ANED country report on the implementation of policies supporting independent living for disabled people

Country: MALTA

Author(s): KUMMISSJONI NAZZJONALI PERSUNI B'DIZABILITA'

The information contained in this report was compiled by the Academic Network of European Disability experts (ANED) in May 2009.
PART 1: EXECUTIVE SUMMARY AND CONCLUSIONS

The options open to disabled people in Malta to live independently have increased considerably since the Equal Opportunities Act came into force in 2000 and following the establishment of the state agency Agenzija Sapport in 2003. However, disabled people may still find it difficult to gain access to these services due to many factors. One such factor is the lack of financial and human resources to develop more personal assistance services or supported housing initiatives such as those offered by Agenzija Sapport.

Despite the fact that disabled people receive financial assistance in purchasing adaptive equipment, they encounter difficulties in accessing independent living services. In addition, the non-contributory disability pension awarded to disabled people, which is roughly equivalent to 55% of the national minimum wage, does not provide disabled people with adequate financial assistance to live independently. While the pension needs to be increased to reflect present economic realities and lifestyle choices, the benefit allowance awarded should also be revised to take the specific needs of every individual into account. A system of direct payments to allow disabled people to buy their own services and exert autonomy over their life should be also considered.

Disabled people in Malta are still largely passive actors in the area of independent living. In fact, while Agenzija Sapport operates on a person-centred model, disabled people themselves have never run their own independent living services or initiated such service provisions. NGOs working in the sector are seldom run and maintained by a majority of disabled people. The idea of ‘independent living’ is a relatively new one and the term is rarely used to refer to services and support that provide disabled people with equal opportunities for choice and self-determination.

Moreover, in order to be in a better position to design a strategy to improve on independent living, there is a need for reliable statistical data. As well as this, there should be information, advice and training for disabled people so they can take control of independent living services. Concurrently, the state should continue to fund the work carried out by Agenzija Sapport and NGOs providing similar services so that larger numbers of disabled people can benefit from access to independent living.
PART 2: LEGAL AND POLICY CONTEXT

The Social Security Act (Cap. 318) (1987) establishes the right of people with severe impairments or those with a visual impairment to receive a pension if they cannot work full-time. However, the pension benefit is not meant to help disabled people to be more independent, predicated as it is on a traditional view that disabled individuals will, and always should have their basic needs taken care of by members of their nuclear and extended families. Reflecting this now outdated mentality the present level of pension benefit is equivalent to just 55% of the National Minimum Wage. People receiving this benefit risk losing it altogether if they earn more than the National Minimum wage, and this has been deemed to be a disincentive for those wishing to enter employment (Cordina 2004).

In 2008, the Social Security Act was amended to allow a severely disabled couple to retain both their benefit payments, provided their separate incomes did not exceed the national minimum wage. However, in cases where a disabled person marries a non-disabled person who earns more than the national minimum wage, s/he loses their entitlement to the pension benefit.

The Equal Opportunities [Persons with a Disability] Act (Cap. 413) (2000) stresses the concept of non-discrimination in relation to disabled people. While the Act makes reference to the idea of ‘independent living’, its main focus is on offering disabled people equal, or comparable treatment to that enjoyed by non-disabled people. For instance, it affirms that disabled people should not be discriminated against in the areas of education, employment, physical access, provision of goods and services and housing. On the other hand, the Act does not go into detail about how disabled people can have access to independent living as such.

In the Maltese context, the primary force that actively promotes legal and policy change in respect of disability issues is the National Commission Persons with a Disability (KNPD). There are many non-governmental organisations operating in the disability sector but very few have adopted a social model view and many are largely run by non-disabled people or by parents of disabled people. Although there is emerging evidence of a disabled people’s movement, the prevailing idea of disability is still tied to the individual model perspective (Camilleri 2006).
PART 3: PROGRESS TOWARDS INDEPENDENT COMMUNITY LIVING

The state has adopted a policy of mainstreaming in various areas. For example, larger numbers of disabled children were integrated in education as early as 1988 and a national inclusive education policy was introduced in 1994. The principle of equal employment opportunities for disabled people was introduced nationally through the 1969 Employment (Handicapped Persons) Act, as it was then known. However, investment in providing disabled people with equal opportunities to live independently has only started relatively recently.

Until the early 1980s, the majority of disabled people received education in segregated environments and it was expected that their families would care for them later in adulthood. In the event of the death of the primary caregiver, disabled people had limited life options and a significant number were forced to live in segregated residential institutions (although the figures are not available). The main institution which provided such services still operates, but practices under the new administration emphasize empowerment and greater self-determination.

The Equal Opportunities Act in 2000 gave disabled people a legal right to equal opportunities in employment, education and housing. On the other hand, despite the recognition of such rights, there was an absence of any personal assistance service provision to facilitate disabled people’s independence and self-determination.

