in this respect: first, the construction of ageing as a medical problem, and second, the behaviours and policies growing out of thinking of ageing in this way. In other words, ageing becomes presented as a medical problem that can be alleviated, if not eradicated, through the 'magical bullets' of medical science. The 'biomedicalization of ageing' had tremendous socio-political consequences, with physicians being set in sole charge of the definition and treatment of old age, primarily as a disease. Today, it is clear that the power of the medical model has drained resources for the scholarship necessary to pursue promising alternative social, behavioural, and environmental approaches, whilst simultaneously encouraging the neo-liberal medical 'bullet' for those seeking the 'nirvana' of a happy and eternal life. It is no understatement that all Parliamentary Secretariats appointed by Nationalist and Labour Governments in the past 23 years, with the exception of just one, held a medical professional background.

Older persons: Opportunity or burden?

The 1996-1998 legislative was too short for the Labour Party to embed ageing policies in a substantive and long-lasting direction. However, it continued to support and strengthen the various services established by the previous two Nationalist governments. For instance, the Labour Government allocated funds to open new community day centres such as the one in Sliema, dedicated much energy to solve the public transport issues faced by older persons in rural areas, and continued to invest in rehabilitation services. Further legislation was passed so as to improve the material conditions of older persons. On the 4th of October 1997 amendments were made to the 1987 Act in order to give a new meaning to the term 'Service Pension'. From this date, a service pension for social security pension assessment was only considered as long as the original rate of such pension was over

Lm200 (€446) per annum and had not been wholly commuted. If this is the case then the service pension is taken at its original rate – that is, when it was first received by the pensioner or the spouse in the case of a widows' pension. Moreover, from January 1998 all differences between the conditions for entitlement to a widows/widowers pension were abolished. In fact, up to that date, a widower was only entitled to a Widowers' pension if he was not working and had, prior to his wife's death depended solely on her income. However, this was not the case for widows who were allowed to work and receive a social security pension at the same time. The new amendments eliminated this discrimination and established that all the benefits applicable to a widow as regard to contributory benefits were to apply to a widower *mutatis mutandis*.

The 1996-1998 legislation occurred in a period which is now being identified as a significant and historic turning point in discussions about the nature of later life. On one hand, ageing became reconstructed in more positive terms, with non-governmental organisations being actively involved in demonstrating the potential for a new meaning to be applied to ageing. One positive construct centred on older persons' ability to work, with research demonstrating clearly how most older workers prefer to have the choice of whether and when to retire rather than be forced to exit the labour market through some mandatory retirement age.¹⁷ An interrelated focus in this respect was upon the rich supply of valuable experiences, wisdom, and skills, that many older people possess and which was being totally underutilised at both national and local settings. It is positive to note that the Labour government gave strong support to such 'positive ageing' thesis. Quoting again the then Parliamentary Secretary,

In this current day we witness active, productive and less dependent elders, who are relishing their third age and very satisfied...more

¹⁷Walker, Alan, 'Public policy and theories of ageing: Constructing and reconstructing old age', in *Handbook of Theories of Aging*, ed. Bengston, V.L. and Schaie, K.W., New York, 1999, 374.

older persons are participating in voluntary services related to elderly care. The government must do its utmost so that such a phenomenon flourishes. We should, for example, engage older persons in the planning, coordination, and carrying out of elderly services.¹⁸

Moreover, on the day that the new community day centre in Sliema opened, the then Prime Minister Alfred Sant emphasised clearly how the Labour Party's vision for ageing policy was one of empowerment and active engagement:

This day centre will instil a sense of community amongst older persons, so that they discover new opportunities and will feel that their future is promising...*The next policy step is to ensure that this day centre is managed by older person themselves.*¹⁹

On the other hand, the mid-1990s were also characterised by the non-sustainability of ageing populations as governments became increasingly aware that that in the foreseeable future there would be fewer people in employment to shoulder the burden of paying to support the large population of older persons. Population ageing was therefore also reconstructed in terms of a threat to economic growth and to the affordability of existing welfare regimes. International organisations such as the World Bank and the OECD tended to paint a bleak picture. For example, the highly influential report of the World Bank, entitled *Averting the Old Age Crisis*, warned that if trends continue, public spending in pensions will soar over the next fifty years.²⁰ Typically, this report advised the introduction of privatised pensions and services as the key solution for such a predicament. The Labour government was

¹⁸Buhagiar, Louis, 'Malta: An ageing population – A future scenario', in *Malta Ageing Forum 1997: Forum Anzjani Maltin*, ed. Calleja, J and Tranter, A., Malta, 1998(b), 71.

