

NATIONAL CHILDREN'S POLICY



MINISTRY FOR THE FAMILY,
CHILDREN'S RIGHTS AND SOCIAL SOLIDARITY

NATIONAL CHILDREN'S POLICY

NOVEMBER 2017

CONTENTS

List of Abbreviations	3
Foreword by the Minister for the Family, Children's Rights & Social Solidarity	4
Executive Summary	6
Mission Statement	8
Definitions	9
1. Preamble	10
1.1. Scope	12
1.2. Guiding Principles	13
1.3. Rationale and Vision	14
1.4. Methodology	16
2. Background	18
2.1. Demographic Trends in Malta	20
2.2. International and EU Frameworks	22
2.3. Malta: Legal and Institutional Structures	24
2.4. Children's Views on their Rights	28
3. Quality Childhood	30
3.1. Home Environment	35
3.2. Social Wellbeing	43
3.3. Health and Environment	57
3.4. Education and Employment	71
3.5. Leisure and Culture	84
4. Conclusion	96
References	100
Annex 1 – Questionnaires	102

LIST OF ABBREVIATIONS

CoE	Council of Europe
ESL	Early School Leavers
EC	European Commission
ESPAD	European School Survey Project on Alcohol and Other Drugs
EU	European Union
FSWS	Foundation for Social Welfare Services
HBSC	Health Behaviour in School-aged Children
IT	Information Technology
MEDE	Ministry for Education and Employment
MFSS	Ministry for Family and Social Solidarity ¹
MHEC	Ministry for Health, Elderly and Community Care
NSO	National Statistics Office (Malta)
PIRLS	Progress in International Reading Literacy Study
PISA	Programme for International Student Assessment
UN	United Nations
UN CRC	United Nations Convention on the Rights of the Child
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNICEF	United Nations International Children's Emergency Fund (now United Nations Children's Fund)
WHO	World Health Organization

¹ As from June 2017, the name of this Ministry has changed to Ministry for the Family, Children's Rights and Social Solidarity (MFCS).

FOREWORD BY THE MINISTER FOR THE FAMILY, CHILDREN'S RIGHTS & SOCIAL SOLIDARITY



Michael Falzon

Minister for the Family, Children's Rights
and Social Solidarity

It is my pleasure to launch this first 'National Children's Policy' which reflects government's commitment to recognise, respect and promote children's rights and their overall wellbeing. I fully concur with the view that 'It takes a village to raise a child', since I sincerely believe that a child's wellbeing is the responsibility of various stakeholders, mainly the family, state and community.

This Policy highlights the uniqueness of each child and adopts a life-course approach to child wellbeing. The vision of this policy is, that all children are to be loved, supported and protected. Children are to be encouraged, guided and assisted to reach their maximum potential, both in childhood, as well as to eventually mature into responsible and active adult citizens, who contribute to the overall enrichment of society.

In line with the United Nations Convention on the Rights of the Child (UNCRC), this Policy seeks to promote the wellbeing, 'best interests' and empowerment of all children, through the protection of their rights and freedoms, the provision of high quality services, and their active participation across all sectors of society, to enhance their present and future prospects.

Indeed, one of the strengths of this Policy is that it has been drafted in consultation with children. With the aim of capturing the vast realities and experiences of children and their various needs, wants and aspirations, this Policy takes on board the views of a wide stratum of children between the ages of 4 and 17 years.

An effective and holistic policy to improve children's and society's wellbeing requires a multi-faceted approach that takes into consideration the different dimensions required to comprehensively address the physical, psychological and socio-economic needs of children, namely the home environment, social wellbeing, health and environment, education and employment, as well as leisure and culture.

The implementation of this Policy in turn demands commitment, coordination and partnership among relevant stakeholders, together with the development and adoption of adequate mechanisms that monitor and evaluate the outcomes of all the policy actions put forward by the National Children's Policy. For this purpose, the Office of the Commissioner for Children shall be monitoring, evaluating and reporting upon the progress achieved in the best interest of all children in Malta.

EXECUTIVE SUMMARY

This policy document presents Malta's way forward for safeguarding and promoting the rights and general wellbeing of children. While placing the child at the centre of its attention, this Policy considers investment in children as a precondition for the welfare and advancement of society.

Guided by the United Nations Convention on the Rights of the Child (1989), this Policy promotes the holistic development and wellbeing of children by focusing on the physical, psychological and socio-economic aspects in the life of the child. In order to address the needs of children in a comprehensive manner, this Policy identifies and addresses five main dimensions, namely: home environment, social wellbeing, health and environment, education and employment and culture and leisure.

Whilst acknowledging children as a specific social group which demands specialised attention, this Policy highlights the uniqueness of each child. This Policy places the child within the context of his/her personal background and wider environment, by taking into account one's informal network of family, friends, communities and the natural and social environment. This Policy also adopts a life-course approach to wellbeing, by considering the various opportunities and challenges associated with different developmental stages and the dynamic and multiple needs experienced by children throughout their lives.

In line with its three main principles of protection, provision and participation, this Policy promulgates a series of objectives under each of the different dimensions of wellbeing with the aim of:

- securing the safety of children and protecting them from danger and harm;
- ensuring the availability and accessibility of quality services and support structures; and
- promoting children's involvement across all levels of society and spheres of social life.

In advancing these objectives, this Policy calls for greater visibility, understanding and consideration of children's views, needs and interests, as well as enhanced awareness of their rights and wellbeing so that these are safeguarded and promoted by all. Moreover, it calls for more child-friendly interventions, and strongly recommends that national legislation, policies and service provision are compliant with the scope and objectives set out in this Policy.

Upholding the principles and objectives outlined in this Policy necessitates commitment from a wide range of stakeholders, including government entities, private organisations, the voluntary sector and the community at large.

Children are themselves main actors in the protection and promotion of their own and other children's fundamental rights and freedoms. This Policy should thus be considered as a framework for concerted action, urging partnerships and cooperation among all stakeholders involved in the area of children's rights and wellbeing.

The ultimate aim is a society which respects and values every child, and works towards the realisation of the full potential and wellbeing of all children.

DEFINITIONS

For the purpose of this Policy, the following terms will be used to refer to:

Children

"... every human being below the age of eighteen years." (Article 1, United Nations Convention on the Rights of the Child)

Adolescents

Children who have reached puberty.

Young people

Whereas the term children refers to all those under eighteen years of age, yet this overlaps with three key definitions of young people². Whilst acknowledging these three definitions, this Policy, in line with the "National Youth Policy Framework 2015-2020", is adopting the EU definition (13 to 30 years).

Primary caregiver/s

Primary caregiver/s refers to the person/s or entity which is/are recognised by the State as being responsible for the care and upbringing of the child.

Family

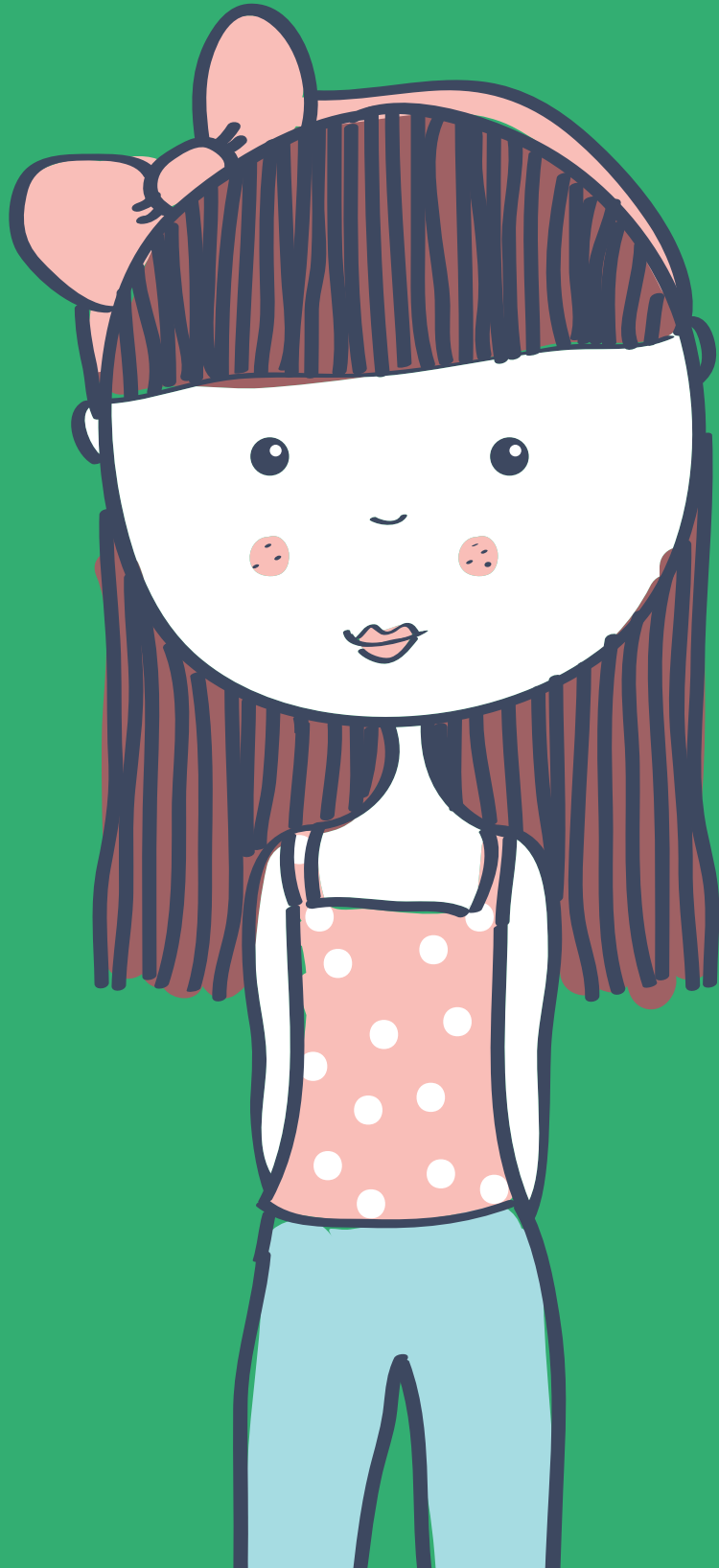
A family is defined as a person, or group of persons, who are linked to the child either by blood, kinship and/or responsibility of care and upbringing.

Home environment

The usual place of residence of the child.

² The United Nations (UN) defines young people as those persons aged between 15 to 24 years, the Council of Europe (CoE) defines young people as those persons aged between 10/12 to 30 years, and the European Union (EU) defines young people as those persons aged between 13 to 30 years.

1



PREAMBLE

Children have an intrinsic fundamental value as well as a significant and active role to play in society. The positive development of their vast potential is the responsibility of society as a whole and thus, children's quality of life and status of wellbeing are a reflection of the overall advancement of society.

1.1 SCOPE

This National Children's Policy acknowledges and addresses the benefits of improving the quality of life of all children in the Maltese islands. It sets out the policy direction in relation to children's rights and wellbeing, and addresses how policy and service provision across different dimensions can result in the attainment of better outcomes for children. Rooted in the positive vision of the UN Convention on the Rights of the Child³, this Policy presents a holistic way of thinking about children and commits to their protection, provision and participation.

Thus, this national Policy should serve as a broad framework to guide the mainstreaming of children's issues across different sectoral areas. This document proposes a number of policy objectives with the aim that these are translated into actual operational measures and actions by Government and other relevant stakeholders, including civil society, the private sector, families and the wider community. Its aim is also that of providing a framework for collaborative action in the area of children's rights and wellbeing and assist policy-makers and service providers to streamline and improve their contribution in the area.

This Policy aims at placing children's rights and wellbeing at the forefront of the national agenda through enhanced awareness raising, child-led participation, and evidence-based practice, as well as the mainstreaming of child-related issues and increased cooperation with other policy structures. This should lead to the consolidation of more concrete action in the field, through the promotion and protection of the rights of the child in the home environment, social sphere, health, environment, education, employment, leisure and culture. This Policy complements various other national reports, policies and strategies⁴ that directly or indirectly promote children's prospects.

3 *The United Nations Convention on the Rights of the Child 1989 was signed and ratified by numerous Member States including Malta, codified Member States' commitment to put children's rights at the forefront of their national agendas. This Charter gained treaty-level status in 2009 through the Treaty of Lisbon.*

4 *'National Strategic Policy for Poverty Reduction and Social Inclusion 2014-2024'; 'National Policy on the Rights of Persons with Disability' (2014); 'National Strategic Policy for Positive Parenting 2016-2024'; 'National Youth Policy Towards 2020: A shared vision for the future of young people'; 'National Health Systems Strategy for Malta 2014-2020'; 'Food and Nutrition Policy and Action Plan for Malta 2015-2020'; 'Healthy Weight for Life Strategy 2012'; 'Sexual Health Policy 2010' and 'Sexual Health Strategy 2011'; 'Addressing Attendance in Schools Policy 2014'; 'Addressing Bullying Behaviour in Schools Policy 2014'; 'An Early School Leaving Strategy for Malta 2012'; 'A Whole School Approach to a Healthy Lifestyle: Healthy Eating and Physical Activity Policy 2015'; 'A National Literacy Strategy for all in Malta and Gozo 2014-2019'; 'A National Policy for Sport in Malta and Gozo 2017-2027'; 'National Digital Strategy 2014-2020'; the draft strategy 'The Malta National Disability Strategy' (2016); and the 'Manifest għat-Tfal' 2013 and 2017 and the Annual Reports for 2013, 2014, 2015 and 2016 published by the Commissioner for Children.*

Moreover, it also complements the revision of existing child-related regulations that integrates such legislation into one coherent legislative framework⁵.

Whilst serving as a platform for guiding the development and implementation of strategies to promote child wellbeing for the coming years, this Policy should not be regarded as a static document, but as an active and flexible instrument which adapts to changing needs and evolving contexts. Such a dynamic scenario calls for the adoption of further alternative or innovative service delivery models so as to enhance the effectiveness of public services.

1.2 GUIDING PRINCIPLES

By ratifying the Convention of the Rights of the Child, Malta is obliged to comply with the agreed principles and standards that promote children's fundamental rights and freedoms. These rights which are universal, inalienable, indivisible and mutually dependant, are the key to ensure that children grow with the full possibilities for development and that their 'best interests' are given primary consideration.

Safeguarding these rights calls on societies to devise concrete actions which primarily feed into the three key international guiding principles that also underpin this national Policy namely:

- Protection - to guarantee the safety of children by protecting them from significant harm⁶;
- Provision - to cover the special needs of children and their right to access quality services, including the right to an adequate standard of living and the right to leisure, play and cultural activities;
- Participation - to ensure that children influence decision-making which affects their lives to bring about positive change.

⁵ *The Child Protection (Alternative Care) Act, 2017 (Chapter 569).*

⁶ *The Child Protection (Alternative Care) Act, 2017 (Part I of the Child Protection, Title I, Sub-title II of Child Protection, article 8(ó)) defines "significant harm" as including "abuse, neglect, ill treatment, exploitation, abandonment, exposure, and trafficking of any of the persons mentioned in sub-title VIII BIS of Title VIII of Book First of the Criminal Code".*

1.3. RATIONALE AND VISION

This Policy envisions that all children are to be:

- loved, supported and protected;
- encouraged, guided and assisted to reach their maximum potential and to mature into responsible and active adult citizens;
- enabled to contribute to the overall enrichment of society.

In line with this vision and the three guiding principles of protection, provision and participation, this Policy is grounded in a person-centred life-course approach, which takes into account both children's present and future prospects. It is also driven by an inclusionary rights-based approach which celebrates diversity and promotes equity and social justice.

It also denotes ownership, responsibility and collaborative work for achieving the objectives of this Policy.

Putting children's rights first is vital. Every child should enjoy civil, political, economic, social and cultural rights. This Policy upholds that children should not solely be viewed as targets, but primarily as holders of rights and responsibilities that are appropriate to their age and stage of development.

This Policy document maintains that children need to be provided with the best possible conditions and opportunities to enjoy a safe, stimulating and happy childhood, and to grow, flourish and be enabled to reach their full potential. Indeed, this Policy acknowledges that children are not only people of tomorrow, but primarily people of today. It thus aims to promote the understanding that children matter in the here and now, and that their needs and interests should be mainstreamed across all sectors and levels of society.

This Policy considers children as individuals as well as members of a family and a society. This entails taking into account the whole child, including his/her immediate and wider environment and giving consideration to the full range of his/her needs, including material/financial, emotional, spiritual, intellectual, social and cultural needs.

Children pass through different stages of growth and development. The various developmental milestones that children need to pass through to progress from infancy to adulthood present a number of physical, psychological and emotional opportunities and challenges. In adopting a life-course approach, this Policy aims to smooth transitions in the development process, by facilitating as much as possible children's uptake of the available opportunities as well as addressing the various challenges that are tied to different growth phases.

Whilst acknowledging the existence of common developmental milestones, this Policy endorses the view that each individual's development is unique and may thus present unique opportunities and challenges. To address this heterogeneity, this Policy provides a general framework that takes into consideration the specific situations and circumstances of the individual child, and acknowledges that children with more complex and specialised needs may require more complex and specialised services and attention. In focusing on the specific interests of children as a distinct social group, this Policy also recognises their interdependency with other cohorts and segments within society.

Children's wellbeing requires that society is equipped with the necessary resources to ensure that no child is left behind. In view of this, the recognition of the value of social inclusion and respect for diversity forms an integral part of this Policy. In line with this vision, this Policy upholds that rights should be enjoyed by all children, irrelevant of gender, race, religion or belief, disability, sexual orientation, socio-economic and cultural or ethnic background. Such a universal approach enhances equity and social inclusion prospects, and encourages inclusive and cohesive communities. In facilitating accessibility for all and addressing the structural inequalities that hinder children's full development, this Policy also promotes greater social justice.