In 2001, efforts to address this concern were taken through the establishment of the supported living division within the Foundation for Social Welfare Services (FSWS). These services had the primary aim of helping disabled people at risk of institutionalisation to access support within their own communities. At the same time, following the publication of 2 reports (MEU 1999, 2000), a case was made for the consolidation of a dedicated agency to fulfil this role. Agenzija Sapport was set up in 2003 with the brief of providing professional personal assistance services “[...] based on need and provided in settings of one’s choice.”

In 2004, a case was made for the introduction of a form of direct payment to help disabled people access employment and for them to escape the ‘benefits trap’ and reduce their dependence on social welfare (Cordina, 2004). “The Economic Dimensions of Independent Supported Living for People with Disability” noted that although the provision of direct payments might have high economic costs in the implementation stage, the state would recover the losses in the long term. However, the proposed adoption of direct payments was not taken up in state policy, although financial assistance to help disabled people to become more active in employment has been promoted through changes to the Social Security Act in 2008 (SSA / Cap 318).

To date, no national study to examine the effectiveness of current policy in realising independent living has been carried out.

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PART 4: TYPES OF SUPPORT FOR INDEPENDENT LIVING IN THE COMMUNITY

Most disabled people receive assistance from family members. Although there has been movement from a system based on needs to one based on rights, institutional provision still predominates in Malta. Steps towards supporting people to live in their own homes have still to be developed to any great extent. As mentioned above, there is a lack of data on the living conditions of disabled people.

Many support services in Malta are run by the state. Co-ordination of these is the responsibility of Agenzija Sapport (see below).

Disabled people can benefit from home-help and other services provided free of charge for elderly people. One disadvantage is that disabled people may need to take time off work if they want to benefit from such services as these are primarily intended for retired people and are only provided during daytime working hours.

The Social Security Act has been amended to give financial concessions in the payment of national insurance contributions to disabled people who employ their own personal assistants, while the establishment of a Carers’ Pension assists family members who provide support or care to relatives on their own on a full-time basis. A remaining difficulty is that payment levels are not high enough to permit disabled people to employ personal assistants.
4.1: PERSONAL ASSISTANCE SERVICES

Only data for the number of disabled people using state support services and those on support waiting lists are available. However, there is no indication on how many disabled people or their families are using other support services.

Assistance services are provided by both the state and NGOs. Sapport is the only state agency that provides personal assistance.

The following information has been compiled from the website of Agenzija Sapport:

- Personal assistance services are aimed at providing disabled people with support in their own homes or work places depending on each client’s needs.

- Intervention services aim to provide disabled people with training in skills related to daily living and/or communication to help them achieve a better quality of life and to continue living at home and in the community.

The decision as to who benefits from these services depends on the particular needs of each client. To ensure that no discrimination or preference is given to individual applicants, Agenzija Sapport has set up a Service Allocation Committee (SAC), which is a semi-independent committee responsible for carrying out service allocation.

Sapport also offers residential services where disabled people are given an opportunity to live in the agency’s residences (please refer to Part 5). Disabled clients are allocated a separate flat while each resident can benefit from the personal support of the same agency. However, Sapport only recommends this option in situations where the disabled person cannot continue living in his or her former residence. This decision is taken by a team of social workers.

Other services provided by Agenzija Sapport include:

- Day care services aimed at helping disabled people maximize their potential for independent living while providing caregivers with an opportunity to continue assisting disabled people in their own homes.

- Social work services which provide help to disabled people and their families in dealing with social problems. In addition, this service aids the agency to develop a person-centred programme and continued assessment of short term and long term needs of each individual.

The agency monitors and assesses the effectiveness of its services on a regular basis. Amongst the challenges faced by Agenzija Sapport, there is lack of human resources, which means that disabled people who require their services may have to wait for a long time before benefiting from assistance.

Voluntary and private non-governmental organisations also offer services such as that of respite care for disabled people and their families. However, there are also long waiting lists for applicants. The services provided in the private sector may also involve payment, unlike those provided by the state, which are largely free of charge, or subsidised.

Examples of voluntary organisations providing support and training services are:

The Inspire Foundation provides assistance to people with physical and intellectual impairments in relation to education, therapy, socialisation and recreation. As part of its mission statement, inclusion and equal opportunities are listed. The organisation is reliant on charity fundraising events. Thus organisation was founded in 2009 after the Eden Foundation (which provided support services mainly to people with an intellectual impairment) joined forces with Razzett Tal-Hbiberija [The Park of Friendship] (which provided services for physically disabled people). Inspire Foundation offers services related to education, therapy, leisure and self-development. The approach of the Inspire Foundation includes the involvement of the family and also includes cooperation with the Employment Agency to help disabled adults in finding and maintaining a job. However, the approach of the programmes still have a strong emphasis on therapeutic intervention and attempts at ‘normalising’ clients.

