

A Revisit On The Mediterranean Model Of Welfare System: Implication For Social Welfare And Policy Development In Nigeria

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Abstract: Mediterranean Welfare model has typically always been highlighted when analyzing the economic, social and political institutional arrangements that characterize the Southern European States. This model is understood for its combination of social welfare schemes with universalistic programs, likewise as for having relied heavily on the role of the family because the main supplier of services across a whole range of fields reminiscent of child care, state and precarious incorporation into the market, look after the aged and also the disabled, and housing. This paper however looked at the ideology, philosophy and modus operandi of the Mediterranean model of welfare system and its implications for welfare and policy development in Nigeria. This paper adopted or relied on evaluation theory as its theoretical framework where relevant literatures were reviewed in relations to the subject in focused and content analysis was the adopted methodology.

Keywords: Welfare, Model, Development, Mediterranean

I. INTRODUCTION

The Mediterranean welfare model is predicated on the principle that the family has the most roles in supporting its socially unprotected members (Popova & Kozhevnikova, 2013). It's the same as the Continental model, and nonetheless the market isn't terribly versatile to employment or economic policy. For an extended time, surveys have shown that family's values in Southern Europe were stronger than any place else within the Western world. Not like different areas within the continent, modernization apparently failed to bring a big decline within the intensity of contacts and commonality ties at intervals in the extended kinship in this region.

The robust institutionalization of marriage, the important role of girls in providing domestic services and care and also the existence of broad family support networks, allows states to have confidence in the family to fulfill the caring desires of their members and guarantee their basic economic security, therefore keeping political demand for public help (Kluzer, et al 2010). Countries whose policy system falls beneath the Mediterranean model have a lot of segmentation of standing

and rights and so the access to social provisions is extremely abundant conditioned. Trade unions in those countries typically have giant membership that can be an evidence of lower financial gain dispersion (Kluzer, Redecker, & Centeno, 2010). commonality expectations and resource pooling at intervals in the home square measure presupposed to have conjointly deactivated demands for the de-segmentation of labor markets, wherever girls and adolescents have historically operated as "outsiders" occupying less fascinating jobs than male breadwinners (either within the informal economy, or beneath short-run written agreement arrangements). The discussion on the existence of a particular 'Mediterranean' welfare model has centered on the historical and political institutional dynamics, likewise as on the policy traits of the welfare arrangements found in Southern European countries.

Specific attention has been given to the external pressures and internal constraints visage by the welfare systems of those countries, likewise on what extent there's a standard response to such challenges. In this paper, we tend to claim that whereas researchers were embarked during this erudite effort, Southern European societies unbroken dynamic, reworking the

character of existing arrangements in not forever forecasted directions, to the purpose of questioning the adequacy of clump them beneath a standard kind. The present context of economic and financial crisis introduces further factors within the method of transformation and reform of the welfare schemes of those countries, placed at the geographical point of the turmoil shattering European economies and societies.

II. CONCEPTUAL CLEARIFICATION

MEDITERRANEAN MODEL OF SOCIAL WELFARE:

This is the kind of welfare regime that revolves around the family because it is the center purpose of development of the individual and society. The family is the center of gravity within the Mediterranean system Ferrera, M. (2010). It's the welfare service that key into the uniqueness of the family cohesion. According to *marriam-webster dictionary*, social welfare is an organized public or personal welfare work for the help of underprivileged groups. social welfare isn't an equivalent as commonplace of living however is more involved with the standard of life that features factors that appreciate the standard of the surroundings, level of crime, extent of habit, accessibility of essential social services, in addition religious and spiritual aspects of life. However, social welfare system provides help to poor people and families. The categories and quantity of welfare obtainable to people and families vary reckoning on the country, state or region.

Social welfare refers to social group based mostly services, programs, policies and activities set up by the government or a company or community that square measure meant to boost the social group well-being of the member of that society, ameliorate the hardship, open up new doors of opportunities and equip the individual with the well-with-all to operate within their fullest capability in sphere of human endeavor to defend themselves in the society (Ugiagbe 2005).

MODUS OPERANDI: Farlex free online dictionary be a Latin phrase that means technique of operation, used to mean the method somebody sometime will one thing, maybe a criminal. It's someone's habits of operating, significantly within the context of business or criminal investigations. However, it's about translated as technique or mode of in operation.

