Foundation for Social Welfare Services

Report 2007-2009
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<td>ADHD</td>
<td>Attention Deficit Hyperactivity Disorder</td>
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<td>AGCT</td>
<td>Alcohol &amp; Gambling Community Team</td>
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<td>ASWs</td>
<td>Administrative Support Workers</td>
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<td>AWAS</td>
<td>Agency for the Welfare of Asylum Seekers</td>
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<td>BAAF</td>
<td>British Association for Adoption and Fostering</td>
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<td>BASPCAN</td>
<td>British Association for the Study and Prevention of Child Abuse and Neglect</td>
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<td>CCF</td>
<td>Corradino Correctional Facilities</td>
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<td>CCS</td>
<td>Cottonera Community Service</td>
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<td>CHI</td>
<td>Child Helpline International</td>
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<td>CNI</td>
<td>Children in Northern Ireland</td>
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<td>COA</td>
<td>Central Agency for Asylum Seekers</td>
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<td>CPI</td>
<td>Crises Prevention Institute</td>
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<td>CPS</td>
<td>Child Protection Service</td>
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<td>CSSSAG</td>
<td>Clinical and Social Support Services Advisory Group</td>
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<td>DCT</td>
<td>Drugs Community Team</td>
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<td>DESSA</td>
<td>Disability Equality Support Specialist Agency</td>
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<td>DHIR</td>
<td>Department of Health Information and Research</td>
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<td>DSWS</td>
<td>Department for Social Welfare Standards</td>
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<td>DV</td>
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<td>EMCDDA</td>
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<td>ERF</td>
<td>European Refugee Fund</td>
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<td>ESPAD</td>
<td>European School Survey Project on Alcohol and Other Drugs</td>
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<td>ETC</td>
<td>Employment and Training Corporation</td>
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<td>EU</td>
<td>European Union</td>
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<td>FAACT</td>
<td>FES-Appogg-ACCESS Coordination Team</td>
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<td>FES</td>
<td>Foundation for Educational Services</td>
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<td>FESAT</td>
<td>European Association of Drug Helplines</td>
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<td>FICE</td>
<td>Fédération Internationale des Communautés Educatives</td>
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<td>FTS</td>
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IFCO – International Fostering Conference Organisation
IOM - International Office of Migration
IRS – Initial Response Service
ISG-SPC - Indicator’s Sub-group of the Social Protection Committee
ITS – Institute for Tourism Studies
KIDs – Kids in Development Programme
KSM – Komunità Santa Marija
LAC – Looked After Children
MACP – Malta Association for the Counselling Profession
MAM – Medical Association of Malta
MCH – Mount Carmel Hospital
MDH – Mater Dei Hospital
MFSS – Ministry for the Family and Social Solidarity
MJHA – Ministry for Justice and Home Affairs
MoU – Memorandum of Understanding
MTR – Mid-Term Review
NFCAM – National Foster Care Association Malta
OIWAS – Organisation for the Integration and Welfare of Asylum Seekers
PFI – Paulo Freire Institute
PHOENIX - Preparing and Handling Opportunities for Employment: saying “No” to Isolation and Xenophobia
PMHC – Primary Mental Health Care
PSD – Personal Social Development
PTSD - Post Traumatic Stress Disorder
PUD – Programm Ulied Darna
Q4C – Quality 4 Children
QHC – Qormi Health Centre
RRRP – Risk and Resiliency Research Project
RSA – Refugee Service Area
SAC – Service Allocation Committee
SAFE – Substance Abuse Free Employees
SAL – Service Area Leader
SAV – Supervised Access Visits
SENT – Special Education Needs Team
SLP - Speech and Language Pathologists
SMOPU – Substance Misuse Out-patient Unit
SPC – Service Period Closed
SPL – Supportline
SVPR – St. Vincent De Paule Residence
TFAL – Tfal Favur Ambjent Liberu
TIP – Trafficking in Persons
UE – Unjoni Ewropea
UN – United Nations
UNICEF – United Nations Children’s Fund
WAVE – Women against Violence, Europe
WHO – World Health Organisation
YPU – Young Person’s Unit
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Introductions
Foreward by the Minister of Education, Employment and the Family

In a society that is continuously evolving, there will always be persons who find themselves in situations which require support. The Foundation for Social Welfare Services, offers guidance and support to hundreds of people who find themselves in such difficult situations.

During these past few years, the Foundation, which incorporates the Agencies Appoğg, Sedqa and Sapport, was continuously updating its policies to offer a better service to meet the needs of its clients.

New laws have been proposed, as well as changes to existing laws. Moreover, new services and benefits have been introduced and others were improved. The Foundation has extended its services within the community to be closer to those in need. Training was provided to professionals, so that they would be in a better position to give the necessary support to the persons who refer to them.

The Foundation also provided security and support to children, young people, adults and elderly, during difficult situations in their lives. The services it offers have become widely sought after since they are of great assistance.

This report gives an overview of the work carried out by the Foundation in the past few years. It reflects good work practices, which continued to render positive results. Now we have to look forward towards the future and continue developing these services and implement them for the benefit of society’s continuous development.

I would like to thank the administration and all the staff working within the Foundation for Social Welfare Services for their professionalism and dedication, and augur the Foundation to continue it is provision of security and support to all those who need the services is offers.
Messagg mill-Ministr tal-Edukazzjoni, Xogħol u l-Familja

F’soċjetà li kontinwament qed tinbidel u tevolvi se jkun hemm persuni li jsibu ruħhom f’sitwazzjonijiet fejn jinħtieġu ghajnuna. Il-Fondazzjoni għal Servizzi ta’ Harsien Soċjali toffi pariri u appoġġ lil mijiet ta’ persuni li jsibu ruħhom f’dawn is-sitwazzjonijiet.

Matul dawn l-ahħar snin, il-Fondazzjoni, li tigbor fiha l-Aġenziji Appoġġ, Sedqa u Sapport, kienet kontinwament qed taġgorna l-politika tagħha biex toffi servizz skont il-ħtiġijiet partikolari tal-klijenti tagħha.

Kienu proposti liġijiet godda jew tibdil f’liġijiet eżistenti. Iddahħlu servizzi u benefiċċji godda u oħrajn kienu mtejba. Wasslet is-servizzi tagħha fil-komunità biex ikunu aktar qrib dawk li jinħtieġuhom. Harrġet nis professjonali biex ikunu jistgħu jaghtu l-ghajnuna meħtieġa lil min jirrikorri għandhom.

Il-Fondazzjoni offriet wens u ghajnuna lil tfal, żgħażagħ, adulit u anzjani u wafqet magħhom f’mumenti diffiċli matul ħajjithom. Is-servizzi tagħha saru ferm imfittxija għaliex huma ta’ fejda kbira.


Minn qalbi nixtieq nirringrazzja lill-amministraturi u l-impjegati kollha tal-Fondazzjoni għal Servizzi ta’ Harsien Soċjali għall-ħidma professjonali li jaghtu b’tant dedikazzjoni u nawgura li l-Fondazzjoni tibqa’ toffi wens u sostenn lil kulmin jiġi bżonn is-servizzi tagħha.
Message from the President, Foundation for Social Welfare Services

These recent years were years of relentless work by the Foundation for Social Welfare Services. This report gives an insight on all the work carried out by the Foundation, and its three Agencies – Ħażenża Appoġġ, Ħażenża Sapport and Ħażenża Sedqa, during the period 2007-2009\(^1\); and how the Foundation continued providing support to persons who are at risk of social exclusion.

These three years have been characterised by various changes. These include changes in the Ministry, as well as in the Foundation’s management. However, this has not deterred the intensive work and dedication of the Foundation to offer an effective and high quality service to its clients. In the past three years, the commitment towards the enhancement of society was evident through the introduction of new Laws, such as the Fostering Act, Domestic Violence Act, as well as the amendments carried out in the Law regarding the minimum alcohol consumption age. The Foundation, which is financed through public funds, strived so that these changes in legislation were adhered to across all of its operations.

There has been continuous investment in both human and financial resources, thus assuring effective service provision. Moreover, work has also been carried out towards the consolidation of services. As seen from this report, more energy has been invested so that the services would be in a better position to meet the needs of the persons, for which they are targeted.

One of the most important achievements has been the incorporation of the Adult Training Centres within the structure of Ħażenża Sapport. These where previously under the management of the Department for Corporate Services within the Ministry for Social Policy, having a

\(^1\) In the case of Ħażenża Appoġġ, the report covers the period between 2006 and 2009
departmental government structure. As a result of this, more professional service provision is guaranteed, and the Centres’ administration has been centralised together with that of the Foundation.

Another important aspect was the emulation of success achieved by the ACCESS project, which was granted the Best Practice Award from the European Union, for the work carried out in favour of social inclusion and the strategies towards the eradication of poverty in 2007. As a result of this, three more centres have been opened within different communities, which follow the same steps of the first ACCESS Centre. Furthermore, the services offered by Agenzija Sedqa have now been centralised under one complex, and various services are now being administered from the Agency’s offices in Santa Venera.

Ultimately, it is also important to mention the Foundation’s role in various projects co-financed by the European Union. These include the project ESF 20 - Training and Support for Labour Market Integration of Socially Excluded Persons, and EQUAL 7 Project – Integration of Asylum Seekers in Maltese Society. In addition, another two projects have also been launched which are Embark for Life - Labour Market Integration of Socially Excluded Youth, and Me2! - Integration of persons with disability into the labour market. It is important to note that the implementation of these projects would not have been possible without the positive synergy between the Agencies themselves, as well as for the collaboration with other entities.

On a concluding note, I would like to thank all the employees within the Foundation and its Agencies, who have all contributed in the work mentioned in this report.
Messagg mill-President,
Fondazzjoni għal Servizzi ta’ Ħarsien Socjali


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1 Fil-każ tal-Aġenzija Appoġġ, ir-rapport ikopri l-perjodu bejn l-2006 u l-2009
iktar professjonalji, u l-amministrazzjoni tas-servizz ġiet iċċentralizzata flimkien ma’ dik tal-Fondazzjoni.


Finalment huwa importanti wkoll li jissemma x-xogħol fuq proġetti ko-finanzjati mill-Unjoni Ewropea, li kienu jinkludu l-proġetti ESF 20 - Training and Support for Labour Market Integration of Socially Excluded Persons u EQUAL 7 Project – Integration of Asylum Seekers in Maltese Society. Ġew imnedija wkoll il-proġetti Embark for Life - Labour Market Integration of Socially Excluded Youth u Me2! - Integration of persons with disability into the labour market. Ta’ min jinnota li dawn il-proġetti ma kienux ikunu possiblmi mingħajr il-koordinazzjoni kemm bejn l-Ąġenziji nfushom, kif ukoll permezz tal-kollaborazzjoni ma’ entitaġji oħra.

Nagħlaq billi nieħu l-opportunità li nirringrazzja lill- haddiema kollha tal-Fondazzjoni u l-Ąġenziji tagħha, li mingħajrom ix-xogħol msemmi f’ dan ir-rapport, ma kienx ikunu possiblmi.
Message from the Chief Executive Officer, Foundation for Social Welfare Services

The promotion and looking after the basic well-being of vulnerable individuals is the crux of social welfare services. Such efforts not only strive to address the social issues being faced by those who come forward to access the services available, but may also strive to improve various aspects of their life. This is achieved primarily through policy development and policy change, improved legislation, as well as the networking between different entities working within the sector. The focus of such aims include, the efficient service provision, and development of the same services. Another issue is the sharing of experiences and imparting of skills between the entities who address the emerging needs within society at large.

The mission embraced by the Foundation for Social Welfare Services addresses just that: ‘by providing quality and timely service and support, FSWS empowers and helps to develop individuals to become responsible, integrated and productive members of society who value life as a resource for self actualisation’.

This is achieved through the sheer dedication towards service users, persistence in improving one’s quality of life – be it a child or an adult – and professional work ethic by the staff of the Foundation for Social Welfare Services, and its three Agencies Aġenzija Appogg, Aġenzija Sedqa and Aġenzija Sapport.

As the forthcoming detailed reports attest, copious amounts of work is done by the staff within the various service units, supported by the backbone provided through inter and intra-agency networking and also the development in legislation during the period under review in this report.
One of the challenges identified prior to the period covered in this report was the need to spread the service provision wider within the community, mainly to address emerging social needs at source and design specific interventions according to the local environment of the prospective service user.

This was addressed by making community services more accessible to those who can benefit most from them and by replicating effective services to other communities in various localities. An excellent example of this input is the various services already provided for a number of years from the ACCESS Community Resource Centre in Cottonera, which was also recognised as a model of good practice by the Council of Europe and was replicated in Valletta, Qawra and B’Kara. Spreading community services would not only make services more accessible, but helps in identifying emerging social needs and at times help in preventing complex social problems from developing. This, not only through immediate intervention before the onset of complex issues, but also through the various initiatives and programmes held within the community that address matters related to education, housing, employment, and upbringing of children, amongst others.

Residential treatment programmes offered by Sedqa were also centralised within the Santa Marija Complex in Hal Farrug, thus maximizing on resources and also facilitating an environment whereby professionals within the services can consult with each other to the benefit of the client. Speaking of centralisation of services, a salient development within the Foundation during this period, was the amalgamation of the corporate services from each individual Agency within the Foundation to one department now catering for the needs of the three Agencies. The functions of research, training, marketing and communications, purchasing and procurement, ICT, and project management now are incorporated in a centralised role within the Foundation, and thus the same departments now cater for the needs of the three Agencies.
Other significant mergers include the Day Services for Persons with Disability with Aġenzija Sapport in April 2007, and the move of the Adoption Service to Aġenzija Appoġġ from the Department of Social Welfare Standards in September 2007. Both moves added to the portfolio of services provided while moving the Foundation towards its aim of being a one-stop-shop of social welfare services. The move of the Day Services for Persons with Disability with Aġenzija Sapport eventually also led to the opening of a new day centre in Paola in January 2008. A few weeks later, in March 2008, Aġenzija Sapport also launched its 6th residential unit in Bormla, Dar Andrew, thus keeping to the Foundation’s promise of service expansion through increased accessibility and increased availability of services in various localities. Aġenzija Sapport now provides Community, Residential and Day Services for persons with disability.

All this was again possible thanks to the commitment, hard work and ability of staff to develop through the various training possibilities offered by the Foundation for Social Welfare Services, directly contributing to the entity’s expertise, trust with the public and the capability of facing issues through development, progress and expansion.

Staff development is highly esteemed by this organisation, and it is ranked high amongst the Foundation’s priorities. Investing in staff and keeping professionals updated with latest techniques, attests that the Foundation remains committed towards providing the best services possible to its clients. During the years under review in this report, various training opportunities were taken on board, including participation in various Leonardo da Vinci programmes, exposing our employees from the various spheres of service provision within the Foundation, to visits and job shadowing with foreign agencies, most notably related to children’s services, supportline services, adolescent support, independent living and employability of persons with disability, and also in the field of domestic violence.

A relevant exercise embarked on was that of developing a skills audit of the staff within the Day Services for Persons
with Disability once these were incorporated within the Foundation, and the provision of training programmes according to the identified needs of the staff within such services. This was also followed by another important, rigorous exercise – the performance management system, through which staff can be given feedback vis-à-vis specific set targets. This is yet another exercise that the Foundation embarked on to ensure efficient and professional services are given to its various client groups.

Given that one of the major challenges of the Foundation is that service demands always exceed the available resources, it has created a regular and strong area of service provision through EU funding. During the period under review, various EU projects were undertaken, and since then, the Foundation has embarked on new ones thus always maximising on the potential of expanding its resources albeit for a specific period of time. An EU project which definitely left a mark and was of significance to all the entities involved, was the Safer Internet Plus – Stop Child Abuse over the internet project. Aġenzija Appoġġ developed further its services for children to cover also child abuse over the internet, thus identifying and recognising an emerging need that was previously not being addressed to the extent necessary. Through this project, the Foundation was not only instrumental in increasing awareness on the possible perils of modern technologies, but also developed a reporting system for victims and created networks with other local stakeholders including the Cyber Crime Unit of the Malta Police, while ensuring that victims were followed up with treatment services as necessary. Although this EU project ended in early 2008, Aġenzija Appoġġ still deals with incoming reports of online abuse and has also submitted a new application to the EU to be able to provide as comprehensive a service as is possible.

It is quite opportune here to state that FSWS does not work alone and does not achieve success by itself or for itself. It is the synergic approach and the involvement of all stakeholders that renders situations manageable. All professionals in which every sphere of work they happen to be have a very salient contribution to improving the quality
Introductions

Foundation Social Welfare Services

of life of individuals. Without such supporting networks between entities, services would be lacking and would not tackle the individual’s problem holistically. One very important aspect that the Foundation constantly works on is thus advocating shared and joined responsibility, proper development and amendment of protocols according to specific needs and legislation depending on the emerging and changing situations. These years have been marked by very important legal developments in this area. Most notably, I would like to refer to the improvements in the areas of fostering, adoption, domestic violence and alcohol abuse thanks to respective legislative measures taken.

During the past years, we have experienced at first hand the result of the enactment of the Domestic Violence Act in 2005, which has consolidated the care provided to both victims and perpetrators of violence. The Act now encompasses a wider definition of what constitutes domestic violence, allows members of the Judiciary to issue orders which also include treatment orders on perpetrators, and most important, gives power to the Police to take to Court any reported cases of domestic violence even those reported by third parties.

The 2007 Fostering Act was another development much awaited by professionals working in the field. This Act strengthened and gave more structure to fostering in Malta. It allows foster carers to have access to important information about the children in their care and hence provide for their needs better.

The aim of safeguarding children’s rights, especially the right to safety and the right to a loving family environment ranks fostering high on the Foundation’s agenda. ‘A child’s place is in the family’ is adhered to as much as feasibly possible. Maintaining the current foster carers (and appreciating their invaluable input) while increasing the pool is paramount, especially in areas such as specialised fostering. Thus, the Foundation invests in this area through regular campaigns held in order to help address the issue of children needing alternative living arrangements once living with their natural family environment would not be in their best interest anymore.
The setting of a minimum consumption age of alcohol was an important milestone and something that realised Sedqa’s hard work in the past years. The legislation, which was first passed in 2007, setting the minimum consumption age at 16, is the first of its sort since before that, the existing legislation only prohibited the sale of alcohol to persons under 16 years. This aided the Agency in its extensive prevention work and also nationally Malta became consonant with the Agency’s message that alcohol is harmful to young people.

The consolidation of services in these past years have surely left an impact, making the services more effective and comprehensive. We are proud of our achievements and that we have come so far. However at the same time, we are very conscious of the fact that there are still many challenges to be faced and a lot of changes and developments that await implementation to meet the consistent demand for our various services. The Foundation for Social Welfare Services thus commits to seek more ways of meeting these demands to the benefit of the clients, and to deliver the best services possible according to the current and emerging needs of service users, particularly children and families.

Nevertheless, the last word should not only thank all the service users who have shown trust in the services provided and all the staff working within the Foundation and its Agencies, but to all other entities and organisations with whom we share the continuum of care to ensure that clients receive the services they need.
Messagg mill-Kap Eżekuttiv tal-Fondazzjoni għal Servizzi ta’ Ħarsien Soċjali


Il-missjoni li tħaddan il-Fondazzjoni għal Servizzi ta’ Ħarsien Soċjali tindirizza propju dan: ‘billi tipprovdi servizzi u sapport ta’ kwalità u fil-hin, l-FSWS tħegġeg u tghin l-iżvilupp ta’ individwi biex dawn isiru membri responsabbli, shah, u produttivi tas-soċjetà, waqt li jagħtu valur lil-hajja bħala riżors ta’ kif tilhaq dak li temmen fih’.


Bħalma juri dan ir-rapport dettaljat, il-haddiema fid-diversi servizzi qed jagħmlu ammont kibir ta’ xogħol, meghjuna min-nisqa ta’ servizzi u entitatjiet ohra kemm fi ħdan il-Fondazzjoni kif ukoll ’il barra minnha, u wkoll mill-iżvilupp fil-legislazzjoni matul il-perjodu kopert minn dan ir-rapport.

Waħda mill-hafna sfidi identifikati qabel dan il-perjodu li qed niktellmu dwaru f’dan ir-rapport, kien il-bżonn li nifirxu aktar is-servizzi fi ħdan il-komunità, speċjalment biex nindirizzaw il-bżonnijiet soċjali fl-ambjent fejn jinholqu u nippjanaw
interventi speċifiċi skont il-kuntest tal-persuna li jista’ jkun li jkollha bżonn l-ghajnuna tagħna.


Programmi ta’ rijabilitazzjoni residenzjali offruti mill-ġenċija Sedqa wkoll ġew iċċentralizzati fil-Kumpless Santa Marija f’Hal Farrug, b’hekk nafnhmu l-aħjar użu mir-riżorsi waqt li noholqu ambjent fejn id-diversi professjonisti fis-servizzi varji jkunu jistgħu jikkonsultaw flimkien għall-benefiċċju tal-klijent.

La qed insemmu ċ-ċentralizzazzjoni tas-servizzi, nixtieq niranferi wkoll għall-żvilupp importanti li sar fi ħdan il-Fondazzjoni matul dan il-perjodu, li matul ġew amgalamati l-corporate services tal-ġenċija individwali f’dipartiment wiehed. Il-funzjonijiet tar-riċerka, it-taħrig, marketing u komunikazzjoni, purchasing u procurement, ICT, u mmanġġjar ta’ proġetti, issa huma inkorporati fi ħdan il-Fondazzjoni, u għalhekk dan id-dipartiment issa jservi lill-ġenċija kollha.

The standards for Social Welfare Services were established in September 2007. An important step towards improving welfare services was taken by the Foundation in December 2007. The one-stop-shop approach for social welfare services was implemented to meet the needs of the Foundation’s recipients. The Social Welfare Centres of the Maltese Agency for Support, which were established in February 2008, provided comprehensive welfare services in all residents’ houses, Dar Andrew in Bormla, and expanded the welfare services offered by the Foundation's office. The Social Welfare Centres offered a wide range of services, including residential, social support, and integrated programmes.

The development of the staff is an important element of any organization, and is one of the priorities of the Foundation. It invests in training and professional development opportunities for all staff members, with a view to improving the quality of services provided to clients. The potential to expand the services offered by the Foundation is recognized, as are the competencies of the organizations, client credibility, and the ability to adapt to changes, progress, and expansion.

Important efforts are made during this period to integrate the skills audit of all Social Welfare Centres. This allows for the identification of the potential to initiate projects. The Social Welfare Centres are integrated into the Foundation's network to provide a comprehensive range of services, including the Leonardo da Vinci programme, which is shared across different organisations, especially in the field of services for children, supportline, organisation for independent young people, and all forms of domestic violence.

Ežerċizzju importanti li sar matul dan il-perjodu kien dak ta’ skills audit tal-haddiema kollha tac-Centi ta’ Matul il-Jum ghal Persuni b’Diżabilità. Hekk kif dawn ġew integrati mal-Fondazzjoni inghataw l-possibbiltà ta’ tahrir skont il-bżonnijiet identifikati mill-istess impjegati. Dan ġie segwit
minn eżercizzju rigoruż iehor, il-performance management system, li permezz tieghu l-impiegati jistgħu jirċieuq respons dwar il-hidma tagħhom. Dan hu eżercizzju iehor li l-Fondazzjoni haddnet sabiex tassigura li l-klijenti tagħha jirċieuq servizz effiċjenti u professjonali.


L-Att dwar il-Fostering fl-2007 kien żvilupp importanti ieħor, tant mistenni mill-professjonisti li jahdu f’dan il-qasam. Dan l-Att saħħa u ta aktar struttura lill-fostering fl-Malta. L-Att jippermetti lill-foster carers sabiex ikollhom access għal informazzjoni importanti dwar it-tfal fil-kura tagħhom u għalhekk ikunu jistgħu jipprovduhom aħjar dak kollu meħtieġ minnhom.

s-sitwazzjoni ta’ tfal li l-familja tagħhom tkun ghaddejja minn sitwazzjoni diffiċċi u ma jkunx ghadu fl-ahjar interess tagħhom li jibqgħu jgħixu mal-familja naturali tagħhom, sakemm is-sitwazzjoni tmur ghall-ahjar.


Foundation
Social Welfare Services
Administration, Social Marketing & Communications
Introduzzjoni

F’dawn it-tliet snin ta’ ħidma li fuqhom dan ir-rapport qed jiffoka, it-taqsima fi ħdan il-Fondazzjoni li toffri s-servizzi ta’ amministrazzjoni, marketing u komunikazzjoni kienet kruċjali fit-tishih u konsolidament tas-servizz offrut. Din it-taqsima tinkludi ŋim ta’ nies dedikat li offfa servizz amministrattiv b’konsistenza u b’impenn u li minnu gawdiet kull sezzjoni oħra fi ħdan il-Fondazzjoni. L-assistenza u s-sapport fuq dak kollu li ghandu x’jaqsam mad-dinja tal-informatika; ma’ xoghol strutturali u ta’ manutenzjoni; ma’ ndafa u żamma tal-postijiet li noperaż minnhom; ma’ kull kuntatt fuq il-mezzi tax-xandir; provvediment ta’ mezzi tat-trasport; ma’ xiri, żamma u distribuzzjoni ta’ ħtiqijiet varji; u ma’ dak kollu meħtieġ sabiex Fondazzjoni tad-daqs tagħna tirrikjedi sabiex twettaq il-ħidma tagħha.


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Nixtieq nirringrazzja lil kull membru tal-istaff fi hdan it-tim tal-amministrazzjoni centralizzata, il-*marketing* u l-komunikazzjoni – li b’impenn, professionalità u b’imħabba flimkien irnexxielna nkomplu nsahħu l-infrastuttura li fiha joperaw l-Aġenziji fi hdan din il-Fondazzjoni.
Corporate Services
2007-2009

Ms Bernice Farrugia – Administration Executive (Aġenzija Appoġġ)
Mr Mauro Farrugia (Service Manager, Aġenzija Support)

Mr Rennie Stivala – EU Projects Officer

Objectives of the Services

In retrospect, the time under review was characterised by a highly active period in all spheres within the Administration Services Division. The services offered by this Division comprise of Marketing, Administration, Purchasing, and Information & Communication Technology.

The sole aim of the Division is that of providing service to all Agencies within the Foundation. The service provision and adoptability vary according to the emerging needs of the same Agencies. Throughout the period in question, the Division was allotted the direct responsibility of Aġenzija Sedqa’s Administration – falling directly under the responsibility of the Administration Manager within this Division. This also entailed that this Manager had to render service on different boards, namely discipline, interviewing and adjudicating ones. Furthermore, as from mid-2008, the salaries were also included within this Office.
On the ICT front, the years 2007-2009 were a consolidation of previous years. Various new personal computers and laptops were purchased to replace the obsolete ones and/or add new ones. As part of the common platform policy of Foundation for Social Welfare Services (FSWS), the latest in standard office automation and communications software were installed.

During the first quarter of 2007, all employees within the FSWS had to change from Teamware mail system to a more user-friendly Outlook email system. This was facilitated by the ICT Executives.

By mid-2007, the two members of the ICT rendered their resignation. In July 2007, two new ICT Executives, Mr Andrè Cutajar and Ms Allison Borg, were recruited to replace the former ICT Executives. The new recruits had to make arduous efforts to adjust and catch up with all the elaborated systems within the FSWS. Their hard work proved very fruitful as in a short period of time they managed to overcome all difficulties.

Both staff members together with the Senior Manager and Administration Manager, were involved in issuing a departmental tender for biometric systems within the FSWS. Various suppliers provided necessary specifications and costing. Following an adjudicating board, it was decided that it would be more feasible to adopt palm-readers rather than fingerprint readers for the Time and Attendance System. Another departmental tender was issued requesting fingerprint Time and Attendance System specifications. Several meetings were held with different suppliers who submitted their tenders, and each system was evaluated. Once the most advantageous system for FSWS was selected, it was decided to try two palm-readers...
in different Agencies within the FSWS. The trial was set for three months. The systems were installed in one of the Day Centres for Persons with Disability in Mtarfa and another one at Appoġġ. Following the trial period, there was a Management decision that such project would be temporarily put on hold.

During the recorded period, the ICT team had a major role in the move of data and voice equipment of Sedqa’s Community Services to new premises from Lija to Santa Venera, as well as the move of the Sedqa Prevention Services from Luqa to Santa Venera. The ICT team planned and conducted studies to install and bridge over a network similar to the one at FSWS Head Office and to harmonise both infrastructures into one single logical network. This was done in consultation with the ICT Unit of the former Ministry for Family and Social Solidarity. The move was carried out in a rather smooth manner – thanks to all involved.

From time to time, certain operations required that specific IT equipment, mainly PCs and telephone sets, had to be shifted from one office to another for more practicality. This was done mainly at the Appoġġ Head Office.

Any move in personnel and service provision infringe drastically on the ICT infrastructure. In all circumstances across the Foundation, the ICT team rearranged all network and telephone cables in a way that the service continued to be delivered with the least impact on the same service. Furthermore, a clean-up exercise was carried out at Appoġġ, Sedqa and the Foundation Head Office, to the racks that house the servers and PABX systems, making it easier to localise cables and to maximise the hardware usage.

Between March 2008 and August 2008, the ICT set up 40 personal computers in all the Sapport Day Centres for Persons with a Disability around Malta. These PCs were destined for clients of the Sapport Day Services, aimed at training persons with disability in ICT skills required in today’s society and for possible labour market integration.
Of particular relevance during the period in question, in June 2008, the payroll and finance software package was changed. The new system was installed on the main server. Furthermore, another personal computer at the Finance Department was purchased to serve as a back-up system.

The ICT staff was involved in creating various databases for different services. These include a database for the Appoġġ Fostering and Psychological Services, another database for the FSWS Training Department, and a database for Sedqa’s customer care area.

During the recorded period, the ICT team was also involved in the setting up of necessary IT equipment for conferences organised by FSWS and/or any Agency within the said Foundation. The conferences include IFCO (International Foster Care Organisation), Eurochild, ESF, EQUAL and Leonardo Projects. The ICT team was also involved in setting up equipment for other training courses and seminars organised in-house by the Foundation’s Human Resources Division. Support was also rendered during the Children’s Day activities held each November, with the ICT setting up the IT equipment required by the Foundation during such initiatives.

Throughout the recorded period, various meetings were held with the IMU (Information Management Unit) within the former Ministry for Family and Social Solidarity to ensure the smooth running of the Foundation’s requirements. The issues mainly discussed include inter alia the server issue, the handing over of the computer system of the Day Centres for Persons with a Disability to the FSWS, and the Content Management System. Several meetings were held in preparation for the latter.

In 2009, the major challenge was the procurement and eventual installation of new servers to serve all the Foundation’s requirements. The new servers were installed at FSWS Head Office and at Aġenzija Appoġġ in G’Mangia. This entailed a lot of planning in order to avoid disruption of service. Thanks to all, all the installations and testing time
Foundation
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were carried out swiftly and without causing any direct hindrance to the service provision.

It is anticipated that in the near future, the Content Management System would be another challenge to be taken up by the ICT in collaboration with third parties.
Administration

FSWS and Aġenzija Sedqa Administration, 2007-2009

Concerted efforts were undertaken to consolidate the work that has already been established within this department and augment it to facilitate pathways for a more efficient service.

The person responsible for maintenance carried out works for all Agencies within the Foundation. His work was coordinated by the Administration Manager, whereby priority was give to the most urgent matters. Having various constellation sites spread all over Malta where Agencies operate, the task of maintaining such premises becomes an arduous and sturdy one to sustain. To support this task, during the period in question, the Foundation felt the need to contract another person for some time to support and intervene to meet the emerging demands.

One of the biggest challenges of this department was the move of all the Sedqa Community Services to Santa Venera. Several departmental tenders were issued for the construction and refurbishment of premises situated in 4 and 5 Braille Street, Santa Venera respectively. Departmental tenders for structural works, painting and plastering, installation of electricity, supply and installation of air conditioning systems, and installation of a lift, were among the tenders issued and awarded. A lot of planning was done in order to make the move as smooth as possible. One should commend the Projects Executive who has been indispensable in coordinating works and collecting necessary quotations for all the required. All works carried out were monitored and endorsed by the Foundation’s Architect. All the Administration Department staff’s input was pivotal in ensuring the smooth transition and the concerted efforts proved successful.

The move of the Drugs and Alcohol Community Services from Lija to 4, Braille Street, Santa Venera was done in August 2007. Subsequently, the Sedqa Prevention team
moved from Hal Farrug to 5, Braille Street Santa Venera by the end of that same year.

Following these major projects, the refurbishment of the FSWS Head Office ensued. Worth mentioning is the fact while these major endeavours were taking place, none of the core services provided by both Sedqa and FSWS were ever interrupted.

Aġenzija Appoġġ Administration, 2006-2009

The Administration Team within Aġenzija Appoġġ consists of 13 employees: 1 Operations Assistant, 5 Customer Care Staff, 5 Administrative Support Workers (ASWs) and 1 Office Hands. This team falls under the responsibility of the Administration Executive.

The Operations Assistant, apart from leading the Administration Team, assists also the Operations Director in administrative tasks. One ASW is assigned to the 4 Service Managers while another ASW is assigned to the Administration Executive. The rest of the ASWs and Customer Care Clerks are assigned to different units within
the Agency. Some are assigned to two units while others are assigned to only one unit, depending on the workload of the team. Amongst the tasks that ASWs and Customer Care Clerks have within their teams are minute taking and report writing, payment sheets and attendance sheets, and filing. Customer Care Clerks are also assigned duties in the Customer Care Area so they are the first persons who meet our clients. ASWs are also assigned duties in the Customer Care area when there is the need to replace the Customer Care Clerks when these are on vacation leave or sick leave. Whereas in the past the ASWs and Customer Care Clerks used to be placed in an office within the teams that they were assigned to work with, during the past three years these were instead placed together in one office. This helped the employees to feel that they belong to a team of their own as well as facilitating things for the Leader whenever she wants to communicate something to the whole team. During the past years, various reshuffling exercises took place in which ASWs and Customer Care Clerks were placed with different teams. As from mid-2009, a new duty assigned to the Customer Care/Clerks and ASWs is that of database inputting.
The roles of the Administration Executive vary and while others remain very often the same, some developed and changed during these three years. Some of these roles include:

- Maintenance of the premises and liaising with the Administration Manager regarding maintenance of premises when necessary
- Payments of invoices and liaising with the FSWS Finance Office regarding such payments. In 2008 a new system, namely the Invoice Status Certificate (ISCs) was created and used when processing invoices. This improved the way invoices were processed as it became easier to track down invoices
- On-going support to staff where needed
- One-to-one meetings with staff
- Liaising with the FSWS Training Office on issues related to training of staff
- Dealing with queries re payroll and liaising with the Finance Office about such queries. In mid-2008 this changed since the Administration Executive started working the payroll. This was one of the last major duties assigned to the Administration Executive during these three years.

Major maintenance works that were carried out include:

- Painting of the façade and the offices
- Given that the physical space in the Agency is quite limited, an exercise was carried out in order to identify solutions as to how physical space can be maximised
  - A new store was created by putting a partition on the 5th floor which is being used for stationary items. After seeing the good result of this store, similar partitions were created in the first, third and fourth floor. As a result 4 new stores were gained.
  - The library found on the 4th Floor was shifted in one of these the newly created stores so an office space was gained, currently being used by one of the Service Managers. A new database was also created to keep record of all the literature that is found within our library.
• The way employees were placed in offices was revised in 2008 and a restructuring exercise was done. This meant that a number of employees changed their office.
• Maintenance work in the Appoġġ canteen included amongst others the fitting of a new kitchen that could be used by the staff.
• Another important task that was carried out was that the glass found in the doors in reception area was changed to Perspex for improved safety of staff and clients.

Aġenzija Sapport Administration, 2007-2009

2007 was a very important year for the Administration Services of Aġenzija Sapport, since it saw the expansion of the Administrative team from four to seven members. This was due to the ever-increasing administrative demands, mainly related to maintenance and the roster of staff. In addition, administrative items such as inventory and payroll-related matters were transferred from the Resource team to Administration, so that more qualitative client-based work could be carried out by the former. The year 2007 also saw the introduction of official uniforms for the Administration team.
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i) ICT
Sapport believes that its professionals should spend most of their time working in direct contact with their clients. This idea was partly hindered by the fact that not enough computers were available for the Resource and Social Work teams to use and the fact that IT equipment was only available in the main offices.

In order to overcome these problems, in 2007 an exercise was carried out to increase the number of computers available so that waiting time could be reduced. Moreover, laptops were introduced to the Service Leaders to provide the necessary mobility and increase the overall time spent in the residences.

ii) Structural Works/Maintenance
As stated above, in the period 2007-2009 there was an augmentation in the maintenance and structural works carried out by the Agency, apart from the general repairs that need to be done every year so that an optimum environment is maintained for our clients.

Several structural works were also carried out, namely:
• The outdoor area of Vajrita Complex in M’Scala was finalised and inaugurated in 2007, whereby a depilated pool area was transformed into a modern and fully-accessible BBQ area and activity venue
• Completion and inauguration of the new Bormla Residence
• Planning and works commenced on the Disabled Minors at Risk Project in B’Bugia
• Renovation of clients’ bathroom in Kirkop residence

In 2009, works commenced on the shafts and roof of the Vajrita Complex in M’Scala. Works included the installing of a new water / drainage system, the relocation of airconditioner systems, general cleaning, and upkeep of the shafts and roof. This was due to the fact that the original water / drainage system was not sufficient to cater for the demand and leakages were causing problems to the Day Centre premises below the residence.
As already highlighted earlier on, the period covered by this report offered a myriad of challenges in all aspects. One of these was purchasing and procurement. All procurements and supplies operations of all Agencies within the FSWS were facilitated by this Department. With the amalgamation of the Day Centres for Persons with Disability with Aġenzija Sapport, such challenge became more assiduous. Undoubtedly, the main advantage of the centralisation of purchasing is that economies of scales are economically viable. However, the planning required to reach such objective entails its due attention and resource. The Procurement & Purchasing Executive has to plan and liaise constantly with all Administration Executives of the three Agencies. Subsequently, more administrative work has to be carried out. The Purchasing & Procurement Executive has to constantly be on the lookout for the most economically advantageous deals the market offers from time to time.

One other important aspect for the Procurement & Purchasing Executive is the upkeep of the stores at Hal Farrug. A radical transformation took place between 2007 and 2009. From a derelict large open space, these stores were turned into a warehouse whereby consumables, stationery and detergents are stored. Structural alterations were carried out to make stores more secure. Plastering and painting was also carried out. Furthermore, shelves were assembled so as all supplies could be arranged in a systematic manner.
The Foundation’s Hal Farrug Complex is also planned to store the Foundation’s centralized archive system. This will enable Agencies to maximise and utilise better the current operating allotted spaces within each service delivery. A system needs to be in place whereby all documents and material brought to Hal Farrug is catalogued and rendered easily retraceable.

When highlighting all the work carried out between 2007 and 2009 by the Administration Department, one would think that there are a large number of people within this Department. In reality, the number of people within this Department is rather small. However, it’s not the number of persons that is important but the zeal, motivation and flexibility that employees within this Department possess, which turn the almost impossible to possible.
Social Marketing and Communications

The principal aim of social marketing is to seek to influence social behaviours to benefit the target audience and society in general. The social welfare field benefits from social marketing as it allows not only for the promotion of existing services and to lure vulnerable individuals and/or families to the services, but also addresses important issues that affect the well-being of society. It also serves as an educating tool to members of the public, thus, in cases, preventing social problems from developing or aggravating.

Objectives of the Service

To promote such services and issues, the FSWS Social Marketing and Communications team resorts to various initiatives and media, such as radio and TV interventions, radio and TV adverts, email shots, mail shots, articles and features in newspapers and magazines, and production and dissemination of printed material, among others – all ways to reach the intended target audience in the best environment possible.

The FSWS Social Marketing and Communications team comprises of two full-time members of staff, with a third member of the team being on a career break throughout the period under review. The team coordinates most of the public relations interventions and campaigns for the Foundation, and is the focal point for the media, representing the FSWS and its Agencies.

The work involves a wide spectrum of initiatives. The following are the salient points covering 2006-2009 for Aġenzija Appoġġ, and 2007-2009 for Aġenzija Sedqa and Aġenzija Sapport.
Performance Review and Analysis

A) Appoğġ
The Social Marketing and Communications team (henceforth, Marketing team) coordinated various campaigns and PR intitiatives for Aġenzija Appoğġ during the period under review.

1) Fostering Campaigns

One of the most prominent and regular campaigns on the team’s agenda is the Fostering Campaign. Ongoing efforts throughout the year to increase awareness about fostering have been upstaged from one year to the next, which in turn also influenced the number of requests received by the Appoğġ Fostering Service from prospective foster carers.

2) Volunteer Recruitment Campaigns

Another regular is the yearly Volunteer Recruitment Campaign. Such campaign was kept to its regular slot during the year – in January – and the aim is to reach out to the public to recruit more volunteers to join the Appoğġ Supportline 179 and the Agency’s Programm Ulied Darna. The timing of this campaign in 2009 was changed to October with the aim of reaching a different audience and to suit the needs of the respective services. Another yearly campaign with this purpose is that aimed to increase the pool of volunteers for Home-Start Malta.

3) Children’s Rights Campaign

Another yearly campaign is the Children’s Rights Campaign, previously represented by Aġenzija Appoğġ but which eventually was put on the Foundation’s agenda and marked by all its agencies, around mid-November to coincide with the World Children’s Day. During this particular month, efforts to promote children’s rights are enhanced over the rest of the year mainly through TV and radio programmes and adverts; and by collaborating with journalists for more emphasis on the topic in the local newspapers; and advocate for the recognition of such rights.
4) Body Shop Campaigns

In 2006, the Marketing team, also worked on a campaign to raise awareness on domestic violence. This campaign was led by Body Shop Malta and involved dissemination of leaflets about the topic and also by the sale of products from all Body Shop outlets in Malta, promoting the message. This campaign was also meant as a fundraising initiative in aid of Għabex. In 2009, another initiative by Body Shop was launched – this time a campaign entitled Stop Sex Trafficking of Children and Young People. Through this campaign, a percentage from the sale of a handcream will be donated to Aġenzija Appoġġ to help the Agency strengthen its training and support services given to vulnerable children and young adults, and to assist it in disseminating information about human trafficking of children and young people for sexual exploitation. A leaflet was also produced aimed to be distributed from all local Body Shop outlets as a means to further create awareness about human trafficking.