¹⁹Alfred Sant quoted in *L-Orizzont*, 'Jinfetah ċentru ta' matul il-jum għall-anzjani fi Sliema', 14 February, 1997 [my translation and italics].

²⁰World Bank, *Averting the Old Age Crisis*, New York, 1994, 7.

not unaware of this side of situation. In line with the 1996 electoral programme which stated that the private sector would function as the motor of economic development within a context of fair competition, it supported the continuation of public-private partnerships as regards residential and nursing services for older persons. In fact, Louis Buhagiar underlined how

The present government is committed in its efforts to provide more homes for the elderly in the most cost-effective manner. We have already...spelt out our long term policy in this regard and believe it to be the best in the present setting. We will continue to work together with the private sector as need arises to our mutual advantage and eventually to the benefit of the elderly community.²¹

However, the period that the Labour Party was in government was too limited to continue developing and implementing the complex features of public-private partnerships. The development of such modern policies became, indeed, the staple feature of ageing policy of succeeding Nationalist governments.

Despite the long-standing international drive towards the implementation of positive ageing policies, for much of the late 1990 and 2000s the Labour Party's vision continued to veer close to the traditional monolithic view of older people as poor, frail, and in need of medical and social assistance. This was especially clear in the 2008 Electoral Manifesto. If elected to government, the Labour Party promised an action plan to improve the quality of life of older persons living in their own homes in the community that would include:²²

Community care services. Local councils will establish an informational register of older persons so that the government will be in a position to provide the needed health and care services in more efficient manner.

²¹Buhagiar, 1998(a), 11.

²²Partit Laburista, 'Dinjità u Wens lill-Anzjani: Abbozz ta' Pjan: Pjan Laburista Bidu Gdid'. Available at http://www.mlp.org.mt/rizorsi/dokumenti/downloads/anzjani_nov_06_1.pdf (updated November, 2006)

Multi-disciplinary team. The Labour Party guaranteed a drastic improvement in community care by establishing a multi-disciplinary team that includes various professionals to focus solely on community care needs.

Protection. Older persons will be protected from the possibility of social exclusion and psychological problems through the establishment of more community day centres, night shelters, and night fostering.

Community carers. A call will be issued for community carers to provide a service that goes beyond that provided by the present 'home help' service (however, this action point stopped here and one never got to know the exact parameters of this 'new' service). And finally,

Tax rebate to families who pay or contribute to their parent's fees to stay in residential or nursing homes run by either the private sector or the church. Unfortunately, this promise removes the older person as the focus of ageing policy.

It follows that the Labour Party's 2008 Electoral Manifesto on ageing policy is somewhat disappointing, since its vision only serves to 'biomedicalise' ageing in Maltese society. Instead of a yearning to achieving higher degrees of social levelling, social cohesion, and social justice, its primary focus constituted a perception of later life as a biologically constructed entity. Such policies, unfortunately, serve only to make older persons experience structured dependency. The latter arises when policy makers draw age-segregated policies that single-out, stigmatise, and isolate the aged from the rest of society. The alternative is to view later life as a socially constructed process, and hence, reflect how the state can aid older persons improve their material resources, social relations, civic inclusion, and community cohesion.