The Richmond Foundation provides assistance to people with mental health issues. This organisation helps people with mental health issues re-integrate within their community and in employment. RF offers various support services to people with mental health issues. Examples include providing people with mental health issues with support to live in their own homes, assistance for them to find and maintain jobs and to provide clients with self-help skills. The RF also works closely with other people involved in the social environment of the client and organises sessions with other staff members at the client’ workplace to increase awareness about mental health. It is also involved in public awareness campaigns. Although it provides the service of a residential home “Villa Chelsea”, the aim of the RF is to ensure that people with mental health issues are re-instated within their own communities. RF works closely with other agencies, such as the employment agency and schools to assist people with mental health issues and tackle stigma and negative perceptions associated with this group.

Regarding the services currently being provided in the area of independent living, it is important to point out that none of them have been initiated by disabled people themselves, although Agenzija Support emphasizes the importance of user-involvement in the process of service assignment and delivery.

4.2: ASSISTIVE EQUIPMENT AND ADAPTATIONS

The National Commission Persons with Disability (KNPD) has an Assistive Apparatus Service or Servizz Għajnuniżt Speċjali (SGhS) that provides disabled people with financial aid in purchasing assistive equipment. This fund also provides disabled people with advice on the apparatus best suited for each disabled person. Although this service is not means-tested, the financial or social situation of the applicant may also be considered. Financial aid varies according to need, up to a maximum of around €1800, although this can be increased in special cases.

According to KNPD’s annual report for 2008, 304 people benefited from the SGhS fund in 2008 and the total of approved grants was €210,950. The average amount granted to applicants was €694 (KNPD 2008).

Apart from the SGhS, disabled people can also apply for additional assistance to purchase assistive equipment through the Malta Community Chest Fund (MCCF), which provides financial assistance to individuals and NGOs --- including disabled people. MCCF is under the Chairmanship of H.E. The President of Malta. Financial help provided through the CCF may vary depending on individual need.

Disabled applicants wishing to benefit from both SGhS and MCCF funding need to be approved by an independent board within KNPD.

In relation to housing, disabled people and their families can claim financial assistance to help them carry out necessary adaptations, primarily to bathrooms, kitchens and for widening of doors. Applications for housing adaptations are assessed by a board of the Housing Authority (HA). HA has the final say in granting these subsidies.

The Health Department also offers rehabilitation services to disabled people but these are impairment-based, mainly focusing on maximising functional aspects of the condition or compensating for the impairment concerned.

Finally, the KNPD is in the process of constructing an Independent Living Centre (ILC) aimed at providing disabled people with services related to independent living. The ultimate goal of the ILC is to provide a wide range of services to people with different impairments, but the current target is to provide assessment and training services to people with mobility impairments. Among the services planned, the ILC will provide general information related to disability services, wheelchair and driving assessments and training, whilst giving disabled people the opportunity to test out equipment.
PART 5: EVIDENCE OF GOOD PRACTICE IN THE INVOLVEMENT OF DISABLED PEOPLE

Agenzija Sapport’s residential services provide disabled people who cannot continue living in their own homes with an opportunity to live in the community. The residences staffed by employees of Agenzija Sapport mainly consist of a residence which houses a small number of disabled people. Housing units usually accommodate up to 4 residents.

A team of social workers assesses each request, follows up applicants and determines whether there are enough resources available to accommodate clients. Referrals are then short-listed according to criteria concerning individual needs and life situations. Each referral is submitted to the Service Allocation Committee (SAC), which decides on which applicants qualify, depending on the resources at the agency’s disposal. If an applicant’s request is approved, a resource team works with the disabled client and their informal support network to design a person-centred programme.

Before each prospective resident enters supported accommodation, they are prepared for life in their new residence by introducing them to their new home environment to get acquainted with support staff and the other residents.

Currently, the agency’s residences operate in four localities in Malta and they consist of different types of dwelling such as apartments, a bungalow and flatlets.

According to Agenzija Sapport:
1. The number of disabled people receiving community services stood at 104 in June 2009. This is a slight increase from the number of clients since the service started in 2003, when there were 100 clients.
2. Agenzija Sapport operate 5 residences in total, spread over the island. The maximum number of clients residing in a single residence (although in separate flatlets), is in the Vajrita complex, where there are 23 residents. The full capacity of this complex is 28 and 5 clients are in transition to living in the complex. The lowest number of residents is in Fgura with 3 clients fulfilling the total capacity.
PART 6: REFERENCES
Please provide an alphabetical list of bibliographic references for all the sources of evidence referred to in your report. Please include web links where these are available.

Agenzija Sapport, Url: http://www.sapport.gov.mt


Housing Authority, Url: http://www.housingauthority.com.mt/

Inspire Foundation, Url: http://inspire.org.mt/home

Kummissjoni Nazzjonali Persuni b’Dizabilita, Url: http://www.knpd.org/


Management Efficiency Unit (1999) "Residential Services for Persons with Disabilities", Malta: KNPD.

Management Efficiency Unit (2000) "Feasibility Study: Services for Persons with Disability", Malta: KNPD.