5) Domestic Violence (DV) Commission Marketing sub-committee

The FSWS Marketing team was also represented by one of its members on a sub-committee appointed by the Domestic Violence Commission. The aim of this sub-committee was to get stakeholders together to generate more awareness about domestic violence and promote the existing service available for victims of domestic violence. Eventually this led to the organisation of a number of initiatives, including the White Ribbon Campaign – aimed at creating awareness, mainly amongst men, about violence on women – and another initiative a few months later, consisting of billboards and posters in bus shelters in various locations. Media coverage and participation in TV and radio programmes accompanied such initiatives and the Marketing team played a pivotal role in such coordination. Furthermore, FSWS representation on this sub-committee made way for more networking and pooling in of resources, while all stakeholders could emphasise their own field of expertise. This sub-committee
was dissolved during the general election period in March 2008 and has not been re-appointed.

6) IFCO and Eurochild Conferences

The Marketing team also played a very active role in the organisation of two major international conferences held in Malta in November 2007. The IFCO Conference, which spanned over four days, necessitated a lot of effort both in PR and in logistics. The Eurochild Conference was then held over the following two days. However, the logistics committee appointed worked very well albeit the different backgrounds of the staff members involved, and this ensured the smooth running of the organisation of these Conferences, which in total reached over 600 participants both from various countries.

7) Tavistock Courses

During the period under review, the Marketing team also took care of the promotion of an intake for the Tavistock course in Applied Systemic Theory. This was aimed at professionals to provide them with new ways of understanding family dynamics with the aim of being better equipped in dealing with problems presented by individuals and families in different contexts such as school settings, general practice, and social work, amongst others. The Marketing team also covered certificate-giving ceremonies for the new graduates by issuing press releases to the media.

8) Klabbsajf

Another yearly initiative is the promotional campaign around May to recruit volunteers for Klabbsajf – a summer school project for children from Cottonera, led by the Appoġġ Cottonera Community Service (CCS) in collaboration with other entities, with the help of a number of volunteers.
9) World Refugee Day

In 2006, the FSWS Marketing team, together with the then Ministry for the Family & Social Solidarity, and other local entities and NGOs, came together to celebrate World Refugee Day, marked on the 20th June. This included the organisation of an exhibition in Valletta open for the general public, an evening organised by asylum seekers at one of the Open Centres, together with a half-day football tournament in Valletta. During this period, Aġenzija Appoġġ was operating an Open Centre for asylum seekers in Hal Far, and thus participation in such event was within the team’s remit.

10) Media Assessments

Regularly, producers of TV programmes refer to the Marketing team for the coordination of assessments of minors and vulnerable persons before they are exposed on a TV programme. The Marketing team coordinates such assessment with a pool of FSWS professionals and in collaboration with the Appoġġ Children’s Services Manager. Such procedure entails taking care of all the necessary logistics both within the Agency and also with the producer and Broadcasting Authority, as the case necessitates. Between January 2006 and December 2009, 118 screenings were coordinated by this office.

11) PR Support

The Marketing team also offers continuous support in PR matters. There are several initiatives held during the year that require coverage and exposure in the media, and the Marketing team ensures that due coverage is allowed. Such support is given regularly, but limited to:
- On-going Children’s Fund fundraising activities, including both initiatives aimed towards FSWS staff, and also other public activities such as the yearly 50-hour car wash marathon and major public events like Enchanted Tales in 2009
- Home-Start Malta events such as the yearly fundraising car booth sale and Retro Night, together with the
programme’s Annual General Meeting, and signing of the agreements with the main sponsors HSBC Cares for Children Fund and Vodafone Malta Foundation

- Donations to Services and Corporate Social Responsibility Days by private companies, such as the donation of a pool by HSBC Cares for Children Fund and the CSR Day, both benefiting Ghabex
- Certificate-giving ceremonies held for volunteers of the Aġenzija Appoġġ Supportline 179, Programmi Ulied Darna, and community projects coordinated by the Aġenzija Appoġġ Cottonera Community Service such as Proġett Dawl and Proġett Taghlim
- A number EU-funded projects (including the Safer Internet Plus – Stop Child Abuse over the Internet; ESF 20 - Training and Support for Labour Market Integration of Socially Excluded Persons; EQUAL 7- Integration of Asylum Seekers into Maltese Society; ERF II – European Refugee Fund), which are dealt with in more detail in another part of the Corporate Services Report in this publication
- Signing of agreements and protocols such as those with the local councils regarding community services, and also the protocol signed between Aġenzija Appoġġ and the Police regarding cases of child abuse, and between Aġenzija Appoġġ and Richmond Foundation regarding cases of clients with mental health problems.

12) Production of Material

During the period under review, the Marketing team also embarked on another project vis-à-vis Aġenzija Appoġġ – that of providing each and every Service within the Agency with an informative leaflet for the public and/or other professionals. This set of leaflets is still under production but so far, around half the Services have a leaflet, with other leaflets covering issues also being produced, such as the popular children’s booklet about child abuse. The latter was launched as part of the Children’s Rights Campaign in November 2006 during which the booklet was disseminated to all children in Year 5 and Year 6 in all Primary schools. Since then more re-runs of such publications were ordered since the content and its presentation are in a very child-friendly format, thus attractive to the young audience while being highly informative.
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Other material was also produced in collaboration with the Ministry for Justice and Home Affairs in 2008 regarding human trafficking. This subject matter was then a new field of service under the remit of Appoġġ. Such publication was produced and disseminated in public areas such as Health Centres, Police stations, the hospital’s Emergency Department, Immigration Office, Refugee Commissioner, Chamber of Advocates, amongst others.

B) Sedqa
Simultaneous to support given to Aġenzija Appoġġ and its services, the Marketing team also coordinated initiatives and campaigns for Aġenzija Sedqa and its services and related issues.

1) Alcohol Campaigns

During the summer months and peaking again during the Christmas festive season, the Marketing team coordinates regular Alcohol Campaigns, mainly promoting responsibility in alcohol consumption, and educating about the harms of excessive drinking, with particular emphasis given to young people and binge drinking patterns. Such campaigns would be based also on official statistics extrapolated from studies such as the ESPAD study about the behaviour and attitudes of Form 5 students, and the local Lifestyle Survey, which was carried out amongst 18-24 year olds in 2006.

Such multi-pronged campaigns would have different plans coordinated according to the intended target audience, from young people to parents. Thus, different media were used for such campaigns during the period under review, according to the target audience and the different environments in which they can be reached. Past campaigns have consisted of posters in restrooms of popular party venues; various Public Service Announcements for radio and TV (including different productions for parents and for young people); informative booklets, accompanying posters and banners; regular TV and radio programmes; features and interviews in newspapers and magazines; email shots; collaboration with Sedqa Prevention Executives, especially regarding reaching
audiences within the community and the workplace; adverts on local magazines; amongst others. On occasions, the Marketing team also collaborated with the Health Promotion Department on drink-driving awareness campaigns during the Christmas festive seasons.

2) Cocaine Campaign

Based on feedback from Sedqa drug services, it was deemed important that the Agency promotes awareness about Cocaine use. Thus an intensive campaign was coordinated by the Marketing Team in collaboration with Sedqa Prevention Team, which included training for FSWS staff and volunteers, and other professionals working in the field; the production and dissemination of separate informative leaflets for the general public and for clients; production and dissemination of posters; e-mail and mail shots; interventions in the local media; etc.

3) Launch of new Sedqa premises

The year 2008 also saw the launch of new premises for the Sedqa Prevention team and Community Services, which moved to one centralised location in Santa Venera next door to the FSWS Head Office. The Marketing team took a very active role in coordinating the launch of these premises in the presence of the Minister for the Family and Social Solidarity during a press conference.

4) PR support to Prevention Initiatives

The Marketing team also offers continuous PR support to the numerous initiatives coordinated by the Agency’s Prevention team at schools, the workplace and within the community. Such initiatives, most of which are on a yearly basis, include:

• Skolasajf
• Parental Skills courses
• S.A.F.E. Awards Ceremonies
• Mocktail courses and bars
• 26th June events to mark the International Day against Drug Abuse & illicit Trafficking
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• National Youth Day
• Various seminars for youth, parents, members of the general public, and professionals and entities
• Activities for young people such as the Teen-Central parties, Judo tournaments, singing and dancing activities held in public places such as Bay Street complex
• LOGOS II visit
• Parish outreaches
• Participation in Notte Bianca
• Fresher’s Week at the University of Malta campus

5) Launch of CD-ROMS

The Sedqa Prevention Services team has been producing, for the past years, a number of tools for use by students and their teachers. Various educational interactive CD-ROMS and packs for educators have been produced. These have been launched during press conferences held in different Colleges, designed to coincide with the FSWS yearly Children’s Rights Campaign in November of each of the years under review. The Marketing team would facilitate the launch and collaborate with the Prevention Services for the presentation of such tools.

6) ESPAD report launch

The International European School Survey Project on Alcohol and Other Drugs (ESPAD) Report based on the study conducted in 2007, was launched in March 2009. The study, conducted in 35 European countries, aims to collect comparable data on substance use among 15-16 year old European students in order to monitor trends within as well as between the participating countries. The Marketing team coordinated the launch through a press conference held for the local media.

C) Sapport
Aġenzija Sapport and its services, particularly the Day Services, also benefited from PR support by the Marketing team.
1) Launch of Bormla Residence

In the first quarter of 2008, a new residence in Bormla for persons with a disability was launched. The Marketing team coordinated this launch with the Office of the Prime Minister since this launch was presided by the Prime Minister and also the Minister for the Family & Social Solidarity.

2) Launch of Paola Day Centre

The Sapport Day Services also expanded their service with the inauguration of a new Day Centre in Paola in January 2008. For this launch, the Marketing team coordinated also with the PHRF.

3) Campaign to recruit Support Workers

A one-off initiative undertaken by the Marketing team was the campaign to promote careers within the disability field, mainly by calling for Support Workers. This campaign, since it had a slant on human resources, was planned in collaboration with the FSWS HR Department.

4) Leaflet on Sapport Services

The need to promote the Agency’s services and inform the public about services they can access has been acknowledged. The Marketing team also worked on the production of a new leaflet about the services offered by Sapport. This leaflet was produced in Maltese and the plans are to have an English version by early 2010.

5) PR Support

PR support is given by the Marketing team especially during the various activities held by the Day Services on a regular basis throughout the year. Such activities would involve most of the clients attending the Day Centres and on most occasions, the media would be invited thus witnessing the many skills and abilities of persons with a disability, while promoting social inclusion.
PR support is also provided on occasions where the Agency receives donations and/or benefit from Corporate Social Responsibility.

D) Others

During the period under review, the Marketing team also worked on projects benefitting the three Agencies within the remit of the Foundation for Social Welfare Services. Such initiatives include, but not only:

- The production of an audio-visual documentary about the FSWS and all the services offered by the three Agencies
- Regular maintenance of the three website, one pertaining to each Agency, including the upkeep of the press releases and forthcoming events sections; uploading of the latest informative material produced; and the upload of vacancies, expressions of interest, requests for tenders and quotes, for the attention of the public
- Coordination of regular programme schedules on TV and radio with the participation of staff from the three Agencies (a total of 45 media slots were coordinated about Agenzija Appoġġ and related issues in 2006; 245, 309, and 288 TV and radio interventions were coordinated in 2007, 2008, and 2009 respectively about the three Agencies and related issues)
- The production of corporate material such as personalised business cards, appointments cards, and folders
- The production of the monthly newsletter FSWSlink
- Production and coordination of ad hoc advertising
- Coordination of interviews, features and comments for the media
- Production of the FSWS monthly page on the children’s newsletter Taghna t-Tfal and Saghtar magazine
- Regular media monitoring and coordinating replies when and where necessary
- Support to the FSWS Training Department in covering training initiatives for FSWS staff and during Leonardo dissemination conferences
- PR support to FSWS EU projects, such as the Me2! and Embark4Life projects, both launched in 2009
• The coordination of the Foundation’s participation in the yearly Children’s Day activity in November
• The production of an interactive online game in Maltese about internet safety and child abuse, entitled Wild Web Woods, in collaboration with the Council of Europe.

Way Forward

Over the past few years, although keeping to minimal financial and human resources, the FSWS Marketing function has continued to expand and develop, ensuring constant media exposure and a high profile for the Foundation, the three Agencies within its remit, and their services.

This was no easy feat considering the skeleton staff of the Marketing team, especially when dealing with pressing deadlines and keeping up with journalists’ demands when items are still newsworthy. Yet, this task of pushing upwards the role of the services offered, and disseminating information to reach as much of our audience as possible, is taken very seriously and constant reviews within the Marketing team take place in order to move along the current projects, requests and developments in all the three Agencies.

The way forward for this function within the Foundation would be the upkeep of all the above and the development in areas such as:
• Media training for the FSWS staff members who would represent the Foundation and its Agencies from time to time
• The coordination of more standardised ways in campaigns, which has already been applied to some of the campaigns mentioned above
• More emphasis on Fostering Campaigns, especially when it is evident that exposure of the topic and personal experiences by foster carers on the local media have proven very fruitful for the Service in question
• Coordination of more campaigns regarding substances which the studies are showing as problematic, even amongst students
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• More pro-active approach towards the media especially regarding particular issues that could help prevent or minimise the risk of developing more serious social problems, for example by emphasising more on positive parenting.

Finally, the Marketing team will continue to work closely with professionals from all the three Agencies and from all the services because it is thanks to the collaboration of our colleagues that the Marketing team can ultimately pass on messages to the general public, educate and be able to make a difference in a person’s life by moving that person to any of the myriad of professional services offered.
Major Foundation EU Projects

During the recorded period, the Administration, Social Marketing and Communications Division has been entrusted with the task of applying and implementing major EU-funded projects. The six major projects during this period under review were ESF 20, EQUAL 7, ERF Hal Far Refurbishment Project, the Hotline project, ESF3.61 E4L (Embark for Life) and ESF3.62 ME2 (Integration of Persons with a disability into the Labour Market).

i) ESF 20 - Training and Support for Labour Market Integration of Socially Excluded Persons 2004-2006

This project was built around the reality that having and retaining a job is a social right that gives dignity to the person, and that a certain amount of independence on the person’s future. The aim of this project is to empower individuals and to make them realise their potential by engaging in productive and rewarding employment, especially in order to drift away from social exclusion and poverty.

During 2006, 22 training modules were delivered to 195 frontline workers assisting socially excluded persons. This training resulted in a great success and participation for it was consistent throughout the whole delivery. Main topics dealt with included the development of their skills in order to facilitate the integration of their clients into the labour market, and the development of their knowledge of vocational training and job opportunities currently available.

The training that was given to these frontline workers aimed at bringing at par the socially excluded persons with other non-excluded individuals, especially when competing for the same jobs in the open labour market. Persons who are socially excluded, or are at the risk of being so, include youths living or leaving institutional care or foster care, persons who were traumatised in childhood or
adolescence through experiences of abuse, single mothers and victims of domestic violence, persons with a disability and/or mental health problems, persons who have been in correctional facilities and therapeutic centres, and asylum seekers.

During 2007 and 2008 another aspect of the project was the mentoring process which involved a number of social mentors who gave personalised attention to the project participants on a one-to-one basis. Due to caseload size and time limitations, it is physically impossible for the Employment and Training Corporation (ETC) Employment Advisors to be present in every situation encountered by the job seekers, like when attending interviews or in situations when they need extra support. The project filled this gap through interventions of the ESF social mentors. Throughout the project, it was important for the social mentor to get to know the mentored better so as to be able to identify his/her needs and goals with regards to employment possibilities. Another role was that of assessing the abilities, skills and qualifications of the mentored to match them with current labour opportunities. In all, 256 beneficiaries received individual help and 45 of
these were placed in gainful employment 8 maintained their employment through the assistance received and 38 initiated further training/studies.

**ii) EQUAL 7- Integration of Asylum Seekers into Maltese Society 2004-2006**

Aġenzija Appoġġ lead this project. The Integration of Asylum Seekers into Maltese Society project went beyond the provision of food, shelter and social work interventions. Its aim was, in fact, to provide training to asylum seekers on various topics, together with vocational training, while offering them the necessary support and guidance. This was done to help to asylum seekers to empower them to become self-sufficient and independent, prepare them for employment in Malta (and not only), and to build a sense of community between asylum seekers themselves as well as within the Maltese society.

The needs of the asylum seekers vary, and the situation at the time of the project necessitated the following objectives, which were identified as the main goals of the project.

- To improve the personal situation and labour market prospects of asylum seekers – in the context of domestic legislation
- Develop training to enable asylum seekers to access mainstream support for training and employment
- Support asylum seekers to play a role in society and manage their own lives
- Prepare asylum seekers for social and vocational integration
- Develop support for asylum seekers to improve labour market integration in Malta and reintegration in their country of origin
- Improve access to education and employment within the scope of domestic policy
- Develop an employment strategy which is appropriate to the needs of asylum seekers and those allowed to live and work in Malta.
This project was mainly based on the EVC model, which stands for Evaluating, Validating and Certifying competences of the asylum seekers. It is a reality that some of the asylum seekers have extensive, useful knowledge, and that this could be used in the countries hosting them in order to contribute back to the economy. However, it was pointed out that most of the certifications would probably be lost by the time these persons manage to reach a safe shore.

This programme, thus, aimed at constructing a comprehensive portfolio for each asylum seeker. This would typically include the person’s previous work experiences, the training received, and a project plan where the asylum seeker would be coached to establish goals and parameters for his/her integration into the labour market.

Also, specific training was developed and delivered to meet their employability needs within the local context. Asylum seeks were, in fact, assisted and facilitated through various initiatives for integration. Training topics included English language, life-skills, CV writing, and interviewing skills.
Another innovative element of the project was the transnational collaboration of the local partner with the foreign partners (Italy, Germany, Greece and Portugal) participating in EQUAL. From this exchange, local partners shared experiences and best practices used in each other’s countries.

This aspect of the project - Preparing Asylum Seekers and Society for Integration (PASSI), focused on the empowerment of asylum seekers and to prepare society for the facilitation of their integration.

The common objectives that these 5 countries worked for were:
- The promotion of integration of asylum seekers into the labour market
- Fighting discrimination
- Identifying good practices on multicultural/intercultural work
- Increasing/improving the competences of organisations/workers participating in this Transnational Cooperation Agreement
- To exchange information and knowledge about reception and integration conditions for the asylum seekers, and upgrade the knowledge of those working directly with them.

The five participating countries were dealing with different influxes of asylum seekers, coming from different countries and having different backgrounds. However, they all learned that by providing asylum seekers with useful knowledge to face the labour market, they are not only alleviating the financial burden on the hosting country, but they are even managing to turn asylum seekers into active contributors to the countries’ economies.

The planned number of asylum seekers to be reached was that of 30, however the actual number of asylum seekers reached by this project was 107 (85 males, 22 females). Thus this project had a very high success rate of 535%.
iii) ERF II – European Refugee Fund

Another project managed by FSWS was the European Refugee Fund. An application was submitted by the Foundation for Social Welfare Services to finance the refurbishment of the Hal Far open centre, which was run by Ħażennija Appoġġ. The aim of this refurbishment exercise was to render this centre more habitable and adequate to the emerging needs of the asylum seekers.

A whole block of four small apartments was earmarked for refurbishment. This was transformed into small independent living quarters for the family nuclei of asylum seekers, who were living separately in various open centres. The need to reunite these families is necessary in order to restore their dignity. This project catered for families with the intention of giving them alternative decent living quarters until further developments in their case emerged.

In all, it is calculated that this refurbishment catered for approximately 70 individuals, including parents and their children. The Agency covered both the basic needs and the social needs of asylum seekers, and also strived to go beyond the provision of food, shelter and social work interventions. In fact, the intention was to build a sense of community between asylum seekers themselves, especially in order to empower them to become self-sufficient and independent in their process of being integrated within the Maltese society.

iv) Safer Internet Plus – Stop Child Abuse over the internet 2006-2008

Ħażennija Appoġġ and the Ministry for Investment, Industry and Information Technology collaborated in the setting-up of the Hotline for child abuse over the Internet. This project also included the collaboration of other stakeholders such as the Cyber Crime Unit of the Malta Police Force, the former Ministry for the Family and Social Solidarity, the former Ministry for Education, Youth and Employment, the Commissioner for Children and the local Internet Service
Providers, Traders at the Malta Chamber of Commerce, Association of Parents of Children in Church Schools (APCCS), Id f’Id Programme, Education Department, the Archbishop’s Curia, and Foundation for Educational Services.

EU funds facilitated the setting-up of the Appogg Hotline service, which forms part of an international network of hotlines as represented by INHOPE (Association of Internet Hotline Providers). This membership with INHOPE was important since it gave the local Hotline strength to work against child pornography and malicious contacts made over the Internet, not just on a local level but also internationally. This project aimed at promoting safer use of the Internet and new online technologies, while offering a secure and was to answer to the needs of the public and to protect victims from this modern threat.

The project provided awareness, information and tips about how to use the Internet safely to children, educators and parents alike. Initiatives included interactive sessions with students in schools, talks to parents, media programmes and advertising. A safe and confidential environment was created, whereby anyone could report child abuse that occurs over the Internet.

This service was complimentary to Supportline 179, the national 24-hour helpline operated by Appogg. This was an innovative approach through which the general public can be reached and listened to. During the period when the Hotline was fully-operational, citizens could file reports of child abuse over the internet using the Supportline 179 network or the online reporting system accessible from the Agency’s website www.appogg.gov.mt from where they would be referred to specialised staff ready to help them overcome these issues.

Between September 2006 and December 2007, the Hotline team of Aġenzija Appogg received 240 reports of alleged child abuse over the internet. 61 of these were passed on to the Cyber Crime Unit of the Police for further investigation. Moreover between October 2007 and
February 2008 approximately 43,000 children from primary and secondary schools have been reached, as well as their parents and teachers through initiatives, talks and seminars held for children, parents and educators.

Even though the project ended in February 2008, reports or child abuse over the internet submitted to the Agency are investigated and passed on to the Police Cyber Crime Unit for follow-up in cases of suspected abuse.

v) The ESF 3.61 E4L – Embark for Life (Integration of Young People into the Labour Market)

This project is aimed at assisting young persons to develop life skills, daily living skills, social skills and other skills that would help them integrate into the labour market and into the community as gainfully occupied citizens. This project will directly work with people of employable age, who are either homeless or in transit from a residential care institution and often failed in their educational attainments (early school dropouts), helping them to become aware, reflective and responsible in their thoughts and actions by imparting particular life skills appropriate to their needs.
Helping them to prevent exploitation within the black labour market economy, work in conjunction with various other stake holders targeting vulnerable young people, thus enhancing the networking and collaboration between the various agencies that render their support to this client cohort.

vi) ESF 3.62 ME2 (Integration of Persons with a Disability into the Labour Market).

This project is aimed at training people with disabilities, giving them one-to-one, specifically-designed training programmes aimed at enhancing their individual abilities thus rendering them more competitive on the labour market. Afterwards, direct job coaching will be supplied for further better adaptation to their acquired jobs, thus retaining more people in employment and at the same time develop the present social protection system for the benefit of these people. Since a considerable amount of service users will get help in their own houses, this will facilitate their social inclusion as they will be better able to compete on the labour market, and even in their social sphere in a shorter time. It envisages to train adult people with disability and work on their abilities thus rendering them more competitive on the open labour market, while at the same time contributing to the lifelong learning theme by training adult people, most of whom have been inactive for quite some time for various reasons. Moreover, it will allow relatives of people with disability, who have been inactive for quite some time in order to assist them, a chance to work, thus enriching the labour market with their potential abilities.

In 2009, both new ESF projects submitted were accepted by the Managing Authority within the Planning and Priorities Coordination Department in the Office of the Prime Minister. Both projects were launched in 2009 and are currently being implemented.
Way Forward

The Foundation for Social Welfare Services, by the same nature of services it renders, needs to remain dynamic and continually evolving to meet the requirements of both service provision and service users. Looking back on the achieved augurs well to the future undertakings. We are fortunate to have dedicated staff on board who have grasped the essence of rendering service to the Foundation’s entities – well aware that by intervening promptly and proficiently – will assist frontline workers to render a more thorough service to our final beneficiaries, i.e. the service users.

Driven by the principle that we render assistance and service to the various Agencies within the Foundation, we shall continue improving our *modus operandi* – and ameliorate our infrastructures to enhance our promptness, proficiency and networking.
Human Resources, Training, Research and Quality Assurance
Rapport ta’ Ἡidma 2006-2009 – Riżorsi Umani, Taħriġ, Riċerka u Assessjar ta’ Kwalità

Introduzzjoni


Reklutaġġ


Taħriġ

Il-Fondazzjoni dejjem emmnet li toffri opportunitajiet ta’ taħriġ lill-impjegati tagħha minhabba l-fatt li b’dan it-
taħriġ huma jistgħu jkomplu ġijvilupppaw il-ħliiet taghhom u s-servizz ikun jista’ jingħata aħjar.


Taħriġ iehor kien ukoll organizzat mill-Fondazzjoni. Dan kien taħriġ dwar superviżjoni, adozżjoni, ġvilupp ta’ ħliiet tal-Care Workers u bosta oħrajn. Saret ukoll skills audit fejn ġew identifikati l-ħliiet tal-impjegati li ġew trasferiti mal-Fondazzjoni min-naħa tas-servizz pubbliku. Taħriġ iehor kien dwar policies u proċeduri, liżijiet, aspetti ta’ saħħa mentali u korsijiet oħra mmirati biex jagħtu tagħrif dwar aspetti differenti ta’ diżabilità.

Barra minn hekk, il-Fondazzjoni investiet billi ġabet esperti minn barra biex jagħtu taħriġ lill-impjegati taghhha. Dan it-taħriġ kien fuq aspetti ta’ abbuż ta’ sustanzi u kif wieħed jippreveni milli jerga’ jaga’ fil-vizzju. Ġew imħarr gia diversi persuni biex jagħtu korsijiet ta’ prevenzjoni ta’ kriżi u kif

Ma naqsux ukoll l-opportunitajiet ta’ tahrīg lokali minn organizzazzjonijiet ohra u li ghalih attendew diversi impjegati tal-Fondazzjoni. Tajjeb li wiehed isemmi li tahrīg organizzat mill-Fondazzjoni kien ukoll miftuh ghal impjegati u professjonisti ta’ entitajiet barra mill-Fondazzjoni.

**Riżorsì Umani u Assigurazzjoni ta’ Kwalità**


**Riċerka**

Kompliet tinġabar informazzjoni dwar is-servizzi tal-Fondazzjoni, jitlestew raporti kif ukoll isiru studji. Fost dawn l-istudji hemm il-European School Survey Project on Alcohol and Other Drugs (ESPAD) li huwa survey ma’ madwar 3,600 student fil-livell sekondarju f’Malta. Hemm studju ieħor li jidentifika l-problemi ta’ użu ta’ sustanzi minn studenti post-sekondarji. Inġabret ukoll informazzjoni għall-evalwazzjoni dwar l-effettività tal-programmi ta’ prevenzjoni mmexxija mill-Aġenzija Sedqa. Matul l-istess perjodu, inġabret ukoll informazzjoni u sar studju dwar tfal li qegħdin
fil-foster care u l-kuntatt li dawn ghandhom mal-ġenituri naturali taghhom u membri ohra tal-familja.


Introduction

The period under review was marked by a consolidation of functions. During these four years, the different corporate functions no longer remained based within the three Agencies but continued to expand and develop at Head Office level with the aim to service the different needs of the Agencies. During the year 2006, a Training Executive was recruited and by the latter part of the year, the Quality Assurance and Systems Auditor returned following a period of unpaid leave. 2007 was marked by other additions namely a Training Executive and a Recruitment Executive. At the end of 2009, the new EU Projects initiatives became the responsibility of this Division.

By the end of 2009, the Division comprised of a total of nine employees namely: 1 Senior Manager, 1 Quality Assurance and Systems Auditor (who later on was also responsible of the supervision of the recruitment and training activities), 2 Research Executives, 2 Training Executives, 1 Recruitment Executive, 1 EU Projects Executive and 1 Administrative Support Worker servicing the Division.

By the end of 2009, the Human Resources, Training, Research and Quality Assurance Division, was servicing the total of 665 employees assigned with three different entities namely: Aġenzija Appoġġ (218), Aġenzija Sedqa (105) and Aġenzija Sapporit (342). An increase in staff occurred in 2007 following the deployment of public service employees with FSWS and assigned with Aġenzija Sapporit.
Due to the large number of employees, the recruitment function has a pivotal role within the Foundation. Throughout the past four reported years, a number of recruitment exercises occurred. These recruitment exercises occurred as a result of staff replacements but also new service development and staff progression. The following list is the number of selected individuals, by post, carried out within the past four years. A number of these opportunities are replacements but some are new vacancies. Promotions are also included.

- 1 Chief Executive Officer
- 1 Financial Controller
- 1 Operations Director
- 1 Senior Manager responsible for Administration Services
- 5 Managers responsible for various operations within the entities, one of them focusing on administrative tasks
- 3 Junior Psychologists delivering their services with children and adolescents
- 1 Executive Secretary providing services within the Chief Executive Officer’s Office
- 1 Senior Social Worker assigned with Aġenzija Appoġġ
- 3 Administration Executives assigned with two different entities and dealing with less senior administrative tasks
- 2 Senior Services Executives within Sapport, Day Services
- 91 Social Workers within the various FSWS operations
- 2 Community Workers assigned with Aġenzija Appoġġ operations
- 4 Family Therapy Workers providing their services with either Aġenzija Appoġġ or Aġenzija Sedqa
- 2 Occupational Therapists assigned with Sapport, Day Services
- 179 Support Workers assigned with Aġenzija Appoġġ but mostly with Aġenzija Sapport
- 15 Customer Care/Administrative Support Workers
- 9 Customer Care/Clerks
- 41 Executives, mostly providing their services with clients but also within Head Office namely information technology, training, recruitment, research and marketing
• 3 nurses assigned with Aġenzija Sedqa
• 2 Cleaners
• 1 Managing Pharmacist with Aġenzija Sedqa to dispense medication
• 4 Programme Facilitators for Sedqa Prevention services
• 4 Project Workers working on EU-funded projects
• 1 Driver/General Duties.

As can be identified from the above numbers, the recruitment within FSWS heavily relied on front office positions addressing clients’ needs. FSWS is one of the main employers of social work and support work positions on the island. The above also indicates that this organisation processes diverse vacancies and provides different opportunities to University and MCAST graduates amongst others.

Following the selection process, all candidates were contacted and an induction phase commenced for selected candidates. Selected candidates accepting the post were informed about conditions of employment. They also entered into a contract of employment. As from 2008, employees were provided with an FSWS identity card.
The Foundation for Social Welfare Services believes in the continuous professional development of its employees. Between 2006 and 2009, a number of training initiatives were organised in order to enhance the professional skills of workers. Through training, skills are enhanced and service delivery is more likely to be effective and efficient. Provision of effective and efficient support can alleviate the hardships and in some cases avoid further difficulties.

The following is an outline of the main training programmes occurring throughout the four years under review:

1) EU-funded Training Opportunities

The Foundation for Social Welfare Services has maintained its commitment in tapping appropriate EU funded opportunities to offer training and to expose staff to good practices in other European countries.

i) 2006 - 2007

Employees from Aġenzija Appoġġ benefited from a Leonardo Da Vinci Mobility Project entitled *Children’s rights and participation in decision making*. Each of the three beneficiaries benefited from a one-week placement in the United Kingdom or Ireland. The main aim of this project was to observe good practices in the involvement of children in decision making in other EU countries. The final aim was to try and adapt such practices within the local scenario. This project helped the participants to identify suitable approaches for involving children and also to create awareness on the importance of children’s rights.

A total of 6 employees from Aġenzija Sedqa and Aġenzija Appoġġ, 3 representing Supportline 179 and another 3 representing Helpline 151, benefited from another Leonardo Da Vinci Mobility programme entitled *Networking for the enhancement of Social Helplines in Malta*. Each of the 6 employees benefited from a one-week job shadowing
experience in the United Kingdom or Italy. The learning experience that the beneficiaries gained during their placements gave them the opportunity to observe a holistic picture of operations and the daily running of telephone helplines abroad. Through this experience, the staff identified both the limitations and strengths of both local helplines.

ii) 2008

In 2008, a Leonardo Da Vinci Mobility programme entitled Enhancing Professional Skill Development of Local Professionals Who Support Adolescents was successfully awarded to Aġenzija Appoġġ and Aġenzija Sedqa. Throughout this programme, 10 employees (5 from each respective entity), had the opportunity to benefit from a one week job shadowing experience in the United Kingdom, Ireland or Wales. The main aim of this project was specifically designed to enhance the professional skills of workers mainly Psychologists and Social Workers whose main workload consisted of work with young people (11 to 18 years of age).

10 employees from Aġenzija Sapport, including the Day Services, were selected to attend a one week Leonardo Da Vinci mobility programme in another European country. The name of the project was Working towards Independent Living and Employability for Persons with a Disability. The placements took place in the United Kingdom, Sweden and Lithuania.

An employee from the Appoġġ Domestic Violence Services benefited from a Grundtvig in-service training initiative held in Italy. The training entitled Background – Acting on the Background of Women Survivors of Violence, focused on the improvement of skills and competences of adult education staff in the area of violence against women. This initiative gave the participant an opportunity to build a good working alliance with different professionals that work in organisations that support women and children who are victims of domestic violence.
iii) 2009

During this year another two Leonardo Da Vinci mobility projects where submitted and granted. The first project entitled *Enhancing awareness on issues related to employment and independent living of persons with a disability* was granted to Agenzia Sapport. A total of 6 Support Workers from the Day Services, benefited from this project as they visited Sense Agency in the UK and to the Disability Equality Support Specialist Agency (DESSA) in Ireland.

The other 2009 Leonardo Da Vinci Mobility programme entitled *Safeguarding and Supporting Adults, Children and Families living with Trauma* was successfully awarded to Agenzia Appogg and Agenzia Sedqa. Throughout this programme, 6 employees (4 from Agenzia Appogg and 2 from Agenzia Sedqa), had the opportunity to benefit from a two week job shadowing experience in the United Kingdom, Ireland or Wales. This project was designed to expose the beneficiaries to good practices. This opportunity provided further insight on the knowledge required when responding to victims of traumatic events with an emphasis on children.

In 2009, the FSWS Training Office applied for a Leonardo Da Vinci Partnership programme entitled *FESAT Best Practice Exchange*. This project has been successfully awarded to the FSWS. The aim of this partnership programme is to develop a model of best practice for drug helplines in Europe. This project involves learning exchange visits to other drug helpline services in Europe, partner meetings, and attending training seminars organised. The project will be implemented between 2009 to 2011. Out of this placement, the prospective beneficiary will be exposed to a foreign experience of helpline services in order to enhance his/her skills on policy and practice, and technology and reporting used within helplines.
a) Final Dissemination Conference

The FSWS Training Office organised a final dissemination conference on the 23rd and 24th July 2009. During this conference, the beneficiaries of the project had the opportunity to disseminate the knowledge gained during their placements abroad. In order for this project to have a ripple effect, the conference involved 100 participants. The invitees included: the beneficiaries of the project; representatives from all entities of FSWS; as well as representatives from other entities outside FSWS that offer services to the client groups addressed by both projects, namely challenging adolescents and persons with a disability. Foreign guests from MENCAP UK and from Include Youth in Belfast were invited to give their input during this conference.

2) Specific In-house Training Modules

Throughout the past four years, specific in-house training modules were offered to employees with the aim of enhancing and ensuring that good standards of practice are maintained.
3) Supervision Training

In 2006 and 2007, a total of 54 members of staff from all the entities of the Foundation for Social Welfare Services were nominated to attend in-house training courses on Supervision. The aim of this training was to help participants acquire and apply knowledge on the three primary supervisory tasks: administration, education, and support of supervisees. This course is an essential requirement for employees since it enriches the practice of members of staff, whilst giving them the necessary skills to supervise.

4) Local Issues Related to Adoption

In light of the new service operated by Aġenzija Appoġġ, in 2007, local professionals competent in the field of Adoption were invited to train the prospective workers of the Adoption Service within the Agency. 25 members of staff attended a three-hour training session. During the training, participants gained knowledge about the professional experience in the Maltese Adoption Services, an overview of the local Adoption legislation, and a medical view about infertility issues.

5) Skills Audit

The skills audit was planned as a training needs analysis to capture the skills of all employees within the Day Services for Persons with Disabilities. The skills audit was also expected to analyse and identify any possible gaps present in a number of employees. This was necessary to plan and deliver the necessary training. All staff, circa 200 employees, from the Day Services attended this training.

6) Enhancing Care Worker Skills

In 2007, a specific 30-hour training programme was designed for Care Workers within the Appoġġ High Support Services and Appoġġ Smartkids. 35 participants were trained. The aim of this training was to raise awareness on various issues related to their role and also supported the Care Workers’ understanding of how to be more effective
in their daily interventions with children.

In 2008, this course was also offered to another 33 Care Workers who work with Aġenzija Sapport. Employees were trained in basic skills such as interpersonal skills, communication skills, and giving and receiving feedback. Participants were not only taught about these skills but also how to integrate them into practical situations.

In 2009, a total of 14 care workers from Sedqa’s residential services and from the day services of Aġenzija Sapport, attended this training. This training gives an overview of the helping skills which the carers use daily and other practical suggestions which will help improve their skills.

7) Issues related to Attention Deficit Hyperactivity Disorder (ADHD)

In 2008, employees felt the need to enhance their knowledge with regards to ADHD. Thus, a three-hour session facilitated by Dr. Ethel Felice, Dr. Joe Cassar, Dr. Antoine Grech and Ms. Simone Schembri, was organised. In all, 60 participants attended this session.

8) Mental Health Issues in Adolescents

In 2008, a three-hour training session on Mental Health Issues and Adolescents was organised. Dr Joseph Saliba facilitated this session. A total of 75 participants attended this session.

9) First Contact Sheet Training

The FSWS Research Office provided training on the First Contact Sheet to 20 Sedqa employees. The aim of this training was to introduce the newly designed First Contact Sheet, to explain how this sheet was to be filled in and also to obtain feedback from the users on the implementation of the sheet with clients.
10) Performance Appraisal System

The training office coordinated in house training earmarked for all key persons within FSWS who will be administering the Performance Appraisal tool. The training provided during 2009 involved 4 training sessions that have taken place between the month of September and October. The training has been facilitated by Ms. Elizabeth Zammit, Quality Assurance & Systems Auditor. In total 68 participants attended this training.

11) Policy and Procedures Training

In order to keep employees aware of policy and procedures available within FSWS, in 2008, 20 key persons from the different entities were provided with twelve hours of training. The key persons were then encouraged to disseminate such knowledge to their respective members of staff. The training was delivered by Ms. Elizabeth Zammit, Quality Assurance and Systems Auditor.

12) Legal Issues

Keeping abreast of new legislation is necessary to our operations. As a result, in 2007 and 2008, local experts were invited to deliver training sessions on legal aspects related to gaming and betting in Malta, legislation on domestic violence, and the new Adoption law. These training sessions were organised for employees within Aġenzija Sedqa and Aġenzija Appoġġ.

13) Motivational Interviewing

A seven-hour training workshop in motivational interviewing was organised for 7 new recruits from Aġenzija Sedqa. The training was delivered by Psychologist Mr. Anthony Gatt. This training aimed to provide workers with the necessary skills to engage clients.
14) S.A.F.E. Programme

This course was given to the Leaders and Coordinators of Sapport Day Services which added up to a total of 18 persons. This one day programme was organised by Ms. Josianne Azzopardi, Sedqaa S.A.F.E. Programme Coordinator.

The S.A.F.E. programme is organised by Sedqa’s Prevention team in order to enhance awareness to the general public with regards to substance abuse at the workplace.

15) Train the Trainer Course in Issues Related to Disability

The aim of this course was to provide insight on how to deliver information in easy-to-read manuals to persons with a disability. This two-day course was devised in collaboration with Ms. Ann Marie Callus from the National Commission Persons with Disability (KNPD). During this training, 13 employees from Sapport Day Services attended.

16) Sign Language Course

This two-day course was designed to disseminate knowledge of basic sign language to support workers who are in contact with persons with disabilities. The course was carried out by the Speech and Language Pathologists (SLP). In 2008, 72 employees received this training.

17) Key Word Signing Course

A group of 9 support workers from the day services attended this two-day training in April 2009. The training was delivered by the Speech-Language Department. The aim for this training was to improve the quality of communication of staff, with adults with a learning disability, where non-verbals complement the verbal communication of the individual.
18) International Training

*i) Relapse Prevention Therapy training*

In 2007, a five-day training seminar was organised by Aġenzija Sedqa. The training was delivered by Dr. George A. Parks, a Clinical Psychologist licensed in the State of Washington in the U.S.A. The main aim of this training was to offer staff an in-depth overview of the clinical implications of alternative conceptual models of addictive behaviour and relapse for effective substance abuse treatment. 40 Sedqa employees attended this training. Apart from Sedqa employees, representatives of other entities that work in close collaboration with the Agency were invited and attended this training. In total, 50 participants attended this training.

*ii) Trainer the trainer course in Non-violent Crisis Prevention*

A professional staff instructor within the Crises Prevention Institute (CPI) UK, Ms. Vanessa Evans, was invited to Malta to conduct an intensive four-day programme that included a train-the-trainer segment, the aim of which was to certify 10 employees within the Foundation for Social Welfare
Services. As a result, certified instructors were trained to provide Non-violent Crisis Prevention Intervention training for all the staff within the Foundation.