A social democratic vision for population ageing

The challenge for future Labour Party policies on ageing can be summarised in two key points. First, to draw policies that acknowledge the rich supply of valuable experiences, wisdom and skills, possessed

by many older people. And secondly, ensuring that social and health care policies are based on the values of social justice, social levelling and social cohesion, rather than a neo-liberalist agenda that paves the way for a reform of care driven by the private sector. Although the privatisation of care has a necessary place in 21st Century welfare, its values and priorities should never lead welfare reform. Policies on ageing are to work towards the transformation of older persons into active citizens who should be encouraged to participate in society rather than be seen as a potential burden on it. Moreover, the task of building a better Malta for older persons should acknowledge that the contribution of older people is vital, both to families and to voluntary organisations. Policy makers must recognise older persons' roles as mentors – that is, providing ongoing support and advice to families, young people and other older people. The following constitute key challenges for a truly social democratic and progressive vision for ageing policy.

Financial and Sustainability of Pension Reforms

Without doubt, the size of the older population and the time spent in retirement will create considerable pressures on sustainability of local public pensions. It is worrying that the assessment of ageing-related public expenditures by the Economic Policy Committee of the European Commission reported that (as a result with its obsession with fiscal sustainability), Malta will decrease its public spending on pensions over the next 50 years by as much as 61 percent.²³ Whilst it makes sense that pension reforms are driven by concerns for the public spending impact of population ageing and a need for fiscal consolidation, a focus on fiscal sustainability should not be allowed to override the importance of assessing the potential impact of these reforms on the relative economic position of pensioners. Pension

²³European Commission, *Annex to the COM (2006) 62 – Synthesis report on adequate and sustainable pensions*, Commission Staff Working Document, [COM (2006) 62 final], Brussels, 2006.

reforms must remain steeped in social justice and always attentive to the fact that the primary goal of a pension system is to reduce poverty and provide retirement income *within* a fiscal constraint. This is surely not the place to develop a comprehensive strategy for the future public pension system in Malta, as this warrants a whole publication in its own right, but it is hoped that the Labour Party faces the challenge to ensure that pension reforms should aim at not only sustainability but also at adequate pensions that keep pensioner poverty at a low level. In this respect, there are two issues of considerable importance for future Labour Party governments. These include:

- First, making individuals aware of the impact of the changes that are happening in the pension system, so that they are trying to accommodate such transformations by extending their working career and (possibly) additional personal savings;
- And secondly, in the absence of adequate time for positive behavioural changes it remains paramount that certain groups, particularly lower income earners with a worse state of health and less employable skills, be able to maintain their living standards in retirement.

These issues confirm the need to reassess the reforms to clarify the incentives for working longer to remain in line with positive gains in life expectancy. This brings us to the next challenge.

Extending working life

The monolithic view that 'later life' is simply a matter ending one's working life in the paid labour force and entering retirement no longer holds true.²⁴ For one thing, such a pattern does not arise at all for women who are not in paid employment, since their main life's work

²⁴Marin, Bernd, and Zaidi, Asghar, 'Trends and priorities of ageing policies in the UN-European Region', in *Mainstreaming ageing: Indicators to monitor sustainable policies*, ed. Marin, B. and Zaidi, A., Aldershot, 2007, 61-105.

has been in domestic duties and the question of retirement does not arise for them in similar ways that it does for paid workers. Moreover, one predicts that as Malta's consumer values continue to move in stronger gears more women in their forties and fifties will actually move out of housework and into paid jobs, which effectively means that for a strong number of older women of the future ageing will entail a period of entry rather than exit from paid work. Policy makers must find a way to induce older workers to remain in the labour market longer, so as to defuse fiscal and social problems in the future. One possible policy agenda is one of 'flexible later retirement'. To achieve this, there is a need for additional incentives in the system to enable people not just to move between jobs in later working life but also to work part-time without losing their entitlement to benefits. Such policy incentives should encourage older workers to avoid the phenomenon of a 'cliff edge' fall from full-time work directly into retirement.