III. A DISCOURSE ON THE MEDITERRANEAN MODEL OF WELFARE SYSTEM

Should we look at the general traits of Southern European welfare states (their scope, financing logics, and underlying organizational features); we could say that this model has many elements in common with the Continental model, while it also shares a few characteristics with the Northern European universalistic type. Cash benefits (especially pensions) have traditionally played a prominent role in the provision of public welfare in Southern Europe. As in 'Bismarkian' regimes, income maintenance is essentially work-related, based both on occupational status and on previous contributions. In line with corporatist countries, the system of social assistance is also weak, offering low levels of protection to citizens not covered

by employment-related schemes. In contrast, education and healthcare constitute universal entitlements, basically guaranteed to all citizens (residents) along the lines of the Scandinavian systems. One of the distinguishing features of this model is supposed to be its fragmentation. As Ferrera (1996) points out, a large number of separate income-maintenance schemes exist in Greece and Italy, some of them very broad and general (i.e. covering 'industrial workers' as a single category), others circumscribed to narrow professional groups. This author recognizes that this portrait can hardly be extended to Spain and Portugal, where the level of fragmentation is similar to Continental standards.

The main exception are disparate and poorly coordinated non-contributory programs and services catering for groups defined as deserving beneficiaries (orphans, widows, disabled), leaving other vulnerable groups (new entrants in labor markets, workers in the underground economy, long-term unemployed, inactive people providing informal care to dependents, undocumented migrants, etc.) ineligible for social assistance. The most distinctive trait emerging of the combinations of dual labor markets and highly fragmented social protection systems is a clear polarization between well-protected beneficiaries, and a large group of under-protected workers and citizens (Ferrera 1996; Moreno 2006; Akah & Uzoh 2019). Some categories of employees (white collar workers, core blue collar workers in medium and large enterprises with permanent contracts, public employees) received relatively generous benefits for short-term social risks (sickness, maternity, temporary unemployment spells), and relatively generous earning-related pensions, while a large segment of citizens remain vulnerable in relation to those same risks. The strong age-bias orientation of social policies epitomizes this situation. While older workers (and the elderly in general) are relatively well protected, younger workers and families remain largely out of the safety net. Youth favoring policies (housing benefits or affordable social housing, childcare, economic support for young households with children) or active labor policies for new entrants into the job market have remained underdeveloped. Italy, Spain and Greece, have the most heavily elderly oriented welfare states in the OECD, with Portugal not far from them (Lynch 2006).

The Mediterranean model is used by Italy, Spain, Greece, Portugal, and Turkey. The model is based on the principle that the family has the main role in supporting its socially unprotected members (Popova & Kozhevnikova, 2013). It is similar to the Continental model, yet the labor market is not very flexible due to employment protectionism. However this model is not very efficient at decreasing poverty. Welfare is mainly directed towards generous state- pensions and early retirements as a means to better work conditions. As a consequence the level of social assistance is much lower than in the other countries. Countries whose social policy system falls under the Mediterranean model have more segmentation of status and rights and therefore the access to social provisions is very much conditioned. Trade unions in those countries generally have large membership which could be an explanation of lower income dispersion (Kluzer, Redecker, & Centeno, 2010; Isokon & Ekeh 2014). In terms of care at home, the Mediterranean countries offer less possibility to receive formal care and therefore, most elderly people who

need assistance such as those with sensory impairment, are taken care of by informal cares such as family, friends, volunteers or caregivers employed by the elderly person or his/her family. This situation is further motivated by the cultural specificities of these countries. Traditionally, often the households are multigenerational where the elderly is supported by their children. In general the senior benefit from being very well respected in the society and be involved through the strong connection and interaction with their family and friends.

The Bolu Mili, shared some examples of the advantages and issues of the social policy in Turkey. Central role there is played by the government. It generally supports the active participation of elderly people with sensory disabilities in the society by offering, for instance, public transport services at a discount or free of charge, by providing housing to elderly citizens. Nevertheless the services for elderly and persons with disabilities are not yet sufficient enough to effectively enable their full involvement. Bolu further reports that the health system in Turkey has greatly improved in the last decades. There is an established strong public hospital system, medical care at home and efficient new staff training provided by universities for this field. However there is a prominent need of funding for creation of more hospitals and community based care services in order make them available to all in need, which is not the case at the moment. In fact, the availability of quality services in smaller towns and in rural areas is reported by the partners as a prominent problem across Europe.