Besides recognising and underpinning the significance of provision and protection, this Policy also acknowledges the benefits of having active and well-informed citizens. For this vision to materialise, all relevant stakeholders need to acknowledge that children are not simply the passive recipients of adult-based decisions, but should be consistently viewed as valuable and equal partners who can contribute to the wellbeing of society. Thus, one needs to include children's perspectives at the different stages of policy-making.

Society should create an environment which offers the right means and opportunities needed to facilitate children's participation. All children are to be equipped with the tools of participatory citizenship, including dialogue, negotiation, volunteering, understanding of rights and responsibilities, and appreciation of cultural differences. The benefits derived from participation are significant, both for the child and for society at large. By empowering children through successful participation, society strengthens their sense of citizenship, trust and belonging, as well as a sense of civic responsibility. Participation also enables the child to develop a sense of autonomy, as well as enhances the child's self-esteem and resilience. Society stands to benefit from such participation since this enhances a holistic view of existing realities

and strengthens democracy and representation. Apart from these benefits, active participation is a precondition for social justice.

The dimensions addressed by this Policy, namely home environment, social wellbeing, health and environment, education and employment, and leisure and culture, provide an overarching framework for the promotion of children's rights and wellbeing across different policy sectors. In view of the complex overlapping issues among these policy areas, the success of the policy indeed depends on the integration of different sectors through collaborative work and shared responsibility by all. Moreover, it requires a consistent and multi-dimensional approach that should be continuously reviewed so as to cater for changing needs and realities. This Policy indeed aspires to establish wide commitment for the implementation of the actions that it sets out. This requires the shared recognition of the relevance and full endorsement of the policy objectives promulgated in this document. Stakeholders thus need to ensure that their organisational priorities, including sectoral policies and strategies, contribute towards the attainment of these objectives.

Collaborative work in the area of child wellbeing should not only lead to more cost-effective service delivery through prevention of duplication of work and resources, but should also reinforce the overall impact of strategies and enhance positive outcomes for children.

1.4. METHODOLOGY

In recognition of the "right of children to participate, exert an influence and to be heard" (Article 12, UN CRC), this Policy has been drafted in close collaboration with children. With the aim of capturing the vast realities and experiences of children and their wide needs, wants and aspirations, this Policy took on board the views of a wide stratum of children between the ages of 4 and 17 years.

For this purpose, an age-sensitive, bilingual tool in the form of a simple questionnaire addressing the five key dimensions (Annex 1) was distributed to a total of 311 Kindergarten, Primary, Secondary and Post-Secondary, male and female students from State, Church and Independent (Private) schools in Malta, including a cross-sectional representation from Gozitan students. The study comprised participants from various classes namely: Kinder 2, Years 1, 3, 5 and 6 at primary school level, Forms 1, 3, and 5 at secondary school level as well as a sample from the Higher Secondary School at post-secondary level.

In this exercise, students were asked to define, in their own terms, their idea of the concepts underlying the five key dimensions addressed by the Policy, as well as highlight what they like, dislike and wish for in these key areas of relevance to their everyday life. They were also asked to express themselves (including also through artistic means) on their life in general

(for those attending primary school from Year 3 onwards, secondary and post-secondary school) and on their own perceptions of happiness (for those attending Kindergarten 2 and Year 1).

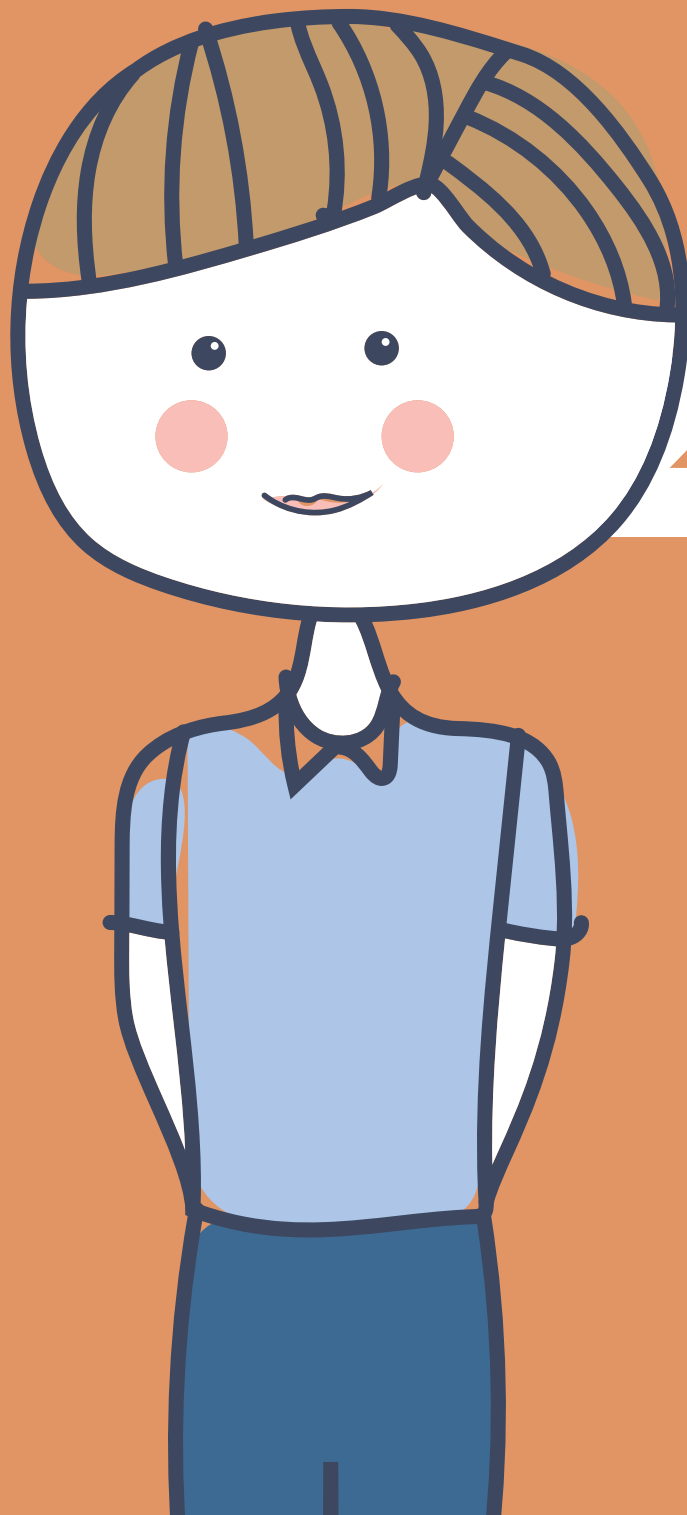
The data arising from these consultation exercises was subsequently analysed in terms of the emergent responses of children's likes, dislikes and aspirations under the different key dimensions. Findings were then translated as faithfully as possible into realistic policy actions.

This Policy thus builds upon and complements the various consultation exercises that were carried out with the aim of eliciting and airing the views of children and empowering them to become active partners in the development, implementation and evaluation of policies and measures which concern them.

Indeed, the Policy makes reference to the consultation proceedings arising from various consultation exercises throughout recent years as well as takes due cognisance of several other studies⁷. The Policy also builds upon the Draft National Children's Policy Document (2011) which not only sought children's views, but also

provided a comprehensive framework for promoting children's rights and wellbeing, as well as upon the National Children's Policy 2016 Consultation Document issued in September 2016. This Policy document together with recent statistical data and the valuable feedback compiled from the respective public consultation exercises on various thematic areas of relevance to child wellbeing underpin the development of this Policy.

⁷ These include 'The Voice of the Child in Care (National Commission for Child Policy and Strategy, 2014)', 'Let Me Thrive: A Research Study on Foster Care in Malta' (Office of the Commissioner for Children, 2016); 'Locked Out: Families of the Incarcerated (Institute of Family Therapy Malta, Fondazzjoni Mid-dlam Għad-dawl & PRISMS, 2016); 'The Global Goals for Sustainable Development: Snapshots from Malta' (President's Foundation for the Wellbeing of Society, 2016); National Commission for the Promotion of Equality Annual Reports 2014 and 2015; Platform Human Rights Organisations Malta Annual Reports for 2014 and 2015; 'A Study of Young Carers in Malta' (SOS Malta, 2014); 'Environmental Health Inequalities in Malta: Assessment Report' (Department for Health Regulation, Ministry for Health, 2013); 'Leisure trends among young people in Malta' (Office of the Commissioner for Children and Aġenzija Żgħirażgħ, 2013) and; the findings drawn by the Children's Forum of the President's Foundation for the Wellbeing of Society (2014-2015).



2.1. DEMOGRAPHIC TRENDS IN MALTA

Children today are growing up in a society which is characterised by rapid social change. Diverse family structures, evolving demographic realities, lifestyle variations, technological advances, and other changes in the broader social structure are putting pressure on societies and communities to adapt to changing times. Such transitions present a number of challenges for all people, including children, across the life-course.

Malta, as across the EU, is characterised by a number of emerging demographic trends and social realities. These include an increase in life expectancy and a decline in the fertility rate which manifest themselves in an ageing population, more diverse family formations, postponement of marriage and child-bearing, and migration flows⁸.

In the last century, the life expectancy for the Maltese population has been steadily increasing. In 2014, the life expectancy at birth for Maltese females stood at 84.2 years, while that of males stood at 79.8 years. As regards healthy life years, Maltese females (74.3 years) stand significantly better than the EU average (61.8 years)⁹. Similarly, Maltese males (72.3 years) also compare

significantly better than their EU counterparts (61.4 years). This increase in life-expectancy (longevity) coupled with a lower birth rate (low fertility) manifest themselves in an ageing population.

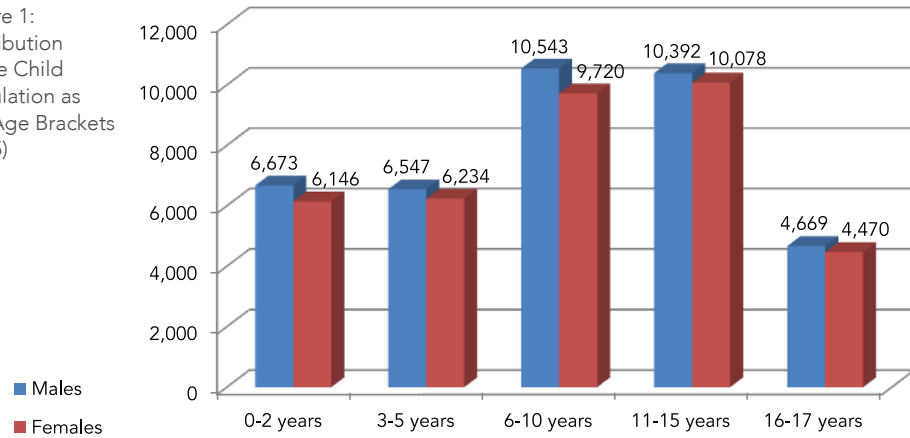
Indeed, the total fertility rate in Malta has experienced a decline in the last decades. While in 1960, this stood at 3.6, in 1990 this dropped to 2.1 and to 1.4 in 2015. This has resulted in a drastic decline where the child population fell from a total of 133,377 in 1957 to 80,803 in 2008, reflecting a decline of 39%. This decline was even more evident in recent years when the total number of children fell by about 9,000 between 2006 (84,515) and 2015 (75,472).

In 2015, the crude birth rate in Malta stood at 10 births per 1000 population amounting to a total of 4,325 children (2,208 males and 2,117 females). During the same year, the total number of children in the Maltese islands amounted to 75,472 (38,824 males and 36,648 females). In 2015, boys under 18 years of age constituted 8.9% of the total population, compared to 8.4% for girls. This population also includes a total of 4,258 foreign children resident in Malta, a number which continues to increase due to immigration trends. Figure 1 shows the distribution of this population on the basis of the developmental age brackets adopted for the purpose of this Policy.

⁸ Where not otherwise stated in this document, National Statistics Office (NSO) data is used.

⁹ Source: EUROSTAT database.

Figure 1:
Distribution
of the Child
Population as
per Age Brackets
(2015)



The traditional welfare state which was once structured on the typical family, with the male as the breadwinner and the woman as the carer, is now no longer the norm. Children are growing up in more diverse and pluralistic families, including lone parent households and reconstituted families. These different family forms characterised by more symmetrical roles are changing the social definition and composition of households¹⁰.

An overview of all households with children demonstrates that in 2015, 80.1% of children lived with both parents, 19.5% lived with a single parent, whereas 0.4% did not live with their parents. Lone parent and reconstituted families have exhibited an increase in the last number of years, mainly as a result of the rise in the incidence of births outside marriage¹¹, teenage motherhood¹² and marital breakdown¹³. Another emergent reality concerns inter-cultural marriages¹⁴ and same-sex civil unions¹⁵.

¹⁰ An overview of the distribution of children across households in Malta, demonstrates that in 2015, 65% of all private households did not comprise any children, whereas 4% comprised a single person with dependent children, 10.6% comprised two adults with one child, 10.4% comprised two adults with two dependent children, 2.2% two adults with three or more dependent children, and 7.9% comprised three or more adults with dependent children (Source: EUROSTAT database).

¹¹ In 2015, the total number of resident births amounted to 4,325, out of which 160 (3.7%) of these registered as having an undeclared father. This percentage has gradually decreased since 2006 where it stood at 364 (9.6%).

¹² In 2015, the number of teenage mothers (under 20 years) stood at 134.

¹³ A total of 3,002 marriages took place in 2015, 49.3% (1,481) of which were civil marriages. During the same year, the number of registered separations (656), annulments (91) and divorces (468) recognised by Maltese authorities stood at 1,215.

¹⁴ Indeed, in 2015, there were a total of 1,303 marriages where at least one of the partners was foreign and of these, 448 were marriages between a Maltese and foreign partner.

¹⁵ A total of 52 unions between same sex couples were registered in Malta in 2015.

Labour market participation today is no longer as predominantly male-based as it was in the past, and while a significant gender gap still persists, women's participation in the formal economy is on the increase. This, along with other factors such as continuing education, are contributing to a postponement of marriage¹⁶ and child bearing¹⁷. As grandparents are increasingly opting to be active in the labour market, they can no longer care for their grandchildren, a role that they had undertaken in the past years when mothers started to engage in formal employment. Active ageing, changing family formations and increased female labour force participation are reflecting themselves in a decline in informal care provision and are consequently giving rise to a societal need to invest further in family-friendly measures¹⁸ as well as in community based care services for children¹⁹. These emerging needs together with those generated by dependent frail elderly, challenge the sustainability of the social welfare system, a reality that may be partly mitigated by immigration trends involving adults and young people of working age.

In promoting investment in children and acknowledging the importance of consolidating resources to address the challenges arising from a dynamic socio-demographic scenario, this Policy also contributes to the promotion of inter-generational solidarity by reconciling the interests and wellbeing of children with those of the rest of society.

2.2. INTERNATIONAL AND EU FRAMEWORKS

The last decades have witnessed an increased interest in the promotion of children's rights, reflected through the codification of various international instruments.

The United Nations Convention on the Rights of the Child 1989 (UN CRC) which was signed and ratified by numerous Member States including Malta, constitutes the most prominent international legal instrument for safeguarding children's rights and wellbeing, and codifies Member States' commitment to put children's rights at the forefront of their national agendas.

¹⁶ In 2015, marriage age for females stood at 31.4 years (34.4 years for males) whereas in 2005 it was 27.9 years (32.1 years for males).

¹⁷ In 2015, age of child bearing (for total registered live births) stood at 30 years, compared to 28 years in 2006.

¹⁸ For example more flexible working arrangements which facilitate the reconciliation between family and work.

¹⁹ Existing children services include childcare facilities, breakfast clubs and Klabb 3-16.

²⁰ (i) Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography, and (ii) Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict (iii) Optional Protocol to the Convention on the Rights of the Child on a Communications Procedure.

The Convention, together with its three Optional Protocols²⁰, provides a holistic and comprehensive framework to guide Member States in the development and evaluation of their children's policy agendas. Basically, this Convention promotes children's rights to be happy, to grow up into mature adults, to be protected from anything that may cause them harm and to be able to express themselves without harming themselves and others.

The EU, through its Charter of Fundamental Rights has also contributed towards the development of a legal basis which safeguards children's rights and wellbeing. The Charter includes a general article on children's rights (Article 24) and a specific article on child labour (Article 32). It also ensures that the child's education conforms with the family's "religious, philosophical and pedagogical convictions" (Article 14), and provides for the right to paid maternity and parental leave following the birth or adoption of a child - Article 33 (Official Journal of the European Communities, 2000, pp.11, 16).

Moreover, the CoE Warsaw Declaration of 2005 provides an explicit legal mandate to take action in the field of children's rights, including amongst others action to address social, legal, health and educational aspects arising from the various forms of violence against children (CoE, 2005).

Another important European framework concerns the European Commission (EC) Communication 'An EU Agenda for the Rights of the Child' (2011) which aims to make the rights of the child an integral part of Member States' fundamental rights policy.

Apart from highlighting the value that children enjoy adequate protection, provision and participation, the UN, the EU and the CoE, all stress the need to strengthen inter-organisational cooperation, and to enhance collaboration across different policy areas related to child wellbeing. Through their policy and legislative frameworks, these international organisations indeed provide a holistic and concrete framework which Member States can adhere to so as to ensure that the rights and wellbeing of children are safeguarded effectively.

21 Services that are accessible and available to all children.

22 Services addressing the specific needs of particular children.

23 Some categories of children and adolescents who have been identified as being at greater disadvantage include: Looked After Children, children living in institutions, children and young persons with a disability, early school leavers, children and young people with literacy difficulties, those with emotional, mental health or addiction difficulties, those living in jobless and single parent households, those witnessing domestic violence or abusive behaviour, teenage parents, asylum seekers and young people who are unemployed or inactive (MFSS, 2006).