As in other European countries (such as Belgium, Hungary and Italy), the single most important group of inactive people of working age are the middle-aged or mature workers 55-64, with social exclusion, drop-out, or exit rates affecting the large majority of this age cohort. In Malta, four out of five middle-aged women, who have more than three decades of additional life expectancy, are still excluded from the world of work. Thus, large-scale social exclusion makes for an entire 'lost generation' in mid-life.²⁵ However, this also presents a positive opportunity for future Labour Party governments to tap into the enormous potential of this silent labour reserve, and a reform package to enhance work capacity will be a possible good way forward. Admittedly, at present there are more questions than answers, and policy makers are far from solving the issue of extending working life. Moreover, future Labour Party governments have tough and unpopular choices to make. The state must no longer dismiss large-scale early exit from work as an inevitable phenomenon but must work effectively to block early

²⁵Marin, Bernd, and Zaidi, Asghar, 61-105.

exit pathways. It is well-known and shared by all expert institutions and economists that governments of ageing populations should never allow for special pension schemes to appease special interest groups, regardless of how strong the pressure is. Rather, pension rules should always be universal and fully transparent, avoiding corporatist and sectional privileges for special occupational groups. Apart from being costly themselves, such privileges tend to demoralize a great majority of the working population and to reinforce and legitimize widespread resistance to any change or reform.

Social exclusion and poverty

In order to reduce the risk for older persons to experience poverty and social exclusion it is necessary to link both public and private pension schemes to wages. There must be a social partnership agreement that increases the value of state pensions relative to the Gross Average Industrial Earnings. With the numbers of older persons expected to increase in the future, the figures of income poor among this demographic group will also rise unless the issue of income inadequacy is tackled.²⁶ Hence, some form of compulsory pension scheme is necessary to ensure greater pension coverage, as well as better incentives for working longer, which brings us to the next priority. A truly progressive strategy to combat social exclusion in old age should consist of two main elements. First, targeted action to tackle poverty and social exclusion among

²⁶One must emphasise here that levels of material poverty in Malta are relatively low nowadays because many older persons in the fifties and sixties are inheriting relatively healthy amounts of property and monetary assets. The latter have been accumulated by their octogenarian and nonagenarian parents whose life course was characterised by *ghaqal* (tr. 'prudence') and *bzuliġa* (tr. 'diligence') which constitute the traditional Maltese value of honour. However, as incoming generations are embracing a leisure lifestyle, as well as showing increasing preference for private services of personal and medical care, future inheritance levels will drop substantially – something that is already the case in the United States of America and a number of European countries. As a result, one expects material deprivation to increase in future years.

current cohorts of older people and, secondly, a long term programme of preventative action to ensure that *future* cohorts do not experience social exclusion in old age.²⁷ Such action is best to include the following two strategies. First, combating poverty and social exclusion in later life. Despite the significant progress made by Government in reducing poverty and deprivation among older people there is a persistent minority living in extreme poverty and experiencing multiple exclusion. A new initiative is required to re-invigorate the drive to reduce poverty in old age. The only way that current pensioners can be lifted out of poverty is by further Government action. Arguably there is a very urgent need for action because many of the poorest pensioners will not live to see the fruits of medium or long-term policy goals. A combination of national and local policies is required if multiple exclusion is to be overcome fully. And secondly, preventing disadvantage and social exclusion. If the intention of policy makers is to prevent social exclusion among future cohorts then, alongside the urgent fire-fighting to combat current poverty and social exclusion a new long-term perspective is required to prevent the accumulation of disadvantage over the life course. In this light the challenge to policy makers and service providers would be to re-orientate the welfare state from its mainly safety net/remedial functions towards some preventative ones. In other words, to focus on the promotion of social inclusion across the life course as well as tackling exclusion in later life.

Community, residential, and nursing care

The growing number of older people in the population, especially those above the age of 75, will provide robust challenges for the funding and delivery of health care in the coming decades. Three key challenges

²⁷Walker, Alan, Barnes, Matt, Cox, Kate, and Leesof, Carli, *New horizons research programme: Social exclusion of older people: Future trends and policies*, London, 2004.

are present in developing a sustainable health policy for older persons: the need to redefine what is old age in the context of health care, the importance of focusing on health promotion and primary care to minimise the stress for older people, and the cost of unnecessary dependence on acute hospital care. In addition, the further development of adequate and appropriate mental health services must be identified a priority. Given the concern over ageism in this sector, this also needs the introduction of a health proofing framework and to focus on equalising opportunities for health services. This could involve positive discrimination and the provision of material and structural support of individuals whose choices in relation to health care are limited by their economic and social circumstances.