Such training offers a solid foundation to structure prevention and intervention approaches based on a philosophy of providing the best possible Care, Welfare, Safety and Security for staff and those they are responsible for particularly during crisis situations.

iii) Responsible drinking and moderation approaches

In 2008, Dr. Fred Rotgers, Associate Professor at the Philadelphia College of Osteopathic Medicine, was invited to deliver a training session to a total of 45 Sedqa employees with regards to moderation training for problem drinkers.

iv) Training placement at Gamcare, United Kingdom

In 2008, an employee from Aġenzija Sedqa benefited from a one-week placement at Gamcare in the United Kingdom. The aim of this placement was for the participant to gain further insight on interventions related to problematic gamblers. The knowledge gained was disseminated amongst members of staff within Sedqa. Gamcare is the leading organisation providing counselling, advice and practical help in addressing the social impact of gambling in the United Kingdom.

v) Seminar for junior drug helpline workers, Lisbon

This training was organised and sponsored by the European Association of drug helplines – FESAT. A worker from Supportline 179 attended this one-week train-the-trainer seminar in Lisbon.

vi) Sense training

In 2009, the Training Office together with the Sapport Day Services and the Ministry of Education invited Ms. Alex Oram and Ms. Janice Greatrex from Sense organisation in
the UK. Sense provides advice and information as well as specialist services to deaf and blind people, their families, carers and the professionals who work with them. They also support people who have sensory impairments with additional disabilities.

vii) Join the Net IV

In 2008, Aġenzija Appoġġ through the Foundation for Social Welfare embarked on a Daphne III partnership with Therapeutische Frauenberatung on a project entitled Join the Net IV. Trauma that is not recognised and/or dealt with accordingly can lead to psychological and physical disorders such Post Traumatic Stress Disorder (PTSD). Thus, the objective of this project was to increase awareness and sensitivity of professionals in the social and health areas who assist victims of violence, regarding the symptoms of PTSD. As part of the project, Ms. Antoinette Gatt Rutter attended a Train the trainer conference. 10 local workshops were then organised throughout the year to disseminate knowledge gained on PTSD. Participants who attended the workshops included Social Workers, Psychologists, Medical Doctors, Nurses, Police Officers and representatives of the Domestic Violence Commission. A total of 113 participants attended these workshops.

viii) Visit to MENCAP, UK

From the 6th to 9th of July 2009, Ms. Marthese Tabone visited the Recruitment Office of MENCAP in the UK. During this visit Ms. Tabone had the opportunity to discuss Innovative recruitment strategies. She also attended a Career Progression Meeting and a recruitment day for one of the services offered by MENCAP.

ix) Changing Landscapes, Emerging Challenges

From the 13th to the 16th of September 2009 Ms. Ruth Sciberras attended a conference in Swansea, South Wales, UK, entitled Changing Landscapes, Emerging Challenges - contemporary issues in safeguarding children and young people. The conference was organised by BASPCAN -
British Association for the Study and Prevention of Child Abuse and Neglect.

x) Autism Spectrum Disorder

On the 4th and 5th November 2009, a two-day refresher course related to Autism Spectrum Disorder was delivered to all certified Instructors of the Non-Violence Crisis Prevention Intervention training. Instructor Ms. Susan Keith from the CPI Institute UK was invited to come to Malta to deliver this training and to share her experience related to subject matter. In addition, two seminars entitled Autism Matters at Work were delivered by Ms. Susan Keith on the 6th November 2009. In total, 77 members of staff from the three entities of the FSWS benefited from this training.

xi) WAVE training

From the 24th to 26th of November 2009, the Foundation for Social Welfare Services organised capacity building training seminars on violence against women and children. This training was commissioned and funded by WAVE - (Women against Violence, Europe). The training was delivered by Ms. Ute Rösemann. Ms. Rösemann, is an experienced trainer and a long-time colleague at the Women’s Counselling Centre Gladbeck in Germany. The training focused on three main themes:

• Programmes for perpetrators
• The impact of domestic violence on children
• Designing training on domestic violence for other professionals.

The target groups of this training seminar were mainly all the employees within the Domestic Violence Service and Perpetrators’ Service offered by Aġenzija Appoġġ. Other representatives of services within the Foundation for Social Welfare Services who encounter women or children experiencing or witnessing domestic violence also attended the training. Representatives of women shelters and representatives from the Commission on Domestic violence also participated in this training.
19) Courses, Conferences and Workshops Organised by Outside Entities

i) Conferences and workshops

Staff from within the three entities of the Foundation also attended various conferences and workshops organised by entities outside the FSWS. Apart from the training previously outlined, during the four years under review, approximately 400 staff members attended workshops and conferences organised by outside entities in the social welfare field to enhance their knowledge and skills.

a) PHOENIX Final Conference and Dissemination Seminar
Staff from the different entities of the Foundation for Social Welfare Services attended this conference entitled *Preparing and Handling Opportunities for Employment saying “No” to Isolation and Xenophobia*. This conference was organised by the Richmond Foundation.

In March 2009, staff members from Aġenzija Appoġġ and Aġenzija Sedqa attended a conference entitled *Where is home?* This conference was organised by the Salesians of
Don Bosco and addressed issues related to out-of-home care for children and adolescent with a focus on therapeutic interventions.

Staff from Aġenzija Appoġġ have attended a dissemination seminar entitled Preventing and Combating Trafficking in Human Beings and Enhancing Victims’ Protection through Operational Networking and Co-operation and Joint Multi-Disciplinary Trainings for Counter-Trafficking Specialists in EU Member States, Candidate and Neighbouring Countries. The aim of this training was to disseminate information and training material to different institutions and agencies on the topic of human trafficking.

ii) Courses

a) Euro change-over
This training was conducted by the National Euro Changeover Committee (NECC). It was aimed at preparing staff to help clients to deal with the euro change-over. A total of 59 employees from the Foundation were given this training.

b) Food safety and hygiene courses
A total of 24 persons assigned with Aġenzija Sapport attended this training. The aim of this training was to equip employees with knowledge about food handling and acquire a license to handle food safely and in accordance with the health and safety regulations.

c) ETC course – Disability course
This course was provided by the Employment and Training Corporation and was aimed towards giving a background of the disability field to those interested to work with persons with disabilities. In all, 4 staff members from Sapport Day Services attended this training.

d) Augmentative and Alternative Communication (AAC) and Dysphagia
These workshops were facilitated by the Speech and Language Pathologists from the Speech and Language Department. The main aim of these workshops was to train
Foundation
Social Welfare Services

Care/Support Workers assigned with Sapport Day Services. This training provided information of visual aids and how to employ them as part of the communication system used with non-verbal clients, or clients with unintelligible speech.

In 2008, 2 half-day courses in which 36 persons were trained in AAC only were carried out. In November of the same year, a new course entitled Dysphagia, for which 15 persons attended, was also introduced. This course focused on feeding and swallowing disorders.

e) Manual lift handling
This one-day course aimed at providing staff assigned with Agenzija Sapport with basic techniques related to safety and the positioning of clients. The course was delivered by the Physiotherapist Ms. Lisa Tedesco Triccas. In total, 24 members of staff participated.

f) Play therapy
Ms. Veronica Ellul who works within the psychology team of Agenzija Appogg, attended a course in play therapy which was delivered by psychologist Dott. Roberta Attard and dramatherapist Mr. Daniel Mercieca.

g) Background course on domestic violence
Staff from Agenzija Appogg had the opportunity to attend a course on issues related to Domestic violence. This course was part of project that received financial support from the EU Commission under the Life-long Learning Programme. During this course staff from Agenzija Appogg had the opportunity to network with participants from other partner institutions.

iii) Other training
Members of staff from Agenzija Appogg and Agenzija Sedqa attended courses which were organised by the University of Malta. The courses entitled Day Care and Residential Care Workers and Understanding Young People in Today’s Society were very popular amongst staff.

A number of staff also attended the four-day conference organised by the International Fostering Conference
Organisation, which was held in Malta during November 2007. Staff had the opportunity to listen to a number of world renowned speakers.

A number of staff from Aġenzija Appoġġ and Aġenzija Sedqa attended a training seminar organised by Mater Dei Hospital. This seminar addressed issues related to mothers who misuse substances, and their babies. This seminar was organised both in 2008 and 2009.

iv) On-going training
Throughout the past three years a number of on-going training modules were delivered to staff from all entities of the Foundation such as induction training. This training is provided to new recruits. Other courses namely First Aid, Fire Fighting, and Nonviolent Crisis Prevention Intervention were organised as outlined hereunder.

a) Non Violent Crisis Prevention Intervention

<table>
<thead>
<tr>
<th>Year</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>No. of Participants</td>
<td>80</td>
<td>28</td>
<td>294</td>
<td>84</td>
</tr>
</tbody>
</table>

Table 1: Number of staff members who attended Non-violent Crisis Prevention Intervention courses between 2006 and 2009

As from 2009, the Training Office also began to offer refresher courses in Crisis Prevention. Participants attended for this one-day course within a year of their two-day course. In 2009, a total of 159 staff members from all entities of the Foundation received the refresher training.

b) First Aid

<table>
<thead>
<tr>
<th>Year</th>
<th>2006</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>No. of Participants</td>
<td>80</td>
<td>43</td>
<td>26</td>
</tr>
</tbody>
</table>

Table 2: Number of staff members who attended First Aid courses in 2006 and 2009
c) Fire Fighting

<table>
<thead>
<tr>
<th>No. of Participants</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>60</td>
</tr>
</tbody>
</table>

Table 3: Number of staff members who attended Fire Fighting courses in 2007

d) Induction for new recruits

<table>
<thead>
<tr>
<th>No. of Participants</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>40</td>
<td>25</td>
<td>35</td>
</tr>
</tbody>
</table>

Table 4: Number of new recruits from all entities of the Foundation who benefited from an induction course in 2007, 2008 and 2009

As identified, a number of training opportunities materialised both locally and abroad. This was possible following the constant input of the Training Executives who coordinated and actively sought out such training opportunities.
Human Resources and Quality Assurance

1) Collective Agreements

The Human Resources Division was also actively involved in the preparation and conclusion of the first FSWS 2007-2010 collective agreement. This collective agreement gave all employees assigned within Appoġġ, Sapport and Sedqa the same conditions and addressed any possible disparities, which previously existed. In 2009, the Medical Association of Malta (MAM)-FSWS collective agreement covering the Medical Doctors of FSWS was also concluded.

2) Policies and Procedures

During the past four years, the following policies and procedures were either prepared or updated to reflect changes within the exigencies of the services.

- Vacation Leave
- Sick Leave
- Discipline
- Health and Safety
- Sexual Harassment
- Equal Opportunity
- Relationships
- Use of Drugs and Alcohol
- Recruitment
- Student on Placement
- Motor
- Participation in Political Activities
- Probation
- Personal Appearance/Dress Code
- Training and Human Resources Development
- Serious Incidents/Injuries
- Service Users/Service Providers Satisfaction
- Students on Placement
- Non-Smoking
- Request to Access Client/Service User Documented Information Procedure
3) Employee Handbook

Another important project that kicked off during 2008 was the drafting of an Employee Handbook. This was drafted in English and Maltese and included a summary of the basic policies of the Foundation. This is a very user-friendly tool both for current employees, as well as for new recruits. An update of this handbook is planned in the future.

4) Staff Queries and Movements

The Human Resources function receives various queries from staff. These are generally related to conditions of work. Employees are also supported in their requests for movements. As from 2008, on quarterly basis, the Human Resources Senior Manager informed the Operations Management about staff requests for movement. Requests were entertained on the basis of placement availability.

5) Job Descriptions

One of the main projects within the responsibility of the Quality Assurance was the review of job descriptions for all collective agreement grades within the Foundation. Until 2007, each Agency had a different version of a job description for the same grades and thus the exercise revised the tasks and issued a common role description which incorporated the main duties carried out for every grade within the different entities of the Foundation.

A whole consultation process was launched with Senior Management. This had also a ripple effect on junior leadership positions. Each job description was mainly divided into three sections, where specific duties were outlined: in relation to service user, in relation to team, and in relation to Management.

The consultation and feedback process took quite a few months until all job descriptions were in place. These
were also groundwork for another project – Performance Appraisal – that was earmarked and tackled during 2009 and will continue during 2010.

6) Performance Management

One of the main projects for 2008 consisted of setting up a Performance Management System for all grades within FSWS. For this reason, the forms that were being used at Appogg and Sapport were reviewed. There was further consultation amongst staff at different levels amongst all agencies accompanied by a couple of training sessions attended by the Quality Assurance and Systems Auditor so as to design the best possible tool that could cater for the needs of the Foundation. This was a rigorous exercise that took several months. Whilst designing the tool, the job descriptions for each job title were also consulted. This was necessary to ensure that the main objectives were included. Whilst the aim is to monitor the performance throughout the whole year, at least once a year, a meeting shall be set up to formally discuss the employee’s performance. The devised tool shall formally measure once a year the following:

- targets achieved in relation to service user
- targets achieved in relation to one’s team/other teams
- targets achieved in relation to Management
- other targets as identified by the specific Agency

This will be followed by an action plan that has different time frames according to priority.

During 2009, intensive training was designed and delivered to all potential appraisers. The participants had the opportunity to practice the tool and further feedback was received on how to improve it. It is being envisaged that such tool will be pilot tested during 2010 and fully launched the year after.

7) Eligibility Report and Interviewing Report

In order to use a standardised approach and to guide the Selection Board members when assessing the eligibility
of candidates and marking job applicants who attend an interview, during 2007 and 2009 the Human Resources Division devised a thorough Interviewing Report and an Eligibility report, respectively.

The eligibility report consisted of sections where the applicant’s eligibility is evaluated on qualifications, experience and any other criteria as per call for applications.

The Interviewing Report consisted of different sections where the interviewee is assessed on qualifications, work experience and performance during the interview. Through the use of this tool, there is a more comprehensive assessment of each applicant and this has proved to facilitate the decision making process for the selection of new recruits.

8) Complaints Handling

During 2006, 2 complaints were handled, whilst during 2007, 9 complaints were tackled. In 2008, 6 complaints were finalised and another 2 were dealt with during 2009. Most complaints addressed aspects of service delivery. On average, each complaint took between 35 and 40 hours to be finalised.

9) Consent Forms

The latter part of 2006 year was characterised by the introduction of various consent forms in line with the Data Protection Act and which can be used by job applicants, professionals and clients. The two consent forms that were designed were Privacy of Personal information of Applicants and Personal Information of Clients.

A number of Confidentiality Forms were also designed. These included: Declaration of Confidentiality and Data Protection, Confidentiality Form – Foster Carers, Confidentiality Form – Court Experts.
10) Requests for Information

During 2007, there were 2 requests for information required by clients and another 2 requests for information required by staff. These were processed in accordance with the Data Protection Law. In two of the cases there was specific consultation with the Office of the Data Protection Commissioner.

In 2008, there were 3 requests for information required by clients. Furthermore, there were 2 requests for information by staff, one of which was withdrawn. These were processed in accordance with the Data Protection Law.

During 2009, there were 4 requests for information by clients and 1 request for information from staff which have all been resolved to the satisfaction of the requesters.

11) Clients’ Rights and Responsibilities Leaflet

During 2008, the drafting of a Clients’ Rights and Responsibilities leaflet was carried out. This was part of Management’s commitment and strategy to introduce the Quality Service Charter for several services within the Foundation. By December 2008, the contents of this project had been compiled, feedback that was received was also amalgamated and Management approved the latest version of the leaflet. In 2009, the leaflet was translated in Maltese and piloted with service users to see whether it is service user friendly. Feedback was received and it was decided to prepare different versions of such leaflet, to target the different client groups serviced by the Foundation.

12) Data Protection Work Group for the Social Welfare Sector

During 2008, FSWS received an invitation from the Data Protection Commissioner to participate in regular meetings between social welfare partners in order to design specific guidelines to the sector that are related to Data Protection issues. The Quality Assurance and Systems Auditor, together with the FSWS Legal Advisor, formed part of this
working group where during the three meetings that were organised, the Commissioner invited participants to air their major concerns to devise a way forward.

13) Code of Conduct

In 2009, a code of conduct applicable to all employees working with FSWS was drafted. The code was prepared in both Maltese and English and provides clear guidelines of acceptable and unacceptable behaviours. This code of conduct was developed in view of the Public Administration Act and reflects the key principles of this Act’s Code of Ethics.
Research

1) Collection and Collation of Routine Data

The collection and collation of routine data from the Foundation’s entities have continued throughout the period under review. In 2007, a new Research Executive, who took over work on Appogg and Sedqa routine data, was recruited. Routine data is compiled into various reports including statistical reports and trends reports and provides information to, inter alia, Government, Foundation-level decision makers and journalists.

The Sedqa treatment demand data, which encompasses socio-demographic and drug-related information, is also passed annually onto the National Focal Point for Drugs and Drug Addiction, where it contributes to providing a picture of the drug situation in Malta. Furthermore, the Sedqa treatment demand data, together with data from other treatment centres across Europe are utilised by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) to establish, inter alia, the main developments and trends in the European drug situation.

In 2006, groundwork began for the eventual introduction of a case management software system. From a data perspective, this system will further enhance the quality of the data collected and will also allow data to be extracted in a timelier manner. This, in addition to providing quality data on treatment demand, will allow us to conduct further epidemiological studies.

During the period under review, ongoing meetings were held with Sedqa intake teams, namely the Drugs Community team, the Alcohol and Gambling Community team, and Teen Support Services, to standardise data collection procedures as much as possible. As a result of these meetings, a new first contact sheet was devised for use in the three intake teams and a first contact sheet user manual was produced. The production of standard operating procedures within these intake teams, were
embarked upon. These standard operating procedures detail information such as the collection, inputting and collation of the Agency’s routine data.

During the period under review, the Appoġġ databases were improved and the difficulties data inputters encountered, were discussed. As a result, further analysis of the databases occurred and new data inputters were engaged and trained.

2) Research Studies

i) The European School Survey Project on Alcohol and Other Drugs (ESPAD)

The Foundation’s Research Office conducts various projects in collaboration with other national and international entities. The European School Survey Project on Alcohol and Other Drugs (ESPAD) is one such study. It is conducted every four years among 15 to 16 year olds in many European countries. This study bolsters our knowledge about the use of tobacco, alcohol and other drugs amongst adolescents, and associated attitudes, perceptions and behaviours. It also provides a comprehensive overview of trends in licit and illicit drug use. Locally, the Foundation has conducted this project, in collaboration with the Guidance and Counselling Services pertaining to the Education Division of the Ministry of Education, Culture, Youth and Sport. In 2007 the fourth ESPAD study was conducted amongst over 3,600 students in Malta and 100,000 students in Europe. Various presentations have been made outlining some of the national findings. The international ESPAD report can be accessed through the following link:

The_2007_ESPAD_Report-FULL_091006.pdf

ii) Study on alcohol, tobacco and drug use amongst 18 - 24 year olds in post-secondary and tertiary education

Previous surveys amongst young persons have focused on those in secondary education. In 2006, students in post-secondary and tertiary education were targeted in a
collaborative study between A¿enzija Sedqa, the National Focal Point for Drugs and Drug Addiction and the National Commission for the Abuse of Drugs, Alcohol and Other Dependencies. The aim of the study was to gain knowledge about lifestyle factors, including substance use and gambling behaviour, among students aged between 18 and 24 years. In 2006, data collection was completed and data were analysed. Results from this study can be downloaded from the following webpage:

iii) The Risk and Resiliency Research Project (RRRP)

To gain an understanding of the factors that promote or prevent the initiation of substance use, longitudinal studies are required. With this in mind, the Department of Youth and Community Studies within the University of Malta and A¿enzija Sedqa embarked on a collaborative, longitudinal study with the aim of assessing those factors that increase a young person’s likelihood of using substances and those factors that promote resiliency. In 2007, the final wave of the data was collected from the same sample of approximately 150 students.

iv) Evaluation of substance use prevention programmes

In 2005, work on an evaluation of school-based substance abuse prevention programmes in Malta and Gozo was initiated. This evaluation study is being conducted co-jointly by all entities providing such prevention programmes on the Maltese Islands, namely A¿enzija Sedqa represented by the Research Office, Caritas, OASI Foundation and the Education Division, together with the National Focal Point for Drugs and Drug Addiction. This evaluation study aims to determine the impact of prevention programmes offered to Form 3 students in terms of knowledge, attitudes and behaviours relating to the area of tobacco, alcohol and illicit drug use by means of a pre-test post-test control group design. In addition to examining the effectiveness of the programmes, this project will also indicate if amendments to the programmes’ content, method and timing of delivery
are required. In 2008, data from the final post-test were collected.

v) Heroin use incidence estimation comparison of two methods in five European countries

The Research Office collaborated on a pilot study on heroin incidence estimation, which was initiated in 2008. In this study, the Reporting Delay Adjustment method to estimate heroin incidence was compared with a new one-day General Inclusion Function method in five different regions in Europe. Anonymised data on methadone-receiving clients from the Substance Misuse Out-patient Unit (SMOPU) were used to obtain estimates for Malta.

vi) Mortality study

Discussions were held regarding a study that will link mortality data from the Department of Health Information and Research (DHIR) and data from SMOPU. This would allow us to assess, inter alia, the mortality rate amongst clients attending SMOPU. The required information was forwarded to the DHIR for further analysis. This study is a joint project between the Foundation’s Research Office, the DHIR and the National Focal Point in liaison with the National Commission on the Abuse of Drugs Alcohol and other Dependencies.

vii) A study of Maltese fostered children and their contact experiences

Following the data collection and analysis of quantitative data about Maltese fostered children which occurred between 2005 and 2006, a paper was presented during the IFCO Conference held in Malta in November 2007. Apart from a survey of fostered children, the second part of the study collected data about fostered children’s contact experiences with their family of origin. Data analysis was carried out during 2008 and finalised in 2009.
viii) FSWS evaluation study

During the latter half of 2009 a study was conducted to review the services offered by each unit within Aġenzija Appoġġ, Sedqa and Sapport that directly deals with service users. The aim of the study was to gain an understanding of the main activities, processes, entities, forces and contexts that influence, enable and constrain positive outcomes for the FSWS’s service users. This study helped to provide an understanding of the potential changes that could be made to enhance client outcomes. The study’s questions were answered using multiple methods of data collection and multiple data sources, and included 45 qualitative interviews with staff working with service users and the Managers and Operation Directors of the services.

3) Other Activities

i) Attendance at international meetings

Personnel from the Research Office have participated in various international meetings held at the European
Monitoring Centre for Drugs and Drug Addiction (EMCDDA), including the Treatment Demand Indicator Meetings in 2006, 2007, 2008 and 2009; the meetings on Population Surveys in 2007, 2008 and 2009; the meeting on Problem Drug Use in 2008 and 2009; a working group meeting on data coverage in 2007; and a working group meeting on the Treatment Demand Indicator: Implementation of a system of data quality assessment, in 2008. International meetings have also been attended in view of the Foundation’s participation in the ESPAD study.

**ii) Research Policy**

The Research Office coordinated student research in collaboration with various departments from the University of Malta. The Office also developed a Research Policy, which outlines the procedures for making requests for statistics and student research requests, and created a Research Application Form. Between 2006 and 2009, approximately 162 requests to conduct research within the Foundation’s services were received and reviewed.

**iii) Questionnaires**

The Research Office also responds to questionnaires from international entities requesting information and statistics about the local situation. The most prominent of these include:

- the European Region Questionnaire to monitor the implementation of WHO regional committee resolution RC55/9
- the ISG-SPC child poverty and child well-being in the EU – draft report of the Indicator’s Sub-group of the Social Protection Committee
- the EU questionnaire on Parenting Support Services in Malta
- the UN Secretary General’s coordinated database on violence against women questionnaire
- the UN’s Annual Report Questionnaire: Drug abuse, extent, patterns and trends of drug abuse
- WHO, UNICEF and UNAIDS Annual Reporting Form for Monitoring and reporting on the health sector response to
HIV/AIDS. Section C. the prevention of sexual transmission of HIV and prevention of transmission through injecting drug use
• Mid-term Review (MTR) of the Commonwealth Plan of Action for Gender Equality 2005-2015 (PoA) Survey Questionnaire
• ULSS20 Verona in collaboration with WHO questionnaire about the Effective Violence Prevention Programmes which will be published in the report Public Health impact of interpersonal violence a mapping exercise.
• EMCDDA short questionnaire about the latest developments in heroin use and related problems based on recent treatment information

iv) Domestic Violence Commission

In 2007 one of the Research Executives was nominated to participate in the Domestic Violence Commission’s Sub-committee on Research and Data Collation. The Sub-committee’s first meeting took place in September 2007 and regular meetings have been held since. As a result of these meetings, collaboration between the FSWS and the Police was enhanced and a means of collating data was identified. In 2008, the Sub-committee, through the Commission, also commissioned a replication of a 2003 study entitled “Domestic Violence against Women: Perceptions of the Maltese General Public”, which was published in early 2009. In the latter half of 2009, the Subcommittee assisted the Commission in being awarded the ESF 3.43 Project: Dignity for Domestic Violence Survivors. The Commission issued a Tender for the Implementation of a Study on the Prevalence of Domestic Violence against Women in Malta and its Impact on the Employment Prospects of the Women.
Aġenzija Appoġġ
Aġenzija Appoġġ: Rapport ta’ Hidma 2006-2009

Aġenzija Appoġġ hija waħda mit-tliet Aġenziji fi ħdan il-Fondazzjoni għal Servizzi ta’ Ħarsien Soċjali, u toffri servizzi soċjali lil tfal, familji, adulti vulnerabbli, u lill-komunità. Uħud mill-ghanijiet prinċipali tal-Aġenzija huma li tagħti sapport lil persuni f’riskju ta’ esklużjoni soċjali; persuni li jgħixxu fil-faqar; u persuni li jinsabu f’sitwazzjonijiet ta’ abbuż jew pożizzjonijiet vulnerabbli ohra. Fl-2009, Appoġġ kienet toffri aktar minn 25 servizz u timpjega aktar minn 182 ħaddiem, li permezz taghhom l-Aġenzija:

- Toffri sapport u protezzjoni lil tfal li jinsabu għaddejin minn abbuż jew jinsabu f’riskju ta’ abbuż
- Toffri sapport lil tfal li ma jgħixxux mal-familja naturali tagħhom
- Tgħin biex tinstab familja għal tfal li ma jkunux jistgħu jibqgħu jgħixxux mal-familja naturali tagħhom
- Toffri sapport u assistenza lil adulti li għaddejin minn abbuż jew jinsabu f’sitwazzjonijiet vulnerabbli
- Toffri servizzi terapewtiċi lil dawn il-persuni
Tissapportja lil familji fil-bżonnijiet tagħhom, b’enfażi partikolari fuq ir-rwal tal-ġenituri, sabiex it-tfal ikunu jistgħu jgħixu f’ambjent ta’ familja aktar b’sahħtu.


Rendikont u Analizi

Matul dawn it-tliet snin li qed nanalizzaw f’dan ir-rapport, l-Aġenzija Appoġġ permezz tas-servizzi varji tagħha, żammet l-istess ammont ta’ case turnover (Figure 1), dak ta’ madwar 8,000 każ kull sena. B’hekk, in-numru ta’ persuni li resqu lejn is-servizz baqa’ wiehed kostanti.


Fl-2009, l-Ąġenzija kellha nuqqas ta’ madwar 3% fil-case turnover tagħha, meta kkumparat mal-2008. Fl-aħħar parti ta’ din is-sena l-Ąġenzija fethet tliet servizzi godda fil-komunitajiet tal-Belt, B’Kara u l-Qawra, b’żieda ta’ 9 impjegati f’dan il-qasam f’din is-sena.
Figure 2: Numru ta’ każjiiet ġodda u ri-attivati li b’dew jirčievu servizz (Service Opened) mill-Aġenzija Appoġġ, 2001-2009

Figure 3: Numru ta’ każjiiet li ġew magħluqa (Service Closure) mis-serviżi tal-Aġenzija Appoġġ, 2000-2009

**Figure 4: Numru ta’ każijiet referuti ill-Aġenzija Appogg, 2000-2009**


**Figure 5**: Numru ta’ klijenti ġodda li bdew jirċievu servizz mill-Ąġenzija Appoġġ, 2000-2009

u servizzi oħra fi ħdan l-Ąġenzija. Din it-tip ta’ informazzjoni tghin lill-Ąġenzija tifhem aħjar ir-raġuni għaliex dawn il-persuni jkunu qed ifittxu l-ġhajnuna tagħha f’sitwazzjonijiet differenti.


National Action Plan


i) Promozzjoni tal-koeżjoni soċjali
ii) Bini ta’ komunitajiet aktar b’sahħithom
iii) Tishih tas-settur tal-volontjarjat

iii) Ghaqda tal-hidma bejn entitajiet differenti fil-qasam tas-servizzi ta’ harsien soċjali
Appoġġ ħadet azzjoni f’diversi setturi relatati mal-prioritajiet identifikati. Hawn taħt ser nagħti spjegazzjoni ta’ numru ta’ wħud mill-miżuri li ttieħdu mill-Ąġenzija f’dan ir-rigward.

i) Promozzjoni tal-koeżjoni soċjali

a) Edukazzjoni u xogħol
Din il-policy tidentifika l-importanza tal-edukazzjoni effettiva li żżid l-opportunitajiet ta’ xogħol ta’ persuna. Livell baxx ta’ edukazzjoni, kif ukoll il-qagħad, huma fost dawk il-bosta fatturi li jżidu r-riskju ta’ faqar. Matul dawn l-ahħar snin, l-Ąġenzija kienet involuta f’diversi proġetti bl-għan li ttejjeb il-livell ta’ edukazzjoni milhuq miż-żgħażagh; tghin lil dawn iż-żgħażagh jitgħallmu ħiliet godda; kif ukoll tghinhom itejbu l-prospetti tagħhom fid-dinja tax-xogħol. Fost dawn l-inizjattivi kien hemm:

- il-proġett Reach, li kien ofrutt mill-Kumpless ACCESS fil-Kottonera
- Proġett Tagħlim, li kien ikkoordinat mill-Cottonera Community Services tal-Ąġenzija Appoġġ
- BUDZ, servizz mogħti mill-Ąġenzija Appoġġ u ġiż żgħażagh Sedqa flimkien u kellu l-għan li jtejjeb l-ħiliet personali u soċjali taż-żgħażagħ
- Programm ta’ skills training għal pre-adoloxxenti

b) Akkomodazzjoni u servizzi ta’ ġarsien soċjali
Din il-policy tidentifika wkoll “good health, adequate housing and effective social welfare services” bhala fatturi importanti li jikkontribwixxu “towards a person’s general well being and promote hischer prospects for social inclusion”. Fuq dan il-prinċipju, l-Ąġenzija Appoġġ f’dawn l-aħħar snin bniel relazzjoni tajba mal-Awtorità tad-Djar, kif ukoll mad-Dipartiment għas-Sigurtà Soċjali. L-Awtorità tad-Djar toffri s-servizzi tagħha fil-Kottonera permezz ta’ impjegat fi ħdan il-Cottonera Community Service tal-Ąġenzija Appoġġ. Dan huwa mod kif l-Ąġenzija tilhaq lil dawk il-persuni li għandhom problema ta’ akkomodazzjoni. Dan l-impjegat mhux biss jiltaqa’ ma’ dawn il-persuni u jispjegalhom l-iskemi ta’ akkomodazzjoni li jistgħu jibbenefikaw minnhom, iżda jwassal ukoll informazzjoni lill-komunità dwar kif għandu jinżamm ambjent tajjeb fid-dar. Apparti minn hekk, l-Ąġenzija Appoġġ għandha kuntatt sod mal-Awtorità tad-Djar u jsiru laqgħat fuq bażi regolari fejn jiġi diskuss x’jista’ jsir biex titjieb b’mod immedjat is-sitwazzjoni rigward akkomodazzjoni ta’ persuni identifikati. Appoġġ għandha wkoll rappreżentant fuq is-Social Assistance Board, u bniel kuntatti sodi ma’ sezzjonijiet differenti fi ħdan dan id-Dipartiment. Hemm diversi klijenti tas-servizzi tal-Ąġenzija li qed jirċievu xi tip ta’ benefiċċju mid-Dipartiment għas-Sigurtà Soċjali, u għalhekk, dawn il-kuntatti huma kruċjali.

c) Il-harsien tad-drittijiet tat-tfal u ż-żghażagh

F’dawn l-erba’ snin, l-Ågenzija kellha wkoll rwol vitali fil-Qorti tal-Familja. Permezz ta’ professjonisti li gew ingagġati biex jaqdu d-dmirijiet ta’ esperti tal-Qorti (li xogħolhom hu li jassessjaw il-każijiet, u jagħmlu rakkomandazzjonijiet lill-Maġistrat fil-Qorti tal-Familja fuq każijiet relatati mal-kura u kustodja tat-tfal, kif ukoll dwar drittijiet ghal aċċess u visti mill-geniturii), l-Ågenzija laħqet miri biex it-tfal jibdew jingħataw aktar vuchi waqt seduti fil-Qorti u f’każi ta’ separazzjoni. L-esperti tal-Qorti jisimghu u jagħtu importanza lix-xewqat tat-tfal meta jaslu biex jippreżentaw il-konkluzjonijiet taghhom. Matul is-snin, l-Ågenzija żviluppat relazzjoni ta’bba mal-Qorti tal-Familja, u din isservi fl-ahjar
interest tat-tfal li jirčievu s-servizzi tagħna. Bla dubju, fadal bosta fatturi li għad iridu jiġu indirizzati u li ser nahdmu fuqhom f-is-nin li ġejjin.


ii) Bini ta’ komunitajiet aktar b’saħħithom

Il-Pjanijiet Nazzjonali juru biċ-ċar l-importanza tal-żviluppp ta’ servizzi fil-Komunità, kemm ta’ ġidma soċjali u żvilupp tal-komunità, kif ukoll ta’ servizzi ta’ edukazzjoni u prevenzjoni.

Foundation
Social Welfare Services


Children’s Services
Maġżer: Ruth Sciberras
- Child Protection Service
- Looked After Children Service and Adoption Service
- Fostering Service
- High Support Service
- Media Assessments

Adult and Family Services
Maġżer: Maryanne Gauci
- Domestic Violence Services:
  - Domestic Violence Unit
  - Ġhabex Emergency Shelter
  - Perpetrators’ Service
- Health Services:
  - Mater Dei Social Work Service
  - Boffa Hospital Social Work Service
  - St. Vincent De Paule Residence Social Work Service
  - Qormi Health Centre Social Work Service
  - Community Outreach Service
Smartkids:
- Kottonera
- Birkirkara
- Qawra
Psychotherapeutic Services:
- Psychological Services
- Family Therapy
Liason Officer on Human Trafficking

**Intake and Socio-Legal Services**

**Maniżer: Graziella Castillo**

Initial Response Service
Programm Ulied Darna
- Proġett Flimkien
- Proġett Hsibt Fik
- Proġett Tereżə
Supportline 179
Court Services
Supervised Access Visits
Adolescent Outreach Service
Crises Intervention in Critical Situations

**Community and Generic Services**

**Maniżer: Catherine Fleri Soler**

Cottonera Community Services
Home-Start Malta
Social Work and Community Development Service – Paulo Freire Institute
Generic Service
Valletta Community Service
Qawra Community Service
Birkirkara Community Service
Hotline Service
Housing Liaison Officer
Rappreżentanza fuq il-Bord tad-Diretturi tal-Kumpless
ACCESS

iii) Tishieħ tal-qasam volontarju

L-ᾲġępżija Ħuġjiet li jettieħdu miżuri f’dan il-qasam. Però ta’ min insemmi tliet fatturi importanti:

- L-ᾲġępżija Ħuġjiet ghandha tliet servizzi partikolari mmexxija minn volontiera – is-Supportline 179, Programm Ulied Darna u Home-Start Malta. F’dan ir-rigward, l-ᾲġępżija hi komnessa li tipprovdi tahriġ u sapport adekwat lil dawn il-volontiera li joffru l-hin tagħhom f’dawn l-oqsma u jgħinu tant nies li ġigu f’kuntatt mal-ᾲġępżija
- L-ᾲġępżija tahdem ukoll fil-qrib ma’ diversi entitatijiet volontarji b’modo partikolari s-servizzi residenzjali offruti mill-Knisja u mill-NGOs
- Matul is-sena 2009, l-ᾲġępżija Ħuġjiet issieħbet ma’ żewġ entitatijiet volontarji, l-SOS Malta u s-Salēţjani, u flimkien għamlu proposta ghas-servizz ta’ linja telefonika u chatline għat-tfal.

iv) Għaqda tal-ḥidma bejn entitatijiet differenti fil-qasam tas-servizzi ta’ ħarsien soċjali

“The promotion of Social Inclusion does not depend only on the range of available services but it also extensively relies on the disposition and ability of all stakeholders to co-ordinate their initiatives and input. Although Malta provides an array of social welfare, health, education and employment services to enhance the overall well-being and prospects of vulnerable people, networking between the agencies providing such services needs to be strengthened.”

Ħuġjiet ħadmet kemm setghet biex ittejjeb is-sinerġija u l-ḥidma bejn is-servizzi tagħha stess, ma’ servizzi oħra fi ħdan il-Fondazzjoni għal Servizzi ta’ Ħarsien Soċjali, kif ukoll ma’ entitatijiet oħra. Saret enfaza partikolari biex tissahħah il-ḥidma li l-ᾲġępżija twettaq ma’ għaqdiet mhux governattivi (NGOs) u professjonistijiet oħra fil-qasam relatat ma-tfal, saħħa u saħħa mentali. F’dan ir-rigward ġew stabbiliti numru ta’ protokolli u proċeduri ta’ Ṣidma. Apparti dan, il-ḥidma tal-ᾲġępżija ma’ entitatijiet differenti u s-sehem tagħna
f’bosta inizjattivi juru l-impenn tal-Appoġġ li ssahħaħ dawn ir-relazzjonijiet ma’ organizazzjonijiet ohra importanti. Dan peress li bhala Aġenzija nemmnu li biex inkunu nistghu noffru servizz mill-ahjar lill-klijenti taghna, irridu nkunu kapaċi nafdmu id f’id ma’ entitajiet ohra.

**Miżuri oħra ta’ prestazzjoni**

Flimkien ma’ dak kollu li semmejna hawn fuq, l-Aġenzija Appoġġ kienet involuta wkoll f’diversi *working groups*, kemm fuq bazzi lokali kif ukoll fuq livell Ewropew, u ppartenċipat f’numru ta’ konferenzi u seminars ta’ tahrIQ. Dan sar bl-għan li jitjiebu l-istandards ta’ prattika tal-Aġenzija, jijdied l-gharfien fil-qasam fost l-istaff, nippromwovu u nagħtu pariri dwar tibdil mehtieg kemm f’*policies* kif ukoll f’lilġiijiet. Hawn ser nirreferi għallon-involviment tal-Aġenzija f’inizjattivi bħal dawn:

- **Matul l-2006 u l-2007**, waħda mill-Maniġers ġiet mistiedna tirrappreżenta lil Malta f’kumitat fi ħdan il-Kunsill tal-Ewropa. Dan il-kumitat kien għaddej b’hidma biex tiġi fformulata Konvenzjoni dwar il-Protezzjoni tat-Tfal mill-Abbuż u Esplojtazzjoni Sesswali. Din il-hidma damet għaddejja 18-il xahar, b’total ta’ sitt laqgħat fi Strassburgu. Din il-partecipazzjoni serviet mhux biss bhala kontribuzzjoni minn Malta biex tiġi fformulata din il-Konvenzjoni, iżda wkoll biex tiżdied l-esperjenza u tingabar aktar informazzjoni rigward l-abbuż sesswali u l-esplojtazzjoni. Dan kien neċessarju speċjalment minħabba x-xogħol li kellu jitwettaq mis-servizz tal-*Hotline*
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• Waħda mill-Maniġers giet nominata bhala n-National Focal Point ta’ Malta fuq il-kumitat dwar kampanja kontra l-vjolenza fuq in-nisa, inklüz l-vjolenza domestika
• Sal-2007 tkompliet il-ċiddma fil-grupp Experts on Integrated Social Services fi ħdan il-Kunsill tal-Ewropa
• Fl-2007 l-Aġenzija ppartecipat fil-Home-Start Chairperson’s Meeting, kif ukoll fil-konferenza internazzjonali li ssir kull tliet snin
• Kien hemm ukoll partecipazzjoni f’working group dwar l-iżvilupp tan-National Standards of Care – Residential Child Care, bejn Ottubru 2006 u Lulju 2007
• Partecipazzjoni fil-Quality4Children Standards, li x-xogħol relatat miegħu intermml fl-2006
• Appoġġ kellha rappreżentanza fil-focus group dwar it-tfal li jgħixu fi djar residenzjali, imwaqqaf mill-Kummissarju tat-Tfal
• L-Aġenzija ħadet sehem fil-Kumitat ta’ Esperti tal-Kunsill tal-Ewropa dwar Children and Family - Building a Europe for and with Children Programme. Dan il-Kumitat holol linji gwida dwar trolloġija pożittiva tat-tfal u kif ghandha ssir promozzjoni ta’ stili ta’ trolloġija li ma jinkludux is-swat fuq it-tfal bhala mezz ta’ dixxiplina


• Matul is-snin li qed nanalizzaw f’dan ir-rapport, kompla għaddej it-taħriġ mill-Commonwealth li jiffoka fuq is-servizzi għat-tfal, iżda b’enfaż partiolkari fuq il-Looked After Children Service tal-Aġenzija matul l-2007. Ir-rizultati ta’ dan ir-rapport ġew analizzati sabiex tittieħed azzjoni, u ġew preżentati waqt seminar fi-2008

• Fl-2008, ġie jiffirmat Memomorandum of Understanding on Combatting Human Trafficking, bejn il-Ministeru għall-Politika Soċjali u l-Pulizija. Appoġġ ġiet appuntata bħala
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L-Aġenzija responsabbli f’dan il-qasam biex tipprovdi servizz lill-vittmi, f’isem il-Ministeru ghall-Politika Socijali, u l-Maniġer tal-Adult & Family Services tal-Appoġġ ġiet magħżula bħala *Liaison Officer*. B’rizultat ta’ hekk, matul l-2008 l-Aġenzija ppartecipat fi proġett *Train the Trainer*, fejn il-Liaison Officer attendiet seminar ta’ tahriġ bl-għan li hi stess toffri aktar tahriġ lil professionisti lokali matul is-sena ta’ wara.