2.3. MALTA: LEGAL AND INSTITUTIONAL STRUCTURES

Whereas universal services²¹ cater for children across different situations and contexts, targeted services²² provide specialised focus on those children who may require additional support and individualised outreach, since their life circumstances place them at increased risk of disadvantage²³.

In Malta, children have been a national priority for several decades. Indeed, apart from the enactment of various legislative safeguards relating to children, such as the: Education Act (Chapter 327); Social Security Act (Chapter 318) – Children's Allowance (Article 76); Children and Young Persons (Care Orders) Act (Chapter 285); Adoption Administration Act (Chapter 495); Foster Care Act (Chapter 491) and the Child Protection (Alternative Care) Act (Chapter 569)²⁴, the wellbeing of children features as an important objective in a number of national policy documents and strategies.

Children are indeed one of the main target populations addressed by Malta's National Reform Programme (NRP)²⁵, the National Report on Strategies for Social Protection and Social Inclusion (NSR)²⁶ and the National Strategic Policy for Poverty Reduction and for Social Inclusion 2014-2024²⁷. Besides focusing on children and young people, the policy priorities put forward by these three strategic documents cut across diverse population groups, situations and needs, such as the unemployed and those living in jobless households, thus indirectly supporting further the commitment to enhance children's prospects.

In line with the objectives promulgated by these documents, throughout the years, Malta has set up various structures, schemes and initiatives to secure the rights and wellbeing of children and ensure their highest provision of care.

²⁴ Enacted in 2017, this Act replaces "the Children and Young Persons (Care Orders) Act, the Foster Care Act and the Placing of Minors Regulations, to introduce child protection orders, to provide for appropriate alternative care and protection for children deprived of parental care or at the risk of being so." At time of writing, this Act is still to come into force.

²⁵ National Reform Programmes (NRPs) present the reform measures that EU Member States are implementing on a national level in order to fulfil the targets set under the Europe 2020 Strategy.

²⁶ The National Strategy Reports (NSRs) on Social Protection and Social Inclusion for the years 2004-2006, 2006-2008, 2008-2010, 2011, 2012, 2013 and 2014 translate the common social EU objectives into national plans in the areas of Social Inclusion, Pensions, and Health and Long-Term Care.

²⁷ This document outlines Malta's strategy to combat poverty and social exclusion in line with the Europe 2020 Strategy poverty reduction target.

Family-Centred Initiatives

Adequate and sustainable income for parents and primary caregivers is essential to ensure that children grow up with enough resources to enjoy a good quality of life. A number of measures, such as the in-work benefit and tapering of benefits provided under the Social Security Act, together with the Youth Guarantee and other EU co-financed initiatives, have been introduced to increase the employability prospects of those who are inactive and to encourage job creation and investment.

For those who are not in a position to engage in the labour market, social security benefits, both of the contributory and non-contributory kind, act as an important safety net. Apart from Social Assistance and employment related benefits such as the unemployment and injury (at work) benefit, parents also benefit from family-related allowances such as Children's Allowance (both universal and means-tested) and Child Supplement. Additional assistance is also provided to families taking care of disadvantaged children such as through the 'Child in Care Benefit' (provided to foster parents) and the 'Disabled Child Allowance'.

Other assistance to families is also provided through in-kind benefits that address such key requirements as health and housing. In Malta, health services (including primary, secondary and tertiary health care) are provided for free at the point of

access. Furthermore, certain scheduled medication is provided free of charge for all those who are certified to require them. A number of measures are in place to promote home-ownership, particularly for first-time buyers, and families with children. Moreover, assistance for low income families is also given through a number of other specific in-kind benefits, such as for example the provision of energy subsidies to help families with the cost of utilities.

Various family friendly measures have been designed to promote the reconciliation between family and working life thus contributing to the availability of more quality time between parents and their children. These include maternity, paternity, responsibility and parental leave, adoption leave, as well as the option to work on reduced hours and teleworking.

Education

In recognition that early childhood services are vital for shaping children's development, effort has been made to increase the quality and accessibility of childcare services. Apart from free childcare for those parents who are in education or employment, financial and technical assistance has been granted to operating centres to upgrade these services in line with established standards.

Besides the provision of free education, various measures have been endorsed to improve children's personal development and prospects for educational attainment. In line with the ongoing reform of the education system, focus has been placed upon addressing absenteeism, early school leaving and promoting further and higher education and life-long learning. Moreover, the promotion of inclusive education and the consolidation of measures that enhance informal learning, active citizenship, and engagement in sports and creativity are ongoing. To this end, Malta provides various avenues for encouraging children's participation in social, cultural, recreational, sporting and civic activities.

Child-Centred Support Services

Such initiatives are complemented by a comprehensive programme of prevention, support and treatment services for children and families, particularly those in need. Through its 'Children's Services', APPOĠĠ, an agency within the Foundation for Social Welfare Services (FSWS), is the main formal provider of specialised²⁸ social work services to protect children from violence and abuse and to promote their general wellbeing.

Apart from the services falling under the portfolio of the 'Children's Services', over the years, FSWS has developed a number of other generic therapeutic, residential and community-based services for children and families. In recognition of the importance that child wellbeing warrants to be seen within the context of the whole family and neighbourhood environment, a number of family resource and empowerment centres have and are being set up within regional communities.

²⁸ The services include the Fostering, Adoption, Looked After children and Weekend Monitoring Services as well as the Court Services, Supervised Access Visits, High Support Services and Supportline 179.

Entities Responsible for Children's Rights and Wellbeing

Apart from these structures, a number of Agencies, Commissions, Boards and other entities are engaged on issues relating to children's rights and wellbeing.

The Office of the Commissioner for Children, which constitutes the main national entity dealing with children's rights issues, was set up in terms of the Commissioner for Children Act of 2003, to promote the welfare of children and ensure that the rights enshrined in the United Nations Convention on the Rights of the Child, and other international documents are complied with at national level.

Among other responsibilities, the Office of the Commissioner for Children, which in the performance of its functions is advised and assisted by the Council for Children, is responsible to promote the rights and interests of children, and ensure that they are able to express their views and participate fully in society. The Commissioner is also responsible to promote an understanding of the rights of children, gather information, and investigate any alleged breaches of such rights. The Office is also entrusted to voice the rights, needs and interests of children, and ensure that child-related services meet required standards and are accessible, and responsive to children's individual needs. To this end, the Office undertakes regular initiatives to encourage children's participation in policy development and delivery

with the aim that these take on board children's needs and wishes and provide a realistic and accurate picture of the situations being faced by children.

Besides the Office of the Commissioner for Children, there are other formal structures that directly or indirectly safeguard and promote children's wellbeing. Amongst others, these include: the Children and Young Person's Advisory Board, the Adoptions and Fostering Boards, the Commission for Domestic Violence and the National Commission for Persons with a Disability. Within the Ministry for the Family, Children's Rights and Social Solidarity, the Department for Social Welfare Standards also acts as regulator on matters concerning children's services such as residential care and child-care standards.

Apart from these public bodies, the Church and civil society organisations are highly active, on a variety of aspects relating to children's rights and wellbeing. Indeed, they provide a plethora of diverse actions ranging from preventive awareness raising and advocacy, to interventionist service delivery across all the five dimensions addressed by this Policy.

By focusing on the physical, emotional and psychological development of children, all the above mentioned initiatives aim at maximising the potential of children by promoting their personal development, wellbeing, rights and freedoms.

Children's Wellbeing – A National Priority

Despite the substantial developments made throughout these last years in this particular area, as evident from the extensive provision of universal and targeted services which act on a preventive and interventionist level, child wellbeing remains one of the key national priorities. This Policy is indeed committed to solicit further progress in this area by strengthening efforts towards empowering children and ensuring that they have access to the highest level of services and opportunities to enable them to fulfil their utmost potential. This Policy document, also promotes the mainstreaming of children's issues across different policy areas and should thus serve to guide present structures and services towards securing more effectively the rights and wellbeing of all children.

2.4. CHILDREN'S VIEWS ON THEIR RIGHTS

The Eurobarometer on the 'Rights of the Child' (EC, 2010) shows that children aged between 15 and 18 years would like to see a number of changes in the 'adult world' for their rights to be further protected. These include:

- i) being granted more trust and involvement in decisions;
- ii) increasing efforts to use technology and the internet to engage them on issues of relevance;

- iii) encouraging respect from adults for their freedom to be children; and
- iv) guaranteeing more support where needed.

The study suggests that across the EU27, 65% (as compared to 59% in Malta) of children were aware that they enjoy specific rights, compared to adults. Across the EU, 14% consider their rights to be 'very well protected', 62% feel that they are 'fairly well protected', while 9% feel that they are 'incompletely protected', and 2% 'not protected'. Correspondingly, 27% of Maltese respondents consider their rights to be 'very well protected', 51% feel that they are 'fairly well protected', while 17% and 1% respectively feel that these are 'incompletely protected' and 'not protected'.

The study also shows that the large majority of both EU (81%) and Maltese (86%) respondents as well as their peers had never tried to seek help, when they believed that their rights had been violated. Thus, this data suggests that whilst overall Maltese adolescents feel that their rights are relatively well safeguarded, yet more work needs to be undertaken to ensure that all children enjoy the full protection of rights. It also infers that more focus should be addressed to empower children to assert their rights and freedoms and to seek redress in the case of any violations that they may experience.



3

Intrinsically, wellbeing connotes positive social relationships, emotional and psychological security, meaningfulness and successful individual functioning. Thus, a child's wellbeing is not only important in the present, but it also provides the basis for future quality of life.

Wellbeing is sensitive to such factors as age, gender, beliefs, ethnicity as well as cultural and socio-economic backgrounds. Despite such heterogeneity, this Policy upholds that a child's wellbeing is primarily determined through five dimensions:

- Home Environment
- Social Wellbeing
- Health and Environment
- Education and Employment
- Leisure and Culture

A child's wellbeing is the responsibility of various stakeholders, with the main three being: Family, State and Community. This Policy recognises the interrelationship amongst the five dimensions and the importance that the three key stakeholders undertake to improve the quality of life of the child as an individual in one's own right, though connected and mutually dependent on adults and society at large.

The role of the Family

As the principal persons responsible for the upbringing and care of the child, primary care-givers should ensure that the 'best interests' of the child are given primary consideration at all times, and should thus:

- encourage children to exercise their rights;
- offer them protection;
- ensure that they are safe and healthy;
- make sure that they attend school;
- encourage them to develop their skills and talents to the best of their abilities; and
- empower them to participate and to voice their opinions.

To help them fulfill their role, the State should provide primary caregivers with the necessary guidance and direction, as and when required.

The role of the State

In line with the Convention, the State recognises the right of every child to a standard of living which is adequate for the child's physical, mental, spiritual, moral and social development. The State is thus responsible for:

- protecting all children from any form of discrimination and taking action to promote their rights and freedoms;
- promoting and safeguarding children's health and safety, both of which warrant that a child has a safe

- place to live, ideally within a family home with biological parents or kin, or with adoptive or foster families;
- providing the child with adequate alternative care when his/her parents or guardians fail to do so;
 - promoting measures to support families, such as initiatives that contribute towards a work/life balance;
 - accessing the highest attainable standard of health and medical treatment;
 - promoting a clean, safe, enriching and child-friendly natural and urban environment;
 - ensuring that children attend school and incentivising participation in cultural activities; and
 - observing the rights of children who are victims, accused or convicted of crime.

In view of its diverse responsibilities, it is essential for the State to adopt a holistic approach, and to strike an appropriate balance between children's and adults' rights and interests if and when these are not in harmony.

Besides its responsibilities, the State should also acknowledge the valid contribution that is forthcoming from the various stakeholders in the community.

The role of the Community

Upholding, promoting and protecting the rights of children is an obligation that calls upon the entire community. Parents/caregivers together with the State, civil society, and children themselves play a decisive role in guaranteeing children's rights.

Together with these key actors, private industry, the media and all other stakeholders should also recognise the child as an important contributor for the development of society. By adopting child and family-friendly practices in their operations, these stakeholders would be manifesting their social responsibility towards upholding children's rights. They are thus called to take initiatives which do not negatively impact children.

As a result, the community plays an important role in promoting children's rights by;

- offering non-governmental services and support to families and children;
- encouraging private industry to provide more family-friendly measures;
- raising awareness and advocating on matters affecting children's wellbeing;
- urging the media to responsibly disseminate information which is accurate and reliable, as well as socially and culturally beneficial to the child; and
- contributing to scientific research that furthers knowledge into social wellbeing in general and that of children in particular.

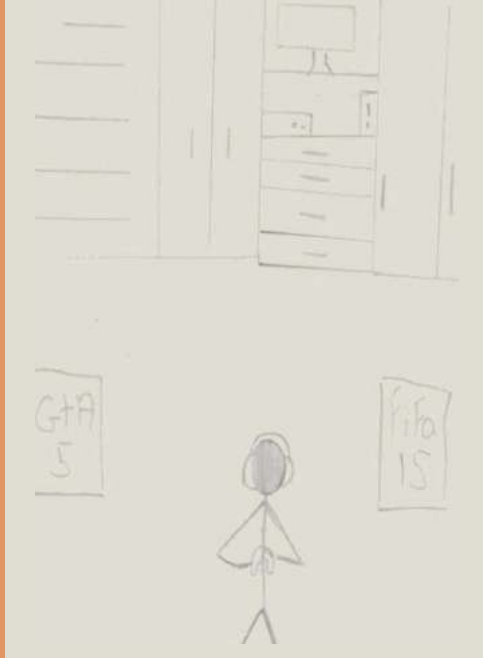
Whilst the Family, the State and the Community have a role to play in promoting and safeguarding the rights of the child, they should also support children to understand their personal obligations and to honour them. In so doing, while enjoying their rights, children would also be respecting their age-appropriate responsibilities, as well as enhancing their prospects of developing into mature adult citizens.

The rights and responsibilities of the child

Accompanying rights by age-appropriate responsibilities shows that every person has rights as well as obligations towards the self and others. The Convention decrees that children are to respect their parents/guardians and other cultures along with their own. Moreover, as they are bestowed the right to be protected from violence, abuse and neglect, to live in a clean, safe and enriching environment, to enjoy their right to freedom of thought, conscience and religion, children are likewise under the obligation and responsibility to respect these rights as enjoyed by others. As children have the right to education, they are also obliged to attend school, share their knowledge and do their homework, not distract or bully others in the classroom. By giving children the right to make mistakes, the Convention is encouraging them to learn from their mistakes.

In order to promote these rights, this Policy specifically focuses upon the five dimensions listed above, namely Home Environment, Social Wellbeing, Health and Environment, Education and Employment, Leisure and Culture, that among them contribute to the comprehensive wellbeing of the child.

These five dimensions require commitment by the Family, the State and the Community. It bears pointing out that although in certain instances children have the right to access particular services without their parents' consent, such as the Supportline 179, yet children's wellbeing is highly dependent on adults.



3.1. HOME ENVIRONMENT

Children's Views:

The **majority** of children describe their life at home as a positive experience with words such as *pleasant*, happy, comfortable and **warm**, caring and loving, routine, *humoristic*.



Komda, ambjent ta' rispett u inthabba u l-post li dejjem infittex"

Jasmine²⁹, 9

(Comfortable, a respectful and loving environment, the place I always seek)

While... a minority state that their life at home is:

stressful, very busy, hectic, fast, boring and noisy.



Flajja kennehejn trankwilla, battibekki ma jiegħux bħal kull familja Maltija"

Alex, 17

(A somewhat serene life, ongoing petty disagreements like in every Maltese family)

Most children are happy with their **family relationship** due to good communication and quality time with **parents and siblings**, despite occasional quarrels and disagreements.



Quite busy with homework and studying for the finals but apart from that when I have the chance to stay there it is the best place on earth"

Sarah, 17

However... Some *feel threatened and sad* because their parents do not understand them, are always at work, or do not live in the **same house**.

Having **siblings**, pets, privacy, own room, a garden, a swimming pool, **a variety of toys**, as well as having **their own** or more *modern technological* devices such as tablets, *smart phones*, computer and game consoles, are among children's main likes and wishes.

²⁹ Children's names presented throughout this document are fictitious.

The 'family' is the place where most children grow up. Thus, policies focusing on children should not overlook the family and the home environment in which a child is brought up. Home is the place where a child's first priorities should be met, namely a safe place to live, play and learn; access to nutritious food; adequate clothing; personal hygiene and healthcare.

Investment in a child's early years is crucial, as it is the formative period in which the child is experimenting, developing and forming important relationships, thus gradually constructing one's meaning of the world. Hence, children's early life experience largely influences outcomes achieved later in life.

Early life is characterised by the different relationships that children have with those around them. The physical and emotional phases of growth are fundamental in a child's development ladder. Primary caregivers can contribute by providing supportive relationships which enhance the security and stability needed for children to grow holistically in a healthy environment. This underlines the importance of delivering timely information and necessary support to primary caregivers, so as to help them become better pro-social models for children.

A fundamental right for children is that they have decent accommodation since this, together with its surroundings, plays a significant role in one's quality of life and life chances. All children deserve a place where they feel the safety, warmth and protection of a home environment. The importance of suitable accommodation is acknowledged in Malta's Housing Authority's mission statement which specifies that 'Decent housing strengthens communities and provides a better setting in which to raise our children.' The State is thus committed to ensure that children and their families are assisted in accessing adequate housing through interventions offered under various national measures that include subsidised rental schemes and the upgrading of social housing.