The development of high-quality, equitable, affordable and sustainable community, residential, and nursing care structures is another crucial challenge. There are three situations in which older persons are found to be dependent on support from other people: (i) those living alone in normal houses or apartments, needing a range of different services, showing functional incapacities after illness and disability, (ii) those discharged from hospital with long-term care needs, who suffer from geronto-psychiatric and/or geriatric diseases, and (iii) those with chronic-degenerative diseases and at risk to lose their autonomy. State welfare must ensure that the revenue collected from taxes go towards the implementation of services that meet the needs of the most vulnerable and subaltern sectors of older persons. For example, the current policy of accepting only relatively independent older adults for admission in community residential homes must be reversed. On the other hand, these relatively independent older adults must be channelled to recognise the virtues of volunteerism whose one possible avenue may be helping less fortunate companions who reside in community residential homes. Key issues in community, residential and nursing care include:

Legislation. The dearth of legislation in relation to personal social services must be tackled in a comprehensive manner, to ensure that greater access to services are available to those citizens on low incomes and who hold no assets. In other words, not all older persons have an

equal claim to state-sponsored care but one must prioritise welfare state services to the most dependent and needy sectors of the ageing cohorts.

Quality standards. National quality standards must be implemented in relation to objectives, quality of care, education and training, staff-client ratios, and physical environment issues. Monitoring and evaluation practices must also be put in place. There is a real need of a shift from an emphasis on the quantity of services available towards an improvement in the quality of care available that approaches clients from a holistic perspective.

Anti-ageist policy. Public policy must move away from the traditional paternalism of service providers. More positive conceptions of later life are to be embraced where ageism is challenged in a way that does not marginalise older persons who are already frail and dependent. In practice, there is an immediate need for an Age Discrimination Act that outlaws age discrimination beyond the workplace and focuses on goods, facilities and services.

Involvement in decision-making. Older persons, including those with a cognitive impairment, must be brought into the decision-making process. Inclusivity acknowledges the two-way nature of the caring relationship, and helps to reduce the stigma attached to using some of the services. A positive way to implement this is to allow members of community day centres and residential/ nursing care homes a say in the planning and organisation of such services.

Formal services. Approaches must be developed in which family carers can be facilitated and supported to continue in their role as carers. At present, the capacity of informal carers to offer care in the future may be waning as the stress and strain is often immense. This can be alleviated by providing personal social services in a flexible, timely, and co-ordinated fashion. It is hoped that future Labour Governments act as catalysts for the foundation of a National Charter for Family Carers that ensures that the rights and obligations of carers are respected and honoured, as well as guarantee that the quality of care to older relatives is of an acceptable standard.

Public, private, and voluntary mix. The mismatch in services has underlined the need for greater clarity about roles and responsibilities between the public, private and voluntary sectors so that there is some meaningful sense of 'joined-up' services. This, of course, has to be achieved in the context of a planned approach to the provision of a comprehensive range of formal personal social services. There must be a sincere move to ensure that services are not being duplicated in favour of a system where different services complement each other.

Elder abuse. Finally, there are two key challenges ahead in regard to abuse of older people. First, although there are various articles in Malta's general criminal code and its civil code dealing directly or indirectly with the problem of elder abuse, one finds no definition of 'elder abuse' nor is there any specific regulation of legislation on the subject. Second, there is a need to embark on national media campaigns that raise awareness of the issue, inform people of their rights, reduce stigma, encourage the reporting of abuse, and form part of preventative strategies.