**Seminars u konferenzi**

- Konferenza Nazzjonali dwar id-Drittijiet tat-Tfal fil-*World Trade Centre* f’Bukarest. Din il-konferenza kienet tiffoka dwar l-iżviluppu, modi u sfidi fl-Ewropa b’konnessjoni mad-drittijiet tat-tfal, ir-rwol tal-familji u *policies* dwar kurru alternattiva.
- **Roundtable Conference** Nazzjonali, bl-involviment ta’ diversi entitajiet, bit-titlu ta’ *Child Abuse on the Internet*, bil-parteċipazzjoni tal-Kummissarju tat-Tfal ta’ dak iż-żmien, Ms. Sonia Camilleri, u l-organizzazzjonijiet Inhope (l-Assoċċjazzjoni Internazzjonali tal-Internet Hotlines).
- **Roundtable Conference** Nazzjonali bit-titlu ta’ *Missing and Sexually Exploited Children: Malta in a European Framework*, bil-parteċipazzjoni tal-Kummissarju tat-Tfal ta’ dak iż-żmien, Ms. Sonia Camilleri is-sapport tal-Kummissjoniji Ewropea (Daphne); u l-parteċipazzjoni ta’ *Childoscope*, li tippromwovi policies integrati Ewropej relatati ma’ tfal mitlufa u abbużati sesswalment.
• Konferenza organizzata mill-Eurochild f’Cardiff, fl-1 ta’ Ottubru fl-2008.
• Partecipazzjoni fil-konferenza The Fight Against Poverty – Civil Society Project Report and Conference Proceedings
• Matul is-sena 2009, membru tal-istaff attendiet konferenza tal-Eurochild
• Matul l-2009, membru tal-istaff attendiet konferenza tal-BASPCAN dwar il-protezzjoni tat-tfal
• Ħadna wkoll parti fl-EU Grundvig Training ‘Train the Trainer’ Project on post-traumatic stress disorder u wara tajna taħrig f’ghaxar workshops li saru ghal professożisti mill-Fondazzjoni u oħrajn
• Bhala parti minn dan il-progett gie mogħti wkoll taħrig minn esperti mill-Awstrija fuq il-qasam tal-vjolenza domestika
• Matul din il-perjodu ntbagħtu wkoll numru ta’ haddiema ghal placement bhala parti mill-Leonardo Bursaries dwar zgħażagh, kif ukoll bdew jintaghżli u jintbagħtu haddiema oħra fuq placements dwar trauma, li ser jibqgħu sejrin għaddejjin matul l-2010.
Konklużjoni u Rakkomandazzjonijiet


Children Services, 2006-2009

Overview of the Services

The Appoġġ Children’s Services Office is responsible for overseeing the way children’s services are set about, the tasks of planning the services, and managing their performance. Both of these areas are taken very seriously as Agenzija Appoġġ sees them as key to getting the right services to children and their families, and delivered to the best ability.

Combined Portfolio of Children’s Services:

• Child Protection Service
• Looked After Children Service
• Monitoring Service
• Fostering
• Adoption
• High Support Service
• Media
• Court Services:
  • Court expert reports
  • Court monitoring service
  • Supervised access visits

Objectives of the Services

The Appoġġ Children’s Services aim primarily at:
• providing the necessary protection and support to abused children and young people and their carers
• supporting children and young people who are living out of home
• providing children and young people with an alternative family environment when they are unable to live with their own family
• promoting the re-integration of children and young people to their own families, whenever this is possible
• providing the best possible placement for children and young people to enable them to reach their full potential
• recruiting, assessing, training and supporting all prospective and approved foster carers and adoptive parents, so they can provide a wide range of placements which meet the diverse needs of children
• supporting children during their access visits with their non-custodial parent
• supporting children whose parents are in the process of separation, in their plight to deal with the hardship caused by such situations
• assessing vulnerable persons identified to participate on media programmes
• raising awareness on children’s rights
• ensuring staff are trained and supported to deliver a child-centred service
• gate-keeping resources within a financial framework that meets the needs of children, young people and their families.

Performance Review and Analysis

Figure 6: Number of cases worked with (Case Turnover) by the Children’s Services, 2000-2009
The Children’s Services\(^1\) combined have seen a decrease of 10\% in case turnover during 2008 (Figure 6). This decrease is due to decreases occurring within the Child Protection Service. This is attributed to the continuous role of the Initial Response Service (IRS) which eliminates non-applicable referrals from the caseload and the continued use of waiting lists. Moreover, the high turnover of staff continued to slow down the operations of the service. The Children Services combined\(^2\) have seen a slight increase of less than 1\% in case turnover in 2009 in comparison to 2008.

\(^1\)The combined Children’s Services up to year 2009 are Child Protection Service, Looked After Children Service, Fostering Service, Supervised Visits Service and Court Services.

\(^2\)Data in Figure 7 refers to Child Protection Service, Looked After Children Service, Fostering Service, Supervised Access Visits Service and Court Services.
A decrease of 25% in cases opened and a decrease of 7% in case closures was registered by the Children’s Services in 2008 in comparison to 2007. Once again, the decrease in cases opened is predominantly due to decreases in staff within the Child Protection Service (CPS) and filtering of cases of neglect through the Initial Response Service. This decrease can also be attributed to the high number of cases taken on in 2007 which have meant that less operational time could be dedicated to new or re-referred cases in 2008.

The number of referrals received has remained relatively stable but then in 2008 there was a decrease of 24%. The Initial Response Service continues to eliminate non-applicable referrals and only refers severe cases that require the specialised intervention of the Child Protection Service. IRS also handles cases of child neglect which previously would have been referred to Child Protection Service. Both the number of referrals and the number of service openings increased by 12% and 33% respectively in 2009 in comparison to 2008.
The number of new clients offered services within the children cluster decreased by 32% in 2008 in comparison to 2007. The decrease may be attributed to decreases in referrals within the Child Protection Service and Supervised Access Visits Service. Within the Child Protection Service, the decrease was attributed to the screening by IRS, and many schools also conducted screening prior to referring a case and thus fewer cases were referred to CPS. With regard to the Supervised Access Visits Service, being aware of the service’s waiting list, Court was only referring the most urgent cases. With the pressures experienced due to the increased demand for Children’s Services, less operational time was effectively available for further interventions as this was divided between the total demands for these services.3

3Figure 10 does not encompass the High Support Service and the Adoption Service.
1) Children’s Services Interventions and Hours Spent

Figure 11: Number of interventions by type conducted by Children’s Services, 2006 - 2008

Figure 12: Number of hours dedicated during interventions by the Children’s Services, 2006 - 2008

Type of intervention
The incidence of 29.5% increase of home visits and of 24.5% of office visits carried out in 2007 over 2006, could be attributed to the fact that the Child Protection Services worked approximately 1,300 extra hours during these two years to decrease the waiting list, with the accumulation of interventions intensifying in 2007. During 2008, the extra hours worked by the Child Protection Service were minimal when compared to the previous year as the service reverted to its original working hours. This is also reflected in the number of interventions carried by the service during 2008.4

2) Restructuring of the Appoġġ Children’s Services

In early 2007, the cases of unaccompanied minors were transferred to the Agency for the Welfare of Asylum Seekers (AWAS), formerly known as the Organisation for the Integration and Welfare of Asylum Seekers (OIWAS). In mid-2007, Appoġġ initiated negotiations for the transfer of the Adoption Service from the Department for Social Welfare Standards (DSWS) to its operations. The negotiations were successfully completed and in August 2007, a proposal to integrate the Adoption Services with the Looked After Children Service was approved. As from January 2008, Aġenzija Appoġġ took full responsibility of the Adoption Service and 4 new Social Workers joined the team.

Prior to 2008, the Agency’s Court Services’ portfolio comprised of Supervised Access Visits, Court Assessments, Court Monitoring, Weekend Monitoring and the High Support Service. All of these services were backed by an on-call system. In 2007, the Weekend Monitoring Service was transferred back to the Looked After Children Service from Court Services. There was also a change in the name of the service, from Weekend Monitoring Service to Monitoring Service. Prior to this change, the service was offered only during the weekend. However, as time went by, the need was felt to cater also for those children who are at home during the week.

In 2008, there was a change in the leadership and the Court Services’ Coordinator was appointed to lead the
service whilst the previous leader continued to assume the responsibility of High Support Service whilst concurrently leading other service in the Agency. In tandem with these developments, with the appointment of a new Service Manager, Court Services was removed from the umbrella of Children’s Services and transferred to the Intake and Socio-Legal Services.

Between 2006 and 2008, three additional Social Workers joined the Children’s Services, who were placed in the Child Protection Service, Looked After Children Service and Fostering Service respectively. Moreover, ten Social Workers from the Children’s Services and one from the Adult and Family Services were appointed to co-ordinate the various services within Children’s Services.

All these rapid and structural changes brought about a number of adaptations that Children’s Services had to face – no easy challenge for sure – but a task which was performed with concerted efforts and actions at every operational level.

As seen earlier on, the Appoġġ Children Services used to also include the Supervised Access Visits and Court Services but these were moved to the Intake and Socio-Legal Services.

3) Conflict-Ridden Priorities

Alongside the adjustments referred to above, Children’s Services continued to be overwhelmed by problematic areas which over time have become an inherent part of these services. One of the major challenges is the continuous high incidence of Child Protection referrals in relation to substance dependence contributing to an increase in the issuing of Care Orders to protect minors whose parents misuse substances. A huge impact on Children’s Services are the serious gaps in the out-of-home care facilities (residential and foster care) for minors needing protection, and the breakdown of placements which have children and adolescents being prematurely re-integrated with their family where protection cannot be
assured. Moreover, the lack of foster care placements is a pressing concern. The Agency has been facing difficulties in identifying and recruiting sufficient foster carers who are willing to foster care children whose behaviour is challenging. Managing the operations of the High Support Service is also proving to be quite an impossible task. This service was created in order to provide individual care for looked after children with challenging behaviour, thus supporting their care-givers in dealing better with their behaviour. However, due to serious financial limitations children who have been identified as requiring the service, are being left on the waiting list. This is putting at stake their placement and jeopardising future placements.

Resource shortfalls and poor access to supportive services which include psychological intervention, Supervised Access Visits, High Support Service, Generic Services and others, contribute to a high level of stress as Social Workers struggle to form a holistic care plan for each child. In addition, large caseloads, long waiting lists, the increase in volatile situations dealt by the workers together with a high staff turnover resulting in newly graduates taking the place of experienced workers coupled with the above accrued situations, are all impinging negatively on the work of the teams. This has been occurring despite various strategies and skilful management across the board and has led to conflict-ridden priorities becoming the order of the day, as highlighted in more detail by the respective Service Area Leaders in this report.

The overall work has become even more complex, dangerous to carry and difficult to address, which is exacerbated by the lack of a comprehensive legal framework that offers protection and continuity of care to all children without any form of discrimination.

4) Creating Social Change

Despite operating under the same limitations prevailing in the past, the Aġenzija Appoġġ Children’s Services continued to act as a catalyst for action and social change. In this respect we pride ourselves that during the period under evaluation, we
managed to prevent residential care for 27 newborns who were placed directly in foster care. We also managed to place in adoption seven looked after children, aged 0 to 14 years. Three of these minors were in residential care, whilst the other four were in foster care with a view for adoption.

Our whole-hearted efforts to refrain from admitting very small children in residential care and raising awareness of the possible harmful effects of this system on children and their development, reaped its fruit as finally social influence became evident. More parents whose children need protection are being receptive towards this strategy even if initially guilt feelings evoke some resistance. Other parents in the same position identify foster care as their preferred placement. Regrettably, due to the limited number of foster care placements, the times when we cannot meet this wish during these emotional-laden circumstances are becoming more frequent. Children’s Services are also faced with the dilemma of refugees, protected persons, asylum seekers, and irregular immigrants who want to enter into the labour market and approach the Agency to place their children in foster care. These minors end up in residential care due to the lack of child-minding facilities, as explained in more detail in the section below. Such restriction is extremely frustrating and defies the purpose of this plan of action and calls for drastic measures to sustain foster care.

This much-desired attitude change is a crucial turning point and is one of the driving forces in this service area. Nevertheless, it is only fair to acknowledge the undeniably good work and commitment undertaken by children’s homes, sometimes at the cost of huge personal sacrifice, to provide concrete care and protection to children who are not living with their family of origin including minor children of refugees, protected persons, asylum seekers, and irregular immigrants.

5) The Impact of Irregular Immigration on the Appoġġ Children’s Services

In 2007, following the relocation of the cases of unaccompanied minors from Appoġġ to the Agency for the
Welfare of Asylum Seekers (AWAS), there was no clarity about the remits of Appoġġ and AWAS with respect to immigrants living outside detention. Once the families with minor children left the detention centres, they fell under the responsibility of mainstream services. However, Appoġġ continued to assume the responsibility of protecting abused minors and by the end of 2009, the Appoġġ Child Protection Service was dealing with twelve cases of abused minors either living in the community with their families, or with Maltese families, or in the open centres. In one instance, a minor even had to be protected with a Care Order.

The primary concern regarding the above-mentioned minors was that to make ends meet, protected persons (parent or but invariably a single mother) wished to leave the open centre to enter into the labour market and due to lack of child care services abandoned the child with third parties. During the period under review, discussions between Appoġġ and other stakeholders including AWAS, the former Commissioner for Children Ms Sonia Camilleri, Ejjew Ghandi Church Office for Children’s Home, and the Central Office for the Immigrants Dar L-Emigrant, were undertaken to address the issue of lack of child care services for children of refugees, protected persons, asylum seekers, and irregular immigrants. Nevertheless, no concrete outcomes emerged as the problem was too extensive to be undertaken by the stakeholders without appropriate supportive systems in place.

In July 2007, AWAS issued a directive by the Management Committee and had prohibited open centres from encouraging any informal placement of children outside centres. Staff was also directed to report any instances when this happened. It was stressed then that AWAS centres needed to abide rigorously with the legal and welfare frameworks. This directive led to Appoġġ Child Protection Service receiving referrals of certain minors living with families whose own children are protected by a Care Order. Some of these ‘hosting’ families were experiencing multiple social problems including: mental illness or drug misuse which are identified as key local inhibitors to parenting capacity. The Child Protection Service
had to intervene to protect these minors and empower their parent/s to find alternative and safer options. A common factor in the ‘hosting’ families, regardless of their parental capacity, was the devastation of being separated from the children they were caring for when their natural parent/s wished to reconstitute their family. The desolation of these families intensified on being aware that the parent/s of these children were planning to repatriate or relocate, thus locally severing all relationships. The Fostering Service had many desperate calls to support and intervene in such situations. Regrettably, due to the paucity of resources, the service could not deal with this emerging phenomenon. The end result was that there were no professionals to support these children and their ‘hosting’ families to cope with these losses and traumas.

By the end of 2008, there were 33 family units (single parents or couples) in open centres for immigrants requiring child-minding and there were 26 immigrant children residing at the Ursuline Crèche in Sliema. Due to shortage of staff, these minors are not being followed by the Looked After Children Service and therefore there is still no holistic long-term plan for them. In November 2008, Aġenzija Appoġġ and AWAS were requested to look into the legal and welfare frameworks surrounding minor children of refugees, protected persons, asylum seekers, and irregular immigrants. Meetings were held also with the Commissioner for Children, Ms Carmen Zammit, and Ejjew Ghandi Church Office for Children’s Homes. The pressing concern was to address the possibility that these children were not being looked after according to current legal and welfare frameworks. A proposal was drawn up and the recommendations were put forward to the Ministry for Social Policy and the Ministry for Justice and Home Affairs so that both entities are provided with additional human and financial resources to address these issues, which proposal is still pending.

6) Important Milestones

Of major significance was the Commonwealth Training focusing on Children’s issues, which programme was
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initiated in 2005 and came to completion in 2009 with the evaluation of the Looked After Children Services. In respect of service delivery, the evaluation has equally identified areas of strength and areas where further work would benefit the service available to service users. The review raised a number of issues in regard to the system of residential care: the continuing use of residential care for very small children and the practice of moving children to a new facility at different stages of their lives in addition to separating siblings who are growing up in residential care. The British experts more generally made various recommendations as well as called for urgent reviews at a strategic level of a long-standing agenda such as the need for a comprehensive children’s legislation and the development of child mental health services.

With regard to the last point, although the lack of residential facilities for children and adolescents with mental health problems is far from resolved, however, one should note that in 2007, Kids in Development Programme (KIDs), a residential therapeutic programme for children between 5 and 10 years, started operating, thus relieving some of the pressure on the Young Persons’ Unit (YPU) at Mount Carmel Hospital.

The area of legislation saw some significant developments in these past three years. The Fostering Act was enacted in 2007 to provide for the supporting structures for the fostering provision in Malta. It set up the administrative framework such as the Central Authority and Fostering Board as well as to regulate voluntary agencies. The Adoption Administration Act came into force on the 1st of May 2008.

During 2006 and 2007, Malta was represented through FSWS staff on the Council of Europe Committee of Experts on the Protection of Children against Sexual Exploitation and Sexual Abuse (PC-ES) and was involved in the drafting of the Convention on the Protection of Children against Sexual Exploitation and Sexual abuse. So far, this Convention has been signed by 28 states. Unfortunately, Malta is still a non-signatory state. The signing and the ratification of this
Convention is highly encouraged as this is the first time that an international treaty has identified and criminalized the offence of sexual abuse concerning child prostitution, child pornography and the solicitation of children for sexual purposes. Should this Convention be enforced, it will continue to enhance existing legislation concerning children’s fundamental rights and dignity.

7) Other Work

i) Appoţţ Children’s Fund
The undersigned also chairs the Appoţţ Children’s Fund Committee, which aims to respond better to the needs of vulnerable children and ensure social equality and inclusion. On behalf of the Committee, Ms Sciberras would like to show her gratitude to various sponsors who support the Fund. Above all, she extends her appreciation to Appoţţ Children’s Fund Fundraising Committee members who, with the help of other members of staff and Management, organise year-round activities in aid of the Fund on voluntary basis at the cost of many personal sacrifices.

ii) Media
The Office of the Children’s Services Manager works in close collaboration with the Social Marketing and Communications Office of the Foundation for Social Welfare Services as the undersigned has managed to build a healthy working relationship with many professionals involved in the media. This networking transpired through the Service Manager’s intensive participation on media programmes to promote children’s rights and by being always available to journalists and producers who made contact with the Agency to inquire about social situations. Despite never breaching confidentiality, she has managed to create a positive synergy and has assured the Agency’s credibility. This linkage has worked in favour of the Agency in protecting vulnerable service users who turn to the media with their attention-grabbing situations – sometimes reported inaccurately and sensationalised – unaware of the precariousness of exposing their personal issues to the viewers.
During the period under review, the above-mentioned offices had to cope with intense pressure from producers and journalists who give very tight deadlines for interviews and articles, and pre-screening sessions for vulnerable persons participating in media programmes. This joint collaboration was extended to the pre-screening assessors who were supported when they encountered difficulties especially undue pressure from certain producers. The Service Manager was responsible for reviewing each pre-screening assessment for final approval and was also consulted on various occasions by producers to review footages involving vulnerable persons prior being aired. In 2007, the two offices were involved in giving feedback to the Broadcasting Authority on the Guidelines regarding Participation of Vulnerable Persons.

On behalf of Appoġġ and by asserting a professional approach, Ms Sciberras has voiced her opinion on many shock value issues in respect to social relevance, which from time to time the media engaged in featuring or reporting. The Service Manager finds this role very challenging and will continue to represent the Agency, when the need arises, with the aim of educating the general public and reach the intended audience.

iii) Nonviolent Crisis Intervention Training
In 2007, together with other participants from the Foundation for Social Welfare Services, the undersigned participated in the Nonviolent Crisis Intervention – a four-day instructor certification programme focusing on the safe management of disruptive and assaultive behaviour. Upon certification the participants become members of the International Association of Nonviolent Crisis Intervention Certified Instructors and have since trained other members of staff, as identified by the Human Resources, Training, Research and Quality Assurance Office.

A Special Acknowledgement: Social Paediatrics Service
A word of appreciation goes to the Senior Registrar in Community Paediatrics, Dr Mariella Mangion, who provided us with the information for this report. Above all we wish
Foundation
Social Welfare Services

to extend our sincerest acknowledgement to her invaluable medical service that she imparts at the Appoġġ Butterfly Centre. Dr Mangion is assisted by Ms Maria Bonavia, Staff Nurse at the Butterfly Centre, whilst Dr Muscat Baron administers a medical service to the Ursuline Crèche in Sliema.

Apart from examining children at the Butterfly Centre, Dr Mangion performs the following tasks: supports and advises designated professionals with regard to safeguarding children who may be experiencing any form of child abuse and neglect; attends case conferences and case reviews; liaises with the Fostering Service and supports foster cares; is consulted by Appoġġ workers and residential carers in difficult situations especially in the management of children with challenging behaviour; is involved in forensic and Court proceedings related mostly to sexual abuse cases and assists in the attendance as well as management of cases at the Child Guidance Clinic.

Dr Mangion is also a good valuable link to Appoġġ within the hospital setting as she facilitates communication and puts Appoġġ workers in touch with the necessary professionals within Mater Dei.

Such initiatives of co-working and of sharing responsibility should be encouraged by major partners. These examples of good practice sap a lot of energy and require a high level of commitment from front liners. Regrettably, they are not so common especially in the area of child protection. Furthermore, it is essential that the Paediatric Department at Mater Dei continues to offer this service as it is one of the vital connected links in the chain of services offered to Appoġġ service users. It is also a way of ensuring a better service to abused and socially disadvantaged children.

By virtue of her expertise and sterling practice, Dr Mangion has gained the respect of all workers at Appoġġ and we deeply thank her for taking on this stressful role which always goes above and beyond the call of duty.
Way Forward

The job of improving services for children and young people goes on into the future. We want our children and young people in a rounded way to have it all and we have got to see that the system, and the way in which it joins together, is providing that for our most vulnerable children and young people. The reality, however, is that the services have not managed to keep up with the scale of the problem, and many children are not getting the support they need. We need to address the gaps in the out-of-home care system (residential and fostering) by mapping out the type and quantity of services needed to meet the diverse needs and work together to deliver the required outcomes to our society and widely spread.

With respect to minor children of refugees, protected persons, asylum seekers, and irregular immigrants, since there is no clarity about the remits of Appoġġ and the Agency for the Welfare of Asylum Seekers vis-à-vis immigrants living outside detention, both entities need to have a policy direction, in this regard, followed by the provision of adequate resources. The provision of child care facilities to support parents in their child care responsibilities while in employment is an essential part of addressing the needs of these minors since the lack of organised child care gives leeway for children to be placed haphazardly with families rendering them potential victims of abuse.

Malta has ratified the 1989 United Convention on the Rights of the Child – certainly an important step forward. But we must recognize the fact that there are still many areas in our society which need to be brought in line with the spirit and letter of this Convention.

The enactment of the Fostering Act 2007 and the Administration Adoption Act in 2008 were both legal major milestones. However, on a national level, to date we have pieces of legislation spread out here and there. Unfortunately, the decision whether to go for a comprehensive Children Act or whether to introduce amendments and new legislation piecemeal has been a
contentious one and seem to have come to a standstill – the issue is still pending and needs to be addressed. Some argue that it does not need to be a whole Act and it would be more practical to have an enabling law, followed by subsidiary legislation. If the current unwillingness to introduce a comprehensive Act is to persist, the least children can hope for is the well-timed enactment of major legislations, their coordination and the safeguarding of fundamental quality standards.

Finally, alongside the need for a comprehensive legal framework, in order to achieve our aims and objectives it is essential that we work together in partnership with other services and entities. We must recognise that this is not always easy to achieve. However, the interest and well-being of the children we provide a service to, must take priority overall considerations.
Appoġġ Children’s Fund

Objectives of the Service

The Appoġġ Children’s Fund aims to respond better to the needs of vulnerable children and ensure social equality and inclusion. Through their interventions, Social Workers endeavour to minimise children’s disadvantages and seek to provide them with the resources that give them the opportunity to remain as much as possible equal with other children born to families who have adequate or better financial means.

The Children’s Fund is made up of a Board that has the role of screening all incoming requests from Social Workers, and to decide whether or not to approve the requests. The Fundraising Committee is made up of a group of employees who, on a voluntary basis, organise fundraising activities so to raise money to sustain the Fund itself. The money raised is donated to Aġenzija Appoġġ to manage and distribute to vulnerable children.

Performance Review and Analysis

The Children’s Fund Board is made up of a Chairperson, a representative of the Fundraising Committee, and two other representatives from Appoġġ staff. The undersigned is the chairperson of this Board. The said committee had 52 meetings throughout the period 2006-2009, and has approved a total sum of €29,435.20. 853 children benefited from these funds.

<table>
<thead>
<tr>
<th>Year</th>
<th>Meeting Held</th>
<th>Children Assisted</th>
<th>Amounts Awarded in €</th>
<th>Requests Made</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006</td>
<td>12</td>
<td>125</td>
<td>6,544.50</td>
<td>81</td>
</tr>
<tr>
<td>2007</td>
<td>17</td>
<td>258</td>
<td>7,285.81</td>
<td>134</td>
</tr>
<tr>
<td>2008</td>
<td>11</td>
<td>216</td>
<td>7,211.06</td>
<td>114</td>
</tr>
<tr>
<td>2009</td>
<td>12</td>
<td>254</td>
<td>8,393.88</td>
<td>133</td>
</tr>
</tbody>
</table>

Table 5: Requests received and distribution of funds, 2006-2009
Their needs varied from education to food provisions, baby needs, medical assistance, transportation, uniforms, and regular clothing, amongst others (Table 6).

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount given in € 2007</th>
<th>Total number of children who benefited in 2007</th>
<th>Amount given in € 2008</th>
<th>Total number of children who benefited in 2008</th>
<th>Amount given in € 2009</th>
<th>Total number of children who benefited in 2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baby Needs</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>256.00</td>
<td>10</td>
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<tr>
<td>Clothing</td>
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<td>33</td>
<td>789.77</td>
<td>21</td>
<td>1,017.59</td>
<td>16</td>
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<tr>
<td>Consumables</td>
<td>595.39</td>
<td>42</td>
<td>1,573.45</td>
<td>75</td>
<td>2,431.97</td>
<td>141</td>
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<tr>
<td>Educational</td>
<td>435.59</td>
<td>12</td>
<td>1,150.99</td>
<td>12</td>
<td>1,685.82</td>
<td>44</td>
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<tr>
<td>Medicinal</td>
<td>338.46</td>
<td>12</td>
<td>292.66</td>
<td>2</td>
<td>0</td>
<td>0</td>
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<tr>
<td>Professional Fees</td>
<td>1,396.11</td>
<td>38</td>
<td>695.58</td>
<td>8</td>
<td>1,228.98</td>
<td>16</td>
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<tr>
<td>Subsistence</td>
<td>883.58</td>
<td>42</td>
<td>1,675.91</td>
<td>76</td>
<td>1,019.52</td>
<td>16</td>
</tr>
<tr>
<td>Transportation</td>
<td>574.07</td>
<td>15</td>
<td>318.20</td>
<td>8</td>
<td>575.00</td>
<td>9</td>
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<tr>
<td>Utilities</td>
<td>1,399.44</td>
<td>64</td>
<td>714.50</td>
<td>14</td>
<td>179.00</td>
<td>2</td>
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<tr>
<td><strong>TOTAL</strong></td>
<td><strong>258</strong></td>
<td><strong>216</strong></td>
<td><strong>8,398.88</strong></td>
<td><strong>254</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Table 6: Breakdown of funds, 2007-2009*

In order for the Appoġġ Children’s Fund to keep meeting the current incoming demands, an average amount of €8,000 is needed every year. In view of this, the Fundraising Committee has the task to organise a number of activities. Throughout these past four years, the Committee has organised several activities. The two activities that generated the most income were the Carwash Marathons and the sale of Figolli. Collectively, these activities raised €6,497.65. It is being noted that the sale of Figolli is increasing in demand every year.
The Committee also organises smaller activities namely, Mixed Grill and Baguette Day that also aid to raise funds. These initiatives, apart from raising funds, also serve as team building activities within the Agency.

An activity that took place for the first time in 2008 was the sale of Boroż ta’ San Martin. It came as a surprise to the Committee when over 400 orders came in. One can proudly say that as a first time attempt, the activity was a success as it rendered a profit of €1,485.00. The same activity has been held once more in 2009 and it generated a profit of €2,160.00.

Other important sources that keep the Fund resourceful, are the various donations affected by different entities, private companies and persons throughout the year. In the period 2006-2009, the Appoġġ Children’s Fund received a total of €11,457.71 out of which €8,530.58 have been donated by Voices and L-Istrina collectively.

In 2008, the Children’s Fund Fundraising Committee made contacts with Credit Europe Bank, which accepted to sponsor upcoming events on a number of months. In 2008, Credit Europe Bank partly sponsored the publication of the 2009 Appoġġ Children’s Fund Calendar while also committing to sponsor other events in 2009.

Another Figolli sale has been held for 2009 from which an amount of €1,875.27 has been raised.

Throughout the year 2009, the Children’s Fund Fundraising Committee organised the activity ‘Enchanted Tales’ in collaboration with Once Upon a Time, held at Serenity Gardens in Santa Lucija. The activity generated an amount of €7,503.84 in donations.
Way Forward

It is with thoughtful appreciation that we thank all benefactors, Fundraising Committee members, and all the staff and volunteers that have made it possible to keep the Fund going. We hope that this initiative keeps flourishing across the years and that we keep finding the necessary support to raise more funds since the demand to help children is continuously increasing.
Foundation
Agenzija Appoġġ
Social Welfare Services

Child Protection Service

Objectives of the Service

The Appoġġ Child Protection Service (CPS) aims to provide protection to children who are going through, or are at risk of going through, any form of child abuse and/or neglect within a procedural framework. Through a multi-disciplinary approach, the Social Workers within the Child Protection Service identify, investigate, assess, and monitor cases of child abuse. Furthermore, part of the role of the Child Protection Social Workers is to provide preventive, investigative, and follow-up interventions not only with abused children but also with their families. The Service also provides consultative services to agencies and organisations which come across cases of actual or suspected child abuse and/or neglect.

During the period under review the Child Protection Service was made up of:

- 1 full-time Service Area Leader
- 3 full-time Coordinators
- 1 full-time Coordinator (promoted mid-2008)
- 14 full-time Social Workers (due to high staff turnover, there were many time periods when CPS did not manage to reach the full complement)

Performance Review and Analysis

In 2006, the CPS experienced an increase in referrals of 31.45% over 2005. However, the case turnover of the CPS decreased slightly in 2007 and 2008, registering a total of 1,608 and 1,270 cases respectively (Figure 13). This decline of 21% (over 2008) was due to high turnover of staff, which slowed down the operations of the service, as well as the screening of cases undertaken by the IRS. In 2009 there was a 6% decrease in comparison to 2008, with a total of 1,194 cases registered as receiving a service during 2009.
The Initial Response Service acts as a filter for other services, such as CPS, by allowing only relevant cases to be opened within these other more specialised services. IRS is also handling cases of child neglect which previously would have been referred to the Child Protection Service.

The Initial Response Service acts as a filter for other services, such as CPS, by allowing only relevant cases to be opened within these other more specialised services. IRS is also handling cases of child neglect which previously would have been referred to the Child Protection Service.
There was also a decrease in the service openings in 2008 (Figure 14) and a slight increase in service closure. The decrease in service openings indicates that a large number of cases are carried over from previous years reflecting that CPS cases are becoming even more complex. The slight increase in closures could be attributed to the approximately 400 extra hours that CPS Social Workers worked to reduce the waiting list and closed cases which no longer presented child protection issues.

This Service experienced an increase of 39% in service openings and an increase of 23% in referrals in 2009 in comparison to 2008. The increase in referrals may be the continued increases in referrals of children from a drug abuse setting.

Although this service experienced an increase in referrals of children whose parents have a drug addiction problem, the total number of referrals received in 2008 decrease by 19% (Figure 15). Apart from screening by IRS, many schools also conduct screening prior to referring a case and thus fewer cases are referred to CPS.
CPS experienced a 35% decrease in new clients in 2008 in comparison to 2007. Once again, the long-term nature of cases meant that many cases were carried over from previous years and workers were unable to take on further new cases, and CPS Social Workers were already carrying high caseloads. In addition, due to the high turnover of staff, it took time to replace staff and there were significant gaps where the full staff complement was not reached contributing to the slowing down of the operations and allocation of cases.
Since the number of new cases has decreased overall in 2008, the number of reported forms of abuse has also decreased in comparison to 2007.

Children at risk are the highest form of abuse reported (Figure 17). Children at risk are situations where children are likely to suffer or have suffered significant harm that hinders their development. These may include one or a combination of the following:

• exposure to domestic violence
• exposure to substance misuse (alcohol & drugs)
• chaotic lifestyles of parents (frequent changes in residences, changes in schools, sexual exposure)
• high rate of school absenteeism due to the above
• parents with severe mental health problems
• siblings referred to CPS
• siblings in care

When combining categories of abuse, a higher percentage of clients report emotional, physical or sexual abuse. Physical abuse remains one of the highest forms of abuse encountered, with 27% of cases reporting physical abuse alone, followed by 17% neglect, and 19% sexual abuse alone in 2008. The rankings in 2008 remained relatively the same as those in 2007 (Figure 17), with only physical abuse, sexual abuse and neglect increasing in numbers reported in 2008. Unspecified forms of abuse (or ‘unknown’) have also been reduced, indicating improvements in data collection. This would have implied that the type of abuse would have been unclear upon referral.

The majority of new cases opened in 2008 consisted of clients residing in the Harbour areas, with 29% coming from the Southern Harbour District and 24% from the Northern Harbour District.
Figure 18: Primary form of abuse of cases referred, 2009

- Emotional: 4%
- Sexual: 16%
- Physical: 34%
- Neglect: 17%
- At risk: 29%

Figure 19: Number of Objections, Care Orders and Interim Care Orders, 2005-2009

- Interim Care Orders
- Care Orders
- Objections
The year 2006 was marked by an 18.42% increase in the number of Interim Care Orders and a 24.14% increase in Care Orders issued, over the year 2005, but the major raise was in the number Objections presented in the Juvenile Court, which surged up to 71.42% (Figure 19).

Between 2006 and 2009, 35 minors have been refused placements in residential or fostering accommodations. Issues for not securing a placement for minors were mainly due to their difficult uncontrollable behaviour, disability, and the age limit; children aged five years and older were considered to be beyond the fostering age and children aged nine to 11 were considered too old for children’s homes caring for young children and too young for others hosting adolescents. This situation was exacerbated with the closure of a residential home following allegations of abuse. The minors involved continued to be followed by their respective Social Worker and an alternative residential or fostering placement was provided.

It is significant that 35 out of the 125 (28.8%) Care Orders issued over the period under review, were in relation to substance abusing parents. The increases in Care Orders and the corresponding Objections take up significant time and energy from the Social Workers. During the period under review, only three out of the 62 (4.8%) Objections contested in the Juvenile Court were not upheld and the children were sent back with their families. Unfortunately, three out of these children were referred back to CPS as their situation did not improve.

1) Fear-provoking Situations

Working intensively to retain staff in CPS, the Appożġ Management team is constantly acknowledging that the issuing of Interim Care Orders are fear-provoking situations and traumatic for all individuals involved. Following two separate incidents in which two Social Workers were injured, the Management strived to provide a holding and containing environment that matched the practice experiences of the team. Consequently, the safety and security procedures during the execution of Interim Care
Orders and Care Orders were reviewed in 2008, and tangible measures were undertaken – consisting mainly of more Police assistance and further intensive involvement of the Children’s Service Manager throughout the process of the Care Order. CPS workers also participated in the Nonviolent Crisis Intervention Training Programme - a programme focusing on the safe management of disruptive and assaultive behaviour. In addition, during 2008, an agreement was reached with the security personnel at Mater Dei Hospital in order to provide more security to both hospital staff and CPS as well as to the minors protected by an Interim / Care Order moving from hospital to alternative care.

2) Turnover of Staff and Placing New Workers in CPS

Since it was established in 1993, the CPS team, like many CPS teams abroad, has been characterised by high rates of staff turnover. In 2006, twelve workers left CPS and apart from the Service Area Leader (SAL), only one member of staff had more than 2 years experience. The team also lost the expertise of one of the coordinators, Ms Graziella Castillo, who had the supervisory role within the team. Ms Castillo was promoted to a Service Area Leader and subsequently, was promoted to Service Manager.

It took nearly two years for the team to reach a stability which was not seen in the previous years. During 2008, only two Social Workers left and one was promoted and moved to another service within the Agency, whereas the other left employment for personal reasons. Finally, the team was made up mostly of Social Workers with two or more years of experience in the field of social work and in child protection. Nevertheless, staff continued to request movements to other services. In mid-2008, after receiving feedback from various sources within and outside the Agency about the negative impact of placing new workers straight into the CPS both on the service and on the workers themselves, and after evaluating the various staff movements within the service, the Appoġġ Management team in consultation with the HR Senior Manager came to an agreement that new graduates were
not to be placed within the CPS and that a rotation system would be put in place whereby workers identified to work with the service would be given a time frame of a two year commitment. This agreement of course does not hold if they wish to spend more years in the service. Concrete measures and action plans were undertaken to put the system in place and in 2008, the two replacements in CPS were filled by two internal moves – one was voluntary and the other implemented by the Appoġġ Management. It was acknowledged by Appoġġ Management team that these measures would impact on the stability of their respective service and each situation of that particular service was taken into consideration when the persons were selected to be moved from one service to CPS. This system is constantly being monitored and evaluated to gauge its impact and effectiveness on the whole operational structure. In 2009, another two replacements in CPS were filled by two internal moves which both were implemented by Appoġġ Management.

3) Projects

During the period under review, discussions started regarding inter and intra-agency protocols with various entities and services, and some were finalized. In 2006, an inter-agency protocol was signed by the Appoġġ Child Protection Service and Aġenzija Sapport. The aim of this working agreement was to assist Sapport services and CPS workers in collaborating in the best interest of minors with disabilities who also happen to be abused or at risk of abuse.

Furthermore, in 2006, the Procedures for Handling Cases of Paedophilia was drawn up in order to provide clear guidelines when a referral alleging sexual abuse in relation to a minor/s involving persons in professional positions and/or involved in employment related to children, reached the Child Protection Service. Throughout these three years under review, an average of two such cases a year were handled by CPS.
In early 2007, a major project that has been brought to a successful conclusion was the protocol agreement between Appoġġ and the Executive Police, which aimed at setting out detailed procedures when dealing with issues of child abuse. The need for this protocol was felt in order to ensure the most efficient way in handling such investigations while providing the highest level of sensitivity to the child and the parents. Throughout the period under review, CPS Social Workers continued to give yearly training on how to handle child protection cases to Police Officers.

The protocols between the Child Protection Service and the Looked After Children, and the Child Protection Service and the Fostering Service, were finalized in 2007 and 2008 respectively.

4) Training

In 2007, specialised training for child protection workers has been held by various professionals who have extensive experience in the field. This training aided the Social Workers, who developed better techniques of interviewing children about the different types of abuse, and also helped them feel more confident when executing their work. The Assessment Framework for Children in Need and their Families was a fundamental part of this in-service training programme since it provided Social Workers with a systematic way of analysing, understanding and recording what is happening to children and young people within their families and the wider context of the community in which they live. From such an understanding of what are inevitably complex issues and inter-relationships, clear professional judgments can be made. These judgments include whether the child being assessed is in need, whether the child is suffering or likely to suffer significant harm, what actions must be taken and which services would best meet the needs of this particular child and family.

5) Waiting List

In August 2006 the Child Protection Service presented a proposal to Appoġġ Management team on a strategy
to deal with the waiting list. They proposed to work few extra hours weekly and dedicate these extra hours to work on the 500 cases that were on the waiting list. In addition, a number of workers showed interest in being paid for a number of hours of the time off in lieu they had accumulated. The proposal was approved by Management and approximately 900 extra hours were worked till the end of 2006 to reduce the waiting list. Familiarisation with the nature and re-prioritisation of CPS cases on the waiting list reaped its fruit: by the end 2007, 147 cases were put on the waiting list, translating in a 70.6% decrease. The reduction in waiting list was also the result of a collective effort by the Child Protection Social Workers who again in 2007, between October and December worked approximately 400 extra hours. The extra hours worked helped CPS workers not to continue accumulating more cases on the waiting list and also gave them time to tackle a number of cases from the waiting list. The extra hours also gave the new workers some additional time to get used to their work at a faster pace. By the end of 2008, there were 80 cases on the waiting list – an additional decline of 45.5%. However, by the end of 2009 there were 130 cases on the waiting list – an increase of 62.5%.

Referrals of minors from newborns up to 5 years are not even put on the waiting list but are dealt with alacrity and these situations are intensely monitored. This policy is adhered at all costs, and in one particular instance saved the life of a newborn who started suffering from withdrawal symptoms upon being discharged from hospital, and could have died had the Social Workers not undertaken a home visit to monitor the minor. Cohering with this policy is crucial in the work carried out by the CPS workers, and despite the ever increasing demands, the team is constantly assessing and monitoring such minors who are the most vulnerable of all with very effective results.