Parenting and families warrant a stronger focus. In putting children's and families' quality of life at the centre of its strategies, society would be giving due importance to the critical relationships that exist between children and their families. The nature of support within the family environment is pivotal for "adolescent development, socialization, health and well-being" (WHO, 2016) and acts as a protective factor against risk behaviour.

According to the 2014 Health Behaviour in School-aged Children (HBSC) Survey³⁰ (WHO, 2016), high family support³¹ and high quality of family communication³² decreases on average as children get older. Children's communication with the mother³³ and the father³⁴ also tends to decrease with increase in age. In Malta, communication with the mother tends to be relatively higher than with the father for all considered ages³⁵. Moreover, communication with both parents tends to be generally higher for boys than for girls³⁶. By providing children with appropriate support mechanisms, one would also be further promoting societal wellbeing. The fundamental role played by the family should be recognised as children's development is primarily dependent on this role. Thus various forms of

parental entitlements and support contribute towards the wellbeing of children and the family as a whole, at a time when female labour force participation is on the rise, and reconciliation between family life and the career ladder is increasingly becoming one of the requisites for a stable family environment.

Positive parenting is crucial for the wellbeing of the child. Generally it is recognised that all parents want to provide the best upbringing for their children. However, parenting can be a challenging responsibility, especially where the family is experiencing hardship.

30 The report presents the responses of 42 countries and regions across Europe and North America.

31 "Young people were asked if they feel that their family really tries to help them, that they can get emotional support from them when they need it, they can talk to their family about problems, and if the family is prepared to help them make decisions" (WHO, 2016, p.31). The averages of 11, 13 and 15 year-old boys and girls in Malta, 79%, 65%, 62% respectively are quite similar to the HBSC averages of 79%, 71%, 65%.

32 "Young people were asked several questions about the quality of their family communication, including whether important things are talked about, if someone listens, and whether misunderstandings are clarified." (WHO, 2016, p.31). 59%, 47% and 41% for 11, 13 and 15 year-olds in Malta respectively and 50%, 41%, 36% for 11, 13 and 15 year-olds respectively as HBSC averages.

33 "Young people were asked how easy it is for them to talk to their mother about things that really bother them." (WHO, 2016, p.31).

34 "Young people were asked how easy it is for them to talk to their father about things that really bother them." (WHO, 2016, p.31).

35 Unlike communication with mother where Maltese scores are at par or higher than the HBSC averages (90%, 83%, 79% for 11, 13 and 15 year-olds respectively), Maltese scores of communication with father are relatively lower than the HBSC averages (78%, 59%, 63% for 11, 13 and 15 year-olds respectively), with particular disparity among the older age cohorts.

36 Except for 15 year-olds where girls have a slightly higher communication with their mother than boys.

Special attention should thus be focused upon creating the necessary conditions for primary caregivers to raise children in such a way that facilitates the development of their full potential.

In those circumstances where, despite all efforts, a child cannot remain with the parents, a responsible relative, or foster carer, society is to ensure that formal out-of-home care arrangements which offer stable and loving relationships are in place.

Moreover, in situations where parental conflict arises to the extent that family breakdown is inevitable, and reconciliation is unlikely, it is to be guaranteed that the children's wellbeing is not impinged. Since family breakdown often precipitates phases of stress and tension, good parental relationships with children should be encouraged and facilitated wherever possible and beneficial for the child.

Where conflict prevails between parents, it is important to recognise that while the role of the couple may come to an end, yet the role of parent does not cease to exist. In most instances, children want to retain a relationship with both parents, as they are significant figures in their life. It is therefore crucial that flexible and responsive measures are adopted, which focus on the wellbeing of the child and the family, through integrated cooperation between state provision, school-based programmes and the courts.

Whilst recognising the relationship between a positive home environment and healthy child development, this Policy acknowledges the fact that in those households which manifest such challenges as poverty, domestic violence, addictions, child abuse, long-term ill health and terminal conditions, disability and mental health issues, the wellbeing of the child asks for increased focus.

POLICY OBJECTIVES:

Home Environment

Against the scenario discussed above, this policy sets out the following actions:

1. Encourage the uptake and enhance the provision of comprehensive information and educational services to prospective parents, so as to promote the holistic wellbeing of the newborn child.
2. Promote and support the implementation of the 'National Strategic Policy for Positive Parenting 2016-2024'.
3. Support the family and out-of-home care providers to offer an environment that enhances the full and harmonious development of the child.
4. Generate awareness about the importance of safeguarding children's safety and wellbeing when their care is delegated to informal carers.
5. Strengthen the promotion of children's healthy lifestyles among primary caregivers.
6. Support primary caregivers and educators in their efforts to provide children with age-appropriate safe places to live, rest, play and learn.
7. Promote the values of respect, dignity and equal treatment of every child among primary caregivers as well as among children themselves.
8. Promote the value of quality family time and meaningful interactions between children and their carers.
9. Sustain efforts to secure a safe home environment and to provide support to children whose parents are facing personal challenging situations, for example addictions and ill-health.
10. Strengthen support units within the community so as to coordinate family care plans, facilitate their implementation and serve as a source of referral for specialised services as may be required.
11. Strengthen the provision of support to families whose children require special attention due to certain conditions (e.g. mental health, addiction, disability, etc.) and/or situations (e.g. poverty, teenage pregnancy, etc.).

I am happy with my life.





Nagaghola attenti fith kajji taghira.
kajja wat da ghandna u gull
ma nagghin gullu. (the only
mistake you can make is guessing
up).



I've got a whole new different world. My world 🌍❤️



3.2 SOCIAL WELLBEING

Children's Views:

Social wellbeing has been defined by children in terms of a number of *positive* and desired aspects, mainly: having a united, loving and supportive *family*; having true friends and pets; living in a good environment; possessing *rights* and values; having basic needs fulfilled (housing, good education, food, money); feeling stable, safe and cared for; being *healthy* physically and mentally; being *successful* and ambitious (in education and career); having the opportunity to socialise, help others and self-develop; *feeling accepted*, respected and appreciated; and, having a *well balanced* active life with time to relax and leisure.

“

No stress, no economic pressure, good living conditions”

Zach, 15

“

A good quality of life means being comfortable with yourself and those around you (stress-free environment)”

Luca, 15

Conversely... a number of aspects are seen as hindering social wellbeing. These include: *bullying*, teasing, fighting, shouting, calling names and arguing; the *fast pace of life*, leaving no time to enjoy each other and *lack of free time*; wars, poverty, crime and violence; pollution, waste and vandalism; negative traits, attitudes and *behaviour* in oneself and others, including: stubbornness, anger, lying, jealousy, rudeness, lack of understanding, discrimination, cruelty, negativity, back stabbing, arrogance, swearing, *shyness*, being judgemental, uncaring and closed minded; school, studying, homework, exams and bad grades; feeling sad, *bored*, unloved, unsupported and ignored; *failing* and disappointing oneself and others and being let down by others; having workaholic parents and very few friends to *trust*; having no mobile, TV, wifi or games; and, experiencing *illnesses*, injuries, family problems and death of loved ones.

While a number of children *are fully content* with their state of social wellbeing to the extent that they wish for *nothing else*.....

“

Jkollok dar sew, genituri li jghinuk, familja li tissaportjak, tkieb tajbin u edukazzjoni tajba”

Kylie, 11

(To have a good house, helpful parents, a supportive family, good friends and a good education)

Others **expressed a desire** for:

more material things, such as additional clothes, a bike, a bigger house, **more** money, technological devices and toys, as well as *non-material things* such as **pets**...

stronger and more meaningful *relationships*, by having more friends, a boyfriend/girlfriend, *better communication* with parents and more time with family...

a more sustainable natural and social **environment**, characterised by more greenery, *cleaner surroundings* and less pollution and criminality....

a more **just and peaceful** world, free from wars and *discrimination* and full of *love*, understanding and freedom....

“

Il-paċi, il-klieb vera, l-inhabba u li ma jkunx hawn gwerer”

Abigail, 9

(Peace, true friends, love and no wars)

more opportunities for free time to *relax*, have fun and engage in *play*, sports, **physical activity**, travelling and other forms of leisure.... and....

enhanced *opportunities* for personal and social **development**, through: study, *extra-curricular* activities, assistance and support to **overcome** difficulties, and participation in initiatives to *help others* and succeed in life.

“

Li jkollok tajja li biha qiegħed tghin lill-oħrajn u lilek innifsek fl-istess tin” –

Christopher, 13

(To live a life where you help others as well as yourself)

In addition, those of an older age (16 and 17 year olds) expressed the following wishes and desires: forming their *own family*, living on their own, owning a car, living abroad, having **a good** summer job/**secure** permanent **job**, and being **more active** in society.

Social wellbeing is a multi-dimensional construct that incorporates a holistic view of child development. Being dependent on various factors and aspects in the life of the child, including one's background and experiences, structural position and personal competences, it has a profound influence upon children's physical, cognitive and emotional development. It thus defines their quality of life, opportunities and general wellbeing as well as impacts on the way that children behave and act, feel and communicate, and get along with others.

Apart from being dependent on the provision of a resourceful, healthy and safe environment, social wellbeing also relies heavily upon various other factors. These include protection against violence, harm and exploitation as well as security against discrimination and exclusion and prevention from unhealthy and anti-social practices, such as crime and delinquency. Social wellbeing is thus dependent on coordinated action, based on early intervention and preventive practices which focus on the holistic aspects of the child and his/her wider environment.

This Policy aims to create a protective and empowering social environment, where children are safeguarded against harm and where their personal resilience is strengthened by addressing vulnerabilities and structural disadvantages. Responding to the social needs of children is a prerequisite for ensuring that their

rights and wellbeing are preserved. Besides promoting social cohesion, investing in the social wellbeing of children and their families is a precondition for social justice.

Early Investment in Children

The development of children asks for the availability of opportunities that help them grow in a nurturing environment which is adept to their dynamic needs and interests. This highlights the importance of access to high quality services and the provision of the necessary tools and resources that facilitate their personal development. Early investment in children should thus act as a safeguard against possible risk factors, which could have long-term damaging effects on their overall development.

The early years of a child's life are vital for building emotional attachments which form the basis of healthy relationships. The social constructs which children gain through their socialisation process with family members and significant others, as well as the wider environment that they interact in, are thus imperative for their overall development. Hence, the socialisation process has a significant bearing on one's sense of identity and self-concept as well as on the ability to integrate and inter-relate effectively.

For this to take place, it is crucial that children develop basic social skills and competences. Social competence needs to be encouraged in both

formal and non-formal settings through the diffusion of social skills which promote pro-social behaviour. This entails the development of trust and understanding, as well as the development of empathy and sympathy which encourage sensitisation towards the needs and situations of others. Social competence largely depends on the acquisition of such skills as communication, cooperation, assertion, responsibility and self-discipline. Children's development of social skills and pro-social behaviour are thus important aspects for both their personal and society's wellbeing. This is particularly important within a rapidly changing societal context, where, amongst others, technological advances, the media and means of social networking are transforming the nature of relationships and socialisation patterns, as well as acting as a platform for diffusing values and role models.

Along with the development of social skills and the transmission of ethical values, children's actions and behaviour are also guided and given meaning by spirituality, religion, and beliefs. Indeed, the UN CRC acknowledges the 'spiritual' aspect under four articles, namely as part of holistic child development (article 17), social and moral wellbeing (article 23[3]), cultural development (article 27[1]) and physical and mental health (article 32[1]). Thus, the Convention places a responsibility upon society to nurture the spiritual wellbeing of children.

Eradication of Poverty and Social Exclusion

The economic and financial status of one's family is a precondition for the social wellbeing of children. Financial stability and the availability of adequate resources help families to afford the relevant necessities and offer a good quality of life for children. Poverty and the situation which accompanies economic disadvantage are indeed seen to be correlated with a number of factors such as stress, lack of adequate nutrition and substandard housing which hinder the social wellbeing of children, and impact negatively on their physical and cognitive outcomes. In this recognition, in line with the objectives of the 'National Strategic Policy for Poverty Reduction and for Social inclusion 2014-2024', focus needs to continue to be placed on combating the intergenerational transmission of poverty and social exclusion and addressing those factors which place children from materially deprived backgrounds at a disadvantage. Thus, poverty has strong and long-lasting influences on children's developmental outcomes, including their subjective sense of wellbeing.

Apart from material deprivation, other circumstances such as family breakdown, exposure to harm and abuse may negatively impact on the child's quality of life and emotional stability. In circumstances where the family is going through difficult times, it needs to be ensured that the wellbeing of children remains at the forefront of

any decisions taken. The child's rights should be, where possible, primarily protected within the family context and removing children from their families is to be seen as a last resort. When such a change is necessary, community and family-based out-of-home placements are to be preferred over residential care. This entails further investment in family-based placements such as fostering and adoption.

Children needing alternative care are to be informed about their rights and choices and involved as much as possible in the decision-making process in a way children can understand. In addition, children should be assisted in the process of transition so as to guarantee their stability, safety and general wellbeing. This needs to be complemented by adequate support services for the family to resolve problematic issues and, where possible and conducive to the best interests of the child, seek family reunification.

Juvenile Justice

Another aspect of concern to the social wellbeing of children is the area of justice. While prevention from crime should be the main objective of the juvenile justice system, children who come in conflict with the law need to be provided with the necessary means for effective rehabilitation and reintegration in society. In adopting a formative (as opposed to a punitive approach), this Policy upholds that detention should be a last resort and recognises the need to develop additional diversionary measures and rehabilitative and restorative sanctions for young offenders. Child-friendly justice based on the principles of due process and the best-interest of the child should not be restricted to children who are in conflict with the law but also to minor victims as well as child witnesses. It is important that the view point of the child is considered and given due weight in all matters that concern them, with the support of professionals.

Further investment is also needed to sustain the fight against crimes involving children, including human trafficking, abduction, child labour, child prostitution and child sexual abuse material.

To prevent cases of abuse as well as bring justice to victims, offences against minors warrant harsher punishments. Moreover, victims of crime and other forms of abuse, including domestic violence and neglect, need to be afforded

immediate protection and provided with adequate psycho-social support which focus on the holistic impact and adverse effects of trauma.

Awareness Raising

In recognising education as a pivotal tool for promoting positive social change, awareness programmes need to focus on educating parents, caregivers and other relevant stakeholders, on the rights of the child and how best to safeguard them. For children to access rights and seek redress in the event of violations, they first need to be aware of them.

Thus, such educational initiatives also need to involve children themselves so that they are made more aware of their entitlements and the responsibilities and obligations attached to the enjoyment of such rights and freedoms. Notwithstanding the validity of educational campaigns, awareness raising is not enough to safeguard children's rights and wellbeing if not adequately backed up by legislation.

Children experiencing any form of human rights violations or discrimination should thus have the possibility to voice their complaint, and procedures should be in place to make sure that such transgressions are effectively dealt with.

Access to High Quality Services

It is pivotal that the State continues to guarantee an optimum standard of universal services for children and families particularly in the areas of health care, education and social benefits. For all children to benefit, structures need to be inclusive and must address the multiple and specific needs which children may have. Universal services thus need to be complemented by more targeted and specialised approaches which specifically address the needs of those who are vulnerable or need additional support. These include provisions for children with physical and mental disabilities, those with learning difficulties and those experiencing psycho-social difficulties.

In prioritising the social wellbeing of children, stronger focus should be directed towards prevention, early intervention and community-based support. In this regard, it is important that the relevant structures are strengthened to enhance the accessibility and quality of service provision. Further investment should also be addressed to provide synchronised and unified support for families and their children. Moreover, it should be acknowledged that the needs of children having particular conditions or living in certain situations are not necessarily the same as those of adults with the same conditions or situations. Therefore policies and programmes need to be tailor-made to the specific needs of children.

Discrimination limits rights, and hinders people from reaching their full potential. Equality of opportunity is thus crucial in ensuring that all children are given the possibility to be active participants in social, cultural, political and economic life. Children who require additional support should thus not be precluded from the full enjoyment of their rights, but should be on an equal basis with the rest of society.

Promoting respect for diversity entails investing in an environment which focuses on inclusion, rather than stigmatisation, marginalisation and segregation. This Policy acknowledges the importance that vulnerable and disadvantaged children be effectively integrated within society. This requires eliminating the various barriers which deter children from effective engagement. Policies and services should thus focus on the benefits of diversity and the mainstreaming of inclusion across different sectors, while also being sensitive to the needs of children who will be directly affected.

Social inclusion and protection systems should ensure, where possible, that disadvantaged children access mainstream services. Moreover, inclusive service provision asks for specialised personnel and resources, capable of dealing with mixed abilities and different forms of disadvantage whilst being sensitive and appreciative of cultural diversities.

Participation

Meaningful participation can be best promoted by creating a culture which values pluralism and portrays a positive image of all children. Recognition and respect of diversity requires a commitment which fosters dialogue, where all people are given the opportunity to embrace their identity and traditions and be able to exchange their views openly. By inculcating in children an appreciation of diversity, and an understanding of the dynamics of the plurality of ideas, beliefs and traditions, children learn to integrate in a heterogeneous society which belongs to all. By realising that what distinguishes people is what makes them unique, children also learn to practise the principles of human rights.

Stakeholders involved amongst others in the fields of education, employment, health, social policy and culture should thus encourage constructive exchange and communication among children of different abilities and socio-cultural backgrounds, as a positive and enriching experience. Spaces such as schools, recreational areas, sports complexes, and community centres which foster inclusion and intercultural exchanges should be consolidated. Through formal, informal and non-formal education, and creative and innovative approaches, children could acquire the tools needed to recognise the value of inclusion and to promote and appreciate diversity.

Participation in such initiatives should also help children to better appreciate the values of democratic governance and encourage them to become more active and committed citizens. This should foster greater social responsibility and more active engagement across all spheres of social life, such as volunteering and participating in civil society initiatives. Such involvement helps children develop new skills and competences whilst yielding beneficial results to the wider community.