Lifelong learning in later life

At present, only a very minor percentage of Maltese older adults are engaged in lifelong learning pursuits.²⁸ Although older learners approach their learning objectives with extraordinary passion, with the range of subjects followed being simply remarkable, there needs to be a serious lifelong learning rationale that constructs a practical framework for older adult learning. By participating in learning activities, older persons become better able to understand financial and legal matters, make more informed consumer choices, live independently, develop new skills and interests, understand social, political and technological change and enjoy a more fulfilling life. Adult education also helps them to overcome social exclusion and isolation, further their active

²⁸Formosa, Marvin, "Lifelong education for older adults in Malta: Current trends and future visions", *International Review of Education*, vol. 58, no. 2, 271-292-85, 2012.

citizenship, whilst bringing benefits in fields such as housing, crime and safety, arts and culture. Learning activities also promote older people's mental and physical health, well-being and social affiliations. Indeed, local research found that a majority of learners reported that engaging in educational activities had a positive impact in ways such as increased self-confidence, enjoyment of life and coping with events.²⁹ It is hoped that future Labour Party governments enact policies that encourage older adults to take part in lifelong learning activities, whether in the formal, informal, and non-formal sectors. Educational policies must be set in place so that more older learners enrol in higher education, not just at the University of Malta, but also the Malta College of Arts, Science and Technology and the Institute of Tourism Studies. Non-formal learning avenues – ranging from state-sponsored bodies such as Local Councils, and the Employment and Training Corporation, to voluntary bodies such as trade unions and cultural organisations – must also be empowered, both financially and in expertise, to plan and organise educational courses that meet the specific learning needs of older people. There is a need for public policies that facilitate the increasing participation of older adults in informal learning which occurs in a wide range of locations, ranging from libraries to dance clubs, and generally through self-directed strategies.

A progressive government must work towards ensuring that access to learning throughout the life course is perceived as a human right, whilst strongly guaranteeing that adequate learning opportunities in later life becomes a central objective in government policy. Two broad priorities emerge from such a goal. First, it is opportune to grapple with and remove the common barriers that preclude older persons from participating in learning activities. Affirmative action must be deployed to counter the fact that many older persons left school at a relatively early age largely due to socio-economic imperatives, experienced a lack

²⁹Formosa, Marvin, "Older adult learning in Malta: Towards a Policy Agenda", *Mediterranean Journal of Educational Studies*, vol. 15, no. 1, 61-85, 2010.

of opportunity to pursue continuing education, and especially in the case of women, encountered cultural mores that envisioned the role of women as one of domesticity. Moreover, it is unfortunate that higher and further education institutions are not passionate about late-life learning and opening their doors to older learners. Elder learning does not bring in grants or offer much career paths in vocational centres. It thus tends to be ignored and not be given priority in marketing exercises. And secondly, there is a need for a national policy framework on lifelong learning that includes a sound emphasis on later life. This framework must be guided by a rationale that reinstates lifelong learning in the values of social levelling, social cohesion, and social justice.³⁰ Local authorities must be awarded an explicit role and responsibility in the planning, coordination and financing of age-related services including adult and late-life learning. In partnership with third sector agencies and formal education providers, Local Councils must take the role of learning hubs that bring all the providers together, to coordinate resources, consult older people, and promote learning among older people. A national policy on lifelong learning will only be successful as long as it meets the needs of citizens with learning initiative that help them plan for retirement, and offer learning initiatives to family relatives and volunteers involved in the care of older persons, as well as frail older persons themselves whether still residing at home or residential/nursing complexes.

Conclusion

In retrospect, the role of the Labour Party vis-à-vis the welfare system for older persons commenced very modestly in the 1920s, to impact significantly with a widening of the allowances and pensions offered in the 1970s, and eventually social care services in the 1980s and

³⁰Formosa, Marvin, "Universities of the Third Age: A rationale for transformative education in later life", *Journal of Transformative Education*, vol. 8, no. 3, 197-219, 2011.

1990s. The history of the Labour Party demonstrates strongly that the party envisioned older people participating in social and civic life, having sufficient income to support and enjoy an acceptable standard of living, and having access to good quality services in the community, including health, education, transport, housing and security. As regards the future, the Labour Party is encouraged to take advantage of the potential of Malta's older generation. People in this generation have decades of experience, lots of wisdom and can look forward to a long and healthy retirement. The challenge is to tap into that resource. We need to recognise that many older people want to carry on working and make very good employees, so we need greater flexibility over part-time work and retirement. That way, Malta's ageing population can continue contributing to our economy for years to come. In a nutshell, it is hoped that the Labour Party recognises that older generations are the ones who have made this country great and believes firmly that older persons have a big part to play in making it greater still.

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