6) Re-structuring and New Leadership

During 2006 and 2007, three coordinators were appointed in CPS. In 2007, one of them was identified to assume the supervisory role within the service to relieve the SAL
of such duty since the latter had the role of supervising CPS Social Workers – a role previously undertaken by Ms Graziella Castillo before her promotion. The other two coordinators carried equal taxing responsibilities in coordinating the intake and long-term team as well as mentoring the new workers. In April 2008, there was a change in the Service Area Leader, and by mid-June the fourth coordinator was appointed to support the leader since two of the three other coordinators, were planning to go out on maternal and parental leave. The new leader, who previously was leading the IRS and Supportline 179, offered to take up the role of SAL of CPS, whilst leading IRS. Leading such two fast-paced services was no easy feat for the new leader of CPS. However, there was a high level of collaboration from both respective Service Managers and teams to sustain the leader in continuing to manage IRS effectively, whilst meeting the new demands and rise to the occasion of concurrently leading another team. Due to these new developments at the end of December 2008, the IRS service was transferred to a newly appointed SAL.

7) Substance Misuse Cases

In these three years, the Child Protection Service has seen an increase in cases of minors of substance abuse mothers. At the end of 2009, the caseload of such minors within the service escalated to 25% of the total caseload. As a result of this increase, a monthly multi-disciplinary meeting at Mater Dei Hospital regarding substance misuse pregnant mothers was introduced in 2007. Staff nurses from different obstetrics wards and gynae outpatients, Social Workers from drug rehabilitation agencies, doctors from the Sedqa Substance Misuse Out-patients Unit (Detox Centre), Child Protection Service Social Workers, and paediatricians, attend these meetings in order to plan together the care plan of unborn children whose mothers are substance users. This meeting has brought a positive change to the coordination of such cases.
8) Supervision

A system of group supervision was re-introduced within the service with the aim of discussing, in a systematic way, the case management of situations that have been within the service more than two years. Successful outcomes of cases discussed in group supervision were experienced by CPS workers, as it provided them with the opportunity to make use of different learning experiences of other staff members which contributed to their professional development at an individual level.

9) Networking with Education Personnel

During the last three years, there was improvement in communication with schools, and a new system for more filtering and prioritisation of cases was introduced. When cases are referred to CPS from schools, an acknowledgement of that referral is sent, and shortly afterwards a school meeting is held with the school personnel. In addition, there was more networking with Child Safety Services in order to streamline the work done by the two entities and to provide a better service to the minors that are being referred to CPS. A step in the right direction is that now most schools ensure that all Child Protection conferences and strategy meetings are attended by a member of staff who is properly informed about the immediate concerns as well as about the children and their history.

Way Forward

Child Protection Services will continue working in order to tackle and curb the waiting list as much as possible. Re-prioritising and reviewing of the waiting list will be an ongoing exercise. From an operational point of view, the system of case prioritisation will be evaluated to ensure that an appropriate system is in place.

Since cases of minors of substance misusing mothers are increasing, more collaboration and coordination of joint cases is envisaged with Agenzija Sedqa and Caritas. It is
challenging for all the workers involved in this field in order to find formal ways on how to pass on information and formulate care plans which are in the minor’s best interest.

CPS will continue looking at ways on how to enhance communication between various stakeholders involved in the protection of minors, such as education personnel, Police and medical staff in order to make the minors’ experiences with such services a beneficial one. CPS will continue to work with multidisciplinary teams to investigate cases of child abuse in a coordinated and planned manner, especially for children who undergo criminal proceedings by holding joint interviews with the of the Police, thus lessening the trauma of reliving the abuse for child victims that CPS seek to protect.

The Service will also be aiming at a powerful and intensive campaign to prevent child abuse and neglect and promoting year-round positive parenting attitude. The team looks forward to better its strategies in changing attitudes and behaviours and reinforce healthy parenting with the aim of connecting families to resources and reduce the likelihood of child abuse and neglect.

Despite the above-mentioned efforts, there still will be need for abused children to be provided with alternative out-of-home care. The desperate and unyielding need for placements for victims of abuse needs to be tackled. Difficulties in finding alternative out-of-home care are being encountered with regards to children of all ages and not only if the child has particular difficulties or needs such as is the case with children who have behaviour problems or a disability. This renders CPS work increasingly problematic, while also decreasing the effectiveness of the unit’s interventions. Above all, children who urgently require protection are being left unprotected.

In addition, we strongly believe that a National Child Protection Policy needs to be in place so as to set clearly the responsibility of all professionals in the protection of children, delineating the roles of all those involved in the Child Protection System. Above all, the review and
upgrading of the current legislation concerning abused children needs to be undertaken, and Aġenzija Appoġġ binds itself to advocate and contribute to such legal changes required.
Social Paediatrics

Objectives of the Service

The Mater Dei Paediatric Department offers a medical service targeted specifically for children in need. Children qualifying for this service include children being assessed for any form of abuse or those who are at risk of abuse. Children living in foster care or residential care are also included in this service (Figure 20).

The remit of this service includes the following:
• Providing a regular medical clinic at Appoġġ
• Monitoring the health of all children living in residential homes
• Assessing and managing cases of suspected abuse referred from hospital.

Performance Review and Analysis

This service is run by a qualified Paediatrician who works in close liaison with the Social Workers. The Social Workers brief the Doctor about the case and are present for the medical visits at the Appoġġ clinic.
The paediatric assessment and examination will aim to identify the following:
- Any signs of abuse
- Areas of developmental delay
- Behavioural problems
- Medical problems.

<table>
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</tr>
<tr>
<td>No abuse</td>
<td>16</td>
<td>19</td>
<td>22</td>
<td>23</td>
</tr>
<tr>
<td>Physical abuse - no sign but concerns present so cases still being followed up.</td>
<td>24</td>
<td>31</td>
<td>25</td>
<td>32</td>
</tr>
<tr>
<td>Physical abuse - signs present</td>
<td>16</td>
<td>23</td>
<td>21</td>
<td>10</td>
</tr>
<tr>
<td>Neglect</td>
<td>37</td>
<td>54</td>
<td>55</td>
<td>46</td>
</tr>
<tr>
<td>Sexual abuse</td>
<td>8</td>
<td>3</td>
<td>12</td>
<td>7</td>
</tr>
<tr>
<td>Foster care</td>
<td>33</td>
<td>32</td>
<td>44</td>
<td>37</td>
</tr>
<tr>
<td>Other</td>
<td>20</td>
<td>15</td>
<td>20</td>
<td>23</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>184</strong></td>
<td><strong>209</strong></td>
<td><strong>242</strong></td>
<td><strong>220</strong></td>
</tr>
</tbody>
</table>

*Table 7: Breakdown of the main diagnosis for the cases seen, 2006 -2009*

The Paediatrician will then discuss and advise what interventions are needed, attend case conferences and monitor the progress of the child. The Paediatrician liaises with other medical professionals involved in these cases particularly with the Child Guidance Clinic Psychiatrists.

Referrals for medical visits are received from all the teams of Aġenzija Appoġġ although the majority of referrals comes from the Child Protection Services Unit.
Foundation
Social Welfare Services

<table>
<thead>
<tr>
<th>Clinic</th>
<th>Number of cases referred</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2006</td>
</tr>
<tr>
<td>Child Guidance Clinic</td>
<td>11</td>
</tr>
<tr>
<td>CDAU</td>
<td>5</td>
</tr>
<tr>
<td>Speech Theraphy</td>
<td>6</td>
</tr>
<tr>
<td>Ophthalmic Out-patients</td>
<td>2</td>
</tr>
<tr>
<td>ENT Out-patients</td>
<td>2</td>
</tr>
<tr>
<td>PaedSurgical Out-patients</td>
<td>-</td>
</tr>
<tr>
<td>Children’s Out-patients</td>
<td>3</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>29</strong></td>
</tr>
</tbody>
</table>

Table 8: Referrals made to other clinics, 2006-2008

1) Hospital Service

Children admitted to paediatric wards and suspected of having non-accidental injury or children deemed to be at risk are referred to the above-mentioned Paediatrician for further assessment and management. Such cases are also discussed with the hospital Social Workers, and together a decision regarding further management is taken.

<table>
<thead>
<tr>
<th>Physical Abuse:</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Skull fracture</td>
<td>3</td>
<td>3</td>
<td>4</td>
<td>3</td>
</tr>
<tr>
<td>Limb fracture</td>
<td>1</td>
<td>3</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Bruising</td>
<td>1</td>
<td>5</td>
<td>2</td>
<td>6</td>
</tr>
<tr>
<td>Neglect</td>
<td>3</td>
<td>1</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Sexual abuse</td>
<td>1</td>
<td>-</td>
<td>4</td>
<td>7</td>
</tr>
<tr>
<td>At risk</td>
<td>1</td>
<td>-</td>
<td>2</td>
<td>5</td>
</tr>
</tbody>
</table>

Table 9: Types of cases referred from hospital, 2006-2009
2) Residential Home Service

The aim of the service is to provide regular and long-term follow-up of children in care. The fact that the same team reviews the child means that there is better monitoring and observation of the children leading to an improved level of health care.

<table>
<thead>
<tr>
<th>Residential Home</th>
<th>Ages</th>
<th>No. of Children</th>
<th>Paediatrician</th>
</tr>
</thead>
<tbody>
<tr>
<td>Angela House, G’Mangia</td>
<td>3-16</td>
<td>44</td>
<td>Dr Mangion</td>
</tr>
<tr>
<td>St. Rita Home, Tarxien</td>
<td>3-16</td>
<td>14</td>
<td>Dr Mangion</td>
</tr>
<tr>
<td>Ursuline Home, Valletta</td>
<td>3-12</td>
<td>5</td>
<td>Dr Mangion</td>
</tr>
<tr>
<td>St. Joseph Home, Zabbar</td>
<td>3-16</td>
<td>7</td>
<td>Dr Mangion</td>
</tr>
<tr>
<td>Dar Sagra Familija, Zabbar</td>
<td>3-16</td>
<td>12</td>
<td>Dr Mangion</td>
</tr>
<tr>
<td>St. Theresa Home, Zurrieq</td>
<td>3-12</td>
<td>7</td>
<td>Dr Mangion</td>
</tr>
<tr>
<td>Fra Diegu Home, Hamrun</td>
<td>3-13</td>
<td>14</td>
<td>Dr Mangion</td>
</tr>
<tr>
<td>KIDZ, Zejtun</td>
<td>8-14</td>
<td>7</td>
<td>Dr Mangion</td>
</tr>
<tr>
<td>St. Patrick’s Home, Sliema</td>
<td>9-16</td>
<td>30</td>
<td>Dr Mangion</td>
</tr>
<tr>
<td>St. Joseph Home, Sta Venera</td>
<td>9-16</td>
<td>20</td>
<td>Dr Mangion</td>
</tr>
<tr>
<td>Jean Antide Home, Sta Venera</td>
<td>12-18</td>
<td>12</td>
<td>Dr Mangion</td>
</tr>
<tr>
<td>Fejda Home, Sta Venera</td>
<td>12-18</td>
<td>8</td>
<td>Dr Mangion</td>
</tr>
<tr>
<td>Ursuline Creche, Sliema</td>
<td>0-3</td>
<td>35</td>
<td>Dr Muscat Baron</td>
</tr>
</tbody>
</table>

Table 10: List of children’s residential homes in Malta, 2008
The children in the homes are generally healthy especially regarding their physical health. Of far greater concern is the significant number of children with emotional and behavioural problems. In fact, in 2008, 39 children (21% of children in care) attend the Child Guidance Clinic and are on psychiatric medication. Developmental problems and learning difficulties also feature strongly.

<table>
<thead>
<tr>
<th>Condition</th>
<th>Number of children with condition</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADHD</td>
<td>13</td>
</tr>
<tr>
<td>Conduct Disorder</td>
<td>8</td>
</tr>
<tr>
<td>Oppositional Defiant Disorder</td>
<td>2</td>
</tr>
<tr>
<td>Emotional Disturbance</td>
<td>8</td>
</tr>
<tr>
<td>Pervasive Development Disorder</td>
<td>1</td>
</tr>
<tr>
<td>Intellectual Disability with behavioural problems</td>
<td>7</td>
</tr>
</tbody>
</table>

*Table 11: Diagnosis of the 39 children attending Child Guidance Clinic, 2008*

**The Way Forward**

Plans for the future include continuing the education to the medical professionals in order to increase their confidence in recognising and reporting cases of child abuse. We also need to find ways of providing education on parental skills from an early age and opportunity to do this could be though the Well Clinics in the health centres. There is a dire need to have increased availability and accessibility of comprehensive mental health services for children and adolescents. Most of all there is a huge lack of residential services for adolescents, be it normal adolescents with difficult social situations or adolescents with emotional and behavioural problems. This grave issue needs to be seriously addressed and followed-up in the coming years.
Looked after Children & Adoption Services

The amalgamation of these two services, which was initiated in September 2007, has been a major development during the period under review. The reasons behind this merge were multiple and included:

- The fact that most adoption work required warranted Social Workers, precluding newly qualified Social Workers from joining the service
- The Looked After Children team’s experience could be utilised to undertake adoption work more effectively since most children who are adopted, both from local and from international sources, are looked after
- The Looked After Children Social Workers were feeling the weight of the long-term cases they were following and would benefit from some variation in their work
- Many of the situations dealt with by the Looked After Children Social Workers involve a high level of pain and suffering and it was thought that adoption cases would introduce a positive note into these caseloads.

This development has led to a number of Social Workers having mixed caseloads, with cases from Looked After Children and Adoption.
Looked after Children Service

Objectives of the Service

The Looked After Children Service aims to:

1) Provide direct services to children in care by formulating care plans which put them as their focus and help prevent and/or reduce institutionalisation by encouraging them to develop their daily living skills and to participate in activities outside the home.

2) Assist in the re-integration of children into their families if it is in their best interest and where re-integration with the natural family is not possible and it is considered in the child’s best interest, make efforts to find a suitable alternative family to foster or adopt the child according to which is most suitable and legally possible.

Performance Review and Analysis

Figure 21: Cases worked with (case turnover) by the Looked After Children Service, 2001-2009
The Looked After Children case turnover has increased by 20% in 2008 from the previous year and decreased by less than 1% from 2008 to 2009 (Figure 21). Increase in staff and less new cases in 2007 meant that more cases could be taken up in 2008 from the waiting list. However this Service continues to have intensive long-term work due to issues with placements of children which is becoming ever more difficult as the needs of looked after children continue to become ever more complex. This is a result of the fact that the need to keep children within their family environment is becoming better understood and it is only those children who face situations which are not conducive to change are admitted into care. This means that the children who are in care are traumatised and need specialised services which are not always available. Furthermore, the families of looked after children are often hostile towards the services, because their children have been removed from their care, making it more challenging to work with them.
As previously mentioned, the increase in staff and low openings of cases in 2007 meant more take-ups in 2008. The further decrease in the number of closures in 2009 (Figure 23) indicates the increasing long-term nature of cases and that a high number of cases are still being worked with.
The number of referrals made to the service has decreased significantly in 2009 as compared to the previous two years (Figure 24). A possible explanation for this could be that since the Looked After Children Service deals with children in care and the number of referrals in the previous three years was high, indicating a high number of children being admitted into care, the availability of placements decreased in 2008 and 2009. In addition, the need to keep children within their families, whenever possible, continued to be given priority. Better screening and assessment of family situations, as well as the development of services such as the Initial Response Service and other services in the community, may have contributed to prevent admissions into care.

![Figure 25: New cases that started receiving a service by the Looked After Children Service, 2002-2009](image)

In 2008 there was a large increase (by 55%), in the number of new cases as compared to 2007. Once again the increase in staff has allowed for this increase in the number of new cases which could be taken up. Many of these cases were taken from a waiting list, which at the end of 2007 stood at 35 and by the end of 2008 was down to 4.
In 2008, male clients accounted for 54% of all new cases whilst females accounted for 46% of all new clients (Figure 26). In 2008, the predominant age groups of new clients were those under the age of 9. A higher percentage of new female clients were under the age of 5, and between 10 and 14 years, whilst a higher percentage of male clients were aged 5-9 years. In 2009, male clients accounted for 53% of all new cases whilst females accounted for 47% of all new clients. In 2008 the predominant age groups of new clients were those under the age of 9 years, whilst in 2009 it was the under 5 years. In 2009, a higher percentage of new male clients were under the age of 5 years and 10-14 years whilst a higher percentage of new female clients were under the age of 5 years.

<table>
<thead>
<tr>
<th>End of Year</th>
<th>Care Orders</th>
<th>Voluntary</th>
<th>Court Orders</th>
</tr>
</thead>
<tbody>
<tr>
<td>2005</td>
<td>170</td>
<td>194</td>
<td>8</td>
</tr>
<tr>
<td>2006</td>
<td>178</td>
<td>183</td>
<td>8</td>
</tr>
<tr>
<td>2007</td>
<td>178</td>
<td>168</td>
<td>12</td>
</tr>
<tr>
<td>2008</td>
<td>196</td>
<td>172</td>
<td>14</td>
</tr>
<tr>
<td>2009</td>
<td>223</td>
<td>166</td>
<td>14</td>
</tr>
</tbody>
</table>

Table 12: Legal status of children receiving service by the Looked After Children team, 2005-2009
1) Team Composition

The Looked After Children team is made up of:
• 1 Service Area Leader (who also leads the Adoption Service)
• 3 full-time Coordinators
• The equivalent of 10 full-time Social Workers
• 1 Social Worker who works 30 hours a week
• 1 Social Worker who works 20 hours a week

2) Turnover

The staff turnover which the Service previously experienced, has been curbed and many of the members of the team have been there throughout the past three years. This has allowed the establishment of a long-term working relationship with many of the minors on the Looked After Children caseload and their families and significant others. The stability in the team members has also allowed the establishment of a support network within the team which sustains its members and allows individual professional and personal development.

3) Services Provided

Besides the main social work service to looked after children, over the past three years, the Weekend Monitoring Service has returned to this service area and has been re-organised. In fact, it has become a Monitoring Service since its services are no longer being provided exclusively on the weekend. This service area is also responsible for assessing Social Contacts and, where appropriate, matching them with children who need this

<table>
<thead>
<tr>
<th>Type of Residential Placement (End 2009)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Living with parents / relatives</td>
</tr>
<tr>
<td>-------------------------------------</td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

*Table 13: Type of residence of children receiving service by the Looked After Children team, as at end of 2009*
service. Social Contacts are families or individuals who are ready to host children who are in residential care, for short periods lasting up to a weekend to prevent them from remaining within the institution throughout the whole week.

4) Caseload

The Looked After Children Social Workers carry a caseload of 30 cases. This limits the amount of work which the Social Workers can do, especially since they are expected to work for the re-integration of the children with their birth families, which, if at all possible, necessitates in-depth work with these families.

5) Waiting List

The number of cases on the waiting list at the end of 2005 was 30, which was reduced to 4 cases by the end of 2008, meaning that the Service had managed to keep up with allocating the referrals it was receiving. At the same time, it must be kept in mind that the main source of referrals, the Child Protection Service, continued to issue a number of Care Orders and, as soon as these cases are referred to the Looked After Children Service, they have to be allocated. The situation was also affected by the transfer of the cases of unaccompanied minors from the Looked After Children Service to the Organization for the Integration and Welfare of Asylum Seekers (OIWAS) at the end of 2007. Although the Service managed to curb the waiting list during 2008, however, by the end of 2009 the waiting list escalated to 39 cases.

6) Termination of Service

There were 71 cases within the Looked After Children Service which were terminated in 2006; 48 cases were terminated in 2007; 29 cases were terminated in 2008 and 15 cases were terminated in 2009. Although this might be taken as a measure of success – because one of the reasons for closure is re-integration with the birth family – unfortunately a recent trend which has emerged is that children are re-integrated with their family because of a lack
of alternatives and not because it is in their best interest. This leads to a number of cases which no longer fall under the remit of the Looked After Children Service but are still manifesting issues of concern. In a number of situations, the level of risk for the children is too high to close their cases. However, in other cases, a decision is taken to close the cases, even if prematurely, and try to find other services which can offer their support.

7) Training

Throughout the period being evaluated, the members of the team attended a number of training courses, both as identified by the Agency and on their own initiative. This has enhanced the knowledge and skills of the team members who are, in this way, able to provide a more effective service for the persons they deal with on a daily basis.

8) Work on Standards

Between 2006 and 2008, a Working Group was established to review the standards of care provided within residential facilities for minors. The Looked After Children Service Area Leader participated in this Working Group and was able to reflect the perspective of the service. This perspective was essential to make the standards as realistic as possible, while not losing sight of the ideal, which must continue to be aimed for. The Working Group took the Quality4Children Standards as the basis and these standards were adapted to the local scenario. When they are implemented, these standards will guarantee better services for looked after children and their families, based on their needs and ensuring their participation.

9) The Nature of the Work

The period being reviewed has witnessed situations which have sapped the energy of the team and created a prolonged crisis situation. Among these, there have been the closure of a residential home after allegations of abuse and a murder committed by one of the team’s service users. Striving to cope with these situations and
Foundation
Social Welfare Services

provide support to minors who have been traumatised in the process, has proven to be very challenging. It is only through an exceptional effort and the support of the team, both external and internal, that the Social Workers have managed to continue making appropriate interventions. Besides these crises, the situations of children who need to be removed from their families are very complicated, with a high incidence of drug abuse and mental health in the families, and also with a high amount of hostility and non-cooperation.

As one can see from the above, the long-term nature of the service is reflected in the analysis of its operations. The service has to be analysed in terms of the advantages and disadvantages it causes for the minors it works with.

1) Commonwealth Evaluation

Between 2007 and 2008, an external analysis of the Looked After Children Service was funded by Commonwealth and undertaken by British experts. The whole team participated in providing feedback and the results indicated a number of strengths in the Service, as well as a number of areas where more development was necessary. The one area where the Service excelled was in facilitating contact between looked after children and their siblings. This was one area which had been worked on extensively by all the team and it was very positive that these efforts were recognised by the evaluation. It also stressed that this aspect of the Service’s interventions is highly beneficial for, and appreciated by, the children.

2) Impact of Services

Unfortunately, the Service is dealing with children who face a multitude of problems, which, for a number of them, are exacerbated because they are living in residential care. Their life circumstances, combined with the high caseloads, make effective social work intervention difficult to achieve, especially if the measure of success is change. The team members have learnt to establish objectives which are challenging but attainable. However, when compared with
the level of need which most of these minors face, the impact they have on these minors’ lives is sometimes minimal. At the same time, the stability of the team has allowed a number of these minors to form a meaningful relationship with their Social Workers, something which hopefully will help them develop resilience.

3) Breakdown of Placements

A major impact on the Looked After Children Service is the breakdown of placements and the lack of alternatives which meet the needs of the minors in these situations. In particular, there are no appropriate placements which meet the needs of minors who have drug addiction problems, mental health issues, very challenging behaviour and/or who do not wish to remain in care. In a number of these situations, especially those involving adolescents, there has been no alternative other than to allow them to live with their family, when this is willing to accommodate them. This happens despite the difficulties which, in some cases, cause a high level of risk. The implications of these situations are considerable for all concerned and put minors in danger, as well as leaving the Social Workers with responsibilities that are difficult to carry.

4) Lack of Resources

Despite the investment to improve services in this field, the demand far exceeds the supply in a number of areas, while in others the limited resources prevent a diversification of services to meet the special needs of looked after children. This leaves a heavy impact on all concerned, primarily the minors themselves. A number of them have to struggle to have any needs met, apart from the basic ones. Support services (including psychological intervention, High Support Services, transport to attend extra-curricular activities, and community services amongst others) are restricted, and the situation is worse for those minors who are not protected by a care order and even worse for those of these who live in residential care. This means that the Looked After Children team is often struggling against all odds to ensure that an appropriate care plan for each child is formulated and implemented.
5) Establishing Network Systems

The Looked After Children Service cannot exist isolated from the multitude of persons involved in every minor’s life, both professional and not. For this reason, it is essential that the Looked After Children Social Workers liaise with each child’s network to create a system which supports the child as much as possible. This raises a number of difficulties and challenges, which have to be dealt with by the Looked After Children Service as part of their everyday interventions. At the same time, these issues linked to dynamics take up a lot of the team’s energy and sometimes, unfortunately, detract from direct interventions with the children. Very often, the process of networking necessitates collaboration with people with very different perspectives, both professionals and family members. In this case, reaching a compromise which safeguards the best interests of the children becomes even more difficult, especially in a context where the lack of resources restricts flexibility. Besides a number of changes within the services provided for looked after children, which can be considered an on-going feature of this scenario, in 2007 the KIDs programme started operating and the networking requirements of the Looked After Children Service were expanded to included establishing healthy relationships with this new service.

Way Forward

One of the salient features of the Looked After Children Service is the long-term nature of the cases, which sometimes precludes changes from taking place. One of the reasons is the high workload which working with long-term cases of looked after children brings with it. Another reason is that the long-term nature of the cases and their difficulty, sometimes leads to a lack of movement, with changes being difficult to accomplish and a number of children being stuck in care. Thus it is a challenge to continue to identify a way forward and work constantly towards improving the service. Some of the aspects of the way forward are the following:
1) Consolidation

After a period of turbulence in the service and changes at all levels, the need for consolidation has been felt throughout the period under evaluation. The decrease in turnover has facilitated this process which, however, was once again interrupted by the introduction of the Adoption Service within the remit of the same service. However, now that the amalgamation of these two services has taken place, consolidating the services for looked after children needs to continue. The consolidation which is being strived for by the team is then reflected in stability for the children on the caseload, something which can contribute to improved outcomes for them.

The prevention of staff turnover needs to be constantly balanced with the team members’ needs for development and career progression. With this in mind, the team members need to be encouraged to put their experience at the disposal of looked after children, at least until it is time for them to move on. This needs to be done through support and training, which has to be on-going. At the same time, the team members need to continue to feel appreciated and that their work is worthwhile, something which they might lose sight of, given the difficulty of the cases they work with.

2) Workload

The current caseload and other work required from the Looked After Children Service Social Workers impacts negatively on the quality of work possible with this client group. In fact, the Service is often criticised for not working enough with the families and for not meeting the children more often, as well as finding difficulty with meeting the very strict deadlines they face. To be more effective in its interventions, the Looked After Children Service is requesting that the caseload is reduced. However, to date, there is no evidence which can be produced to substantiate this request. The Commonwealth Evaluation Report of the Looked After Children Service, which was referred to earlier on, refers to this issue by recommending that Aġenzija...
Appoġġ carries out a time limited pilot study exploring the potential of smaller and more intensively managed caseloads. Hence, the way forward would be to conduct a pilot study whereby a number of Social Workers have their caseload reduced by half to 15, and their interventions evaluated over a six-month period, at least.

3) Creating Awareness

The issues which are faced on a daily basis by the Looked After Children Service have been brought to light throughout this report. The next step is to continue to bring these issues to the attention of policy makers, for concrete action to be taken both as regards the investment of resources as well as the safeguarding of children’s rights through appropriate legislation.

4) Working towards Positive Outcomes

It is our duty to continuously strive to achieve the best outcomes possible for looked after children. In this process, we need to continue to evaluate what will help these children achieve these outcomes. This implies an on-going evaluation of such issues as contact with birth families, how this impacts on the children and how best to manage it to ensure that the children derive maximum benefits from it. It also implies exploring what other services are necessary to accommodate the needs of looked after children, particularly those whose needs are not met by the existing facilities. The process also necessitates evaluating the contribution of support services to individual children and providing feedback to enhance this contribution.
Adoption Service

Objectives of the Service

The objective of the Adoption Service is to find suitable alternative families for children who, for some reason or other, cannot live with their natural parent/s. It assists prospective adoptive parents who apply for local or inter-country adoptions to adopt a child and/or children needing an adoptive family. The Adoption Service within Aġenzija Appoġġ offers counselling, information, training / preparation through group meetings for prospective adoptive parents, and assessments of the prospective adoptive parents. Post-adoption work and also tracing of natural parents of adopted adults, is carried out with adopted persons. In assessing the applicants for suitability, the Adoption Services are advised by the Adoption Board. The Adoption Services Social Workers also work in partnership with the adoptive parents to ensure the best child placement possible. Furthermore, the Social Workers liaise with other services from where children and their biological parents are being referred. If the biological family needs support throughout and/or after the adoption process, the responsibility of supporting the biological family also falls within the Adoption Service.

The aims of Adoption Service are to:
- find suitable alternative families for children who, for some reason or other, cannot live with their natural parent/s
- train prospective adoptive parents, who apply for local or inter-country adoptions
- assess and recommend prospective adoptive parents in the adoption process
- assist in the preparation of the necessary adoption documentation
- carry out post-adoption reports.

But, above all this, one has to keep in mind that the whole process is targeted towards the best interest of the children that will be placed with prospective adopting parents. The children are the primary consideration.
The Adoption Service team is made up of:
- 1 Service Area Leader (who also leads the Court and Supervised Access Visits (SAV) Services)
- 1 Coordinator
- 2 full-time Social Workers
- 1 Social Worker who works 30 hours per week
- 1 Social worker who works 10 hours per week

In August 2007, the official handing over of the service from the Department of Social Welfare Standards to Aġenzija Appoġġ started off, taking approximately 4 months to be transferred completely. In January 2008 the caseload responsibility of the Adoption Service was delegated to Aġenzija Appoġġ. However, the Department for Social Welfare Standards remained as an authority over the Adoption Service.

By January 2008, the Adoption Services were part of the Looked After Children Services, where both units worked in collaboration with each other. The Looked After Children Service’s Service Area Leader was also responsible for the running of the Adoption Service and for staff supervision. Apart from the Coordinator, the Adoption Service was also made up of four Social Workers most of whose working hours were shared between the Looked After Children and the Adoption Services.

Aġenzija Appoġġ is still not yet accredited because of the legal loopholes existing within the Adoption Administration Act (2008). Both Aġenzija Appoġġ and the Department for Social Welfare Standards forwarded their recommendations to the Minister so that the necessary law amendments concerning accreditation issues and other matters take place. In the meantime, the Department for Social Welfare Standards started working on the accreditation criteria and procedures. A committee on Adoption Services Standards was also set up by the Department for Social Welfare Standards. The Appoġġ Children’s Services Manager and the Adoption Services Coordinator were appointed as two members within this committee.
Throughout its functions, the Adoption Service went through a number of changes and challenges. The change in adoption laws in 2008 split up adoption cases in two categories, namely old and new law cases. This system was not being accepted by all entities involved. However, all attempts to clarify this matter with both local and foreign entities led to a better understanding of the system. There were also a number of changes to the Adoption Board with the first taking place in 2008 when the Board was first set up instead of the Adoption Panel. The Adoption Board was set up with a couple of months of delay, and its term valid till April 2010. During this period, the Adoption Board brought about new requirements. Every time there was a change in the Board’s members, there was a delay in the member’s re-appointment and this created a backlog of cases that had to be seen by the Adoption Board.

Other challenging matters that the Adoption Service faced included issues with individual countries such as:
• Bulgaria’s resistance to cooperate on children’s medical reports
• Pakistan’s contact was arrested on forging of documents
• Pakistan’s forging of children medical reports
• Russian hosted children sent back to Russia after a number of years living in Malta and the only hope of re-unification with Maltese families was through adoption
• Russian authorities requesting a bilateral agreement which resulted in conflict of legal implications
• Ethiopia and Cambodia opting out single applicants
• Prospective adoptive parents waiting for years to be matched with a child from Albania
• Cambodia changed laws while couples were in process of adopting children
• In June 2008, a Court case was filed by a married couple challenging the constitutionality of Civil Code provisions (as amended by the Act of 2008) and decided in favour of the applicants. In view of this, the three year marriage period required to adopt had to be removed. This process is still not finalised.
1) Nature of the Work

Amongst other daily issues, these following matters were being dealt with by the Adoption team:

- The Adoption Services Coordinator and the Central Authority Legal Officer visited Bulgaria in March 2008 to discuss the issues arising from the medical report procedure.
- Pakistan cases that had already started the procedure to adopt from Pakistan have been supported to finalise their adoption before Pakistan Adoptions were completely closed.
- Assessments of Maltese families that were hosting Russian children were given priority with the hope that the children are adopted by these same families.
- Russian agreement discussions and negotiations with various entities are still taking place.
- As for countries not allowing singles to adopt, any single applicant is being informed immediately.
- Attempts to contact Albanian authorities took place and the Albanian contact recognised by the Maltese Central Authority to act on behalf of the Maltese applicants was re-appointed in 2010.
- Monitoring of Cambodia cases was ongoing.

2) Positive Experiences

The Adoption team has also been through other positive experiences. These experiences include:

- Reflection Day with Looked After Children Service (December 2008) – the Adoption team had the opportunity to reflect on the positive outcomes and experiences of individual cases.
- Unit Day (September 2009) – the Unit Day was facilitated by the Service Area Leader of Looked After Children and Adoption Services. The team had the opportunity to revise the Prospective Adoptive Parents’ Preparatory Sessions and their content.
- New agreement with Slovakia – this agreement allows 7 applications for Slovak adoptions.
Performance Review and Analysis

In 2009, the Appożg Adoption Service received a total of 107 enquiries, of which 86 resulted in applications. 5 Preparatory Courses for Prospective Adoptive Parents were held and 47 Home Study Reports were completed during the same period. 34 inter-country adoptions took place and the Service was involved in 7 local adoptions. The 7 local adoptions include the husband or wife being the biological parent and the spouse adopting the husband’s or wife’s child. However, not all of these types of adoptions make contact with the Adoption Services. 200 post-adoptions reports were completed for 223 children who were living in 171 families. All this work was taking place against a backdrop of familiarisation with the service, identifying areas which required either development or change, and the new Adoption legislation. The latter came into effect in May 2008 and necessitated a change in certain procedures, particularly the functioning of the Adoption Panel, which became the Adoption Board.

Figure 27: Inter-country adoptions between January and December 2008
By 2009 the team members became more familiar with the procedures and better equipped to apply them to the different situations they were facing. In the process, collaborative relationships were developed with the different bodies involved in the process including the Maltese Central Authority, the Central Visa Unit and foreign adoption organisations. The team was able to look forward to continue with the development of the service in a positive manner and by looking ahead.

**Way Forward**

The way forward for the Adoption Service envisages creative ways on how to better meet the needs of the service users, both children and adults. The team aims at reaching more adoptive families who find themselves in difficulties. It is also aiming at focusing more on the supportive element during and after the adoption process since all team members have become more familiar with procedures and less time is being spent on policies and procedures and their familiarity. Another aspect which the team is aiming at is revision of policies and procedures mainly that of course content.
Monitoring Service

Objectives of the Service

The Appoġġ Monitoring Service falls under the Looked After Children Service. In 2007, the Monitoring Service was transferred back from the Agency’s Court Services to the Looked After Children Service. There was also a change in the name of the service, from Weekend Monitoring Service to Monitoring Service. Prior to this change, the service was offered only during the weekend. However, as time went by, the need was felt to cater also for those children who are at home during the week.

The service is run by a Coordinator and the work is supervised by the Service Area Leader. Between 2006 and 2008, there was a high staff turnover. In 2006, there were seven monitoring workers, in 2007 there were 5 workers (two of whom were new workers) and in 2008 there were 4 workers (one of whom was new). The workers, who each provide the service for a few hours a week, all receive monthly supervision as well as attend meetings when necessary.

Performance Review and Analysis

The aim of the service is to monitor minors at home. The monitoring worker visits the minors, mostly at their home, and monitors the home environment and the relationship between the minor and the other family members. This service facilitates the re-integration of looked after children with their birth families and also, in other cases, tries to ensure the safety of the children, supplementing the assessments being made by the Social Workers.

Each case entails an introductory meeting, a monitoring visit per week (or as required), a report for every session held, as well as supervision every month. There is also an on-call service which is available to support the monitoring workers mostly after office hours and during the weekends.
1) Referrals

Cases are mostly referred to the Appoģ Monitoring Service by the Looked After children Service, Child Protection Service and Court Services. A small amount of generic cases previously referred to the Child Protection Service, started being followed by the Appoģ Generic Service.

2) Cases being followed

In 2008, 15 cases were being followed.

<table>
<thead>
<tr>
<th>Number of cases</th>
<th>Referring Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Appoģ Looked After Children</td>
</tr>
<tr>
<td>2</td>
<td>Appoģ Courts Services</td>
</tr>
<tr>
<td>6</td>
<td>Appoģ Child Protection Service</td>
</tr>
</tbody>
</table>

Table 14: Number of cases by referring service, 2008

In 2009, 19 cases were being followed, 18 of which took place in Malta whereas one took place in Gozo. Table 15 shows a breakdown of the cases followed in 2009:

<table>
<thead>
<tr>
<th>Number of cases</th>
<th>Referring Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>12</td>
<td>Appoģ Looked After Children</td>
</tr>
<tr>
<td>1</td>
<td>Appoģ Courts Services</td>
</tr>
<tr>
<td>6</td>
<td>Appoģ Child Protection Service</td>
</tr>
</tbody>
</table>

Table 15: Number of cases by referring service, 2009

<table>
<thead>
<tr>
<th>Number of cases</th>
<th>Referring Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
<td>Appoģ Looked After Children</td>
</tr>
<tr>
<td>12</td>
<td>Appoģ Child Protection Service</td>
</tr>
<tr>
<td>2</td>
<td>Others</td>
</tr>
</tbody>
</table>

Table 16: Monitoring Service waiting list as at end 2009
Way Forward

The main aim is to decrease the waiting list of the Monitoring Service by allocating more cases. The need to re-discuss and re-evaluate the need for the service over a period of time is also being felt since there might be the need to either increase the monitoring or to decrease it, as the cases necessitate.
Fostering Service

Objectives of the Service

The overall aim of the service is to recruit, train, assess, match, monitor, and support foster carers. In the period 2006-2009 the Fostering team, apart from meeting these basic service provisions, established a number of targets that needed to be reached by the end of 2009. These were:

- The Foster Care Legislation
- The Quality 4 Children Project to establish European Out-of-Home Standards
- The establishment of NFCAM (National Foster Care Association Malta)
- The IFCO Conference.

The Fostering team is made up of:

- 1 Service Area Leader
- 1 Full-time Coordinator
- 6 Full-time Social Workers
- 1 Social Worker who works 30 hours a week.

Performance Review and Analysis

Figure 28: Cases worked with (case turnover) by the Fostering Service, 2000-2009
The Appoġġ Fostering Service has been relatively stable between the years of 2006 and 2007 and increased to 160 cases in 2008. The number of foster carers increased by 3% in 2008 over the 2.5% decrease experienced in 2007. There was a sharp increase of 17% in foster carers in 2009 over 2008. This increase may continue to be due to the move towards fostering versus institutionalisation of very young children or babies.

When looking in more detail at the total number of foster carers (Figure 29), we notice a decrease of 3% in the number of non-related foster carers within the service in 2008. On the other hand, the number of kinship foster carers increased by 14% in 2008 over 2007. In 2009, there was a substantial increase in the number of non-related foster carers within the service in 2009. On the other hand, the number of kinship foster carers decreased in 2009 over 2008.

In recent years, there has been an increase in the number of referrals from families where there are drug abuse issues. In such families, other family members, such as the grandparents, often take care of the children and become kinship foster carers thus increasing the number of kinship foster carers within this service.
During 2009, there were 195 children in foster care; 53% of these children were girls whilst 47% were boys (Figure 30).

1) Recruitment of Foster Carers

i) Review

During the period under review Aġenzija Appoġġ took part in a number of media productions to promote foster care to the general public, in collaboration with the FSWS Marketing team. This was done with the involvement of a number of foster carers. These included television and radio programmes, articles in newspapers and magazines, information on the Agency website, email shots and talks in various centres around Malta and Gozo. An intensive foster carers’ recruitment campaign takes place at least once a year, with other regular short interventions repeated during the year. During the period under review, the number of inquiry calls kept increasing. Several participants in the pre-service training programmes mentioned specific media programmes as the trigger to their interest in becoming prospective foster carers.
ii) Inquiry Calls

<table>
<thead>
<tr>
<th>Year</th>
<th>Jan</th>
<th>Feb</th>
<th>Mar</th>
<th>Apr</th>
<th>May</th>
<th>Jun</th>
<th>Jul</th>
<th>Aug</th>
<th>Sep</th>
<th>Oct</th>
<th>Nov</th>
<th>Dec</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006</td>
<td>11</td>
<td>4</td>
<td>6</td>
<td>11</td>
<td>1</td>
<td>5</td>
<td>1</td>
<td>10</td>
<td>12</td>
<td>10</td>
<td>17</td>
<td>7</td>
<td>95</td>
</tr>
<tr>
<td>2007</td>
<td>9</td>
<td>5</td>
<td>22</td>
<td>13</td>
<td>11</td>
<td>5</td>
<td>3</td>
<td>5</td>
<td>1</td>
<td>17</td>
<td>11</td>
<td>5</td>
<td>107</td>
</tr>
<tr>
<td>2008</td>
<td>6</td>
<td>6</td>
<td>12</td>
<td>9</td>
<td>-</td>
<td>7</td>
<td>3</td>
<td>7</td>
<td>6</td>
<td>5</td>
<td>6</td>
<td>5</td>
<td>72</td>
</tr>
<tr>
<td>2009</td>
<td>6</td>
<td>10</td>
<td>5</td>
<td>2</td>
<td>5</td>
<td>6</td>
<td>6</td>
<td>4</td>
<td>5</td>
<td>5</td>
<td>3</td>
<td>2</td>
<td>59</td>
</tr>
</tbody>
</table>

*Table 17: Number of inquiries from individuals interested in foster care, 2006-2009*

iii) Analysis

As stated above and from feedback gathered during our initial home visits with prospective foster carers, it resulted that the most effective media used in our awareness campaign was the use of television programmes. Second was the use of radio and third were the articles in newspapers and magazines. What concerns the Fostering team is the lack of continuity. The awareness campaign would be more effective if it is constant and if it involves all the stakeholders especially the inclusion of successful stories of young people who have been fostered themselves.