Conclusion

Promoting coordination at different levels and across a multitude of sectors is a precondition for children's social wellbeing. Better collaboration among entities working with children and their families should promote a more comprehensive and integrated approach leading to more effective service provision. Moreover, better networking should help to improve efficiency through the sharing of resources and practices. The effectiveness and efficiency of child-related services also depend on the evaluation of outcomes so as to better address actual and emerging needs. This Policy thus underlines the importance of adopting an evidence-based approach both in policy-development as well as in service provision.

In order to secure greater social wellbeing, society thus requires a system of enabling and supportive structures which address the varying and multiple needs experienced at different stages by children and their families. Accessible, high quality, community-based programmes which focus on early intervention and prevention as well as more awareness raising and evidence-based practice, legislative back-up and inclusive and anti-discrimination practice together with enhanced collaboration are indeed central tools which this Policy endorses to secure children's social wellbeing.

POLICY OBJECTIVES:

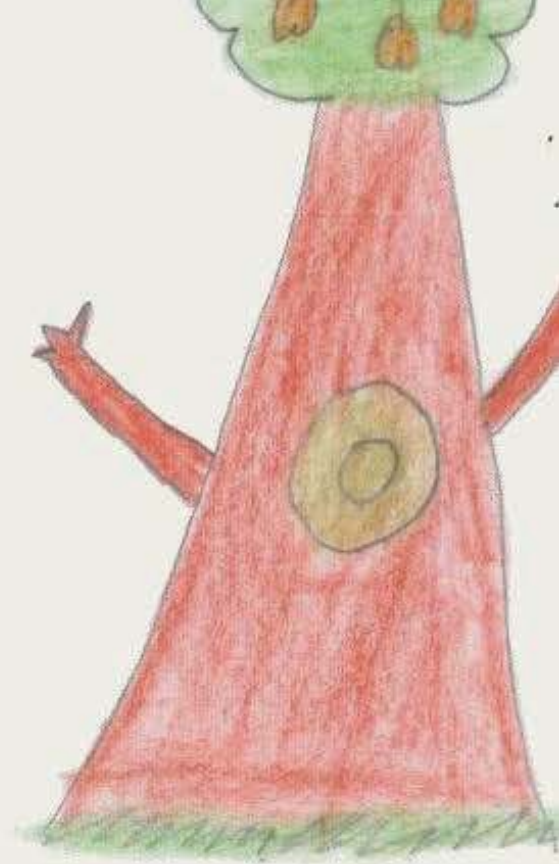
Social Wellbeing

Against the scenario discussed above, this policy sets out the following actions:

1. Encourage an integrated approach among all stakeholders which focuses on promoting and safeguarding the holistic development of the child.
2. Enhance the wellbeing of the child and the family through integrated cooperation between the providers of educational, recreational, judicial, social and health services.
3. Provide further training and resources for families and service providers to facilitate and enhance the holistic development of children.
4. Promote monitoring, awareness raising and sensitisation of information regarding issues that directly or indirectly concern children.
5. Promote empowerment, inclusion and active involvement of children within society, whilst also generating awareness among children to be responsible citizens and to respect all members of society.
6. Recognise and promote children as active citizens by engaging them in democratic processes, social participation, environmental activism and innovation, volunteering and social entrepreneurship.
7. Ensure that the views presented by children through participation in forums and consultations are duly considered by policymakers.
8. Ensure that views presented by children are taken into account through democratic participation by extending voting rights to young people aged 16 and over for all State, Local and European elections and referendums.
9. Promote the protection and welfare of all children.
10. Ensure that legislation, policies and services that affect children are systematically reviewed to better safeguard the protection, participation and provision in the best interest of children.
11. Facilitate the sharing of general observations and/or statistical information concerning children whilst ensuring that children are not identifiable to unauthorised persons, with a view to recognise trends and thus be in a better position to enhance the development of services that address actual priority needs.

12. Revise the system and mechanism by which a child is deemed “at risk” so that these, effectively and in a timely manner, capture various situations that can expose a child to significant harm.
13. Strengthen initiatives that address the unique protection risks and needs of migrant children, particularly those who are unaccompanied.
14. Encourage training and strengthen enforcement mechanisms to render child protection more effective and efficient so as to curb all forms of abuse.
15. Promote best practice among retailers, media and the entertainment industry with the aim to eliminate sexualisation and commercialisation of childhood.
16. Recognise all existing and emerging family structures, so that children’s needs are catered for in all settings.
17. Combat all forms of discrimination and intolerance primarily among groups that are at greater risk of marginalisation (e.g. children with mental health challenges and addictive behaviour or children living with persons experiencing such challenges or behaviour, children of imprisoned parents or children having imprisoned siblings, migrant children, children with a disability, children in care, LGBTIQ+ children and children from ethnic and religious minorities).
18. Provide children with access to remedy if there has been a breach of their rights as provided by the UN Convention on the Rights of the Child and promote awareness of the services provided by the Office of the Commissioner for Children.
19. Promote access to all services and programmes for children with disability in synergy with the ‘National Policy on the Rights of Persons with Disability (2015)’ and in line with the UN Convention on the Rights of Persons with Disabilities.
20. Enhance children’s access to an imprisoned or hospitalised parent or primary caregiver.
21. Recognise and respect children’s spirituality, religion and beliefs.

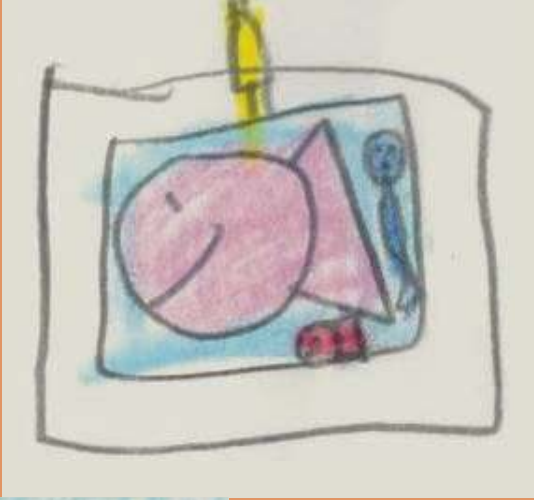
22. Promote and support research to understand and better address current and emerging needs of children.
23. Consolidate measures that protect children from the intergenerational transmission of poverty and social exclusion in synergy with the 'National Strategic Policy for Poverty Reduction and for Social Inclusion 2014-2024'.
24. Intensify outreach and community-based initiatives to provide greater support to vulnerable families with children.
25. Evaluate the impact of existing initiatives and explore the development of new projects to eliminate child poverty.
26. Address the material and psychosocial needs of homeless families with children and of individual minors.
27. Update, promote and monitor the National Standards for Out-of-Home Child Care.
28. Enhance out-of-home care and after care service provision to meet the different needs of children.
29. Invest further in residential homes that accommodate unaccompanied minor asylum seekers within the community.
30. Ensure that all children leaving institutionalised care are appropriately prepared and supported in their transition to independent living through education, training and/or employment by the development of an after-care plan and follow-up.
31. Encourage the development of children's basic social skills and competences and the expression of pro-social behaviour so as to prevent juvenile crime and delinquency.
32. Strengthen rehabilitation services for children with addictive behaviours.
33. Promote a child-friendly justice system and adopt more rehabilitative and restorative approaches for juvenile offenders.
34. Ensure that all child victims and perpetrators are given support.



Tien intobbb in nature!!

me with my dog in the countryside
me eating a banana.





3.3 HEALTH AND ENVIRONMENT

Children's Views:

Children are very well-informed on what is needed to be healthy, as the majority of children mentioned *physical activity and a balanced diet*.

“

To exercise because that frees you physically, socially and mentally, to have a healthy diet, to be happy”

Ella, 13

Moreover... having enough sleep and rest, *personal care and clean environment*, as well as no drugs, alcohol and cigarettes were frequently listed.

“

Eat nutritious food, exercise and rest well”

Jake, 9

Children also highlighted the importance of proper and *frequent medical care*, such as being vaccinated, *advances in medicines* and improvements in *medical technology*.

“

Not spending a lot of time on social networks, or playing playstation or Xbox. Not being obsessed about anything”

Liam, 17

Older children have a holistic view of being healthy, encompassing *physical, social* and *mental* wellbeing. Socialising, being *accepted* in society, loved and supported, being positive and having free time, and being able to deal with problems and *stress*, are considered vital for their health.

“

...not to have stress, which I do feel that I have with all the assignments... it's too much to handle...to find some free time to spend with my family or even exercise”

Leah, 16

When questioned about their **outdoor environment**... children appreciate *nature*, flora and fauna, *clean air*, clean public and open spaces, natural surroundings (countryside, playing fields and beaches), *recycling*, *planting* of trees and the upkeep of *historical* places.

“

I wish for an environment that is clean and safe for us”

Martina, 17

Indeed...*less pollution*, global warming, waste, *noise*, cars, and buildings, more *awareness* regarding the environment, animal protection and care, more bike lanes, and ‘no smoking places’ were amongst the most common wishes for a better environment.

“

I don't like to see abandoned places or animals living outside having to face all the elements”

Nina, 16

The **urban** environment was also given importance, such as good infrastructure, an efficient public transport, *less traffic, and no vandalism*. Moreover reference was also made to having gyms, restaurants, shops, leisure places and health centres *in their vicinity*.

“

Careful planning as to what and where things are built. Urbanisation is impossible to avoid but it can be done sensibly”

Ben, 17

Children's health is closely associated with the condition of the environment in which they interact. The first environment is that which surrounds them inside their mother's womb, soon followed by the home environment – both physical and psychological – which welcomes them once they leave the birthing centre and starts shaping their upbringing and personal development. Moreover, the physical environment in which children can grow and develop healthily should include natural habitats free from pollution, more open spaces and play areas. Sustainable and safe community regeneration is essential for the healthy development of children. A decline in the state of the environment, both natural and urban, through the reduction of green areas, increased levels of traffic and industrial pollution, and the impact of climate change, all pose threats and detrimental effects on children's physical and psychological health.

A Child-Friendly Physical Environment Society is thus responsible to offer children a healthy and sustainable physical environment, by safeguarding, as much as possible, open spaces and ensuring safe and child-friendly communities. Efforts could include commitments to infrastructural investments, improvements in public transport, increased use of renewable energy, enforcement of the polluter-pays-principle and incentives to reduce energy and fuel consumption. Promoting and communicating environmental awareness and responsibility amongst children and

adults is of utmost importance. It is hence recommended that children are educated on the benefits attached to the protection of the environment and that they are encouraged to reduce and prevent waste and depletion of resources by minimising energy and water consumption, and to recycle amongst other initiatives. Good practices and adequate regulation and monitoring to improve the state of the environment are essential.

Although various initiatives have been undertaken to maintain a clean and healthy environment, yet more needs to be done to improve the quality of children's lives. Morbidity rates in children, as measured by in-patient admission rates to Mater Dei Hospital for children aged 0-17 years, were relatively stable at an average of 8.6% over the last five years (2012-2016), varying from 7.9% in 2015 to 9.1% in 2013. It should be noted that the five most common discharge diagnoses registered in the Hospital Activity Analysis system over this period include acute gastroenteritis, head injury, abdominal pain, acute and chronic upper respiratory tract infections, as well as other unspecified viral infections.

Health

Pre-pregnancy factors and early life conditions are important determinants of the future health of the child. Development of chronic non-communicable disease, such as obesity, Type II diabetes mellitus, cancer, cardiovascular diseases and stroke, have been linked to maternal pre-pregnancy factors and early life conditions (Food and Nutrition Policy 2014-2020, pg. 42). Pregnant women's lifestyles such as high stress levels and long-working hours, smoking, alcohol consumption, drug use, late or no prenatal care and lack of social support have been associated with an increased risk of a pre-term birth (European Council for Steiner Waldorf Education & Alliance for Childhood European Network Group, 2013). In 2015, there were 315 pre-term births (births before 37 weeks gestation) in Malta, comprising 7.1% of all babies born. Improving maternal pre-conception health and health care is important as it can help prevent pre-term births and other adverse outcomes which may lead to infant death, morbidity and chronic health conditions (Atrash et al 2006, Dean et al 2013).

Breastfeeding is strongly advocated by the Ministry responsible for health for at least the first six months of life, while continuing breastfeeding in conjunction with weaning, adequate and safe foods is encouraged for infants up to two years or beyond (Food and Nutrition Policy 2014-2020, pg. 42). Besides its nutritional and health value, breastfeeding is key to

the development of the parent-infant bond, (European Council for Steiner Waldorf Education & Alliance for Childhood European Network Group, 2013). Hence, more needs to be done to encourage breastfeeding, by amongst others providing adequate facilities.

The child mortality rate is highest in the first year of life where latest available data (2012-2014) shows that a total of 71 children aged under 1 year passed away over the three-year period. Over the same time span, the data shows a lower mortality rate in the age groups 1-4 years (7 deaths) and 5-14 years (10 deaths). A total of 14 deaths occurred in the 15-19 age group during the same period.

The most frequent causes of death in the youngest age group are congenital malformations, deformations and chromosomal abnormalities and certain conditions originating in the perinatal period. Intentional self-harm and external causes of death such as traffic accidents, falls and drowning are the most frequent cause of death in the 15-19 age group, accounting for 8 out of the 14 deaths that occurred.

Over the last ten years (2005-2014), a total of 81 new cases of paediatric cancer were recorded. This refers to malignancies arising in individuals aged from 0-19 years, most of which originate from developmental anomalies that start in utero or are due to genetic predispositions. Although there are no strong scientifically documented links between the types

of paediatric cancer in Malta and environmental pollution, yet efforts should still be made to prevent children's exposure to environmental hazards which may give rise to chronic and life-threatening illnesses that warrant early diagnosis and attention in the best interest of children and their carers.

Promoting Healthy Lifestyles

Lifestyle related health problems have increased amongst children in Malta. The latest round of the HBSC study conducted in 2014 (WHO, 2016) shows that Malta has the highest rates of overweight and obesity amongst 11 year-olds (32% of girls and 38% of boys), 13 year-olds (33% of girls and 36% of boys) and 15 year-olds (26% of girls and 34% of boys). The average rates for the 42 countries and regions participating in the study stood at 22%, 20% and 17% for the respective age groups mentioned. Increased consumption of foods rich in saturated fat and sugar, sedentary lifestyles and a lack of involvement in physical activity, are principal causes of the high rates of obesity registered in Malta.

In fact, a large proportion of children report spending two or more hours daily during weekdays being sedentary watching television (41% of 11 year-old girls and 53% of 11 year-old boys, rising to 54% of girls and 65% of boys among 15 year-olds).

This percentage is significantly higher than the proportion of children who spend at least an hour a day doing moderate/vigorous physical activity³⁷. Since children spend much of their time at school, an essential part of the school curriculum should be individual or team sports. The 'Healthy Eating and Physical Activity Policy' (MEDE, 2015) emphasises the correlation between physical activity and academic achievement as well as the development of cognitive skills. It asserts that, "all students, regardless of sex, race/ethnicity, health status, physical or cognitive ability or disability, should have access to physical education and other physical activity programmes" (MEDE, 2015, pg.11). Different forms of physical activity should thus be promoted as a means of recreational activity, within and outside the school boundaries.³⁷ 21% of 11 year-old girls and 28% of 11 year-old girls, dropping to 9% of 15 year-old girls and 16% of 15 year-old boys.

Healthy eating habits in children such as adequate daily intake of water, and fresh fruits and vegetables, as opposed to the high intake of sugars, and saturated and processed food, not only improves their present quality of life but also influences their future dietary habits and long-term health.

³⁷ 21% of 11 year-old girls and 28% of 11 year-old girls, dropping to 9% of 15 year-old girls and 16% of 15 year-old boys.

"Data from the 2014 HBSC study (WHO, 2016) shows a gender disparity in daily vegetable consumption amongst children in Malta. Whereas the percentage of 11 year-old boys in Malta reporting daily vegetable consumption is at par with the HBSC average at 35%, figures are slightly above the average³⁸ when it comes to 13 and 15 year-olds at 35% and 38% respectively. However, reported percentages for girls in Malta are significantly below the average for participating countries since 11 year-old girls in Malta report daily vegetable consumption of 18% compared with an HBSC average of 42%. Vegetable consumption is higher among 15 year-old girls in Malta, with 32% reporting daily consumption, compared with an average of 38% among participating countries. While daily fruit consumption is higher when compared to vegetable consumption, still less than half of children in Malta report eating fruit daily. This contrasts with the consumption of soft drinks, where Malta ranks the highest amongst 42 countries and regions in daily soft drink consumption among 11 year-olds³⁹ and 15 year-olds⁴⁰ (WHO, 2016)."

Recent measures to promote healthy intake include state provision of healthy snacks of fruit, vegetables and milk to students, and the introduction of Breakfast Clubs, offering early care service before school hours. This Policy supports the provision of drinking water and the reduced availability of foods high in fat, sugar, and salt in schools. To counter the advertisement of unhealthy foods, this Policy recognises that children need to develop a lasting healthy eating lifestyle, not only by access to more information, but also through hands-on experiences by means of agricultural school gardens, food preparation, preservation and storage (Healthy Eating and Physical Activity Policy, MEDE, 2015, pg. 16). Unhealthy eating habits are related to low income due to the higher cost of healthy food (Rao et al, 2013).

Therefore, it is important to strengthen initiatives that reduce child poverty and increase awareness of how to eat well on a low budget.

38 For 13 year-old boys, the average is 31%, while for 15 year-old boys, it stands at 30%.

39 34% of 15 year-old girls and 39% of 15 year-old boys.

40 39% of 15 year-old girls and 37% of 15 year-old boys.