An important aspect for ensuring the quality of services is the coordination between the various actors. The example of Turkey shows that when different services are provided by different ministries, their coordination often is not optimal. For instance, home care for the elderly people is not always integrated with rehabilitation and training and this is problematic for those with sensory impairment as they have a greater need of them. Home care givers also suffer from a lot of stress during the care of a senior with sensory problems because there is a lack of mobile units. Bolu confirms that there is a great need for training of professionals both from the social and the health care systems, on how to correct address the needs of elderly persons with sensory impairments.

IV. THE MEDITERRANEAN FAMILY

It has often been argued that welfare and family are much more closely intertwined in Mediterranean countries than in any other welfare regimes (Plattenga 2004). According to this view, the historical presence of strong family ties, and the existence of a familistic value system, constituted the cornerstone of welfare provision, and has had a decisive influence in social-policy making in these countries. The strong institutionalization of marriage, the availability of full-time housewives, and the intensity of family ties across generations in the Mediterranean regime, enabled the State to delegate the responsibility for guaranteeing basic economic security and to provide for the care-giving needs of large segments of unprotected citizens, thus helping to keep the political demands for better public provision low. Families

functioned traditionally as 'shock absorbers' when its members confronted short-term deprivation (unemployment, family breakdown), or special needs (sickness, dependency or maternity). The State was not expected to intervene, but to concentrate on the protection of the heads of the family. Resource-pooling and inter-generational solidarity expectations within the family also deactivated demands for the de-segmentation of labor markets. The familistic ethos has been backed by the social doctrine of the Catholic Church, which not only had an important cultural influence, but also played a prominent role in the field of social policy in Italy, Spain and Portugal (while the Greek Orthodox Church played a functionally equivalent role). The strong emphasis in the role of the family has not been accompanied by social policies that supported families, or strengthened their capacity to care for its members. Rather, the reference to the responsibilities of the family served to legitimize the provision of meager social services, as well as to overtly justify political inaction in these areas of policies (Saraceno 1994). These characteristics set the Mediterranean model apart from Continental European countries where, although there is a strong reliance on the family for the provision of care to its members (based on the principle of subsidiarity), the family receives financial support to better perform these roles (Bettio and Plattenga 2004).

In some parts of Europe the social support is highly dependent on the involvement of family members. Eastern European countries have the highest share of people aged 65 and older living in households with at least two younger generations of their family. At the same time however the family is often not sufficiently, if at all, supported by the state for providing such services, which puts a heavy burden on the younger generation. The emphasis of informal care also poses serious questions in regard to the quality of the services the users receive and the negative consequences unqualified care might have on the wellbeing of the elderly with sensory impairments. On the other hand, multigenerational households seem to be much less common in Northern European countries such as Norway, Sweden, the Netherlands, Finland, as well as Germany (Rodrigues, Huber, & Lamura, 2012).

The strengths of Mediterranean model includes state-pensions and options for early retirement, ensuring for the security and material comfort of the seniors, Active interpersonal and intergenerational communications and support, mostly thanks to family members, Benefits for the seniors when using public services etc. Weaknesses includes the following; High dependency on the support from the family, Insufficient coverage of services in the rural areas and smaller towns, Insufficient community-based services, High dependency on the political priorities and actions at governmental level.

V. IMPLICATION

Though the Mediterranean model of social welfare is good and it has been unknowingly practice and effectively delivered in the Nigeria society particularly in rural communities or villages due to the raising population which is characterized by high needs for her inhabitant. Policy makers should rather be interested in making laws that will boast the

Mediterranean model of social welfare in Nigeria than trying to improve on the remedial welfare model currently operated in the country as this model lacks the ability of getting to the targeted audience as at when due.

VI. CONCLUSION

There is a proportional diversity in the manner which different European countries address the social welfare needs of their citizens. The economic, political, historic and cultural background of each state to a big extent determines the way it develops its social welfare system. In terms of care provision, for instance, it can be concluded that although European countries' social and health systems have witnessed a growing public support to long-term care of elderly people at home, informal care, mostly provided by family members, friends, volunteers or other caregivers employed by the family is still much more used than state care (Kluzer, Redecker, & Centeno, 2010, p. 11).

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