Table 18 shows the number of families that continued the process of assessment to become foster care families.

<table>
<thead>
<tr>
<th>Year Started Process</th>
<th>Number of Foster Care Families</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006</td>
<td>27</td>
</tr>
<tr>
<td>2007</td>
<td>28</td>
</tr>
<tr>
<td>2008</td>
<td>33</td>
</tr>
<tr>
<td>2009</td>
<td>36</td>
</tr>
</tbody>
</table>

*Table 18: Number of families who started the process to become foster care, 2006-2009*
2) Initial Training

i) Review
Over the years, the Fostering team has made several attempts to update the current training programme called ‘A Challenge to Foster’ by introducing new material relevant to the Maltese context. This training pack is based on the UK experience of care where most of the children are fostered directly from home and not from institutions and thus covers several aspects of foster care. From feedback received from participants, we are confident that the material presented is very challenging and stimulating.

In Malta, the majority of children in need of a foster care placement are initially placed in residential care. The acting-out behaviour of such children is very hard to understand and sometimes one may feel disheartened. Prospective foster carers are being made aware of these realities prior to being given the responsibility of fostering a child. The above-mentioned material is essential material for prospective foster carers to familiarise themselves with and to understand and equip themselves with the skills needed to help these children. The number of training programmes delivered during the past years amounts to 18.

ii) Number of Participants

<table>
<thead>
<tr>
<th>Year</th>
<th>Kinship Foster Care</th>
<th>Non-Related Foster Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006</td>
<td>15</td>
<td>37</td>
</tr>
<tr>
<td>2007</td>
<td>-</td>
<td>61</td>
</tr>
<tr>
<td>2008</td>
<td>24</td>
<td>41</td>
</tr>
<tr>
<td>2009</td>
<td>14</td>
<td>50</td>
</tr>
</tbody>
</table>

Table 19: Number of participants in foster care courses, 2006-2009
iii) Analysis
Although a lot of work was done to update the training material that is being delivered, more investment is needed in new training material for its pre-service training. For example, some of the material on video being used is in English. It would be very beneficial if a local production is done by way of communicating the same material in Maltese. During this period under review, a number of training programmes were also delivered in Gozo and the interest in foster care in the sister island has since been increasing, which indicates that it is beneficial to invest further in this area.

3) Commonwealth Consultancy

i) Review
Between 2007 and 2008, an external analysis of the Looked After Children Service was funded by Commonwealth and undertaken by British experts. Some team members and foster carers participated in providing feedback through interviews and focus groups.

ii) Analysis
It was evident from the results that many foster carers provide a high quality care for very vulnerable children and they spoke highly of the support they received from the Fostering Service Social Workers. They wished to have more contact with the children’s Social Worker and to receive additional training. With regards to therapy, it emerged that very limited access to psychological support was available for the children and their foster carers when the need had arisen. The experts recommended a review of services available to support foster carers, particularly in light of the complex needs of the children they foster. Moreover, this measure is crucial if foster carers are to be retained within the service and are to continue providing consistent care for the vulnerable children placed with them.
4) Assessments and the new Fostering Board/Board of Appeal

i) Review
The number of assessments carried out during the years 2006-2009 amounted to 13 kinship and while 23 to non-related prospective foster care families. This figure compares well when compared to that of previous years. With the introduction of the Foster Care Act in 2007, a new Fostering Board and a Board of Appeal had to be established. Both Boards were set up by the then Ministry of the Family and Social Solidarity. Due to a very lengthy exercise in accordance with the transitory provisions under the Fostering Act which necessitates that it needs to approve all foster carers, the Fostering Board approved only two new families in 2008. This exercise ensured the approval of each foster care family in accordance with the new legislation and provided all approved foster carers with the necessary official documentation. New assessments were temporarily put on hold in order to carry out this work.

ii) Number of Participants in Assessments

<table>
<thead>
<tr>
<th>Year</th>
<th>Kinship Foster Care</th>
<th>Non-Related Foster Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006</td>
<td>20</td>
<td>16</td>
</tr>
<tr>
<td>2007</td>
<td>3</td>
<td>26</td>
</tr>
<tr>
<td>2008</td>
<td>11</td>
<td>15</td>
</tr>
<tr>
<td>2009</td>
<td>13</td>
<td>23</td>
</tr>
</tbody>
</table>

Table 20: Number of assessed foster carers, 2006-2009

(Note: The above statistics include families whose assessment commenced at the end of the year and continued through following year).
iii) Analysis
Apart from the difficulties stated above which were of a temporary nature, the most difficult process in foster care is within the assessment process itself. This is because the team as always has to make sure that the families or individuals being assessed meet the required standards. Now with the introduction of the new legislations this procedure has been more highlighted so that the safety of children being placed in foster care is ensured.

Social Workers are sometimes faced with de facto situations and have to evaluate very complicated situations. Most of these cases are related to kinship foster care: where a child is already placed with a family member who was not previously matched, trained and assessed. Some cases were even mandated by Court. Most of these carers are grandparents who are in their seventies and are looking after toddlers or teenagers who are not easy to cope with. The Agency has developed specific training programmes for next-of-kin foster carers, since their needs are different from those of unrelated foster carers. In addition, professional training for the Social Workers working on assessments is of utmost importance.

5) Matching
i) Review
Members of the Fostering team are constantly being requested to provide foster placements to children who need a secure family base. The average amount of placements requested and awaiting matching has always stood at an average of 60. These requests were done on behalf of babies, to five year olds, going up to young adolescents. Some needed short-term placements, others needed long-term care. Although the Fostering team kept its momentum in recruiting new foster carers, it still falls short in meeting this demand. Thus when one comes to match a family with a child in need of a placement, it can be very difficult. A significant success we have had over these past few years is that we managed to place a significant number of babies in foster care. During the period under review, 27 babies were placed into foster care.
With the necessary financial and human resources, the supply of foster care families could meet the demand of children waiting to go into foster care. This target could be achieved within the next few couple of years. Nowadays all over Europe, the target is to place babies in foster care. Many families do not choose to become foster carers due to financial difficulties and therefore a review of the Child in Care Benefit would increase the possibility of more potential foster carers.

### Monitoring, Ongoing Training, & Support

#### Review

In the yearly Operational Plan, each Social Worker within the Fostering team plans a maximum time to supervising the foster carers. Unfortunately, the time allocated to provide each family with the support it needs is quite restricted. Foster care families have the chance to meet their Social Worker up to 14 times a year during home visits. Providing each foster care family with more support and more ongoing training would be indirectly meeting the needs of the fostered child and thus safeguarding the child’s placement.

#### Analysis

To provide adequate supervision to our foster carers the emphasis has to be on training and even financial support. Over these years, through contacts established with IFCO and BAAF (British Association for Adoption and Fostering), Aġenzija Appoġġ has managed to provide some training such as the IFCO international conference held in

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of babies</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006</td>
<td>6</td>
</tr>
<tr>
<td>2007</td>
<td>7</td>
</tr>
<tr>
<td>2008</td>
<td>7</td>
</tr>
<tr>
<td>2009</td>
<td>6</td>
</tr>
</tbody>
</table>

Table 21: Number of babies placed in foster care, 2006-2009
November 2007. With regards to training a proposal that is being put forward in this analysis is that an ongoing training plan is formulated around the Quality 4 Children standards. These standards will be presented later on in this document.

7) The Foster Care Legislation

i) Review
During this period under review, the Ministry for Social Policy (previously known as the Ministry for the Family and Social Solidarity) have worked hard to formulate the Foster Care Act. The consultation with all the stakeholders, including the Appoqg Management team, the Fostering Service as well as foster carers, was essential as it provided the Ministry with the necessary feedback on every aspect of foster care. A number of meetings were held between the foster carers and a representative from the Ministry. NFCAM also had its own meetings with Ministry representatives and gave its contribution towards the legislation. The Act encapsulates the rights of children in foster care, the protection of foster carers, ongoing training to both staff and the right of foster carers to have access to information about the child in their care. This legislation was approved by Parliament in November 2007.

Following the enactment of the Foster Care Act 2007, as the designated agency, Appoqg applied for the accreditation to assess foster carers with the Department for Social Welfare Standards, which accreditation is still pending.

ii) Analysis
The enactment of this Act by Parliament impinges on the existing service provision since it dictates a high level of quality care and practice. At present each Social Worker within the Fostering team has a caseload of 25 families. These include initial cases, assessments and approved foster carers. This means that regular monitoring is very difficult to carry out if the caseload remains so high. The Act also states that the accredited agency must provide its workers and foster carers with ongoing training. Upon accreditation, Appoqg needs additional financial resource to substantiate what is required at law in relation to the
training needs of foster carers. However, irrespective of what is required by the new legislation, the Agency understands that it is crucial to support foster carers, particularly in light of the complex needs of the children they care for.

8) The Quality 4 Children (Q4C) Project

i) Review
The Quality 4 Children Project was initiated in 2003. Its aim was to establish Out-of-Home Care Standards for children and young people living either in foster care or residential care. Three major worldwide child organisations piloted this project. These were IFCO, Fédération Internationale des Communautés Educatives (FICE) and SOS Villages. The Service Area Leader of the Fostering Service within Agenzija Appoġġ, who is also an IFCO member, was appointed by the then Ministry for the Family and Social Solidarity to represent Malta on this project. 32 countries from all over Europe participated. The method of storytelling was used to collect data which served as the basis to establish these standards. In June 2006, a document was finalised and was presented in Brussels at the European Parliament for it to be endorsed as an official document. This document was a point of reference for our foster care legislation and is also being used in establishing our local Out-of-Home Care Standards.

ii) Analysis
The creation of these standards is a quality assurance for children and young people in foster care. Concerns will arise in their implementation. Agenzija Appoġġ and foster carers need to be sustained in meeting what is being proposed by these standards. For example, standard 4 states that “where possible siblings are to be cared for together.” With the ever increasing financial demands on families today, the Child in Care Benefit needs to be reviewed for foster carers to be able to actualise such a standard. The request by natural parents to place siblings together in foster care is on the increase. This implies that the demand to recruit new foster carers is increasing. More frequent intensive campaigns would serve to promote and boost foster care thus enabling the Agency to reach this goal.
9) NFCAM – National Foster Care Organisation Malta

i) Review
In 2006, the National Foster Care Organisation Malta was established and launched. Appogg Social Workers worked hard with the foster carers in establishing the NFCAM statute, plan a way forward for the Association, established contacts with foreign agencies, helped to collect funds from sponsors to maintain the administration, and create the quarterly Newsletter to inform members of its activities. The aim of this Association is to work with all involved in fostering in order to achieve the best outcomes for children and young people. NFCAM strives to achieve better living conditions for children in residential care by working in close collaboration with the Fostering Service within Appogg. NFCAM also supports Maltese foster carers encouraging the families to share experiences and ideas for the full benefit of the children in their care. Since its creation, this Association has managed to organise several activities for its members such as training, the IFCO Conference, media awareness, meetings with Heads of the State such as the President of Malta and the Archbishop. NFCAM has also managed to create its own website and publishes its
quarterly Newsletter. The most significant contribution that the association has given was the chance to share his views and ideas during the process of formulation of the Foster Care Act and the National Out-of-Home Child Care Standards. Such close collaboration and networking safeguards the interest of the looked after children by ensuring a national standardised out-of-home child care.

ii) Analysis
Unfortunately, not all approved foster carers form part of this Association. This is a very disappointing issue that needs to be tackled over the years to come. The association needs to work out its own strategy to promote its ideas amongst foster carers and others interested in this cause in order increase its membership. The Association also works hand in hand with the AppoGG in raising the profile of foster carers, in recruitment campaigns and in supporting foster carers in the care provision.

10) IFCO – Conference

i) Review
In November 2007, AppoGG and NFCAM, in close collaboration with the IFCO Board, managed to organise a world renowned conference on the subject of foster care. The contacts established over the years by the Service Area Leader proved beneficial since Malta was accepted as the next venue to organise the conference during a world IFCO conference in New Zealand that same year. The number of participants at the conference was over 300 people from more than 50 countries. Apart from formal lectures and workshops presented, the organising team also organised a number of social events where participants could relax and appreciate the beauty of Malta by day and night. These included a night harbour cruise and a walk through Mdina.
ii) Analysis
This experience provided many foster carers and Social Workers with the opportunity to taste the good and positive experience of training. The foster care team worked hard to make sure that all foster carers were sponsored and could attend the conference. Although only half of the foster carers managed to attend, feedback given from the same carers indicated that it was an enriching experience. They appreciated the chance to share their life experiences with foster carers from other countries and they gained courage to continue their endeavour.
Way Forward

From the review and analysis documented above, it is very evident that a lot of work was done over these years. These achievements were part of a plan formulated in 1996. The way forward is for Aġenzija Appoġġ to formulate a short-term and a long-term strategic plan including the ideas proposed in the analysis sections of this document. The main proposals include the:

- Development of a new pre-service training including as of institutionalisation and refugees
- Ongoing training based on our National out-of-home Child Care Standards
- Increase in the Child in Care Benefit
- Support and training to children of foster carers
- A rigorous awareness campaign and increase in staff within the Foster Care team.

As the designated agency, Aġenzija Appoġġ will be acting and implementing on the Department for Social Welfare Standards’ recommendations to get the accreditation to assess foster carers. All of these measures would attribute to retain foster carers within the service so that they continue to provide a high quality care for very vulnerable children. Aġenzija Appoġġ strongly believes that fostering is the way forward. The Agency will continue to strive to work hand in hand with the State and other major stakeholders to increase the existing pool of foster carers with the aim of placing looked after children directly into foster care and moving a considerable number of children from residential care into foster care.
High Support Service

The Appoġġ High Support Service (HSS) was set up in June 2002. The service provides one-to-one support to children living out of home, are under a Care Order, and require more in-depth intervention due to the challenging behaviour which they present or because of special needs. Since 2005, this service has been extended to provide respite for foster carers who have children with challenging behaviour and who are also protected by a Care Order. The majority of cases are of long duration.

The age span of children using the service varies from 1 to 17 years and is delivered as part of their care plan. The service is only imparted upon the recommendation of the Children and Young Person’s Advisory Board endorsed by the responsible Minister for Social Policy. Since the beginning of the project, the service has been funded by the Ministry for Social Policy, then known as the Ministry for Family and Social Solidarity.

Objectives of the Service

The service helps by sustaining the children through a High Support Programme and assists them to integrate within the Residential Home or an alternative place of residence, engage in meaningful activities and avoid, to a large extent, entry into psychiatric facility. Other aims of the service are:

- To offer a needs-led service for specific children and young adolescents who are service users of the Appoġġ Looked After Children Service
- To support the children to integrate and function positively as part of their ‘family group’ and to assist them in developing skills which are appropriate and acceptable within a family
- To work hand in hand with Head of Care/Head of Unit or care-providers and liaise with various professionals, including the child’s key Social Worker so as to meet the child’s various needs in an integrated manner.
• To provide stimulating activities (educational / play) according to each children’s individual needs, interests and abilities and accompany them when necessary

• To assist and support the children in developing competence and independence, by learning general life skills, appropriate to the age and ability of the children.

During the period 2006-2009, the HSS Service Area Leader (SAL) and Coordinator worked on a number of targets which were reached by the end of 2009. These were:

• having clear guidance and procedures for the staff
• improving communication with the Church Residential Facilities
• providing clear lines of accountability
• ensuring the presence of suitable and better qualified personnel to care for the children
• better management of human resources
• training for staff
• ensuring the attendance of the Support Workers for supervision sessions
• providing hands-on supervision
• networking with major stakeholders
• staff retention and prevention of burnout
• restructuring and on-call system
• vigilant monitoring of the waiting list
• constant review of the allocated budget.

Performance Review and Analysis

The 4 years under review were marked with a deluge of new challenges and changes for the HSS. The year 2006 was characterized with a new leadership for the Service, followed by the introduction of a new HSS Coordinator in 2007. In 2008, the HSS was removed from under the auspices of the Appoġġ Court Services and a new leader was selected to assume the responsibility to lead Court Services. Whilst in HSS, the Leader concurrently took on other responsibilities within other services in the Agency. With the change in leadership, the on-call system of the above-mentioned services was reviewed, and during 2008 it was also removed from the umbrella of Court Services.
to be managed by both the SAL and the Coordinator. In early 2009, a new Coordinator was appointed as the former Coordinator moved to the Adult and Family Services.

Changes were also attributed to the staff as the staff complement continued to decrease. In 2005, the staff had reached a maximum of 23 Support Workers, which were decreased to 20 in 2006 due to decrease in demand and no increase in budget.

In 2007, the staff complement comprised of 13 full-timers and 9 part-timers (equivalent to 16 full-time carers), whilst in 2008 there was an increase in the demand for the Service but staff decreased to 10 full-timers and 6 part-timers (equivalent to 15 full-time carers). By the end of 2008, the complement of the Service was understaffed by 3 full-timers and 3 part-timers, and combined with a surge in the referrals, it was a nearly impossible endeavour to continue operating the Service. As an immediate solution, Aġenzija Appoġġ was recruiting contractees for HSS to replace the full-time and part-time Support Workers who terminated their employment, in order to manage the active cases. Some of the experienced staff moved on to other positions within or outside the Agency which affected the operations of the Service. The delay in the recruitment and replacements process of Support Workers during 2007 and...
2008 was a major challenge that the service had to face. In 2008, due to the new collective agreement, the budget for the HSS increased. However, it had to be utilised for the improved working conditions of the Support Workers and not to meet the increasing exigencies of the services.

The referrals continued to increase around mid-2008. Due to the fact that HSS was faced with a number of service demands which could not be met, a waiting list had to be initiated. In 2008, the demand continued, rising from 7 to 15 children at the beginning of 2009, which translated into an increase from 228 hours to 596 hours of service provision.

1) HSS Hours as Distributed in 2008

![Figure 32: Hours of intervention by residence, 2008](image)

![Figure 33: Percentage of hours of service by home, 2008](image)
2) Recruitment and Support

Most children in care act out their unresolved feelings due to the negative experiences sustained in their young life. This involves in-depth work which concerns behaviour modification as most of the children adopt an aggressive attitude towards others. During the period under review, one of the most difficult processes for the team was to ensure that the new HSS staff being recruited by Aġenzija Appoġġ met the required qualifications standards set by the EU. Selecting suitable Support Workers for children requiring individualized attention was a challenge. HSS Support Workers who worked with teenagers, children suffering from mental health and mental disability problems were at greater risk of rebellious and aggressive behaviour. It proved to be very difficult for the Support Workers to safely restrain such children when they acted out, from harm themselves or others. During the period under review, work injury reports by the Support Workers increased, due to new service users being uncontrollably aggressive and jeopardizing the safety of their Support Workers and their own. In such situations, Appoġġ Management always tried to determine the factors that triggered the aggressive episode and found alternative ways of how to deal with the

<table>
<thead>
<tr>
<th>Children’s Placements</th>
<th>Number of Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>St Rita Home</td>
<td>2</td>
</tr>
<tr>
<td>Angela House</td>
<td>2</td>
</tr>
<tr>
<td>Fostering</td>
<td>2</td>
</tr>
<tr>
<td>Young Persons’ Unit</td>
<td>2</td>
</tr>
<tr>
<td>Sagra Familija</td>
<td>1</td>
</tr>
<tr>
<td>Fra Diegu</td>
<td>4</td>
</tr>
<tr>
<td>St Joseph Home</td>
<td>2</td>
</tr>
</tbody>
</table>

Table 22: Number of children according to placement, 2008

In 2009, children in residential homes, were provided with over 36,000 hours of High Support.
situation. Despite these difficulties, the service continued to be provided by a committed and dedicated staff.

The HSS Leader and Coordinator were continuously aware of the distress and anxiety that this caring can cause, and exploring new strategic ways to enable the Support Workers to deal with such situations was an ongoing exercise. In 2006, the HSS supervision system was strengthened to ensure that all Support Workers receive regular supervision – an important function due to the stress-generating nature of the work and to ensure a high quality service to those who utilize it. Group sessions continued to be organized on a regular basis with the aim of providing the space for the staff to share their difficulties and self-reflection practices. The creation of open relationships encouraged communication with staff about work-related issues, which initiated the necessary synergy to retain staff and prevent burnout.

3) Networking

HSS is a high back-up service to other services, since the work is mainly carried out in the Children’s Residential Homes and with the foster carers. Many attempts were successful by both HSS senior staff and Appoţ Management to ensure the smooth running of the service between HSS Support Workers and professionals such as the House Mothers, Young People’s Unit staff, Children’s Homes Office Ejew Ghandi, as well as with Social Workers from the Appoţ Looked After Children Service. Good relations have also been built with MCAST teachers and students, which have been instrumental in bringing up a good number of applicants expressing their interest to join HSS and sometimes filling the gaps of schedules due to lack of HSS Support Workers.

4) Training

Strategies were combined with training programs to deal with safety issues. The HSS Leader and Coordinator encourage the self-development of Support Workers and seek to help them achieve their full potential. During 2007
and 2008, Support Workers received Non-Violent Crisis Prevention Intervention Training to have more support in dealing with the children in their care. Moreover, a joint training course with the Appoġġ Smartkids Child and Family Centre was organized in 2007, where many of the HSS Support Workers attended this specialized training given by Appoġġ.

5) Procedures and Dual Accountability

The Procedures Manual was drawn up in 2008 where accountability and boundary issues ranked high on the agenda as the issue of dual accountability continued to emerge. Although, the Children’s Homes Office Ejjew Ghandi, acknowledges that the provision of Support Workers by Ħażienzija Appoġġ was a welcomed move, however, the worker’s dual loyalty to Appoġġ and to the Church Residential personnel has always presented management difficulties. The carrying out of care plans are the subject of conflicting views and not always avoidable, especially when the expectations of the residential homes and Ħażienzija Appoġġ are incompatible and there are different assumptions in relation to certain procedures and work practices. A controversial matter is the issue of the Support Worker being attached to a particular child’s residential homes’ personnel challenge this policy as some are of the opinion that the Support Worker should be attached to a particular unit within the residence under the guidance of the House Mother. In addition, the fact that the HSS Support Workers work in Residential Homes who also employ their own carers with different working conditions, creates further difficulties. Such diversifications create a conflicting environment which the senior residential staff has to learn to navigate to prevent any potential escalation of friction between the staff, which is certainly not beneficial to the children in their care.

All of the above complexities are addressed with the HSS Coordinator. The latter’s role through supervision is to identify these issues, clarify them, and sustain the Support Workers by guiding them and assisting them to resolve such dynamics. This is mainly done by trying to reach
the best possible option so that the children’s needs are met whilst taking into consideration and adopting great sensitivity to the exigencies of the residential facilities.

Due to the challenges mentioned above, during 2006, the Children’s Home Office Ejew Ghandi and Aġenzija Appoġġ had discussions with the government to explore the possibility of the service to be handed over to the Church Authorities, but this arrangement did not materialise. In 2006, the Ministry commissioned an Operational Review and Financial Audit of the HSS and Young People’s Unit however the outcome was never discussed. In 2008, the Children’s Home Office Ejew Ghandi put forward a proposal to take over the Service. Aġenzija Appoġġ did not object to this, but no feedback was received on such proposal. Despite these proposals, Aġenzija Appoġġ acknowledges that the Church does appreciate that the administrative burden is carried by the Agency. The Church has also come to the conclusion that it is not in a position to take over all the administration of the service.

6) Budget restrictions and major challenges

In January 2008, the FSWS Board took a decision to increase the rate of payment of the Support Workers on the HSS programme, in order to harmonise them with their counterparts engaged in other FSWS programmes. Moreover, the government directed that all definite contracts are to be changed into indefinite ones. Consequently, in March 2008, after the signing of the FSWS collective agreement, the situation became very difficult as a huge budget shortfall ensued. The additional funds went to address the Support Workers’ working conditions and not to increase human resources and deal with the surge in demand. Since Aġenzija Appoġġ was short of funds, replacements of staff who resigned could not be undertaken. The Children and Young Persons’ Advisory Board assisted by allocating funds from one of their budget votes and some residential homes recruited Support Workers on their own, whilst others turned to Appoġġ for the recruitment process. Such budget restrictions and delays in recruiting staff inflicted a high level of instability
in the service which was causing a chasm in the working relationships and putting at stake the children’s placement. An already exhausted number of residential care givers felt unsupported, and were on the verge of burnout. Some Church residential facilities were very unhappy with the service, as approved recommendations could not be effected and children were put on the waiting list. In addition, children who were placed in care on voluntary basis and whose situations are not less complex than those protected by a Care Order, are not eligible for the service – a policy that goes against all professional judgement as it discriminates against the looked after children on the basis of their legal status. Aġenzija Appoġġ Management had to continually clarify that the service is managed by Aġenzija Appoġġ and funded by the Ministry. This arrangement implied that Aġenzija Appoġġ is refunded by the Ministry after it would have incurred the expenses, and therefore the Agency will not be refunded unless the Terms of Reference set by the government are adhered to.

The operations of the Service were under great duress and work schedules had to be adjusted incessantly to attempt to meet the exigencies of the service, draining the already limited resources. The Support Workers were working longer hours and moved from one residential home to another. Children suffered their instability was reflected in their behaviour and all around, a feeling of helplessness and demoralisation could be felt.

It was only by a great deal of internal support and dedication that the service continued its operations until a level of stability was established for Aġenzija Appoġġ to manage the service. Here one has to acknowledge the sterling work carried by the Church in its residential children’s homes, despite of all the challenges and situations mentioned above.
Way Forward

The Appoġġ High Support Service aims to formulate a yearly ongoing training plan for the staff including Management of Children’s Behaviour, and parental skills programs. The training attempts to develop an ability in all Support Workers to regain full control and confidence in their caring role. When the Support Workers are educated on the causes of the child’s oppositional defiant and non-complaint behaviour, it can be significantly effective in diminishing behavioral problems in the children they care for.

The service should be extended to children with challenging behaviour who are in care on voluntary basis. This will ensure equality of services to children who are in care irrespective of their legal status. This need was reflected in 2008, in the recommendations of the Evaluation Report of the Appoġġ Looked After Children Services, which was funded by the Commonwealth and undertaken by British experts. In addition, upon implementation, the National Standards for Out-of-Home Child Care will ensure that the requirements for the looked after children apply equally to all children living away from home.

Evaluation of the programme needs to be an ongoing process, as this would ensure to the consolidation of those aspects of the Service which are functioning well and achieving the set goals. There should also be changes to ameliorate those aspects which hinder relations with the care givers. A good number of measures have already been undertaken to ensure open communication between Aġenzija Appoġġ and the Church Residential Facilities to better understand each other’s concerns and explore ways of working together. Some of these measures which the service aims at continuing to build on are:

• Church personnel observing and giving feedback in selection process
• On-call system for replacements to ensure that someone is always available
• On the job supervision by the Coordinator and Service Area Leader
Foundation
Social Welfare Services

- More regular visits to the Residential Homes to ensure better communication
- Non-violent Crises Prevention Intervention training programme to all HSS Workers
- Induction training to all new workers to include a session on the role of the Support Workers for which staff in Residential Homes will be invited.

The remit of the High Support Service may be different from the Church Residential Facilities, but the two strive to maintain the same aim – that of providing good quality services to children living in out-of-home care. However, this goes beyond the mere HSS system and therefore additional funding is needed to ensure the upgrading of services.
Court Services

During a separation process, parents may become so absorbed in their own painful emotions that they fail to get any insight into how their behaviour is affecting their children. Children frequently end up being used as pawns between the parents in order to get back at each other. They may also become so involved in supporting one parent against the other, that they lose their role as children and retain grudges that were never theirs in the first place. Parents involved in a high-conflict relationship are often distracted from their roles as parents by the amount of energy and time they consume fighting with each other. At times, they are less emotionally available to the children and less effective as parents.

A pending Court case adds to the tension and frustration to the family going through the separation process, especially when this is a prolonged process. The Family Court was set up in the Maltese Legal System with the main aim of treating family matters in the most sensitive ways. Prior to its enactment, the Ministry for Social Policy and the Ministry for Justice have worked hand in hand to propose a family Court that caters for both the legal and socio-psychological implications that separation cases give rise to. The work of Aġenzija Appoġġ professionals is pivotal in providing a service that targets the latter implication.

Without a doubt, the innocent victims of separation are always the minors. Their whole lives are shattered. They need to start living without one parent, sometimes they need to change their homes, their schools, their friends, their complete way of life, simply because of the fact that their parents cannot live together anymore. They may even feel guilt that they caused their parents’ separation. Our task as professionals is to present the minors’ interest at the Family Court, whilst providing them with a safe environment where to disclose their bottled emotions.
1) Social Work Court Reports

The Appoġġ Court Service was set up in order to assist the Family Court in decisions relating to the care and custody of children. In situations deemed appropriate by the Family Court Judge / Magistrate, a Social Worker is appointed to prepare a Court Report. Following an assessment, the Social Worker prepares a Social Report, putting forward recommendations relating to care and custody, or on other issues as the Family Court may deem appropriate.

The Appoġġ Court Service may also be appointed by the Family Court to investigate allegations of abuse on minors. As part of the investigations, the Court Experts will interview the parents and the children, friends and relatives, as well as other professionals who are or have been into contact with the family. This may include professionals from the Appoġġ Child Protection Service, the Appoġġ Domestic Violence Service, and other service that they might have come in contact with. The Court Expert will then draw up his/her own recommendations, taking into consideration the feedback received from all the parties concerned. The Court Expert acts independently from other professionals, and the final recommendations put forward to the Family Court reflect entirely his/her professional opinion as an expert of the judicial system.

2) Monitoring Service

One of the recommendations which may be put forward may be for the family to continue being monitored in order to be provided with the support necessary and to make sure that the decrees issued by the Family Court are being abided with. Within this Service, the monitoring social work professional, continues to follow the family through home visits, office visits, school visits, access visits and other sessions which may be deemed necessary to continue providing a follow-up on the case. Recommendations, as well as regular updates about the situation, are then put forward to the Judge / Magistrate through a note filed by the Legal Advisor, or by a Court Report if asked for by the Family Court.
3) Psychological Assessments / Therapy

At times, the Family Court may appoint a Psychologist to assess or provide therapy to a party or a child. In this regard, a Psychologist specialising in the area carries out the assessment or necessary therapy and again, the assessment and any other information deemed necessary are put forward to the Family Court through a note filed by the Legal Advisor, or by a Court Report if asked for by the same Court.

4) Family Therapy

The Judge / Magistrate may feel that the individuals within the family in question need to find constructive ways to help each other for the benefit of the minors. Therefore s/he appoints a Family Therapist who, in turn, works at acknowledging the context of the dynamic relationships within the family as an institution; sharing and respecting the different beliefs and perspectives; whilst exploring possible way forward. When a Family Therapist is appointed, the Family Court is still updated about the situation, again through a note by the Legal Advisor and also through a Court Report if the Magistrate / Judge asks for such a report.

The client of the Appoġġ Court Service is basically the Family Court, since the service is provided to aid the Judges/Magistrates reach their final decisions. The various services provided by this Unit are aimed to provide a detailed assessment about the family’s situation to the Family Court. Court Service’s professionals go a step further than that of simply collecting and providing an in-depth assessment. Following the assessment, this Unit’s professionals put forward recommendations based on their knowledge, expertise, and experience, after thorough discussions with their supervisor.

Whilst collecting the necessary information, the professional needs to keep a neutral stance when dealing with any of the parties, whilst taking all the necessary precautions to make sure that the minors within the situation are protected from any type of abuse.
The majority of situations faced by the Court Service’s professionals are those where the couple are undergoing separation proceedings. The Judge / Magistrate may appoint a professional Social Worker to investigate which party shall be entrusted with the care and custody of the minors and/or the other party’s access with the same minors. These are not the sole requests the Family Court requests from the Appoţg Court Service. Other requests may involve, but are not restricted to investigations:
• Regarding physical, sexual, emotional, or neglect
• In situations where one or both parties are accused of substance abuse
• Where one or both parents are certified as suffering from mental health problems, which may create obstacles in the upbringing of the minors
• In situations of domestic violence
• In situations where there are conflicts between parent/s and minor/s.

Objectives of the Service

The Service’s aim and objective is to assist the Family Court Judges / Magistrates in decisions relating to the care and custody and/or access of children in an impartial and objective way. In doing so, the Service aims at:
• Ensuring that the children’s views are made known to the Court through representations made by the appointed Court Expert
• Ensuring that the children’s interests are given paramount importance above all other interests
• Ensuring that children’s rights are safeguarded and promoted during Court proceedings.

Performance Review and Analysis

The case turnover of the Appoţg Court Service seems to be ever on the increase over the last four years. The case turnover has increased by 4.8% in 2008 over 2007, which had already increased by 11.5% over 2006. In 2009 it increased further by 28% over 2008.
In 2007, the service openings (Figure 34) increased by 30% whilst in 2008 it decreased by 37%. In 2009, the service openings decreased by 2% over 2008. This decrease could be since due to waiting list, Court was referring only urgent cases. Court also started referring more cases to private Social Workers. On the other hand, the service closures continued to decline in 2008 (Figure 35) however it increased by 5% in 2009 in comparison to 2008. This indicates that the cases are being worked with on a longer-term basis. Furthermore, due to decrease in referrals, the Service was restructured and started offering
more support in intervention especially in Supervised Access Visits Service. Hence, the Service is focusing more on quality.

Since 2007, there has been a decrease in the number of referrals received with a further 18% decrease noted in 2009 over 2008. As in previous years, this could be the result of cases being allocated and referred to private Social Workers. Clients who could not financially afford to pay for private Social Workers’ reports were being referred to Aġenzija Appoġġ whilst those who could afford were referred to private Social Workers.

1) Re-structuring of Service

Prior to 2008, the Appoġġ Courts Service’s portfolio comprised of Supervised Access Visits, Court Assessments, Court Monitoring, Weekend Monitoring and the High Support Service. All of these services were backed by an on-call system. In 2007, the Weekend Monitoring Service was transferred back from the Looked After Children Service to Court Services. There was also a change in the name of the service, from Weekend Monitoring Service to Monitoring Service. Prior to this change, the service was offered only during the weekend. However, as time went
by, the need was felt to cater also for those children who are at home during the week.

In 2008, there was a change in the leadership and the Court Service’s Coordinator was appointed to lead the Service whilst the previous leader continued to assume the responsibility of the Appoġġ High Support Service, whilst concurrently leading other service in the Agency. In tandem with these developments, with the appointment of a new Service Manager, the Courts Service was removed from under the umbrella of Appoġġ Children’s Services and transferred to the Intake and Socio-Legal Services.

2) On-Call System

The On-Call system has also evolved in 2007. Under the prior system, the Service Area Leader was responsible for the on-call service which, apart from the Court Service, covered also the Supervised Access Visits Service, Weekend Monitoring Service and the High Support Service. However, experience was showing that this was too heavy a burden on the leader since this on-call is faced with crises situations on a daily basis till 22:00 hours, especially during weekends. Since it was thought that the Weekend Monitoring Service was more related to the Looked After Children Service, in 2006 the Monitoring Service was entrusted to the responsibility of the Looked After Children leader.

To alleviate the workload of the Court Services leader, the Court Service on-call system was shared by five workers (including the leader) and was covering the Court Service, Supervised Access Visits Service and High Support Service. Eventually, with the change of leader in 2008, the High Support Service moved with the prior leader and therefore the present on-call system incorporates the Court Service and the Supervised Access Visits Service. It is manned by two workers who, on a roaster basis, help out the Service Area Leader in covering the on-call service from 08:00 to 21:00 from Mondays to Sundays.
3) Establishing and Maintaining Positive Working Relationships with the Court

A number of meetings with the Family Court Judges proved to be a good opportunity for discussion on legal aspects and communication regarding the difficulties encountered by the Agency in providing the services. The Appoġġ Court Service has handed over a list of professionals to the Family Court Judges, appointed as the necessary experts to prepare the Court Reports and/or to carry out the necessary work and present to the same Court, the necessary documentation.

Aġenzija Appoġġ has succeeded in building positive contacts with the Family Court administrators in order to ensure a smooth running between the liaison team and the Court administrators. As a result, the implementation of the common procedures was enacted.

4) Difficulties in Differentiating between the Various Services of Aġenzija Appoġġ

Despite the Agency’s frequent attempts, the Courts and lawyers still do not differentiate between the Agency’s different services. Court does not understand that certain Services have waiting lists whilst some others do not. Furthermore, Court personnel would expect that the Leader of the Appoġġ Court Service is well informed about each and every case where Social Workers have given witness on. Due to the Services’ different aims, each Agency Service has different methods of operation. For example, the Court Service’s Social Workers assess the whole situation in order to gather the information which will have been requested by Court earlier. On the other hand, the Appoġġ Domestic Violence Services Social Workers focus on the alleged victim of domestic violence. Hence, when summoned to witness, the latter can only provide information according to the alleged victim’s version.

5) Court Witnessing

Whilst the need for witnessing is highly understood, the fact that professionals within this Service spend long
periods of time waiting at Court to give witness, is a major difficulty for the operation of this Service. Frequently, such waiting is all in vain since service users or lawyers do not turn up and consequently Court hearing needs to be adjourned. There have been situations where workers have spent months going to Court with regards to a particular case on a weekly basis. Should the Agency be provided with an office based at the Family Court, professionals will be able to continue with their work and then be summoned when it is their turn to give witness. Furthermore, such an office might pave the way for improved communication and working relationships with the Court, lawyers and also service users.

6) Liaison between the Agency and the Court

The Court Service has successfully built a system where it is the main liaison between the Agency and the Court. The Agency now has one main channel with the Court and also has records of all the work being done for the Court. The Court Service also provides continuous support related to Court work and separations to the professionals within the Agency.

7) Legal Advisors

The Agency has also changed its Legal Advisors. This legal support services have improved substantially over the years, and the Agency’s services are provided with ongoing legal support. They provide the Social Workers within this Service with ongoing consultations and regular meetings in order to provide a follow-up on any pending Court applications and/or notes. This fortnightly meeting is also aiding the Social Workers within the team to further their legal knowledge about the system of the Court.

8) Threats and Complaints

Social Workers within the team regularly end up caught in the middle of tremendous pique between parents, frequently resulting in constant threats and complaints directed at workers. Social Workers also strive at ensuring
that the minors involved are exposed to as minimal of separation pique as possible. The service strives against parental alienation. Parental alienation is when a child expresses unjustified and unreasonable dislike or hatred towards one parent, rendering access to the rejected parent difficult or impossible. In such circumstances, these feelings of the child towards one parent are due to brainwashing on the child by the other parent, usually referred to as the ‘alienating parent’. Unfortunately, such work is very often next to impossible as parents rarely understand the effects of parental alienation and still tend to continue alienating their children from the other parent behind closed doors.

9) Private Social Workers Working Directly with the Courts

As mentioned above, due to the Agency’s financial limitations, the Court has been referring some of the work to private Social Workers, and hence the Agency is experiencing a lack of referrals. Another reason for this, according to the Family Court Judges, is that they themselves are meeting up with the children and listening to them directly. The effect of all this is that the Court is only referring extremely difficult cases, where the parents are in constant conflict with each other and refuse to reach any form of agreement about the concerned minors.

The Service is lately noticing that Court is mostly referring situations where the parents cannot pay for the service, and hence the Court cannot refer to private Social Workers. Since the Agency does not receive any payments for the mentioned reports, it cannot allocate these cases to contractual workers due to financial reasons. As such, the only option is for the Court Service’s Social Workers (whose task is that of coordinating the service) to take on the cases themselves. This is an added burden on the few Social Workers coordinating the service, especially since experience is showing that such cases need very intense interventions.

The Service has also faced situations where private Social Workers refuse to take on certain cases due to
extreme pique, and hence cases are referred to Appoġġ. In such situations, it may also be quite difficult to allocate such cases to contractual workers (due to the necessity of constant office visits, telephone calls, etc) and will therefore need to be operated by the Court Service team. Even if allocated to contractual workers, the Court Service team will still need to intervene periodically to facilitate communication between service users and contractual workers.

10) Training

Opportunities for specialised training in the field is limited. However, in 2006, the Service benefited from a very positive training week experience via the Commonwealth Training. This training was provided by a British expert who was very knowledgeable and flexible to focus the training on the situation faced in Malta. Throughout this training, the British expert Ms. Gupta focused mainly on giving witnessing and preparing children for giving witness. During the last two days of this training, Ms. Gupta focused on Court mandated supervised access visits. Supervisors conducting SAVs were invited for this training and had the opportunity to reflect and discuss their roles within the Supervised Access Visits Service.

Due to the high turnover of workers, and since most of the workers have never benefit from related training, a similar opportunity would be extremely beneficial for the Court Service team.

11) Financial Situation

The major challenge the workers within the Court Service continuously face is that Court expert reports ordered by the Court are against payment which parties undergoing separation are expected to pay, as per Court procedure. Most of the parties are already burdened with financial difficulties and hence frequently experience additional stress in having to pay for the mentioned reports. Therefore, Social Workers within the team frequently end up in disputes with service users regarding payments
issues, which on most occasions highly impacts the social work role. Furthermore, the Social Workers in this team need to liaise constantly with the FSWS Finance Department to check whether service users have paid for the services rendered. Such a task can be very time consuming. Lately meetings with the financial team are being held in order to make sure that an effective and efficient service is being provided to clients. It also helps for both teams to understand better each other’s work.

The Service continuously faces dilemmas where, for instance, one party is willing to pay for the service whilst the other party refuses, which may result in further conflict between parties. Although not funded for this service, the Agency still feels responsible to act upon Court Orders even when parties refuse to pay, especially in domestic violence and child abuse allegations.