Risky Behaviour

Young people want to explore and often this results in risky behaviour that is detrimental to their health. Smoking, binge drinking, and drug use are threats to adolescent health. Results from the 2014 HBSC survey (WHO, 2016) show that a significant proportion of Maltese adolescents, particularly 15 year-olds, engage in such types of risky behaviour. Weekly alcohol consumption was among the most prominent risky behaviour which 13 and 15 year old students engaged in, and Malta⁴¹ had the highest rate of weekly alcohol consumption in 15 year-olds among the 42 countries and regions⁴² participating in the study, despite a decreased rate compared to the 2010 round of the survey. Weekly alcohol drinking⁴³ and weekly tobacco smoking⁴⁴, both increase with age. In addition, 11% of 15 year old boys and 13% of 15 year old girls began

smoking at the age of 13 or younger (WHO, 2016). On the other hand, the use of illicit drugs⁴⁵ at least once in their lifetime for 15 and 16 year-olds in Malta⁴⁶ was below the average of the 36 participating countries in the European School Survey Project on Alcohol and Other Drugs (ESPAD) carried out in 2015 (European Monitoring Centre on Drugs and Drug Addiction, 2016). The proportion of Maltese students aged 15 and 16 who engaged in the use of inhalants at least once in their lifetime⁴⁷ was at the average of the 37 participating countries⁴⁸ for boys and slightly above average for girls (European Monitoring Centre on Drugs and Drug Addiction, 2016). This Policy calls for increased prevention and care to reduce the incidence of these experimental and risky behaviours, that may eventually lead to addictions.

41 26% of boys and 19% of girls.

42 26% of girls and 32% of boys.

43 From 3% among 11 year old boys to 32% among 15 year old boys and 1% among 11 year old girls to 30% among 15 year old girls.

44 From 1% among 11 year old boys to 11% among 15 year old boys and 1% among 11 year old girls to 12% among 15 year old girls. 45 Includes cannabis, amphetamines, cocaine, crack, ecstasy, LSD (Lysergic acid diethylamide) or other hallucinogens, heroin and GHB (Gamma Hydroxybutyrate).

45 Includes cannabis, amphetamines, cocaine, crack, ecstasy, LSD (Lysergic acid diethylamide) or other hallucinogens, heroin and GHB (Gamma Hydroxybutyrate).

46 14% used illicit drugs (same rate among boys and girls)

47 7% of boys and 9% of girls.

48 7% of boys and 7% of girls.

Universal Primary Health Care and Early Intervention

Malta provides free quality healthcare through hospital, primary healthcare and community health services for all, including children. This Policy promotes regular screening of children in schools for hearing, vision, posture, hair and oral health. Community-based prevention and screening need to be consolidated to facilitate early medical and psychological services for children's common and rare health conditions. Every child has the right to the best quality healthcare regardless of differences in sex, race/ethnicity, religion and beliefs, health, social and economic status, and physical or cognitive ability or disability.

Abuse, whether in the form of neglect, violence or exploitation of children not only violates children's right to wellbeing but also has detrimental effects on their health and development. Any form of abuse (verbal, physical, psychological/emotional, sexual) is highly likely to pose multiple negative health effects ranging from psychosomatic symptoms, eating disorders to self-harm or suicide. This Policy advocates early detection, prevention and the provision of special support services.

Special services should be given to children who have been neglected, abused or exploited to aid their

recovery and restore their self-respect and dignity. At a time when access to the digital environment is highly prevalent, the protection of children from inappropriate exposure, exploitation and abuse becomes more urgent.

Healthy Relationships

Healthy relationships are an important part of life, especially for children in their adolescent years who would be exploring their sexuality. Children are more vulnerable to unhealthy sexual relationships if they are excluded, deprived, and lack a stable family unit based on respect and dignity (Wilkinson & Pickett, 2010). They are also more vulnerable to such unhealthy relationships if they lack adequate knowledge and awareness of sexual health education. Children's knowledge of sexuality should be developed and they should be free from fear, shame, and guilt associated with the expression of their own sexuality. An integral part of children's wellbeing concerning sexual health depends on "a state of physical, emotional, mental and social wellbeing in relation to sexuality" (WHO, 2010). In 2014, 19% of girls and 25% of boys aged 15 reported that they have had sexual intercourse (WHO, 2016). A 2012 national study (DHIR, 2013) on sexual knowledge, attitudes and behaviour found that the

49 Age of first sexual intercourse was 15 for those aged 16 to 18, and 17 for those aged 19 to 29.

age at first sexual intercourse has been declining⁴⁹. The provision of accurate age-appropriate information and sexual health education should enable children to make informed decisions.

Teenagers tend to be first exposed to formal sexual education at secondary school but show the desire for more involvement of parents with respect to sex education, especially in areas not related to reproduction. Amongst older teenagers, 16 to 18 year olds, there is greater awareness about the use of condoms and the prevention of sexually acquired infections but misconceptions about pregnancy and contraception use still exist (DHIR, 2013), thus reflecting the need for enhanced sexual education.

An issue which tends to be highly relevant in health related matters, and which most often arises in respect to sexual health issues, is that concerning minors' autonomy, since legally, parental request is required until they reach the age of 16. Yet, there may be cases where minors choose to deal with health related matters without their parents' consent. Against this scenario, the 'best interests' of the child should prevail if there is discord or disagreement regarding parental consent to medical information and care. Professionals in the social, legal and health fields are thus encouraged to work together, so that advice on health related matters puts the child's 'best interests' at the forefront. The issues of parental consent, professional guidance and the ability of the minor to take reasoned decisions, ask for

further discussion and analysis, to find a way forward in the 'best interests' of the child.

Conclusion

Children have the right to a safe and healthy development, to be protected from harm and to have equal access to quality healthcare. Their full participation in healthy development and wellbeing guarantees their dignity and respect.

POLICY OBJECTIVES:

Health and Environment

Against the scenario discussed above, this policy sets out the following actions:

1. Uphold the right to high quality treatment and care.
2. Enhance pre-natal and post-natal support to parents, primarily mothers.
3. Strengthen the promotion of healthy lifestyle patterns primarily among expectant mothers as well as children, primary caregivers and educators.
4. Promote and support the benefits of breastfeeding and facilitate other effective alternatives when necessary.
5. Promote prevention and screening so as to facilitate early medical and psychological treatment among children.
6. Enhance screening, diagnostic, curative and palliative services at every stage of health care provided to children, particularly with regards to rare medical conditions.
7. Ensure there is equity of access to mental health services for all children, in particular adolescents.
8. Strengthen care and support within the school and home environment for children living with long term health conditions.
9. Address culturally sensitive issues in all aspects of health care provision to children.
10. Promote and support healthy lifestyle choices among children and their families to primarily address childhood obesity in synergy with 'A Healthy Weight for Life: A National Strategy for Malta 2012-2020' and the 'Food and Nutrition Policy and Action Plan for Malta 2015-2020'.
11. Address problematic use of the internet by promoting safe and responsible use among children and primary caregivers.
12. Promote a public environment, both natural and urban, that is conducive to the healthy development of children.

13. Strengthen support to children as they go through the transition from childhood to adolescence to adulthood, to safeguard physical, sexual and mental health development.
14. Promote the values of respect, one's personal expression of sexuality and gender identity, as well as freedom from exploitation and abuse through age appropriate methods and health services in synergy with the 'National Sexual Health Policy' (2010).
15. Enhance prevention, early detection, support and care with regards to smoking, alcohol, gambling and drug use among children.
16. Create greater awareness on child safety and injury prevention especially in terms of road and water safety.
17. Make roads safer for children especially in village cores by, for example, creating more pedestrian areas.



My teacher





EXPERIMENT



3.4 EDUCATION AND EMPLOYMENT

Children's Views:

Learning is important in order to... get to know new things, and increase one's potential, get a good job and build a career, communicate, socialise as well as to be *independent*.



"It determines whether you'll live a good healthy life and have a high-standard of living, it determines your income, friends and lifestyle"

Amy, 16

Children recognise that school provides a *safe environment* in which they can develop and grow, by helping them to see *right from wrong* and motivating them to do things in a good way, learn good *values* like love, respect and cooperation, have manners and follow rules, *mature*, speak for oneself, and *understand* what is happening around them.



"Bix inkunu nafu nagraw"

Julia, 7

(So that we'll know how to read)

Education *opens the doors* for all jobs in the future, broadens their horizons, gives them the opportunity to improve their *social status*, to be strong, intelligent and be able to *communicate* with people of different nationalities, *integrate* and live a good quality of life.



"Bix inkabbru l-potenzjal taghna u bix inkunu nistghu nahdmu koghol li joghjgobna"

Jack, 13

(To increase our potential, and be able to to take up work that we like)

Getting an education helps them to *succeed*, be comfortable and free: the more you learn, the less you have a hard or stressful job or a job with bad conditions.

The most things children *like* about school are meeting *friends*, and friendly, gentle and dedicated teachers who *give them attention*, help, and encourage them. Yet... common complaints included bullying; strict and arrogant teachers; *boring lessons* and lack of activities.

Indeed...outings; playing; break time; activities; fun and creative lessons; clean, attractive and equipped classrooms with *modern technology* such as interactive white boards were also amongst the most mentioned. However, some children also criticised their neglected school environment, unequipped classrooms, *lack of hygiene*, particularly in toilets which also lack basic things.

Children also expressed their *liking* for interesting and interactive subjects which allow for freedom of thought/speech, PE, PSD, art and crafts, extra-curricular activities, and for subjects which they have personally chosen. On the other hand... children are not happy about having too much homework and study; *stress* - school is getting harder and more demanding; tests and *exams*; obligatory subjects; choosing subjects as early as in form 3; long lessons and short breaks.



Exams dominate the failure or success of a person”

Matthias, 16

Children appreciate that education *is free for all*, and some positively noted the introduction of co-ed classes. Sixth Form students also appreciate receiving *stipends* as an encouragement to carry on with their studies.



It is free and you basically get paid to learn”

Elena, 16

Nevertheless, children do not like to *wake up early*, long school hours, having too much books to carry, as well as their uniform.

In addition, children wish for a greener environment, more use of technology, more focused teaching when required, more *hands-on experiences*, more time to practice their talents, teachers to be more involved in bullying cases.



Li tkun mgħallim u edukat hu importanti għax b'hekk kulhadd ikun jisma' b-opinjoni ta' haddiehor u jilthqu kompromess”

Nicole, 11

(To be taught and educated is important, so that everyone listens to each other's opinion and reaches compromise)

Children need to be involved and empowered to explore and experiment, take risks, ask questions, express themselves and be free to use their imagination. Providing the right environment and the necessary conditions for quality education where all children have the opportunity to process ideas, be innovative and think flexibly is crucial. Nurturing creativity and a life-long love of learning is a societal responsibility.

Education begins at home. The presence, love and care of family members determine a child's emotional, spiritual, social, cultural and physical development, whilst their consistent guidance, attention, help, encouragement and example determine a child's intellectual development.

Early Years

The environment of child-care centres should be stable and offer consistent care and varied learning opportunities so as to promote and support the holistic development of children from an early stage. The opportunity for young children to make solid attachments, to play and explore safely depend on high quality professional care.

Going to school is the next big step in a child's life. This transition should be supported through good

communication and a welcoming environment for primary caregivers to be actively involved in their child's progress. Early assessment and the development of individual education plans are vital at this stage. Moreover, professionals who work with children should be trained on how they can positively interact with children of all ages and backgrounds. Such training and insight should be complemented by comprehensive and integrative educational policies, operating guidelines and codes of practice that help to prevent educational exclusion. Students manifesting some form of diversity, that may range from disability to religious beliefs to cultural backgrounds and other differences prevalent amongst minority groups, are at increased risk of exclusion. The promotion of inclusion in education would help such students and their primary caregivers benefit, in a timely and concrete manner, from the mechanisms, services and assistance that they may require.

Early screening and profiling of children leading to the provision of intensive courses should be consolidated in the best interests of all students with literacy difficulties. Continuous assessment and differential learning should complement standardised and test-based approaches so as to promote educational attainment and reduce stress⁵⁰ among children. Methods used in the classroom and

⁵⁰ Malta ranked first, rating around double the average sustained by participating countries in the 2014 HBSC Survey (WHO, 2016) in terms of how much children (11, 13 and 15 year-olds) feel pressured by schoolwork.

in skills assessment should always recognise the importance of children's creativity and cultural backgrounds. A more tailored approach involving the student, teachers, school counsellors and parents is also important for the student's achievement.

Absenteeism

From an early age, students' active participation in the learning process reduces absenteeism⁵¹.

Malta ranked first, rating around double the average sustained by participating countries in the 2014 HBSC Survey (WHO, 2016) in terms of how much children (11, 13 and 15 year-olds) feel pressured by schoolwork. Daily engagement is correlated with a curriculum that allows for critical thinking, creative expression and hands-on learning. The inclusion of physical activity and fine arts, such as dance, drama, music and the visual arts as well as that of spiritual, religious and ethical experiences in the daily school curriculum is crucial for a

holistic educational experience and engagement. Furthermore, schools should also foster democratic values through participatory mechanisms such as student councils and student representatives.

Absenteeism in schools is highly correlated with academic performance⁵². A vital entitlement for all children is to be able to read, write and make accurate basic calculations, speak fluently and express themselves well. Malta's illiteracy rate⁵³ also warrants attention for multiple reasons. Students with low literacy are more likely to leave school early and to be unemployed, and more likely to suffer from ill health. Children from disadvantaged backgrounds are more at risk of illiteracy, lower cognitive and educational performance (MEDE, June 2014), higher absenteeism and early school leaving. The significance of this disadvantage is increasing as the labour market is constantly asking for higher literacy skills.

51 The Department of Student Services at MEDE has concentrated on the implementation of early intervention and individual educational plans to help prevent absenteeism. Indeed, although during the academic year 2014/2015, student absenteeism in State schools (39.5%) for children aged 5 to 15 years remained significantly (21.3%) than in Church and Private schools (30.6%), yet State schools experienced a significant drop of 12.3% in absenteeism over the previous year. In 2014/2015 academic year, a total average number of 5.9 unauthorised absent days per student were recorded for public schools, whilst 1.6 and 2.4 unauthorised absent days were recorded for Church and Private schools respectively. Data includes unauthorised absences of children attending Special Schools.

52 Malta's student performance in mathematics, reading and science is significantly higher than or at average with EU and OECD averages for Private schools, Church schools and girls attending Junior Lyceums. Students attending Area secondary schools and boys attending Junior Lyceums score low levels in maths, science and reading literacy, which is below levels of other countries, showing room for improvement (MEDE, 2013).

53 With regards to reading literacy, among the 15-year olds, "the percentage of Maltese low-achievers decreased by 0.8% from 2009 to 2015; while the mean across OECD countries increased by 1.5%" (PISA, 2015).

Holistic Education

The educational setting is central for children to acquire skills whilst enjoying play and recreation. Through play, children learn new social competences, and are encouraged to interact with their peers. As a result, play should not be solely limited to the designated break time and physical education classes, but should also be extended to the teaching component. Moreover, the use of school buildings and their surroundings can provide opportunities for the development of play and other leisure activities in the local community, even after school hours.

Schools are to ensure that technological tools are resorted to in the classroom, and that every child is given the opportunity to use these new forms of technology, thus enabling them to familiarise themselves with the full potential of these tools. It should be recognised that children are growing up in an era characterised by these new forms of technology, and it is thus imperative that learning is not estranged from this context. In this dynamic scenario, apart from a selection of books, libraries may be more equipped with the new technologies and free Wi-Fi. Moreover, public libraries could

include fun centres for developing skills and competences through enjoyable and creative experiences, active participation, workshops, story-telling, and music, drama and dance events. A comprehensive education, which seeks to promote knowledge and pro-social lifestyles, should also seek to help children to better understand themselves and others, as well as the world around them. In this regard, education needs to promote a greater sense of responsibility and commitment through the acceptance and celebration of spiritual, religious, ethical and cultural differences. Such education can nurture the inner life of the child to guide his/her actions and behaviour through a better understanding of norms, values, rights and responsibilities.

Ultimately, a well-developed spiritual understanding does not only help to strengthen children's resilience and ethical practice, but can also help them acquire meaning and competence to address difficult experiences whilst motivating achievements in several aspects of life.

All children have the right to safe learning spaces which are free from violence and aggression, both on physical and emotional levels. Safeguarding the right to a violence free environment⁵⁴ promotes learning

54 Violence includes bullying characterised by "those behaviours which are repeated over time by an individual or a group and which are intentionally hurtful in a direct or indirect manner against a person who has difficulty defending himself or herself" (MEDE, 2014, p.11). According to the PIRLS 2011 (MEDE, 2013), more than one-fifth (22%) of Maltese children are bullied at school on a weekly basis, being more than the international average (20%). A more recent study, the 2014 HBSC Survey (WHO, 2016), shows that the percentages of 11, 13 and 15 year old children in Malta (average of boys and girls: 9%, 10% and 5% respectively) "who have been bullied at school at least two or three times a month in the past couple of months" is below the HBSC averages (13%, 12% and 8% respectively).

and the positive development of the child⁵⁵. The negative implications of violence are corroborated by the findings drawn from the consultations⁵⁶ with children which show that bullying is of primary concern for them, whether it is direct or indirect, face-to-face or virtual.

Gender Equity

Gender stereotyping and gender inequality are another reality which may be effectively addressed by the educational system. Gender equity and appreciation of all forms of gender identities should be acknowledged by combating stereotypes so as to make children aware that there are diverse roles which transcend traditional gender roles. Gender equity in education also needs to consider intersectional identities arising from such aspects as social class, ethnicity, beliefs and cultural background in order to be truly inclusive. Apart from the formal curriculum, gender formation and gender equity are also influenced by the informal curriculum which includes the organisation of the education system and its general practices. Moreover, education needs to challenge the gendered symbolic identities of academic subjects in order to promote a more diverse and balanced uptake in different fields

of study and career choices which should enhance gender equity and representation in the labour market.

Sexual Education

During teenage years, children are prone to be peer-oriented, sexually active and rebellious. The importance of sexual education should not be underestimated, particularly at a time when sexual attitudes are becoming increasingly liberal. In fact, "sexuality education has been commonly defined as a life-long learning process starting in childhood..." (Ministry for Health, Elderly and Community Care, 2010). Children should be reared to respect themselves and others in all aspects of life, especially in terms of privacy and intimacy. In the absence of such respect, the development of one's own sexuality may be exposed to various risks. While primary caregivers need training on how to address this subject with children in an informative way, educators have also an important role to play in promoting healthy relationships and raising awareness on one's personal sexual health and one's responsibility towards that of others. Primary caregivers and educators should encourage children to feel free to air their doubts and fears, to ask questions and to share their thoughts on sex in a supportive and confidential

55 In most cases, bullying is based on socio-economic status, gender and sexual orientation, appearance, racial and ethnic origin, religious beliefs, and learning ability. "A significant proportion of bullying in schools is rooted in the lack of respect for diversity and in social inequalities" (MEDE, October 2014, p.14). Victims of bullying are at a greater risk of developing anxiety disorders, depression and suicidal thoughts and bullies are more likely to commit crimes later in life (Pappas, 2013).

56 Consultations that were specifically carried out for the purpose of this policy.

educational environment. In the light of increased teenage pregnancy, boys and girls should not only be alerted about the importance of sexual health, but should also be made fully aware of their responsibility towards one another and, in the case of conception, of the commitment towards their child and the life changes that birth brings along.

Education and Training

Adolescent children shall be fully informed of the possible adverse effects that certain actions may have on their health, their learning ability, expenses and their general overall development. Students should also be made fully aware of the importance of completing school⁵⁷, since the need for education grows in proportion to the increasing need for an advanced, skilled and flexible workforce. Thus, realising and maximising one's potential, be it in the academic or vocational field, is crucial to student motivation, attendance and achievement. Education plays a determining role in the psychosocial and academic development of the child and his/her eventual prospects in the labour market. Thus, adolescent children who are neither in education, nor in employment or training (NEETs) reflect a great loss of human potential and are at a higher risk of multiple forms of deprivation. Against this scenario, various initiatives have been taken, such as the 'Youth Guarantee Scheme', the 'National Employment Policy' (May, 2014) and the 'National Youth Employment Strategy 2015' to address the challenges

that children in their adolescent years face, in particular their lack of experience, mismatch of skills and precarious working conditions.

Whilst promoting labour market participation and young people's employability prospects, Malta outlaws child labour. Thus, when young children (below 16 years) are being expected to help out in the family (including business), due care should be taken by primary caregivers so as to ensure that the tasks given are safe and suited to the child's level of development. In the case of older children (over 16 years) who take up paid work, the respective conditions should neither be harmful nor exploitative and should comply with national laws. Ultimately, children's work responsibilities should not deprive them of their right to education, relaxation and play.

Conclusion

In view of the foregoing, children are to be endowed with an education which equips them for life. In providing the necessary knowledge and skills for personal and social development, education opens up opportunities for advancement and social mobility. Whilst acknowledging the importance of academic subjects, it is to be stressed that more focus is to be given to life-skills subjects, so as to inculcate a positive disposition in children to adopt the role of active citizens in society.

⁵⁷ It is a priority for Malta to reduce the percentage of early school leavers (ESL), standing at 19.8% in 2016 which is significantly higher than the EU27 average of 10.8%.

POLICY OBJECTIVES:

Education and Employment

Against the scenario discussed above, this policy sets out the following actions:

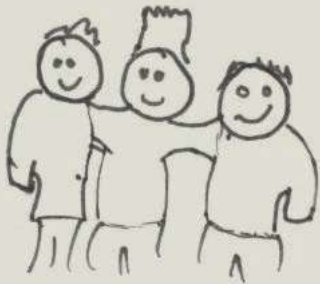
1. Uphold the right to high quality education.
2. Strengthen coordination and interaction between educators and primary caregivers.
3. Provide all children with a stronger voice in educational matters which affect them both directly and indirectly.
4. Enhance the quality of childcare by enforcing the National Standards.
5. Increase the accessibility of childcare services and schools in such a way that meets the educational, social, emotional and physical needs of all children.
6. Promote and support attendance of children in pre-school and kindergarten centres.
7. Strengthen efforts to reduce school absenteeism in synergy with the 'Attendance in Schools Policy (2014)'.
8. Strengthen quality education and additional educational support structures that are available to all children in institutional settings such as hospitals and respite settings, to help them overcome gaps in their schooling.
9. Strengthen the provision of induction courses for children coming from migrant families so that they acquire basic skills that facilitate their integration both in the educational system and in society.
10. Strengthen social inclusion measures and enhance efforts to improve educational outcomes of children coming from migrant families, children with special needs (including gifted children), especially through early years' education.
11. Promote different pedagogies and foster an inclusive school environment where all learners are able to flourish and attain their highest academic or vocational potential.

12. Nurture critical and creative thinking and development across all levels of education.
13. Enhance opportunities for continued assessment for learning throughout compulsory education.
14. Support educational settings to invest more in children's creative and cultural appreciation and involvement in collaboration with cultural organisations.
15. Respect and address children's needs for spiritual development and growth.
16. Strengthen the promotion of children's healthy lifestyles among educators in synergy with 'A Whole School Approach to a Healthy Lifestyle: Healthy Eating and Physical Activity Policy (2015)'.
17. Strengthen and update age-appropriate education in sexual health, sexual orientation and gender identity in line with the 'National Sexual Health Policy (2010)' and the 'Trans, Gender Variant and Intersex Students in Schools Policy (2015)'.
18. Intensify training in health and safety as well as in first aid for both educators and children.
19. Strengthen the provision of programmes offered outside school hours to enhance the holistic development of children.
20. Enhance early intervention in schools that extends beyond academic learning through professionally trained support staff.
21. Strengthen the commitment against bullying in schools in synergy with 'Addressing Bullying Behaviour in Schools Policy (2014)' and extend such a commitment to combat all forms of bullying, including cyber-bullying, among children across other settings.
22. Strengthen awareness and education on the pros and cons of social media, more specifically, the risks of bullying, sexting, grooming, abuse, privacy, etc.
23. Support educators in both primary and secondary schools to be able to respond effectively to the basic needs of children experiencing psychosocial and mental health challenges.

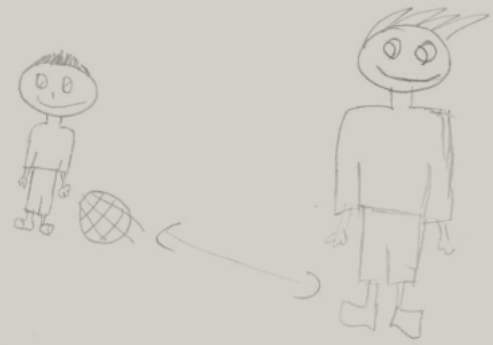
24. Continue to provide timely access to educational and therapeutic support for children who are identified as requiring additional or special attention/ services.
25. Enhance opportunities to nurture children's personal, social and career development within compulsory schooling.
26. Increase and update the provision of subjects relating to financial literacy together with personal and social education in all levels of schooling.
27. Reinforce efforts to reduce early school leavers (ESL) in synergy with 'A Strategic Plan for the Prevention of Early School Leaving in Malta (2014)'.
28. Strengthen vocational and career guidance to ensure that all children reach their full potential.
29. Continue to promote the gender balanced uptake in the choice of subjects so as to counter gender stereotyping in career prospects.
30. Sustain the commitment to effectively address children (especially those of adolescent age) who are not in education, employment or training (NEET).
31. Promote vocational and applied education to encourage the development of entrepreneurship skills and internship programmes among all children so as to strengthen links among local businesses, schools and youth organisations, thereby facilitating children's future transition into employment.
32. Support children to engage in the farming, fishing and agritourism sectors.



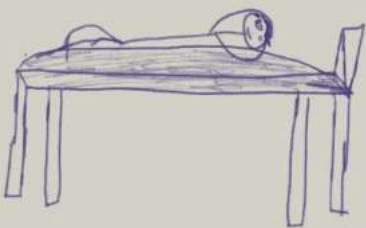
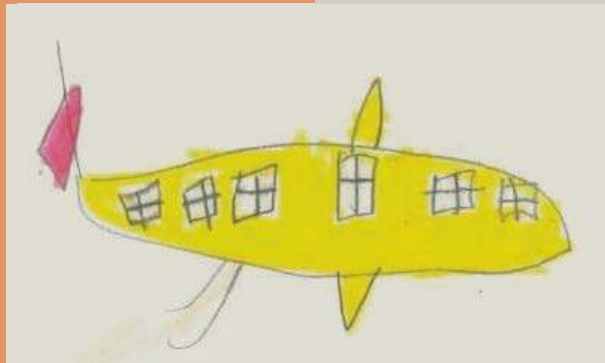




I enjoy time
with my
friends



Nilgob mo' hjo.



3.5 LEISURE AND CULTURE

Children's Views:

Children seem to *create a balance* between *indoor, outdoor, physical* and *sedentary* activities during their free time.



nagħmel il-krafts, inpingi, immur il-gym, immur passigġati, nilgħab ma oħti

Emma, 10

(Do crafts, draw, go to the gym, go for walks, play with my sister)

Although playing with technological devices, watching TV and online videos, *chatting*, exchanging photos and playing *online* with friends were commonly mentioned, children also enjoy playing with their *pets, siblings and toys*. Reading, writing and studying; practising hobbies like drawing, cooking and gardening; playing instruments, playing in *band clubs* and listening to music; doing some type of *sports*; and practising performing arts (dancing, drama, singing) were also frequently listed as to how children like to spend their spare time.



Nilgħab futbol, nara TV, nilgħab bil-kompjuter, ngħum

Jacob, 14

(Play football, watch TV, play on the computer, go swimming)

A lot of significance was also given to: *going out* and enjoying the countryside, going to playgrounds, meeting with *friends*, doing voluntary work including helping in the *village feasts* and helping others, being part of religious/civic organisations, *relaxing/resting* at home, and spending time with *family*.

Children **complained** that their free time is *not enough* or they feel that it is *not 'free' at all*. Fighting with siblings and friends; having lots of homework and studying; doing house chores; being alone and getting *bored* by not knowing what to do other than spending time on social networks, playing games on technological devices or *watching TV*.



Nieċassa lejn it-television

Elias, 7

(Staring at the TV)

While some children are *happy* with how they spend their free time, since they wished for nothing else, others expressed that they would like: to have pets and spend time with them; to enjoy nature; to play *outside*; to learn and do *new things*; to be involved; to go out with *friends*, more books to read, more games to *play* and to travel more.



“Make a more efficient timetable and split my work properly”

Mariah, 16

Although the majority of children requested *more free time*, some feel that they need better time management, and thus *more guidance* in prioritising. At the same time, more *attention* from parents as well as more time with siblings and extended family members, were also listed in their wishes.



“Ma tistax tmur f’ hafna postijiet ta’ divertiment ghax f’ Malta kważi m’hawn xejn”

Isaac, 11

(You cannot go to a lot of leisure places, because in Malta there is almost nothing)

Children between the ages 11 and 17, want to *advance* and to see their *dreams/aspirations* come true with regards to the passions they have focused on in their free time. Yet this cohort desire: having *new experiences*; doing voluntary work; as well as more appropriate places where they can enjoy themselves; and more public and free of charge parks/playing fields in their *locality*.



“Nixtieq li ma nahlx hafna hin fuq it-teknoloġija iżda minflok nagħmel xi sport jew voluntary work”

Hailey, 17

(I wish not to waste too much time on technology, but instead take up some form of sport or voluntary work)

All children have the right to leisure, play and to express themselves in spiritual and cultural activities and the right to decide on how they participate in these activities. Creative play, physical activity, spiritual expression and community involvement are fundamental to healthy development. Moreover, children's involvement in the design, implementation and evaluation of leisure and cultural facilities and activities can be a means to maximise their uptake and participation.

Play

This national Policy adheres to the belief that play is a basic need for all children, and that fun should be a key characteristic in childhood and adolescence. In play, children are given the possibility to choose freely their level of engagement, and often enjoy their first experiences of active participation. Social transitions have brought about a change in children's play. Play has become more individualised, especially since the advent of videogames, computers, internet, and other recreational technological tools. These have led to a more sedentary form of play⁵⁸. Moreover, play time and its quality

have become limited by increased curricular and formalised extra-curricular activities, as well as the demanding way of life of primary caregivers, especially where more household members are engaged in the labour market. Environmental changes have also affected children's outdoor play. Streets have become busier, traffic and pollution have increased, while open spaces in urban areas and green areas have been reduced. As a consequence, safe outdoor play has become structured and organised.

For children to be able to develop into happy and healthy citizens, they need an environment which encourages them to indulge in age-appropriate play and to enjoy themselves in activities which are spontaneous and enriching. Recreation contributes towards self-expression, development of identity, and feelings of autonomy, whilst also offsetting stress, tension, and the negative effects of sedentary lifestyles. For adolescent children, leisure time is not only an entitlement, but also a means where they build personal relationships with their peers, and extend their network of friends. As children get older⁵⁹, family support and family communication tend to decrease⁶⁰, while peer support⁶¹ and

58 In general, a trend also exhibited in Malta, while a higher percentage of girls tend to use the computer for email, internet or homework purposes, a greater percentage of boys tend to use the computer to play games (WHO, 2016).

59 Data taken from the 2014 HBSC Survey (WHO, 2016).

60 As outlined above under the Home Environment section.

61 "Young people were asked if they perceive that their friends really try to help them, that they can count on them when things go wrong, if they have friends with whom they can share their sorrows and joys, and if they can talk to them about their problems." Children aged 11, 13 and 15 years in Malta scored 51%, 52% and 61% respectively. These percentages reflect the averages of boys and girls.

communication with friends (spending time⁶² and texting⁶³) tend to increase (WHO, 2016). Girls are more likely to report high peer support⁶⁴ and to spend time with friends in the evening⁶⁵ while boys are more likely to spend time with friends in the morning and afternoon⁶⁶. Yet, while relationships with peers carry a number of benefits, time spent with friends during adolescence tends to be also associated with risky behaviour such as binge drinking and unhealthy sexual relationships (WHO, 2016).

Opportunities for leisure should be inclusive and facilitate equitable access so as not to deprive any children from their right to engage in play, sports, arts, spirituality and culture. Physical and social access to play and recreational activities should be the norm including accessibility to such leisure areas as beaches. Hospitalised children should be provided with recreational facilities which not only render their experience as close to their normal environment as possible, but can also assist in their rehabilitation or recovery. Similarly, asylum-seeking children in open centres should be offered the opportunities, spaces and

facilities needed to engage safely in play activity. Opportunities for recreation should also be guaranteed to children in conflict with justice. The use of play therapy and structured group activities are to be promoted since play should form an intrinsic part of children's protection and care. Play is also a tool for social inclusion and should be rooted in all activities. On the other hand, difficulties in accessing play, lack of toys and equipment, are challenges which deserve attention since children may also be at risk of being marginalised in play activities.

Moreover, age-appropriate recreational equipment, including multi-media tools, should be available in public spaces frequented by children. Thus, this Policy encourages the design of public play facilities according to the needs and interests of all children.

Decisions on the development of public play and recreational spaces and facilities should be taken together with children. Participation in the planning and designing of these opportunities ensures enhanced use and appreciation of this national investment. Partnerships among

62 Stable for children in Malta among the three considered ages, but HBSC averages show a more increasing trend.

63 14%, 20% and 38% for 11, 13 and 15 year-olds in Malta respectively.

64 58%, 63% and 61% for 11, 13 and 15 year-old girls in Malta respectively in contrast with 43%, 41% and 60% for boys.

65 Spending time with friends after 8pm daily: 7%, 6% and 8% for 11, 13 and 15 year-old girls in Malta respectively in contrast with 1%, 1% and 5% for boys.

66 Spending time with friends every day before 8pm: 19%, 15% 17% for 11, 13 and 15 year-old boys in Malta respectively in contrast with 6%, 8% and 7% for girls.

statutory bodies, the business sector, and voluntary organisations are encouraged so that the amenities needed for play and recreation are increased and safeguarded. In addition, authorities should continue to regularly monitor facilities and conduct periodic evaluations, to ensure that facilities meet the desired health and safety standards and are enhanced in accordance with contemporary forms of recreation.

In all public structures, areas for quality play should be provided and maintained, while recreational activities are to ensure that inappropriate behaviour is not tolerated and that regulations are respected. Education is central in this context since transgression is best avoided if children are informed about the consequences of inappropriate behaviour which can be harmful to self and others.

As with play, recreational activities have changed along the years, particularly because of the increasing popularity of technology-oriented recreation. Moreover, consumerism is characterising today's societies, where children are being confronted with advertising on a daily basis. As a result, the advertised products are becoming a must-have, thus instigating peer-pressure and creating further challenges for those families who do not afford such products. Primary caregivers, educators and society have the responsibility to educate children and young people to be discerning in their consumer choices.

New Technologies

Children nowadays have increased access to the new technologies which offer both opportunities and risks. The digital environment has become active and multi-interactive through laptops, tablets, games consoles and smart phones. Initiatives such as BeSmartOnline! which brings together the Malta Communications Authority, Aġenzija APPOĠĠ, the Office of the Commissioner for Children and the Ministry for Education and Employment, aim to create awareness amongst children, educators, parents/primary caregivers and other stakeholders on how to make safe use of the internet.