12) Decrees not Received Directly from the Courts

Another major difficulty faced by the Service is that frequently the team comes across decrees which had ordered the service users to make use of one of the Agency’s services weeks, months, and sometimes even years after they were issued. This is extremely worrying to the service since minors may be at risk and also since the Judges may be unaware that Appoġġ did not receive the mentioned decree and may view the Agency’s lack of intervention as a sign of disrespect. This issue has been tackled with the Court Registry, which continuously informs the Agency that, frequently, the service user should be the one bringing the decrees to the Agency and not the Court. However, in such instances, service users are not eager to be assessed or monitored, and hence will not come forward with such a decree. It is recommended that the Court establishes a formal system to ensure that Court decisions are communicated to all parties concerned.
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Challenges and Achievements

The rapport between the Family Court Judges and Magistrates continued to increase. Meeting with one of the Judges was held and proved to be very positive and highly welcomed by the Judge and the team members. Good and very positive communication between the Court Services and the Agency lawyers continue to ameliorate the service delivery.

As in the previous year, the number of complaints made by clients continued to decrease. This could be attributed to the fact that workers within the Court Services and even the Supervised Access Visits are dedicating more time to parents involved in separation and in some cases a good working relationship was established. Particular emphasis was made by the Court Social Workers on trying to support parents as much as possible and this proved to be highly effective and welcomed by the parents themselves and even by the children who are involved in this process.

Way Forward

The Service aims at continuing to be the liaison between the Agency and the Court since this system is proving to be very efficient.

The Agency wishes to engage in a more supportive function to couples undergoing separation proceedings, as well as their children. In view of this, the possibility of conducting support groups for children in separation situations is being looked into. One needs to be very cautious about this due to the very limited Court Service’s team and also the rate of referrals from Court may increase at any time. One cannot start working on such an essential project which will then need to be discarded in order to follow the different rate of referrals. A genuine follow up which can be offered to the minors should the need be felt should also be ensured.

Due to the already mentioned financial situation, and due to the constant increase in separations noted in society, the need of an Agency service specialising in marital
separations is being felt. Through employing a Coordinator and three full-time Social Workers who will focus their energy on separation related work, such team will be able to cater for the current work the Court Service is currently working on, without the need of contract workers and without the need of service users paying for the services rendered. This will eliminate the negative publicity the Agency receives regarding collecting payments. The same team will continue to provide follow-ups to children who may be at risk and may also provide the children with an opportunity to visit the setting of the Court before they give their witness. The workers will also be able to accompany the child during witnessing in order to provide support.

Another aim is that of continuing to build better relationships with the Family Court Judges and their administrative support, with the ultimate aim of providing better service to service users. As such, ongoing meetings with the Family Court Judges are essential. As already mentioned above, an office at the Family Court will prove beneficial in better communication with the Judges, Court personnel, lawyers and service users. It will also help reduce the time spent waiting at Court, amongst others, and formalise procedures to as to ensure a more efficient service.

Mediating between parties in conflict without taking sides is not an easy task. Since Social Workers in this team frequently end up mediating between parties, training in mediation skills (such as that given to Court Mediators prior to enacting their role), may be beneficiary for this Service’s workers.

Ultimately, the main way forward is that of gaining the finances to provide this service free of charge, like other Appoġġ services. Such a step will definitely be a pivotal move forward to this team and its service users.

The ideal situation would be for minors who at the initial stage of their parents’ separation proceedings are allocated with support throughout the whole proceedings, as is the current system in most European countries via the guardian
ad litem. The current Court system does have the system of a children’s lawyer. However, the same lawyers insist that they only see the concerned child once and are to write a report about that child based on what the child tells them. In such situation, due to parental alienation, children may easily be providing (sometimes even forced to do so) the custodial parent’s version of events, which the children’s lawyer will relate as the children’s views. Ongoing professional support to the children from the initial phase of the separation proceedings will ensure that the separation induces as little pain as possible on the innocent parties in this whole situation - the minors.

Joint training involving all the different professionals that work within this structure could lead to better collaboration and commitment from all parties involved. Gaining a clear picture of the current situation in Malta with regards to separation and its effects on children would help in setting up clear guidelines and procedures.

In 2009, following the Commonwealth consultancy held in previous years with CPS and Looked After Children (LAC), a meeting was held with Dr Endeley from the Commonwealth consulting team whereby a new project was being planned. The idea was to evaluate and get a clear picture of the current Court systems and the experience of children within this scenario. This meeting was attended by the Court Services leader and manager, the CPS leader and manager, as well as by the Agency Operations Director, FSWS Human Resources Senior Manager, and the CEO of the Foundation.
Supervised Access Visits

The service users of the Appoġġ Supervised Access Visits are considered to be the children as well as the parents, both custodial and non-custodial. The Service aims at facilitating the contact between the child and the visiting parent, whilst at the same time protecting the child from any form of abuse. Moreover, the Service is also provided to protect the right of the visiting parent to have access to his/her child, by providing the appropriate environment for this to take place. In situations of domestic violence, the Service also helps both the victim and the visiting parent, by offering protection during the child’s access to the child, and in some cases, to the custodial parent.

There is no typical service user who makes use of the Service. However one can outline some of the difficulties that such service users may be facing.

One of the major categories concerns service users who are in situations where a Care Order has been issued in favour of a child, so as to protect the child from situations of abuse whilst not infringing contact between the child and his/her parents.

Another major category is in situations where the couple is undergoing separation proceedings due to allegations related to: sexual, physical or emotional abuse, exposure to immoral behaviour, substance abuse, mental health problems, domestic violence, and other similar situations. The Agency has also faced situations where the visiting parent has not seen the minor for quite some time, or where due to tremendous pique between parties, access will not be able to take place without the Service’s support.

Objectives of the Service

The Service’s aims and objectives are:

• To provide a safe environment where the child can maintain or re-establish the relationship with the visiting parent, when access is not possible otherwise
• To re-assure the custodial parent of the child’s safety during the access visit with the visiting parent

• To provide the setting and the opportunity for the visiting parent to have access with his/her child

• To ensure that victims of domestic violence or child abduction are not exposed to further harassment or violence (emotional or physical) whilst making use of the Service

• To document the interaction between each parent and the child for the possible use of the Court or other evaluators and to maintain an effective monitoring system

• To provide feedback to the visiting parent to improve his/her relationship with the child

• To provide a setting where the child can freely express genuine feelings towards the visiting parent, whether these feelings are that of affection, fear or anger.

Performance Review and Analysis

Figure 37: Cases of Supervised Access Visits worked with (Case Turnover), 2000-2009

<table>
<thead>
<tr>
<th>Year</th>
<th>Cases</th>
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<tbody>
<tr>
<td>2000</td>
<td>40</td>
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<tr>
<td>2001</td>
<td>70</td>
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<tr>
<td>2002</td>
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<td>2007</td>
<td>83</td>
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<tr>
<td>2008</td>
<td>98</td>
</tr>
<tr>
<td>2009</td>
<td>108</td>
</tr>
</tbody>
</table>
The Supervised Access Visits Service (SAV) has seen a slight decrease in 2006, since there were less case closures in 2005 in comparison to previous years. This was followed by an increase in case turnover of 8% in 2008. There was an increase of 20% in 2009 in comparison to 2008. This shows that there was a steady increase since 2007 in case turnover (Figure 37).

Figure 38: Cases opened (service openings, including new cases and re-activated cases), 2001-2009

Figure 39: Cases closed (service closures), 2001-2009
The number of cases opened increased considerably in 2008 (Figure 38) whilst the number of case closed decreased by 58% (Figure 39). Due to the decrease in case openings and the increase in case closure in 2007, more cases could be worked with in 2008. Furthermore, the decrease in case closures in 2008 indicates that the cases are worked with on a long-term basis. In 2009 there was a considerable increase in cases opened and closed respectively in comparison to 2008.

A considerable increase in new service users occurred in 2007, but the number of new service users decreased in 2008. Since a high number of new cases were opened in 2007, a limited number of new cases could be taken up in 2008. Furthermore, being aware of the Service’s waiting list, Court was only referring the most urgent cases. After an increase of new clients that occurred in 2007, and a decrease in 2008, the number of new clients increased again in 2009 by 25% in comparison to 2008 (Figure 40). This was complemented by an increase in closures of cases as well.

In 2009, the Service had no waiting list since, as previously mentioned, Court was only referring the most urgent cases. Case allocations increased by 25% over 2008.
1) Changes

In early 2007, the Service Coordinator was promoted to Training Executive position within the FSWS Group and Human Resources Research Office. Since then, the Service has been under the direct leadership of the Service Area Leader, since no Coordinator was appointed. In June 2008, the Service Area Leader was identified to undertake other responsibilities within Agenzija Appoġġ and the Court Services Coordinator was promoted as Leader. The Service also underwent a change in Manager. Graziella Castillo, Intake and Socio-Legal Services Manager, has replaced Ruth Sciberras in managing the Service.

Apart from the already mentioned changes, the Service faces continuous changes in supervisors. Due to the fact that supervisors are not employed, and most of the supervisors are students, changes in the pool of supervisors are frequent occurrences. Hence, this is a major difficulty that the Service faces since after gaining considerable experience, supervisors tend to feel the need to move on.

The Service often receives complaints regarding the high turnover of staff from all service users, although it is acknowledged that staff retention is beyond the control of the Agency.

2) Cancellations and Replacements

Each supervised session entails a lot of liaison and coordination work. Hence, as much as possible, sessions are scheduled on a fixed schedule, i.e. same day, same time, week in week out. Such a system is also beneficial for the minors involved since it helps in building a routine.

However, in dealing with human beings, irregularities are bound to happen. The Service continuously faces a substantial amount of sessions which need to be cancelled. Due to this, the Service entails a lot of administrative work and liaison with a substantial amount of parties. Since the Service strictly believes that minors are entitled to spending time with both parents whenever possible, replacements
for cancelled sessions are provided if possible. In order for setting up such replacement sessions, the Social Worker needs to make quite an amount of telephone calls: parents, residential homes, foster carers, Social Workers etc – at times evenamounting to ten phone calls for a one-hour session. Needless to say, this is the bulk of the work of the involved Social Workers – work that administrative staff can easily help out with but due to the lack of this support, Social Workers need to carry out such tasks themselves.

A major concern in the service is when parents (in some cases, due to mental health issues), do not turn up for the session without any notice, despite being provided with the On-Call Mobile Number which they can make use of if they cannot make it for the session. When this occurs, especially at the last minute or sometimes even without any notice at all, children are very disappointed. As such, in 2005 a system was introduced where visiting parents had to pay €23 (Lm10) deposit prior to enactment of the service. The Service was still provided free of charge but the €23 was a guarantee that the visiting parent will come for the session or at least inform the Agency should he/she not be able to make it. If the visiting parent does not inform that he/she is not coming for session, €7 would be deducted from the deposited money.

Experience showed that this system was not working and it therefore had to be abolished. Parents were confusing this deposit with payment for the service, despite it having been refunded if not availed of when the service was terminated. Furthermore, it was very difficult asking a parent whose child had just been taken away due to Care Order proceedings, and asking them to pay €23 for them to spend time with their children under supervision.

3) Lack of Resources

Another major difficulty the Service faced throughout these years, and is still confronted with, is the lack of Agency cars available to carry out transportation of children during challenging SAV cases. The majority of supervisors still have to use their own transportation to transport children, risking
their own cars and also risking the possibility of service users’ knowing their car details. The latter can be a further reason for the changeover in supervisors.

Budgetary restrictions do not allow room for training and welfare of supervisors, since the entire budget is allocated to cover the costs of the access visits. Over the years, the Service has had to make do without group supervision and with very limited individual supervision, in order to cut out costs. Specialised training has also been minimal since present budget does not allow room for it. The only training supervisors have attended in the past few years was that in their own free time. Case follow-up between supervisors and Social Workers is also done in the supervisors’ free time.

Another issue the Service has been confronted with from various parents and even from Court is that regarding to the premises and what it can provide in order for the children’s needs to be met. Supervised Access Visits take place in the Agency’s counselling rooms, which are not purposely set out for access visits. Toys are very limited; in fact frequently supervisors bring toys with them to make the setting more accessible. Lawyers have confronted staff with other issues with regards to premises, such as the lack of a nappy changer, bottle warmers, baby cots, etc.

4) Threats and Complaints

The Service continued to encounter situations where service users, be it custodial or visiting parents, do not like the decisions taken by the Service. As a result, a considerable amount of complaints and threats are received. Such frequent incidents are far from a motivating factor for the supervisors. Investigating these complaints is time consuming. However, each complaint was thoroughly delved into by the FSWS Quality Assurance and Systems Auditor.

During the Court proceedings, the supervisors would still be carrying out the access visits with the parent/s, who sometimes alleged that the supervisor lied in Court and
demanded that s/he is taken off the case. During 2007, Court Preparation sessions for the Service’s new recruits were organised, with the aim of preparing them for such intense Court-related work. During the same year, the regular presence of a Police Officer on the premises was a relief and profoundly appreciated, as the supervisors felt more secure and less anxious to work with aggressive parents.

Other complaints came from residential homes which insisted that the Heads of Children’s Homes are never properly informed of the outcome of the supervised access visit that their children would have had with the parents or either of them. Similar complaints reached the Service from the Appoġġ Fostering team. Appoġġ Management acknowledged that this lack of feedback was creating problems for the Head of Homes and foster carers, who sometimes have to manage the difficult behaviour of the children following a supervised access visit.

However, these sessions are limited by budget, in order to report back to the Head of Homes and Foster Carers for every single visit, there needed to be additional funds to pay for the time of the supervisors, thus this option could not be taken up. The measures adopted to address this issue were to improve the Service without impinging on the resources by working on an exception basis only. When an incident occurred during a visit, the supervisor would contact and inform the Social Worker on call, who would have the responsibility to get in touch with the care givers on the same day of the incident. This measure enabled them to be prepared for any eventual behavioural problems that the child may present. The Service undertook other internal procedures to ensure that the above guideline is adhered to.

In 2008, the Children’s Home Office Ejew Għandi put forward a proposal to take over the Service to give the Church a new role that would fit better with their children’s homes service. The Agency expressed its concern over this proposal since children’s homes can only provide part of the service – i.e. to children in residential homes. This would fragment the service. Moreover, the Agency believes that
this proposal would also create a conflict in the role of the
care givers.

5) Budget Shortfall

The policy of the Service states that in order to reach as
much families as possible, a maximum of 4 hours of service
per week, including transportation when necessary, is
provided to each family. There are situations where the
Children and Young Persons’ Advisory Board strongly
feel that minors will benefit from further access. Hence,
the Advisory Board pays for the hours exceeding those
stipulated by the policy. Other clients who insisted for
further hours were also given the option of paying for
the extra hours, but this procedure had to stop since the
Service was receiving negative publicity.

Due to financial restrictions, in the years 2006-2007 the
Service had a waiting list. As a result, the Family Court was
only referring extremely difficult situations. Consequently,
the caseload was reduced but the work involved in each
case was very intense.

Due to the necessities of the service, in 2008 the Agency
stopped contracting supervisors and instead started
purchasing a service from a local company. This gave
supervisors the opportunity of being employed part-time
instead of being contracted with the Agency. However,
after about a year, it was decided that the Service should
resort to the previous system, since the financial burden
had rapidly increased with this new system.

When the Service reverted back to the previous system,
i.e., contracting supervisors, the financial situation allowed
for the waiting list to be fully allocated. As a result there
are currently no cases on waiting list, whilst in-depth
intervention in caseload is being emphasised through
continuous support to the supervisors, frequent on-the-
job supervision during the actual sessions, and constant
communication with and/or on behalf of service users
through meetings and telephone calls.
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In 2007, after 11 years from the initiation of the Service, the supervisors’ hourly rate increased from Lm2.10 to Lm2.50 (€5.82) per hour, leaving an even greater impact on the allocated budget.

6) Service Developments

Despite the mentioned limitations, the staff strives at service development. As such, more weight has been given to the coordination of the Service, which has resulted in additional in-depth work and monitoring of the actual supervision process. In 2007, the number of supervisors increased from 27 to 34, which by the end of 2008 increased to 45. In 2009, the number of supervisors decreased again to 38.

The 38 contracted supervisors are closely monitored by the Service Area Leader, a full-time Social Worker, and 4 part-time Social Workers. Two of the mentioned Social Workers coordinate the cases related to Care Orders, whilst the remaining 3 workers focus on coordinating the Court-related orders. This is helping staff gain expertise in their related fields.

The coordination of the Service has expanded to include social work intervention with service users. Experience is showing that access is smoother and the relationship between all parties concerned improves concurrently with the mentioned social work interventions.

i) Voluntary service users

The service has also provided its support in different situations. In some situations, a service has been provided to voluntary service users – cases where a Care Order has not been issued and where there is no separation proceedings but the parents voluntarily ask for their contact with their children to be supervised. This may occur when the parents want to prove their method of parenting, after possible allegations or when the parents have not seen their children for a very long time and fear their children’s reactions.
The Service has also catered for situations where the parents did not need continuous supervision, so instead of supervising the entire access, the Agency’s premises is offered as a meeting place and hence permitting the sessions to be monitored from time to time.

**ii) Siblings’ meetings**
Another situation being offered is that of siblings’ meetings. The Agency is encountering quite an amount of situations where, due to different care plans, siblings end up living in different situations and have no way of meeting up and upholding the relationship. The SAV Service has therefore been providing an opportunity for such siblings to meet up and keep in contact with each other.

**iii) Input of SAV supervisors**
The input of SAV supervisors, who served as Support Workers for a short period of time when breakdown of residential and foster placements occurred, was highly appreciated by the Agency. Although, it was taxing on the SAL and the Coordinator of the service to contact the SAV supervisors to request their disposition and availability, however, they undertook this challenge diligently, and most of the time managed to help out to contain a crisis situation. In certain situations, SAV supervisors were requested to serve as carers in adults’ shelters to care for youngsters when their placements broke down.

**iv) Leonardo bursary**
In 2006, a Social Worker within the team, who later was promoted to a Coordinator and SAL respectively, benefited from a Leonardo Bursary experience in Durham, United Kingdom. Throughout this experience, the Social Worker had the pleasure of visiting a residential setting where supervised access visits take place. Such a setting is ideal for this service where children can spend qualitative time with their visiting parent / other relative with various facilities, such as cooking, etc. It was also noted that in the United Kingdom, the system employs one coordinator and then it is the Social Worker who supervises the sessions and is entirely responsible for the case. Such a system reduces a number of personnel involved with the service.
users and also reduces a lot of contact between the supervisor and the coordinating Social Worker, and hence operational time. However, for Social Workers to conduct such duties, their caseloads need to be drastically reduced from their current caseload of 40, in comparison to the average current caseload of 30 for looked after children and 40 for Social Workers in the generic field. In fact, the caseload of Social Workers in the UK doing such work is that of 15.

7) Challenges and Achievements

The Service saw some restructuring and the outsourced service with People’s solutions was terminated. SAV supervisors were no longer employed through People’s solutions but became part of the work force of the agency. This led to new administration procedures and further interviews for supervisors in order to increase the pool of supervisors. The new re-structuring meant that some extra savings from the SAV budget could be used to recruit two part-time supervisors in order to address the waiting list. The waiting list was cut down and cases referred either following the issue of a care order or through Court decrees were being allocated immediately.

One of the major challenges of this Service which seem to be recurring year after year is the decrease in the pool of supervisors. A good number of supervisors is always required both for new urgent cases but also for replacements. The service has also faced challenges of threats from parents as well as lack of resources such as cars etc. The demand for these resources is extremely high when compared to the supply of the service.

**Way Forward**

The Service’s main aim is to be in a position to be able to allocate any case as soon as it is referred, also by looking into other systems that make the service sustainable. It is strongly believed that there should not be a waiting list for children to meet with their parents in a safe environment.
Currently, the Service is also aiming to employ 2 part-time supervisors (20 hours each) who will join the pool of contracted supervisors. This will help in providing a more committed and available pool of trained supervisors.

An increase in administrative support will also alleviate the extra workload of the coordinating Social Workers, and thus allowing the latter to focus more on the coordination and development of the service instead.

It has been noticed that the split coordination of the service is being very effective. Supervised access in relation to Care Orders and that in relation to Court Order, is very different; expertise in the different sectors helps a lot. Hopefully, the next step is that of splitting supervisors which will help them gain the expertise currently gained by the Social Workers coordinating the service in the different situations. Thus, sustaining the Service and the introduction of possible restructuring in the allocations of care orders and Court order cases will be the goal for the coming years for the supervised access visits. Courts Services and Supervised Access Visits will continue to work closely in order to make the maximum use of the resources available.

Retention of staff is also the way forward to guarantee a good quality of service to major stakeholders, but especially to the children themselves.
Community and Generic Services, 2006-2009

The Appoġġ Community and Generic Services gather together a group of services that on the one hand represent the Agency’s community-based services (namely the Cottonera Community Services, Paulo Freire Institute and Home-Start Malta), and on the other hand, the services providing the initial contacts of the general public with the Agency (namely, the Customer Care Service – which is the first point of contact through telephone calls or visits to the offices, Supportline 179 – which receives hundreds of calls each month from people requesting some form of assistance in their difficulties – and the Initial Response Service – which offers the first social work intervention for those requesting it).

Along with the above-mentioned services, the section included also:
1) Generic team – a team of Social Workers offering generic social work intervention, hence operating like the community services, but from a centralised office rather than a community-based one;
2) Programm Ulied Darna – a service run by volunteers who, through various tasks ranging from family visits to accompanying service users to appointments, and to receiving and distributing donated pieces of furniture and other useful items;
3) Prison Service – a small service providing support and guidance to prison inmates and, when possible, to their families;
4) Adolescent Outreach – a service targeted at young people experiencing severe emotional and behavioural difficulties.

With the services grouped under the same Services Manager, there was the idea of having a common direction of development for a number of services, creating collaboration between services which otherwise would have worked more in isolation. Although there was already
collaboration between each team leader of the different services, this collaboration was enriched and facilitated once there was a common Manager.

During the years under review, this collaboration between the services was enhanced further. For instance, the Cottonera Community Service, Paulo Freire Institute and the Generic Service got together for in-house training, sharing experiences and bringing out common issues that are pertinent to generic social work intervention. These include issues of boundaries and dealing with conflicts of interest, issues when dealing with children at risk of abuse, mental health issues in the community, the assessment framework, and the importance of maintaining a positive and supportive relationship with the service users who are also residents in the community.

The Cottonera Community Service and the Generic Service also started to review the current procedures and forms for referral, intake and interventions. The idea was to draw upon that which is common to streamline the work.

The Appoġġ services run by volunteers, namely Programm Ulied Darna and Supportline 179 started to campaign jointly for new volunteers, and got together to formulate and implement a training programme for volunteers of both services, before assigning them into two groups for more specialised training according to the service of choice. The aim of this collaboration was to create a common understanding and action for the benefit of the volunteers within the Agency as well as for the enhancement of the service provision by the same volunteers. The campaign would aim to attract people who are considering taking up voluntary work, without yet specifying the area of work, hoping, in this way, to attract even those who had yet to decide what line of work they would opt for. The first part of the training would be suitable for any volunteer in any social field, thus giving the prospective volunteers more time to learn about their abilities and be in a better position to choose the work which applies mostly to them.
Objectives of the Service

- providing initial first contact, preliminary assessments and short-term interventions
- channeling people to the appropriate services and resources
- strengthening families such that children can continue to live safely in their own home environment
- providing services that are suitable to the needs of individuals and communities
- building on strengths of children, families, carers and communities, so as to develop sustainable individuals and communities
- assisting in parenting by providing support in the various stages of children’s development
- focusing on preventive work rather than dealing with crises situations.

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Figure 41: Number of cases worked with (case turnover) by the Generic and Community Services, 2000-2008
Figure 42: *Services opened by the Generic and Community Services, 2000-2008*

Figure 43: *Number of cases closed by the Generic and Community Services, 2000-2008*
All the Figures above show a sharp increase in 2004 when the Appoġġ Initial Response Service (IRS) started to operate. As the new intake service, the Initial Response Service started to take cases, holding the initial assessment and either carry out a short term intervention or refer to other services accordingly. The very nature of the service means that there is always a high turnover of cases, because cases are dealt with in a relatively short-time and closed or referred to other specialised services, allowing for new cases to be taken on. On the other hand, the Cottonera Community Service and Paulo Freire Institute deal with both short and long-term cases, because they are community-based and have to deal with whatever issues the residents present. The majority of the cases, though, are those needing long-term intervention. On the other hand, the Appoġġ Generic team deals with long-term cases, which are referred from other services, mainly the IRS and Child Protection Service (CPS). The Generic Service does not have an intake system and thus IRS and CPS refer those cases needing long-term generic intervention.

In mid-2008, there was a change in the portfolio of the Community and Generic Services. With the introduction of a new Services Manager to see to the Intake and Socio-Legal Services, the Initial Response Service, Programm Ulied Darna, Supportline 179 and the Adolescent Outreach Service were removed from the Community and Generic
Services and passed on to the new Intake and Socio-Legal Services section.

In September of 2009, the new community teams, made up at the time of only Social Workers, started to operate within the Community and Generic Services. Since the services in the respective communities were still starting, and relatively small, the impact on the statistics of 2009 was minimal.

Below are the graphs showing the statistics of the Community and Generic Services, without the services that were removed in 2008 and with the increase in the services that started in 2009.

Figure 45: Number of cases worked with (case turnover) by the Generic and Community Services, 2000-2009

1 Figure 45 refers only to Generic Service and Cottonera Community Service, since there was a change in the portfolio of the Community and Generic Services in 2008.
Figure 46: Services opened by the Generic and Community Services, 2000-2009

Figure 47: Number of cases closed by the Generic and Community Services, 2000-2009

\[\text{Figure 46 refers only to Generic Service and Cottonera Community Service, since there was a change in the portfolio of the Community and Generic Services in 2008}\]
The statistics of the Community and Generic Services without the IRS would be lower and more stable, although all experienced an increase in active cases, since there was an increase in staff in all services thus allowing for more cases to be seen to.
Statistics here show a constant increase in interventions between 2006 and 2008, with sharper increases between 2006 and 2007 than those between 2007 and 2008.

The number of office visits is the highest, being around double the number of home visits. While being more time consuming, home visits are a fundamental part of social work intervention. However, office visits allow Social Workers to reach more service users. One also must take into consideration that drop-ins, that is, office visits without an appointment (generally new service users), are included in the office visits quoted above.

The increase in residential visits indicates that the teams doing generic work within the Agency, particularly the IRS, are getting more involved in placements of children until the cases are taken up by the Appoțq Looked After Children service.

The increase in Court interventions may indicate that there is more involvement of the Community and Generic Services in cases of Care Orders – either because they are supporting the families whose children are being protected, or because they are working with families where the children’s situation is such that it would require intervention by the Agency’s Child Protection Service, often leading to a Care Order. Again, this is an indication that the nature of the cases that are being followed by the Community and Generic services are getting more complex and that they are becoming more and more supportive to the Agency’s specialised services.

1) Restructuring

In 2007, the Ministry for Family and Social Solidarity started working on opening three new ACCESS Community Resource Centres, mainly in St Paul’s Bay, Valletta and Birkirkara, and directing Aġenzija Appoțq to have three community teams there. The Agency’s Community and Generic Services portfolio had to adapt to this change; firstly because of the additional responsibilities, particularly with the task of having to set up three new services;
secondly, because it made more sense to bring together all the services that are community-based and those that are providing generic social work intervention; thirdly, the impending work in the community would mean that the Services Manager would be less present at the Agenzija Appogg offices, thus becoming less available for a number of services based there. With the difficult situations and crises that are regularly faced by these services, it was not ideal not to have a Service Manager available in the premises to guide and support the staff when the need arose.

Consequently, in 2008 a new Services Manager was introduced, who took up a number of services, namely Programm Ulied Darna, Supportline 179, the Initial Response Service, Customer Care and Adolescent Outreach. These services were previously managed by the Community and Generic Services Manager.

The move to develop new community-based services is one of high importance and significance in the development of social work services in Malta. This move implies that the work experienced in the communities of Cottonera and Ħejtun, have had a positive impact. Primarily this is due to the fact that the services are closer to the people, and hence more likely to build good relationships with the residents in general and particularly with the service users. Secondly, this same relationship between Social Workers and the service users allows for a more relevant form of service provision, offering support and preventative work with individuals and families to reduce the risk of crisis and the need for more specialised services. Finally, the idea of having another form of action, that is, community development and community-based projects besides the traditional social work intervention, has added value to the service provision because it aims at building community potential, thus helping to build valuable support networks in the community and helping residents become more independent.

This form of action in the community also invites the involvement of other major service providers, with the aim of creating collaboration and co-operation between
the entities, encouraging them to be more sensitive to the needs of the people and provide more personalised services that are appropriate and relevant for the particular community. Another aim of this action is to have people not viewed simply as consumers having a variety of services available for them, but to be seen as actors, partners in the process of service provision. Hence, the idea of “charity” would be replaced by “empowerment” – encouraging people to take more control of their situation with the help of the services, and become more independent.

This is a long process, whose results will not be seen in the short-term, but rather in the longer term. Yet, headway has already been made through the work in Cottonera and Żejtun – work with entities such as the Employment and Training Corporation, the Housing Authority, the Foundation for Educational Services, St. Margaret College and the individual schools, and more recently, the community-based mental health services, to mention a few. A basis for further networking is being built and, although more work needs to be done, it is very reassuring to know that there is interest in strengthening this collaboration.

2) Others

i) Hotline service
In 2006, the Hotline against Child Abuse over the Internet was initiated. This service was to run for around 2 years co-funded by the European Union. The decision to have the service placed within the Community and Generic services was because it was to be complemented by the 24-hour telephone helpline Supportline 179, which, at that time, formed part of the Community and Generic Services. Aġenzija Appoġġ was operating the Hotline, while the Ministry for Industry, Investment and IT was responsible for the awareness-raising node. There was a small team seeing to the incoming reports, which needed to be filtered and referred to the Cyber Crime Unit (Malta Police Force) and communicating with parents, students and educators about safe internet use.
Eventually, when the project was terminated and the new application was rejected by the European Commission, the Agency decided to maintain a basic service, which was to be run by the Services Manager with the help of a contractee who would be available for a few hours weekly. The service remained under the Community and Generic Services so that the experience already gained by the Services Manager could be utilised.

Consequently, after the end of the EU-funded project in February 2008, the Services Manager kept checking the reports received through the online reporting system on the Appoġġ website, as well as maintained contact with the specifically-appointed Advisory Board which continued to meet albeit on a less regular basis. This arrangement is still in place. A new application was submitted at the end of 2009 for a new project altogether which would then allow the Agency to have a new service with a new team.

ii) Housing
The Services Manager has had a history of working with the Housing Authority and the Department for Social Housing through her previous work in Cottonera. The two Housing entities were later merged into the Housing Authority.

At the end of 2007, the Service Manager was nominated on the Housing Authority Board as well as on the Housing Allocation Board. This meant that with the presence of a Social Worker on both Boards, there was more opportunity to assess the social needs of those people applying for alternative accommodation, as well as more opportunity to ensure that the policies designed by the Housing Authority would be more socially oriented. However, with the change of the Minister, there were changes in both Boards and the Service Manager was no longer part of either Board. Notwithstanding this, good communication with the Housing Authority continued and the Service Manager remained the focal person for Aġenzija Appoġġ with the Housing Authority, meeting on a regular basis and presenting situations faced by the Agency’s service users. It is to be noted that these do not include cases about service users from Cottonera and Kalkara, since there is the
Foundation
Social Welfare Services

presence of the Housing Community Worker in Cottonera, and hence, the contact with the Housing Authority through the Services Manager is needed in the rest of the cases.

iii) Community Centres
Although the community services were targeted to start operating in 2008, much work had to be done regarding the preparation of the premises. The new ACCESS Centre at Qawra was officially opened in February 2008. Therefore, most preparations were completed by then. However, there were still pending issues – similarly in the Valletta ACCESS premises. These were always seen to by the Services Manager, in liaison with the Ministry for Social Policy, through a number of meetings and contacts with the personnel in charge of the works.

A number of meetings with some of the community leaders were held, as an introduction to the work that was expected to be carried once the teams would be introduced in the communities.

iv) Community Teams
In July 2009, the recruitment process for the new community Social Workers commenced, with the Service Manager being on the interviewing board for the Foundation’s Social Workers intake. A number of new Social Workers were employed whilst two Social Workers were transferred from other services. This meant that there was a healthy mix of new workers and more experienced ones.

The new teams, which at the time, only consisted of Social Workers (the process for recruiting Community Workers was still ongoing at the time), underwent an induction course, which was meant to help the workers understand the role of the community Social Workers and the Agency’s idea of work in the community.

By the end of August, three new community teams were set up – in Valletta, St Paul’s Bay (based in Qawra) and B’Kara. At the time, the teams were made up of Social Workers since the process to recruit Community Workers had not been initiated.
v) Introduction of Coordinators

In 2007, there was a move to strengthen the services that were considered as support to the other specialised services – the Initial Response Service and the Generic Service. These two in particular were an asset to the Child Protection Services mainly because of the filtering of referrals (IRS) and the interventions in cases of child neglect. The Generic team got more involved in cases which would otherwise have been followed by CPS but which needed mainly generic intervention.

Furthermore, the Agency’s Cottonera Community Service and the Youth Outreach, whose demand was increasing, also benefited from the decision to recruit new Coordinators. Thus, the Agency provided 4 new posts for Coordinators.

Since these were new roles in the Agency for these services, the Services Manager needed to work on clarifying the roles and supporting both the Service Area Leaders, as well as the coordinators themselves in their new role.
Later in 2009, it was decided that the Qawra Team would also have a coordinator, since the Service Area Leader was split between two community-based services. The recruitment process to employ a coordinator started towards the end of 2009.

**Way Forward**

With all the complexities that are evolving in today’s society, we are facing new challenges each day – new situations of poverty, younger women having children, the increase of a diverse ethnic population, widespread use of drugs and alcohol, dysfunctional family relationships stemming from growing expectations from partners who are taking less responsibilities towards the upbringing of their children, violence in the family even in children or young people, to mention but a few.

The Appoġġ Community and Generic teams contribute significantly to a large number of service users, mainly families with young children. They offer support and guidance in these complex situations to prevent the families from reaching crisis point, safeguarding the children and doing the most to keep the children at home within their family.

The community element of the intervention in the community teams has helped to build good support networks for the service users. Although not present within the community, the Generic team also works on the same principles of building meaningful networks for the service users in their community – with the ultimate aim of improving the quality of life of the families and increasing their independence on social services.

Our experience is showing us that, while the community element is proving to be a successful form of intervention that needs to be strengthened, we need to continue to strive to seek more and more effective ways of building these support networks. Bringing existing resources together is surely a positive step towards ensuring that the persons needing most support will be reached and helped.
Tapping into local resources such as parish volunteers who can support the families, exploring the benefits of group work, or skills training to the main carer, are excellent examples of how we can use our creativity and flexibility to reach and support more families in need.
Generic Service

The Generic Service had been created because the Agency felt a need for more generalised social work intervention since, for many years, it had been developing specialised services. A more generalised social work service prevents service users from needing more specialised services, especially when it is involved from the onset, before the service user reaches a crisis point. There were situations where the service users of the specialised services needed more generic intervention, which would end up being carried out by the specialised workers, this at the expense of more specialised interventions in certain urgent situations e.g. the workers from the Child Protection Services would continue to work with a family, even when the crisis would have passed, because the families would still need support and generic intervention. The specialised workers would be taken up by tasks that a generic worker could easily carry out.

Hence, the Generic Service was initiated, and later strengthened, partly to address the growing demands on the Agency’s specialised services. However, it is easily seen that generic intervention offers a possibility to work with an individual or a family in a more holistic way, addressing a variety of issues that would be causing harm and distress, and focusing on a general outcome rather than a specific one.

Objectives of the Service

• To provide a relevant, accessible, professional service to all those requiring it
• To provide social work services to individuals and families, whose needs are not being met by specialised services
• To draw up, with the service users, a plan of action that would improve their quality of life and ensure a healthier and safer home environment for children
• To work in partnership with the service users to implement the plan of action, within a time frame that is mutually agreed upon
• To help the service users create effective and supportive networks within their own community
• To complement, when necessary and appropriate, the specialised intervention to give a broader and more holistic service to those who need it
• To ensure staff professional development, for quality service delivery.

The Service is based on respect towards the service users and being sensitive to their needs, and building on their strengths to facilitate a process where they can become more independent and enjoy a better quality of life.

The Appożġi Generic Service has become the primary social work intervention team that offers support and help to persons and families seeking it, by building sustainable support networks within the community. This helps families and individuals move away from the crisis point that would require specialised intervention.

Workers identify community resources that can support clients, which include networks with other entities and organisations, particularly, those based in the community.

Performance Review and Analysis

The Generic Service again saw some major changes in the past years. In 2005, there had been a turnover of staff and a new Service Area Leader was appointed. During the period covered in this report, again, there was a change in Social Workers and a new Service Area Leader was appointed in 2006. In 2007, the number of Social Workers within the Generic Service increased from three to five. The reason behind this increase was due to the number of referrals that the service was receiving. There was again another change in the Service Area Leader in 2009. The Service Area Leader of the Generic team was selected to lead two of the community teams, namely, the Qawra and the B’Kara teams. The person who previously occupied the post of Coordinator within the Generic Team was selected through an interview to take on the role of Leader in the Generic Team. The fact that person chosen was from within the
team helped maintain some stability in an otherwise very hectic period of time.

The Generic team deals with a range of situations – generally difficulties that include problematic family dynamics and relationships; financial difficulties; issues related to children, including neglect and the re-integration of children into their families; adolescents leaving care; and health issues, in particular mental health issues usually faced by the main care-giver in the family.

The Generic team receives referrals from services within the Agency – mainly, though not exclusively – from the Initial Response Service and the Child Protection Service. Other referrals come from the Adolescent Outreach, the Domestic Violence Services and Looked After Children service, amongst others.

When these referring services feel that the service users need further intervention, the Generic Service will take the case. The criteria for accepting the case are very broad and comprehensive. However, a key element which could exclude the generic intervention is the service user’s perception to the service – essentially, if the service user is unwilling to receive this service. It is important that from the onset, the service is accepted, because it is in this way that a good working relationship is built.

During 2006, the Service Area Leader together with the team’s Social Workers worked towards a clear vision of the function of generic social work within the environment of specialised service provision. This started within the team itself, that is, working on clarifying its own working procedures and working framework. It also held meetings with other workers in other services so that the role of the Generic Service would be better understood. This was a great challenge since at times the Generic Service was seen as the service that could take up all cases that did not fall within the remit of other services, when in practice, this was not possible. The idea of having voluntary clients was not always understood, especially when the person making the referral believed that social work intervention was
essential to the family. The service cannot be imposed on anyone. This exercise is seen to be relevant and should be on-going, since, Social Workers and other services change. Thus, it is important to keep delivering the message on what sort of service the Generic Service provides, particularly, the fact that it is effective only with voluntary service users.

Sometimes, the Generic Service would face other pressures to take up and work with a person/family immediately when the team would already have its own priorities on the waiting list.

The initial contact with referred clients was seen to be very important as the team needed to ensure that the clients were as clear as possible in what the service can offer and how it can help. The more involved the Generic Social Worker was in the referral process, the more likely it was for the client to accept the service, since the Generic Social Worker would be able to give a better picture of the service. This would also help service users distinguish between different services, since sometimes the families would not immediately see the difference between, say, the Child Protection Social Worker and the Generic Social Worker. This often causes resistance to the Service.

Once the referral is accepted by both service user and service, a thorough assessment is carried out so as to draw up an individualised plan of action, meant to address a number of needs of the service user/family. This plan of action is drawn up with the service user.

The number of referrals increased and this brought about an increase in the waiting list. Although the number of Social Workers had increased to five, the demand for the service was also increasing at a steady rate. One has to keep in mind that the cases followed or referred to the Generic Service are long-term cases, and therefore, the case turnover, compared with the number of referrals and active cases, is not too high.
The team introduced an extensive exercise, which they called the Generic Team Day. During this exercise, the team would go through the waiting list and screen the referrals. In this way, an updated picture of the situations is made and those situations which didn’t require interventions would be closed. Some of the situations would have changed, thus changing the prioritisation of the case.

Because of such an exercise, a number of cases would be closed and the waiting list would change, sometimes substantially.

In 2007, two were held – in January and May respectively – during which days, all workers within the team dedicated a whole day working on the waiting list cases only. Urgent cases that were identified during the exercise, which needed to be followed up immediately and were thus given due priority. Others were closed because of change in circumstances. This exercise proved to be extremely helpful not only to reduce the waiting list, but to give an insight to the team as to the nature of the cases that were being referred and those that were awaiting the service. This has become a yearly event, generally organised once or twice a year.

Throughout the years covered by this report, the Generic Service worked on establishing links with other entities, NGOs, parishes, etc. In 2007-2008, five localities were identified and contact was initialised with the respective parishes. These localities were identified mainly from cases that workers themselves were working on and other cases that were being referred. The localities were San Gwann, Mosta, Naxxar, M’Scala and B’Bugia. Contact with Żabbar parish church was also established and discussions on the needs of the families from that community followed. The idea was to start building community support networks for persons who face difficult day to day situations. However, with such a small team, this task is quite demanding and unfortunately Social Workers cannot dedicate so much time since they would be taken up by seeing to the service users’ demands.
All workers within the Generic team receive regular supervision. Supervision is essential for workers to identify key areas of personal development, development of care plans / action plans and discuss issues of concerns that they face during their contact with clients.