Such initiatives need to be further strengthened in order to equip children with the necessary skills to think critically when making use of the new technologies.

Digital technology is part and parcel of contemporary life and the fast pace of change may result in digital divides between adults and children. It is the responsibility of key players in the lives of children to familiarise themselves with such technology and to guide and empower children to make safe use of technology. Concerted efforts by all educators in schools and effective communication in the home are key. Various tools and resources are available both online and offline which offer support. Through the BeSmartOnline! Initiative, a specific team has been set up within the 179 helpline in order to provide support for children with regards to the internet.

Efforts need to be strengthened in order to eliminate the production, possession and dissemination of online child sexual abuse material through law enforcement and public reporting on the specifically dedicated hotline www.childwebalert.gov.mt.

The new technologies offer many opportunities to children which include access to information, facilitation of communication and entertainment, however it is crucial to promote an online-offline balance in order to prevent problematic internet use. This could be done through limiting the time children spend online by offering alternatives as well as promoting physical activity such as sports, which is another form of leisure. Moreover, sports enhances mental wellbeing, and serves as a means of empowerment, thus, significantly contributing to the development of the child.

Sport Activities

Both individual and team sports are the foundation of healthy habits and a healthy life. Physical activity is not only synonymous with healthy development, but entails also an element of fun, that should be encouraged both by primary caregivers and Physical Education (P.E.) teachers. This would help children to view sports as a life-long involvement which is enjoyable and stimulating. Apart from being a fun activity, sports gives the opportunity to build social competences, mainly by creating networks and building trust. Particularly, in team sports,

children learn to cooperate with others, and understand that different skills and competences can lead to a common goal. This can nurture a healthy competitive spirit, both on an individual, as well as on a team level. Sports can serve as an instrument which fosters social inclusion and community building, by integrating people coming from different backgrounds, needs and abilities. Sports facilities and initiatives should continue to be supported to accommodate the various forms of sports and meet the needs of all social groups, so as to be accessible for all. In this regard, a coordinated approach between different policy domains, including education, sports, youth, health, local governance and welfare could lead to a better appreciation of the value of sports that could stimulate further and more effective involvement.

Culture

Along with sports organisations, cultural entities play a significant role in empowering children to be involved in participatory and innovative activities. Besides visits to conventional cultural sites, all forms of cultural and creative dimensions are to be encouraged. Museums, theatres, orchestras, choirs, band clubs and sports clubs, amongst others, occupy a central role in promoting collaboration, and in supporting children to be active participants.

More initiatives, similar to the Culture Card that entitles students to attend a number of cultural activities and artistic productions for free, should be introduced to give children and young people more opportunities to participate in sports⁶⁷ and cultural⁶⁸ events. In order to promote higher involvement, children are to be encouraged to interact with sports professionals and artists, and should be offered affordable, high quality tuition in these fields. Due consideration should also be given to children coming from socio-economic disadvantaged backgrounds, so as to facilitate their access to such activities.

Whilst recognising the various forms of physical and digital activities that positively contribute to children's leisure and culture, this Policy also acknowledges the relevance of spirituality within this dimension. Whether institutionalised or not, spirituality is a key contributing pillar towards personal and social wellbeing. Spirituality widely defined in terms of the assets that enable people to choose what is good and right for both oneself and society, nurtures the child's potential for personal insight and awareness of one's values and ethical practice.

Society should appreciate the potential that spirituality, religion and beliefs have to stimulate personal and social wellbeing. Hence, it should provide the adequate environment to develop children's spiritual assets such as compassion, forgiveness, appreciation, humility, patience and gratitude, whilst also instilling community values based on universal democratic principles such as respect for human dignity, freedom, equity, pluralism and justice. It should also create adequate space for interfaith dialogue and reflection. This is all the more relevant given the growing cultural diversity and religious pluralism in contemporary society. The development of spiritual assets and spiritual wellbeing should enhance the child's link to the wider community by promoting social solidarity and committing to the common good. Personal spirituality and community values compliment and enhance one another contributing to greater social cohesion. Children's mutual understanding of and respect for spiritual and cultural differences promotes greater solidarity and appreciation of diversity in all its forms. Increased community involvement through activism in voluntary and other solidarity initiatives should result in greater community building and sustainable development.

⁶⁷ In 2008, 30.3% children practised some kind of sports (M: 79.1%; F: 20.9%).

⁶⁸ In 2013, 10.2% engaged in dance, drama and music courses (excluding band clubs). In March 2013, a total of 7,426 children (M: 22.7%; F: 77.3%) enrolled in performing arts courses (dance, drama, music), with dancers covering 50.4%, followed by 26% and 23.6% in drama and music respectively

Children should be empowered and enabled to investigate society's values and adopt their own value system. In times where the values of individualism and materialism are thriving, empowering and enabling children to question and if necessary challenge the dominant value system can be an important medium for promoting positive social change.

Given the relevance of spirituality for both personal and social wellbeing, opportunity should be provided to effectively help children express their personal spiritual and religious beliefs and transmit universal democratic values.

Conclusion

Leisure and Culture play an important role in a child's development and should thus be given the necessary space to help children have a happy childhood that provides room for creativity, meaningfulness and free expression, while also cultivating talents and competences for the wellbeing of themselves and others.

POLICY OBJECTIVES:

Leisure and Culture

Against the scenario discussed above, this policy sets out the following actions:

1. Strengthen collaboration between all levels of government and NGOs to provide and make maximum use of existing facilities and resources within communities for leisure, sporting and culture.
2. Promote a greater sense of responsibility and solidarity through acceptance of differences in spiritual, religious, ethical and cultural values.
3. Support and increase quality youth work, especially in places of recreation and play, so as to help children in their overall development.
4. Ensure that children have age-appropriate activities and spaces for leisure, whilst guaranteeing that quality standards, safety and regulatory issues are followed and enforced.
5. Encourage inclusive and equitable play opportunities for children.
6. Strengthen the provision of accessible and affordable good quality sporting facilities for all children in synergy with 'A National Policy for Sport in Malta and Gozo 2017-2027'.
7. Promote the importance of silence, stillness and reflection so as to help children experience the here and now and nurture spirituality.
8. Develop further safe play and recreational spaces for children such as playgrounds, youth cafes, sports centres and leisure centres.
9. Promote opportunities for children to participate more fully in cultural activities.
10. Support cultural organisations to invest more in children's creative and cultural appreciation and involvement, primarily in collaboration with educational institutions.
11. Disseminate clear, timely and updated information regarding the benefits and risks of the digital environment.

12. Support the production of age-appropriate quality children's programmes that primarily address the entertainment, education and information needs of children.
13. Enhance efforts to limit children's exposure to age-inappropriate online material such as that of a sexual or violent nature.
14. Strengthen the protection of children against all forms of online abuse.
15. Strengthen awareness initiatives amongst parents and children to better protect them from online abuse and bullying.
16. Ensure the enforcement of standards that regulate the representation of children in the media and public activities.



4

This investment is considered to be vital for improving children's present and future prospects as well as for promoting the general wellbeing of society.

In focusing attention upon the physical, psychological, and socio-economic aspects in the life of the child, this Policy presents a number of actions under five key dimensions, namely: home environment, social wellbeing, health and environment, education and employment, and leisure and culture. The ultimate aim underpinning this approach is to work towards the realisation of the full potential and wellbeing of all children, while encouraging society to foster respect and value for every child, regardless of his/her different characteristics, abilities and circumstances.

The implementation of the various actions and objectives promulgated by this Policy demands commitment, coordination and partnership among relevant stakeholders. Moreover, putting this vision into practice can best be achieved through the development of adequate mechanisms that monitor and evaluate the execution of this Policy. For this purpose, the Office of the Commissioner for Children shall be monitoring, evaluating and reporting upon the progress achieved under the different dimensions of the Policy. Moreover, at the end of the period

covered by this Policy, an independent evaluation of the overall impact deriving from the implemented policy actions will be undertaken. Such an evaluation would help to continue addressing the emerging needs, interests and realities of children through evidence-based and participatory practices.

The full accomplishment of this Policy can only be achieved if children acknowledge and appreciate the benefits of protection, provision and participation and are empowered to further their rights and freedoms whilst observing their obligations and responsibilities, so as to be active participants in their own development and that of society at large.

REFERENCES

- Atrash, H. K., Johnson, K., Adams, M. M., Cordero, J. F., & Howse, J. (2006). Preconception care for improving perinatal outcomes: the time to act. *Maternal and child health journal*, 10 (1), 3-11. Retrieved from <http://link.springer.com/article/10.1007/s10995-006-0100-4>.
- CoE (2005). Warsaw Declaration: Action Plan, CM(2005)80. Retrieved from http://www.coe.int/t/dcr/summit/20050517_plan_action_en.asp.
- Dean, S., Mason, E. M., Howson, C., Lassi, Z., Imam, A., & Bhutta, Z. (2013). Born Too Soon: Care before and between pregnancy to prevent preterm births: from evidence to action. *Reproductive Health*, 10 (Supplement 1), S3. Retrieved from <http://www.biomedcentral.com/content/pdf/1742-4755-10-S1-S3.pdf>.
- DHIR (2013). Sexual knowledge, attitudes and behaviour: National Survey 2012, Retrieved from <https://ehealth.gov.mt/download.aspx?id=9982>.
- EC (2010). Flash Eurobarometer: The Rights of the Child - Analytical Report.
- European Council for Steiner Waldorf Education & Alliance for Childhood European Network Group (2013). *Improving the Quality of Childhood in Europe 2013: Volume 4*. Heys, B., Matthes, M., Sullivan, P. (Ed.). East Sussex, U.K.: ECSWE (European Council for Steiner Waldorf Education).
- European Monitoring Centre on Drugs and Drug Addiction (2016). *ESPAD Report 2015: Results from the European School Survey Project on Alcohol and Other Drugs*. Luxembourg: Publications Office of the European Union, 2016.
- Malta Communications Authority (2012). *Use of ICT by Minors: Quantitative Research*. Retrieved from <https://www.mca.org.mt/>.
- Ministry for Health, Elderly and Community Care (2010). *The National Sexual Health Policy for the Maltese Islands 2010*. Valletta: Outlook Coop.
- MEDE (2013). *PIRLS 2011: Progress in International Reading Literacy Study: Malta Report*, p. 74. Valletta, MEDE.
- MEDE (June, 2014). *A National Literacy Strategy for All in Malta and Gozo 2014-2019*. Retrieved from <http://education.gov.mt/en/Documents/Literacy/ENGLISH.pdf>.

MEDE (October, 2014). Addressing Bullying Behaviour in Schools Policy. Retrieved from <https://education.gov.mt/en/Documents/Addressing%20Bullying%20Behaviour%20in%20Schools.pdf>.

MEDE (2016). PISA 2015: Programme for International Student Assessment: National Report. Retrieved from http://curriculum.gov.mt/en/international_studies/Documents/PISA_2015_Malta%20Report.pdf.

MFSS (September, 2006). The National Report on Strategies for Social Protection and Social Inclusion 2006-2008. Valletta: MFSS.

Office of the Refugee Commission (April, 2015). Personal Correspondence.

Official Journal of the European Communities, 2000. Charter of Fundamental Rights of the European Union (2000/C 364/01). Retrieved from http://www.europarl.europa.eu/charter/pdf/text_en.pdf.

Pappas, S. (February, 2013). The Pain of Bullying Lasts into Adulthood. Retrieved from <http://www.livescience.com/>.

Rao, M., Ashkan, A., Singh, G., Mozaffarian, D. (2013, December 5). Do Healthier Foods and Diet Patterns Cost More Than Less Healthy Options? A Systematic Review and Meta-Analysis. *BMJ Open*, 3 (12).

UNESCO (2002). Learning throughout Life: Challenges for the twenty-first century. Paris: UNESCO.

UNICEF (November, 2011). Children, religion and spirituality. Retrieved from https://www.unicef.org/about/partnerships/index_60392.html.

WHO (2010). Measuring sexual health: conceptual and practical considerations and related indicators. Genève: World Health Organization.

WHO (2016). Health Behaviour Study in School-Aged Children (HBSC) Study: International Report from the 2013/2014 Survey: Growing up unequal: Gender and socioeconomic differences in young people's health and well-being. Copenhagen: WHO Regional Office for Europe.

Wilkinson, R. & Pickett, K. (2010). The Spirit Level: Why Equality is Better for Everyone. Penguin Books Limited. New York: Bloomsbury Press.

ANNEX 1 – QUESTIONNAIRES

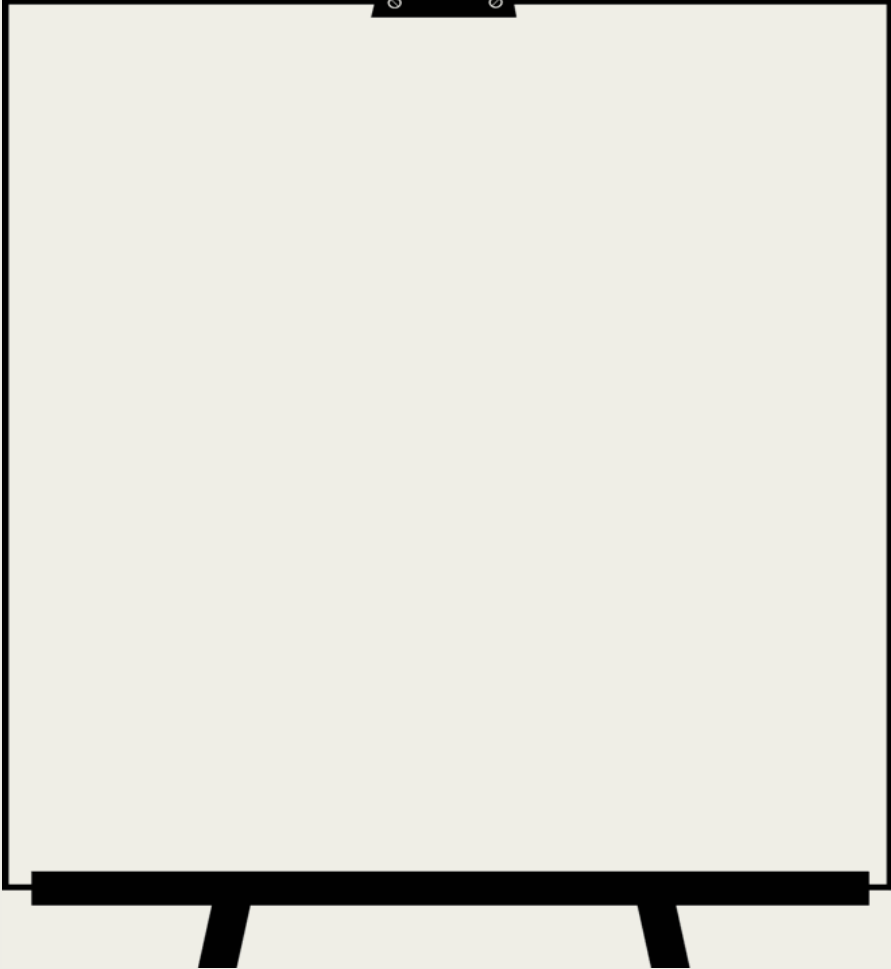
Questionnaire **Annex 1A**

School: _____

Kinder 2: *Year 1:*

Boy *Girl* *Age:* _____

Draw a picture of something that makes you happy.



Questionnaire

Annex 1B

School: _____

Class: _____

Boy

Girl

Age: _____



A) Home Environment



1. How would you describe your life at home?

2. What do you like in your home? What do you not like in your home? What do you wish for in your home?

	Like	Do not like	Wish
1			
2			



B) Social Wellbeing



3. What do you understand by a happy life?

4. What makes you happy? What makes you sad? What do you wish for to be happier?

	Makes you happy	Makes you sad	Wish
1			
2			

C) Health and Environment



5. What do you think is important for you to be healthy?

6. What do you like about the outdoor environment? What do you not like about the outdoor environment? What do you wish for in the outdoor environment?

	Like	Do not like	Wish
1			
2			



D) Education and Employment



7. Why do you think that learning is important?

8. What do you like about school? What do you not like about school? What do you wish for in school?

	Like	Do not like	Wish
1			
2			



E) Leisure and Culture



9. How do you spend your free time?

10. What do you enjoy doing in your free time? Are there any things which you do not like in the way you spend your free time? What else would you like to do in your free time?

	Enjoy	Do not like	Would like
1			
2			



11. Draw a picture or write some sentences about your life.



Questionnaire

Annex 1 C

School: _____ *Form:* _____

Boy *Girl* *Age:* _____

A) Home Environment

1. How would you describe your life at home?

2. What do you like in your home ? What do you not like in your home? What do you wish for in your home?

	Like	Do not like	Wish
1			
2			

B) Social Wellbeing

3. What do you understand by a good quality of life?

4. What makes you happy? What makes you sad? What do you wish for a better life?

	Makes you happy	Makes you sad	Wish
1			
2			

C) Health and Environment

5. What is important for you to be healthy?

6. What do you like about the outdoor environment? What do you not like about the outdoor environment? What do you wish for in the outdoor environment ?

	Like	Do not like	Wish
1			
2			

D) Education and Employment

6. Why is education important?

7. What do you like in the educational system? What do you not like in the educational system? What do you wish for in the educational system?

	Like	Do not like	Wish
1			
2			

E) Leisure and Culture

8. What do you do in your free time?

9. What do you love to do in your free time? What would you like to do? Are there any things which you not like in the way you spend your free time?

	Love to do	Do not like	Would like to do
1			
2			

10. Describe your life by an artistic means (drawing, story, poem, song).

A large, empty rounded rectangular box with a thin black border, intended for a child to draw, write a story, poem, or song. The box is centered on the page and occupies most of the lower half of the page.