<table>
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<tr>
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<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
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<tbody>
<tr>
<td><strong>Home visits</strong></td>
<td>365</td>
<td>502</td>
<td>1,098</td>
<td>865</td>
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<tr>
<td><strong>Office visits</strong></td>
<td>469</td>
<td>461</td>
<td>514</td>
<td>300</td>
</tr>
<tr>
<td><strong>Residential</strong></td>
<td>51</td>
<td>33</td>
<td>68</td>
<td>82</td>
</tr>
<tr>
<td><strong>Court</strong></td>
<td>14</td>
<td>6</td>
<td>59</td>
<td>27</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>899</td>
<td>1,002</td>
<td>1,739</td>
<td>1,274</td>
</tr>
</tbody>
</table>

*Table 23: Number of hours of service provided by the Generic team according to place where service was given, 2006-2009*

<table>
<thead>
<tr>
<th></th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Home visits</strong></td>
<td>207</td>
<td>261</td>
<td>471</td>
<td>368</td>
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<tr>
<td><strong>Office visits</strong></td>
<td>408</td>
<td>342</td>
<td>371</td>
<td>222</td>
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<tr>
<td><strong>Residential</strong></td>
<td>34</td>
<td>16</td>
<td>33</td>
<td>37</td>
</tr>
<tr>
<td><strong>Court</strong></td>
<td>7</td>
<td>3</td>
<td>22</td>
<td>11</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>656</td>
<td>622</td>
<td>897</td>
<td>638</td>
</tr>
</tbody>
</table>

*Table 24: Number of interventions carried out by the Generic team according to place where service was given, 2006-2009*

1) Peer Review, London

The Service Area Leader of the Generic Services (which include the Generic team) was chosen as a Government delegate to participate in a Peer Review meeting held in London on the 4th and 5th May 2006. The Peer Review organized by “Sure Start” focused on social inclusion. A discussion paper highlighting comments and statements made by Sure Start was presented by the Maltese delegates. It gave an overview of the current services available in Malta and how these services are working in an attempt to combat poverty and social exclusion in Malta.
2) Exchange Seminar, Belfast

In May 2007, a representative from Agenzija Appoġġ participated in a members’ exchange seminar held in Belfast, Ireland. The seminar Promoting Children’s Rights through Positive Parenting Policies, was organized by Eurochild and CNI (Children in Northern Ireland). Agenzija Appoġġ is a member of Eurochild. This seminar provided discussions and suggestions on how countries could promote children’s rights whilst enhancing policies related to positive parenting.

3) Family Workshops

In 2009, the team underwent a reflective exercise where they concluded that group work would be beneficial for a number of their service users. Following discussion with the Management, the team started to work on designing the Family Workshops, which proposal was later accepted by the Management.

The Family Workshops aim to get a group of parents, service users of the Agency, to offer a space for skills training – ranging from personal and inter-personal skills, to home management skills, till finally reaching a stage where they plan a more independent life – that is, as independent as possible on social welfare services.

The Family Workshops aim to bring in an added value to the intervention that is already provided by the Generic Team – that is, having both individual and group interventions.

Way Forward

The team’s experience in working with children and families has taught us that interventions that strengthen protective factors in the lives of children and families are very important and best results are likely to be achieved by a multi-faceted approach that addresses difficulties in different areas.
This kind of integrated approach requires finding out what support and services are available in the community and empower families to make use of them, thus our interventions need to be flexible and not just focused on direct social work intervention. Some families need time-limited and task-centred support but others will need longer-term input, which may come in different forms from different sources, as long as the aim is common and beneficial.

Therefore, the Generic Team is developing an approach, made up of individual and group interventions, as well as building community support networks for the families.

Our clients need encouragement and help to seek support from their own community. Given the appropriate time, support and empowerment parents / families will seek ways of finding solutions to their own problems.
Supportline 179

Objectives of the Service

For over 10 years, the Appoġġ Supportline 179 has been offering support and assistance to thousands of callers from Malta and Gozo. Supportline 179 is the main helpline in Malta, offering any form of help, ranging from guidance and information on available services; to support to lonely people; crisis interventions, such as suicide calls; calls on domestic violence, and reports on child abuse and neglect. Having started by offering some hours of service daily, it went on to become a 24 hour service, 7 days a week by the year 2002.

Performance Review and Analysis

Importantly, this Service is provided by volunteers, some of whom have been giving their service for many years. The team of volunteers, which reaches around 90 at any given time, is trained and supported by professional staff at Appoġġ. The volunteers work in three 4-hour shifts starting at 8.00am till 8.00pm, and another 8-hour shift from 8.00pm till 8.00am the following day.

The fact that the Service is manned by volunteers gives a significant value to the service:

- volunteers are people from all walks of life, with a variety of skills and abilities, who give some of their free time on a weekly basis for the benefit of those in need
- having a great number of people who are not professionals, yet are able to give such a meaningful service, implies that the management of such a service should be different and should always take this factor into account – be it recruitment, skills training, support, and fundamentally, the appreciation of their input, without which, the Service would not be able to run.
In 2006, Supportline 179 celebrated its 10th Anniversary, marked by an activity for all those involved in the Service throughout the years. A group of young people, promising singers and dancers, release a song _Bikja Ohra_, dedicated to those children facing difficult situations, in time for the Supportline’s 10th Anniversary.

In 2006, there were around 21,000 calls made to Supportline 179, 75% of which were genuine calls. In 2007, the calls dropped to around 19,000, with the same percentage of genuine calls as the previous year. In the following years the number of calls continued to decrease.

Around 70% of callers are generally female, while a mere 3% are children. The low number of child callers is often due to the fact that the children, who would need to call through the household landline, would find it difficult to do so while either of the parents is around.
As indicated in the statistical report for 2009, the total number of calls received by the Supportline 179 has been steadily decreasing since 2003. During 2008, the total number of calls decreased by 5% and in 2009 decrease further by 19%, as compared to the previous year.

However the nature and intensity of the calls changed as well when compared to calls made in previous years. Calls tend to be longer and much more complex, leading to the involvement of various professionals in order to support callers. The number of female clients has remained constant over those of male callers. When compared to previous years, there has been a slight increase in calls made in the morning, afternoon and after midnight. Volunteers themselves have seen and felt the increase in callers requesting to talk or asking for information. Mental health, loneliness and depression have remained on top of the number of calls made on 179.

The service has continued to grow and in 2009, two training programmes were concluded. This has led to an increase of around 42 volunteers in 179 (with another 27 joining Programm Ulied Darna). These volunteers received intensive training including practical work on the helpline with the support of paid staff as well as with the support of experienced volunteers.
With regards to paid staff, the service has seen a new leader who joined the team in 2008 and a new Psychology Officer who joined the team towards the end of 2009.

The Annual General Meeting of 2009 took a different dimension. Volunteers’ representatives were involved and even took the initiative to prepare and conduct a session with the other volunteers. This was highly welcomed and gave a sense of responsibility and ownership both to the representatives as well as to the other volunteers. There has been ongoing collaboration between the volunteer representatives and the workers including also meetings with Management. These have led to better collaboration and commitment from both parties.

2009 also saw the introduction of a new concept within 179. As members of the EU, Malta together with other countries was bound to introduce the new EU helplines for social support, namely the Child Helpline 116 111 and the Emotional support helpline 116 123.

The Agency submitted an expression of interest to a call issued by the Ministry for social policy to run the Emotional Support Helpline 116 123. This helpline is very much in line with the nature of calls received on 179. Statistics over the years have shown that as highlighted above, listening, emotional support, mental health, depression are common presenting problems on 179 thus the Agency felt the need to apply for this EU helpline which will be in line with the current procedures of the Supportline 179.

Another initiative was a joint collaboration and joint working document with the Salesians and SOS-Malta for the introduction and implementation of the Child Helpline 116 111. The Salesians and SOS-Malta were already preparing for the introduction of online counselling for children and adolescents. They have carried out research about this with school children. The Agency was asked to support this project due to the expertise in running the Supportline and a new initiative was taken up whereby child helpline and online counselling would be presented as a joint initiative by the three stakeholders. A working document was prepared and presented to the Ministry.
This initiative came in time with the participation of the Service Manager at a regional consultation meeting organised by Child Helpline International (CHI) in Milan. This year’s consultation focused on three main topics. Firstly, it highlighted the issue of new communication technologies which are taken up by children and young people and therefore become more and more important for child helplines. Secondly, it provided a platform to discuss the opportunities and challenges when sharing a common telephone number such as 116 111 and 116 123 and brand on a wider regional level. Andthirdly, it initiated a dialogue amongst the members about the strategic direction of the network and therewith starts shaping the future of CHI. In the same year, Aġenzija Appogg renewed its membership with Child Helpline International and also with FESAT, which is a drug helpline foundation.

During 2009, FESAT together with other member countries launched an EU funded project – Specific Transnational Projects, 2007-2013 – requesting input from various member countries in trying to develop a drug-related policy and procedures for drug helplines. Since the drug helpline previously run by Aġenzija Sedqa (Helpline 151) within FSWS had been amalgamated with Supportline 179 and thus became the responsibility of Aġenzija Appogg, the Agency joined this initiative as Associate Partners. As partners, representatives from the Agency will participate in the seminars and working groups in order to share the history of the service within a European forum. Hopefully during 2010, four or five participants will be eligible to take part in this project. This after receiving a grant from EU funds to join this initiative of FESAT.

As in previous years, in 2009 a joint protocol between Supportline 179 and Richmond Foundation was renewed and signed. This provided for clear guidelines when clients of Richmond Foundation called 179 in crisis situation or after office hours. Throughout the years, this protocol has proved to be good guidelines for the volunteers and helped in establishing a good working relationship with Richmond Foundation.
The Way Forward

Being the main helpline in Malta, the Agency needs to keep on working on making it more accessible and personalised to the general public, for it is offering guidance and support to a great number of Maltese people, or persons living in Malta. Of course, with the great quantity of incoming calls, challenges are many, not least because of the large number of volunteers and the limited resources offered to support these volunteers. The volunteers themselves offer a challenge – in that, one can only expect what they would be willing to give and therefore, should a volunteer slack in his or her work, should s/he show less commitment, the management of the situation has always to be dealt with differently to a staff member. Thus, it also remains a challenge for the team to select the right people who can do this type of work with dedication and commitment.

1) Calls from Children

The number of child callers has always been low, although there are a large number of calls related to children and their needs. It is a constant challenge to reach out to children, knowing the difficulties they face to actually pick up the telephone and call. The use of Supportline 179 is always highlighted when professionals, particularly educators and those doing preventive work. More use of 179 by children would mean that the volunteers would surely need more training on how to deal with children on line.

2) Calls from mobile

With the use of mobile growing in Malta, and the constant decrease in users of landlines, Supportline 179 may become more inaccessible to those needing help, because, while it is a freephone for landlines, it is still a paid service to those using a mobile. Commitment from mobile service providers may help solve this issue.
3) Strengthening the volunteers’ skills

In 2007, the Agency employed a part-time worker to support the volunteers of the Agency. The idea was to have a person focus on the training needs and support of the volunteers, with the ultimate aim of improving the service.

The ultimate aim of Supportline 179 will remain that of providing ongoing support to clients 24 hours a day throughout the whole year. This will continue to be the target for the coming years through the ongoing support and training to volunteers in order to be able to assist clients and professionals in the best way possible.

The year ahead will see further discussions on the restructuring of the service in order to provide a better service whilst making good use of the resources available. The Agency’s two services run by volunteers, namely Supportline 179 and Programm Ulied Darna, need to focus more on identifying the needs the volunteers have and how these can be addressed. The experience of joint marketing campaigns, recruitment, and training of volunteers has proved to be effective and this could serve as the basis for further discussions along these lines.
Initial Response Service

Since the first year of its initiation, the Initial Response Service (IRS) has played a significant role within the Agency. The Service became a primary point of contact for anyone in need of social work intervention or facing a crisis. The IRS soon started to take up all new cases, except those which clearly needed intervention from the Child Protection Services or from the Domestic Violence Services. Thus, the team started to take a growing number of cases, which resulted in the decision by the Agency to increase the staff in 2007.

Objectives of the Service

• To carry out an initial assessment of the presenting situation
• To refer to specialised services, within or outside the Agency, when appropriate and necessary
• To draw up a short-term action plan in cases needing generic short-term intervention
• To build networks with significant service providers to enhance communication and ensure a smooth handover of cases when necessary.

Performance Review and Analysis

Referrals come mainly through drop-ins (that is, unscheduled appointments), telephone calls (either directly to Appoġġ Customer Care or through the Appoġġ Supportline 179), or through other services or professionals. In these last years, a considerable number of referrals came through the Agency’s or Ministry’s website, whereby people made use of this medium to ask for help and support.

Therefore, the members of staff have to be available for arising situations whilst each were following open cases, which would amount to 40-45 per worker. The difficulty that the workers constantly face is the fact that, although they have a full caseload, albeit of short-term cases, they have a
constant intake of new cases, some of which are crises and thus require immediate intervention. When the IRS workers are faced with a crisis, they would have to work solely on that, often in pairs, depending on the nature of the case. Therefore, the daily tasks on their caseload are disrupted in order to deal with the crises.

1) Client Groups

A large percentage of cases dealt with by IRS involve children (nearly 50%), varying from behavioural problems, dysfunctional family situations, emergency placements for children and difficulties in parent-child relationships. Significantly, IRS started to take on cases of child neglect, while referring cases identified as severe neglect directly to the Appoġġ Child Protection Services. This means that some pressure was removed from the Child Protection Services, which were facing a constantly growing number of referrals that increased in severity and urgency.

This involvement in child neglect cases led to more communication with the Child Protection Services to find ways of working efficiently together when necessary, or to have a common approach and practice, to ensure that the work is done with the highest standards possible.

Most child neglect cases require long-term intervention. Therefore, the IRS refers the cases to the Appoġġ Generic team, which deals with long-term generic cases, as long as the service users accept social work intervention. Problems arise when the Generic team, itself having limited resources, is unable to take the case immediately because of the full caseload. Thus, sometimes, in cases where the children are at high risk of neglect, the IRS would have to continue to work with the family to avoid placing the case on a waiting list. Once the Generic team is able to allocate the case, then it is handed over, allowing the IRS to close the case. Thus, close liaison between IRS and the Generic team is very important for the best possible transition of cases.

Other situations presented include adults going through
marital difficulties or separation, financial difficulties and, in cases of crisis, suicidal attempts and homelessness.

Figure 51 shows a sharp rise in child abuse cases, in family/relationship cases and a slight rise in homeless cases over the three years under review. The other issues, such as child behaviour, separation / child access and marital problems, have seen a decrease, although, since they are related, it could be that the presenting problem would be first considered for statistical purposes.
Child abuse and family relational problems are the most reported forms of problems occurring within new cases in 2008 and 2009 (Figure 52). The high number of child abuse cases may be due to the fact that IRS has been taking over more cases of child neglect from the Child Protection Service.

2) Staff

Up till 2007, the IRS was working with 3 Social Workers (there was an increase of 20 hours of social work intervention from 2005). Furthermore, in 2006, the Service Area Leader was handed the responsibility of an additional service. That meant that the Leader had 3 services to manage, one of which was completely new. In 2008 another change in leadership took place.

However, by mid-2007, members of staff within this service had increased to 6 Social Workers, including also a coordinator. The idea of having a coordinator was to have a more experienced worker assist the Service Area Leader in tasks such as guidance and support to the new workers, administrative tasks, such as filtering the waiting list.

The increase in staff meant that the roster that was set up in 2005 would work more efficiently. The shifts include intake, that is, seeing to drop-ins, having back-up to the intake worker in crisis situations and/or high flow of new cases of the day, as well as more time to carry out home visits, office visits or meetings with other professionals. The roster minimised the problem of having disruptions in the day-to-day casework due to crises, besides giving the workers an equal distribution of different tasks during the week.

An increase in staff also meant that, although the number of referrals was increasing, the service was able to respond to more cases. There was more room for allocation of cases to workers, thus also reducing the waiting time for cases on the waiting list, and more openings and closures of cases.
As mentioned above, there are situations that require the workers to work in pairs – namely, cases of crisis intervention or assessment of child neglect cases. The main reasons for this are safety, having better assessments, support in the various immediate tasks that need to be carried out, the need to have more accurate reports in case of Court proceedings, as well as to be in a better position to give evidence in Court, should it be needed.

The Administrative Support Worker of the Initial Response Service worked on improving the filing system, since new cases increased by around 75% between 2006 and 2008.

3) Challenges and Achievements

During the past four years, IRS went through major developments, and though it is relatively new and smaller than some other Appogg services, its significance is essential to the Agency, and managing such a service is full of challenges.

In managing a service such as IRS, one must bear in mind the increasing number of cases – as the service becomes known, more people would refer to it. One must be careful to ensure that the service is used appropriately, so that the resources would be used properly and by people who cannot be assisted by other professionals coming from other specialised services. Such instances include people who come for legal advice, when clearly, this cannot be given.

Another important issue to bear in mind is that within a day, one can have a vast array of presenting problems. Social Workers need to be equipped for any form of assessment, to deal with any form of situation. This, compounded with the fact that the majority of the service users are new or relatively new, makes the task not an easy one.

Crisis situations are commonplace – and since by their nature they have to be dealt with immediately, Social Workers often have to drop scheduled tasks to deal with the crisis at hand, not to mention the ever increasing
complexity of situations that are presented which are more time consuming and need more consultation.

However, the service has built and continues to build a good knowledge base and experience to deal with the growing and changing demands. It is crucial that the team is supported and managed positively to bring out the best possible output. This is not without difficulty since on one single day, the team would have to deal with 7 to 8 new cases. Time management, therefore, is paramount.

Figure 53 shows the number of cases referred to the Appoġġ Initial Response Service. Since 2005, the number of referrals has been increasing steadily, reaching slightly more than 1,800 in 2008. In 2009 there was an increase of 1% over 2008 which, in turn, had a 14% increase over 2007.

In 2009, IRS received a total of 1,827 referrals. As regards to the nature of referrals, they differ from parent-child, family relations, behavioural problems, homelessness, legal, child neglect / emotional abuse, day care, amongst others. However the main presenting problems were behavioural problems, child neglect / emotional abuse, and family relations.
Workers conducted around 217 home visits, an increase of 36 visits when compared to 2008. The number of office visits also increased from 1,021 in 2008 to 1,246 in 2009.

In March 2009, the IRS workers conducted a blitz day in order to screen the waiting list. The Service saw also an increase in the number of referrals received via the Agency’s website whereby the majority of them were assessed by the IRS workers and referred to other services where applicable. As at the end of 2009, the Service had a waiting list of 74 cases.

Other challenges that the team faces include the lack of psychological services and extra resources to support the service users going through particular circumstances – for example, crises such as the Naxxar tragedy in 2008 (the firework explosion in a residential area) and other such instances which are immediately referred to the Initial Response Service. In such instances, the Appoġġ Management team supports the members of staff by trying to provide extra resources however these are not easy to obtain. Another challenge involves having to respond instantly to new emerging trends – for example, dealing with perpetrators of domestic violence when they come and request a service, while the abused partners would be seeking support and/or shelter from Appoġġ. The team would have to respond to new situations and constantly seek new ways of co-working with other services.

Another major challenge is the number of referrals that workers deal with on a daily basis. The nature of the referrals varies continuously and workers feel the need to be always updated and trained in the various areas and issues that continuously arise.

One of the major phenomena in 2009 was the increase in the number of asylum seekers seeking support from the Agency. Once these people leave the open centres following a number of months receiving support and guidance from Agency AWAS, they move into the community with the result that the majority of them lack employment, housing and, at times, the basic needs such
as food etc. This has led to an increase in the number of asylum seekers seeking the interventions of IRS Social Workers – at times having to face the reality of not having the necessary means to support these clients.

**Way Forward**

Whilst working on increasing the efficiency of the service – the response to crises, the quality of service provision, training and support to staff – the team will be working on the following:

a) **Guidelines regarding presenting problems**
These would outline guiding principles on how various situations should be addressed.

b) **Finalisation of the Procedures Manual**
This would clarify the aims and objectives of the service and the way the service is to be run.

c) **Protocols within and outside the agency and review of existing ones**
There are already a number of protocols in place between IRS and other services. These would be reviewed regularly to ensure that they are still relevant to the day-to-day practice of the service. New protocols are planned to be drawn up with services such as Domestic Violence Services and the Generic team, amongst others.

d) **Review of Initial Assessment Forms**
The Initial Assessment Forms are tools that each worker uses when dealing with new cases. These would be reviewed to ensure the relevance of the information being gathered for the purpose of assessment and further intervention as well as the clarity and practicality of the forms.

e) **Evaluation of the service**
The working procedures of the Service need regular evaluations in order to guarantee that it is responding to the needs of the service users in the best way possible.
f) **Evaluation of forms**

The Initial Assessment Form and the Out of Home Care Forms are pertinent to the IRS team and thus need to be user friendly for more efficiency in their work. Therefore, the Forms need to be reviewed from time to time. Work with the Residential Homes, in the case of the Out of Home Care Forms, would guarantee that the forms used are valid and appropriate.

As the current situation stands, whereby IRS Social Workers are carrying huge caseloads with long term cases, a new way of thinking in addressing this issue as well as addressing the waiting list that has been on the increase, will be carried out in the coming years. The ultimate aim is to reduce the waiting list making the service respond more quickly and efficiently to the needs of the service users.
Programm Ulied Darna

Objectives of the Service

Programm Ulied Darna (PUD) consists of three projects – Progett Flimkien, Progett Hsibt Fik and Progett Tereža.

1) Progett Flimkien

The aim of this project is to encourage the development of parenting through hands-on experience. This is carried out by trained volunteers who work together with parents by addressing parental concerns and family needs. Volunteers visit families at home and try to support and encourage parents to help their children develop to their fullest potential. They also work to build on the parents’ self-confidence and promote the overall development of children physically, emotionally, socially and intellectually. Through self-confidence, parents are helped to avail of other resources within the community which can give them encouragement and support in bringing up their children.

2) Progett Hsibt Fik

Volunteers enrolled through Progett Hsibt Fik provide services which cater for children’s needs and indirectly support their family / carers. The main aim is to offer practical help and support by means of providing transportation, child-minding, homework assistance, respite services and outings for children. The focus is on the children, yet volunteers support also their families and carers. Volunteers from both services work jointly by providing a holistic service to children and their families in conjunction with other professional help that families receive from other services within the Agency and from others as well.

3) Progett Tereža

Progett Tereža was launched to provide practical help with the aim of catering for the various materialistic needs
of families and individuals in difficulty. This can take the form of helping in the sorting and storing of donations, the delivery of goods, matching requests to donations, and checking the quality of donations. Progett Tereža is at times the first link that families in need have with the Agency. At times, in situations were families lack the initiative to request help, by providing material support to these families, the Agency will continue to follow the families and offer them other support that they require.

This service is run by a highly committed volunteer who forms part of the Programm Ulied Darna team. This person dedicates around 10-15 hours of service every week and after a number of years of service, he is able to link families in need to other services that the Agency offers.

4) Parenting Skills

Way back in 2006, this Service was provided by a trained volunteer and a Psychologist. In the years that followed, this Service was not being offered. However, service users were being referred to other services within the Foundation for Social Welfare Services which are more specialised in providing this service. In 2007, Project Officers within PUD and Social Workers felt the need that a more suitable and structured parenting skills programme for our service users was required. The idea was to provide the basic skills needed in a way that service users could apprehend and eventually put into practice what they learn and discuss in small parenting skills groups.

These skills programmes provide Appoġġ service users the basic skills in child rearing, focusing mainly on communication and discipline of children by means of a 7 two-hour sessions course in parenting skills facilitated currently by one of the PUD Project Officers who is also trained in providing these programmes. The Facilitator liaises continuously with the service users’ Social Worker and provides adequate feedback to help families ameliorate their family situation.
These projects are aimed at working with parents and families by providing emotional support and practical help, with the ultimate aim of supporting the family unit in order to cater for the well-being and interests of children. The three projects do not work separately, and thus Social Workers liaise with PUD Project Officers before referring a case to either of the projects. In this way, service users are offered a package of services that best suits their needs.

**Performance Review and Analysis**

By the end of 2006, *Programm Ulied Darna* had 71 volunteers including nine new volunteers who joined the pool of volunteers throughout that year. Between 2006 and 2008, *Programm Ulied Darna* saw an increase of 35 new volunteers (nine in 2006, fourteen in 2007 and twelve in 2008). 33 volunteers resigned from PUD for various reasons during the same period. This was complemented by an increase of 27 volunteers in 2009 following two joint campaigns and training programmes together with Supportline 179.

In 2006, the volunteers within *Programm Ulied Darna* dedicated around 5,500 hours of voluntary services within the 3 projects, that is an average 15 hours per day. There was also an increase in the volunteers’ participation in the support groups, which are held regularly throughout the year. The aim of these support groups is to give the opportunity to volunteers to come together and discuss issues and dilemmas arising out of their work, in the presence of their supervisor. Furthermore, throughout the same year, volunteers attended the European Social Fund training organised by the Foundation for Social Welfare Services.

A database for all PUD cases was set up. The database included also statistics regarding requests and donations received by *Proğett Tereža*. This gave a clearer picture of the type of requests and referrals that are being made to the Service, also helping in obtaining a clearer picture of the needs of the families who are in dire need of social support and how PUD managed to intervene with these families.
In June 2006, Project Officers worked on decreasing the waiting list of Proġett Hsibt Fik, which at the time stood at 224 cases. An intensive exercise was carried out. All cases referred were reviewed and assessed. Through this exercise, the waiting list was reduced to 85 cases.

There were a total of eighteen families referred to Proġett Flimkien between 2006 and 2008. These families required the assistance and support of a volunteer to help them enhance their parenting skills. In 2006, sixteen families were supported by trained volunteers. Some of these families benefited from this Service even in previous years and thus these cases where carried forward to the following year. Families talk very positively about the support they receive from volunteers. They feel that volunteers’ support was essential in their lives and helped them a lot in the upbringing of their children.

Volunteers dedicate a lot of their time to these families, and Social Workers working with these families do acknowledge and appreciate that families supported by volunteers do a lot of improvement ultimately in the best interest of the children. Parents feel that the attention and dedication of volunteers helped them structure and offer security to their children. Volunteers who supported parents who were finding it difficult to control their children, or offered them the necessary skills to help keep the family together, feel proud and highly motivated when their efforts, guidance and continuous support results in children not being removed from their family environment. This is highly motivating and rewarding to volunteers who see that their efforts contributed towards a better family environment for children.

Proġett Hsibt Fik is highly requested by families and Social Workers who work with these families. In 2006, the Service received 55 case referrals, which increased to 85 in 2007. In 2008, due to the large of amount of cases on the waiting list, the number of cases referred decreased to 38 since workers were not referring a lot of cases due to the amount of cases that were awaiting service. Again due to the lack of closures and the lack of volunteers available, few allocations
were being made. *Progetto Flimkien* experienced a decline between 2006 and 2008. In 2006 the service received 20 case referrals which decreased to 19 referrals in 2007 and 13 referrals in 2008.

*Progetto Tereza* remained highly requested throughout the 2006-2009 period, during which the project received 111 requests for material support in 2006, 138 requests in 2007, 65 requests in 2008 and 144 requests in 2009. This, in turn, was supported by 99 donations in 2006, 146 donations in 2007, 68 donations in 2008 and 105 donations in 2009. The role of the volunteer within this project is to match requests and donations according to the family’s needs.

1) Administration

The referral form of *Progetto Flimkien* was reviewed and a new one was designed. The new referral form was intended to be more user-friendly and able to give a more comprehensive picture of the needs of the families that were being referred.

Efficient organisation and administration is pivotal in the projects and thus, administrative exercises are on-going, to ensure that the service users receive the highest possible quality service. This includes, for example, better communication between the Project Officers and the volunteers, and those volunteers having an email address started to receive communication via email. This also meant that communication was made easier and more cost effective.

A new Service Area Leader was appointed in the beginning of 2006. The new leader took on other Services, namely, the Generic Service, the Adolescent Outreach Service, and the Prison Services. One of the main tasks of the new leader was to restructure the parenting skills groups, following the resignation of the parenting skills facilitators. During this restructuring exercise, there were consultations between the Service Manager, Service Area Leader and the Project Officers to make the groups more focused on the needs of the families receiving support from
the Agency. This change came into force in 2007 and such programmes started to be implemented as well. During that same year, the Project Officer for Proġett Hsibt Fik was replaced. Another change in leadership took place in 2008 when the Service Area Leader of the Generic Service was appointed Service Manager and thus a new leader replaced her. The service saw the move of one of the workers to a Social Worker position thus a new Social Administrator joined the team towards the end of 2009.

2) Recruitment Campaign

Each year, the FSWS Marketing team assists PUD by coordinating a campaign to recruit new volunteers. Since PUD is not the only service that runs with volunteers (the other services being Supportline 179 and Home-Start Malta), an idea developed to make one larger campaign and recruitment exercise. Therefore, the campaign in 2007 was a joint one with Supportline 179, whilst in 2008 Home-Start Malta was also included in the recruitment campaign.

The idea of having one common campaign was to try and attract as many people as possible who would wish to do voluntary work. It was thought that by not specifying at an early stage what sort of work is needed, more people would be curious and interested to find out more about voluntary work within the Agency. Specifications of the type of work needed would be given at an information meeting held for all those who are interested in doing voluntary work.

Another reason for the joint campaign and recruitment exercise was to have combined resources and shared ideas between the two Services.

The process of joint recruitment started off with an intensive marketing campaign, with slots on the television and radio stations, newspaper articles, and advertisements. The staff from both Services participated in the marketing exercise, talking about the benefits of voluntary work and also giving an idea on what kind of work would be required from the prospective volunteers.
This was followed by the information meetings, where those showing interest would be invited and would hear about what Appoġġ has to offer and what the volunteers would be doing. Those still interested undertook a group interview, with 8 to 10 prospective volunteers participating. The structure consists of a case study whereby all those present would discuss possible solutions. The facilitators’ role was to observe volunteers and assess their abilities, attitudes, personality and perception of voluntary work. Where the need arose, an individual interview followed.

Once the prospective volunteers are accepted, they receive training. The structure of the training also was reviewed and changed. The initial 6 sessions were done jointly, and consisted of training on helping skills that any volunteer, in any setting would need. After the first part of the training, the volunteers, with the help and assessment of facilitators, could choose their area of preference and would move on to the second part of the training, which was more specific to the needs of respective services.

Overall, one can say that this was a successful initiative and the joint exercise was repeated in 2008.

3) Volunteers’ experience

The work done by volunteers calls for the recognition and appreciation. Volunteers are offering their commitment and responsibility from their free time, their only interest being helping others. Their work complements that of professionals and it is part of the care plan that individuals and families have. They manage to build a very good professional relationship with service users, and the latter themselves look forward to their time with the volunteer.

Through the volunteers’ dedication and hard work, PUD manages to support other units within the Agency. There have been many success stories in the past year. These are some comments put forward by volunteers:

“I have been a PUD volunteer for the past three years. My role as a volunteer representative is that I help
wherever it is needed. Other volunteers encouraged me and I also found encouragement from the coordinators. But the thing that motivates me most is that you find the help and support you need in whatever you do”. ("Ili volontiera mal-PUD għal dawn l-aħħar 3 snin. Ir-rewol tieghi ta’ rappreżentanta tal-voluntiera huwa li nghin fejn ikun mehtejg. Hajruni volontiera oħra u sibt ukoll inkorraġiment mill-'Coordinators'. L-aktar ġaġa li tinkuraġġini hija li ssib l-għajnuna li tkun tehtejg u sapport f’dak li tkun qed taħmel. “)

“I have been with PUD for the past 4 years. I got interested to represent the volunteers so to get to know the other volunteers well and to be able to assist them better. The needs of the volunteers is what encourages me most to represent them”. ("Ili mal-PUD għal dawn l-aħħar 4 snin. Thajjart inkun rappreżentanta tal-voluntiera biex inkun naf aktar lil-l-voluntiera oħra u biex inkun nista’ nghinnhom aħjar. Il-bżonnijiet tal-voluntiera hija l-aktar ġaġa li tinkuraġġini nkun rappreżentanta.”)

Throughout 2007, PUD saw a more active role from the volunteers’ representatives. Throughout these years, the latter worked on an evaluation of a questionnaire which was sent to all volunteers in order to improve the service and identify the key areas of training for volunteers. They also compile a quarterly newsletter which the Service issues for all volunteers.

Another added value in the Service was the recruitment of a part-timer, who was selected to work with the volunteers of the Appoġġ Services – that is, both those within PUD and Supportline 179. The new worker’s role is to help out in the recruitment and training of volunteers and to give more attention to their needs, particularly, their training needs so as to enhance their output and maintain their commitment and potential. This is done, ultimately, for the benefit of the beneficiaries of the service.

During 2009, the service continued to develop along the lines of joining the projects rather than having them separate. This in order to give an idea of a holistic service
provision to clients and better administration of the input that volunteers were giving. The decrease in referrals as well as a decrease in service openings has led to further discussion within the team regarding a new way of addressing the needs of clients with the current cohort of volunteers.

This new way of thinking and restructuring came along also with the initiative and plans from the Foundation for Education Services to start homework clubs in a few communities in Malta, and with its plans to target firstly the Appoġġ clients who are requesting help with homework, "Proġett Tereża" continued along the lines of previous years. It remains a needed service and a way of getting in touch with service users who may find it difficult to seek help or feel shame of doing so. The number of donations received and tackled increased considerably in 2009. In all, the service provided 220 deliveries and pick-ups in 2009.

Workers from "Programm Ulied Darn" were invited to attend a training workshop organized by Home-Start Malta. They had the opportunity to meet with the local Home-Start organizer, volunteers, and with the CEO of Home-Start International – Ms Anna Stuttard, who shared her experience and views in working with families with young children.

As in previous years, joint marketing, recruitment and training for volunteers took place with the Sipportline 179 Service. This continued to confirm its validity and whilst new volunteers joined both services, there were volunteers from one service who requested to receive training from the other service in order to be able to provide voluntary work within both services.

Throughout 2009 the Agency, through its services of Supportline 179 and PUD, continued to gain a good reputation of the good structure and organised training that it provides to its volunteers. Heritage Malta requested guidance and support from the Agency and a meeting between the Service Manager and the managers of
Heritage Malta was held whereby an overview of the current system of the Agency in recruiting and training volunteers was shared. This initiative was taken up by Heritage Malta in preparation of a voluntary scheme that they were planning of setting up.

**The Way Forward**

1) **Joint Recruitment**

The exercise is giving satisfying results and is broadening the experience of the staff who is involved. Therefore, it is beneficial that the process is repeated each year, having an evaluation to see what went well and what needs to be improved for the next exercise.

2) **Support groups for volunteers**

The support groups need to be strengthened since the volunteers need to be nourished and supported to continue to provide a quality service to the families. These support groups have an element of on-going training.

3) **Appreciation from professionals**

The volunteers do lots of quality work and support many families, selflessly and with the best values at heart. Their work needs to be appreciated and recognised, not only because they deserve this but also to help them feel more valued and feel that they are an essential part of the Service. By raising more awareness on the value of the volunteers, more people may be encouraged to offer their time to voluntary work.

4) **Focus on Positive Parenting**

A need is felt to design parental skills courses that are more tailor-made for the needs of the Appoġġ service users. Although there are a number of parental skills training courses available, for example, those organised by Sedqa’s Prevention team, the case is such that often, the families who use the Appoġġ services find it difficult to integrate
with the mainstream participating parents. The reasons for this are mainly the low skills that the service users present, the family situations that are generally more complex than mainstream family situations (this, compounded with the low skills, make them more difficult to cope with), as well as health or mental health problems presented by the parents.

However, it is important to network with Agencies such as Aġenzija Sedqa to maximize available resources and work on integrating the service users to the mainstream. As mentioned above, such programmes tailor-made for Appoġġ service users are being organised. More emphasis on promoting positive parenting is essential. Volunteers should also be trained in positive parenting thus what parents/carers are taught during parenting skills programmes will be enhanced by hands on experience between the parents/carers and the volunteers.

5) Networking with other Agencies/Organisations

Contacts have been established with organisations such as the Kummissjoni Djocebana Familja and other organisations or NGOs that work with families in need that offer services from within the community. This would help offer a more holistic and supportive service to the families. There have also been plans to help in training volunteers who work with families in need in the community. These plans need to be developed once more contact is made with the organisations. Of course, one needs to consider the available resources of the Agency to do this and therefore, it is a slow process that needs careful planning.

Programm Ulied Darna helps to promote the overall well-being of parents, children and families. Identifying and training volunteers will remain the focal point since without the interventions of these volunteers, this Service would not be able to operate. A word of thanks to all volunteers who formed part of this team and were there to support families in need.
The way forward will remain that of amalgamating the different projects of *Programm Ulied Darna* and to think along the lines of preparing and supporting volunteers to offer the service that is required by the family. This implies that the service should be based on the families’ needs and not according to the different projects.
Cottonera Community Service

This service has been provided to the residents in Cottonera since 1994 expanding its remit from Bormla to the whole of Cottonera and Kalkara upon moving to the ACCESS Community Resource Centre in Birgu in 2002.

Objectives of the Service

The Cottonera Community Service aims to provide two levels of service:

a) the provision of community-based social work services – addressing the presenting issues whilst taking into consideration the context, culture and everyday life of the residents. When working within the community, that is, being based in the community, the Social Workers use the knowledge they gain about the community together with the links they build with other service providers, other resourceful people or leaders, to provide a service that is more accessible, personalised, effective and relevant to the needs of the local community.

b) the provision of community development work – supporting the local community to facilitate a process of change through participation and involvement to improve the quality of life of the residents. This is done through outreach work, formal and informal contacts with the residents, skills training, as well as through project work.

The Cottonera Community Service is built on values that enhance the local potential, promote social inclusion and build support networks, ultimately for the residents to enjoy a better quality of life.
The team also works with other service providers operating within the same localities, with the aim of offering a more holistic service to the service users, as well as to influence the service provision within the community. This ensures that the service responds to the real needs of the residents and that it enables personal development rather than hinders it.

Performance Review and Analysis

1) Community Social Work

The nature of social work cases dealt with vary considerably ranging from adolescents with emotional and behavioural difficulties, children at risk of abuse, persons with mental health difficulties, childcare issues and family problems, to difficulties associated with ageing and addictions.

The Community Social Workers support individuals and families on a short-term as well as a long-term basis, as the case require. This is a voluntary service, in the sense that people ask for or choose to receive a social work service. Therefore, the Social Worker is able to build a good and trusting working relationship with the service users, allowing for better support and guidance on several issues. Perhaps the most pressing issues involve situations where there are large families with low financial income, families with health or mental health issues and low skilled families. The Social Workers support the families in order to avoid having children being removed from their family and placed into care.

There is a multitude of situations that the families and individuals face, including social isolation – including a lack of adequate support systems, illiteracy or low levels of literacy, unemployment, low paid jobs or job instability, poor housing or homelessness – dysfunctional and violent intra-family relationships, poor financial situations, school absenteeism, risk of addictions or substance misuse, and delinquency or other criminal activity, amongst others. This means that the Social Workers have to be versatile and prepared for any sort of situation, with the constant aim of
supporting the person to address the issues in the best way possible.

However, clearly, the Social Workers cannot work alone; they are constantly working with other professionals, volunteers, relatives and/or friends involved in the service user’s lives. These include schools, mental health services (both local as well as central), services for addiction problems (namely Aġenzija Sedqa and Caritas), parishes, local councils, NGOs that offer informal services to the families, and other specialised service providers.

Unfortunately, there are situations where, even though the Social Workers are involved in the families’ lives and give all the possible support, the risks of child abuse are too great and the Child Protection Services need to be involved. In cases where the families fail to protect their children from abuse, even with the support of the Community Social Worker, a Care Order is issued and the children are removed from the family. Wherever possible, the Community Social Worker continues to work with the family. Fortunately, on many occasions, the relationship built between the family and the Community Social Worker is such that it allows for this to happen. This is a key strength in the work within the community.

The Community Social Workers have an average caseload of 40 cases each. However, unfortunately, the demands are so great, that they end up dealing with around 45-50 over a period of time, particularly when the new cases present crisis situations or other very serious situations that cannot be put on a waiting list. There is an average of 42 cases on the waiting list at any point in time during the year. In order to avoid people being left on the waiting list for a long time, the team carries out an exercise, once or twice a year, where they revise the waiting list, contact the persons waiting for the service and gather the necessary information to determine whether the cases need to be closed, given more priority and thus be allocated immediately or remain on the waiting list.
One problem that the Social Workers face is that there is a significant number of families needing long-term support and therefore, there would be little space for allocation of new cases. Therefore, one of the challenges in the community is working against long-term dependency on the social work service. To this effect, the Cottonera Community Service would need to review the operations and ensure that the interventions are pertinent and efficient. One way of dealing with this is through the involvement of the community development workers. In fact, a community team should always include the community development element, so that the issues that the service users are facing would be addressed also through project work in the community.

This is not always an easy task because the design and implementation of community projects often depend on the resources available, which are not always forthcoming. Nevertheless, it is up to the team to work constantly on focusing on the needs of the most vulnerable in the community.

i) Sources of Referrals

![Figure 54: Sources of referrals of new cases in 2008](image)

- Self 60%
- Family/Friend 21%
- Other professional 3%
- Community work/parish 2%
- Mental health service/hospital/health services 3%
- Appogg 9%
- Other 1%
- Unspecified 1%
Figure 54 shows where the cases dealt with by the Cottonera Community Service are referred from. It is important to note that a good majority are self-referred and that the rest of the referrals are done with the consent of the person.

Figure 55 again portrays that a large percentage of the cases each year are self-referred, highlighting the significance of the service in the community. It is interesting to note that there is a steady number of people who return to request the service more than once.

<table>
<thead>
<tr>
<th></th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of referrals</td>
<td>137</td>
<td>148</td>
<td>164</td>
<td>237</td>
</tr>
<tr>
<td>Service period opening (new and re-openined cases)</td>
<td>104</td>
<td>141</td>
<td>166</td>
<td>253</td>
</tr>
<tr>
<td>New cases opened</td>
<td>89</td>
<td>103</td>
<td>148</td>
<td>101</td>
</tr>
<tr>
<td>Service period Closed</td>
<td>66</td>
<td>147</td>
<td>105</td>
<td>223</td>
</tr>
</tbody>
</table>

Table 25: CCS case breakdown, 2006-2009
ii) Social Work in Mental Health

In 2006, the Mount Carmel Community Services opened the Bormla Day Centre which extended its service to a number of persons in the community suffering from mental health problems. The Day Centre aims to provide aftercare support, rehabilitation and links with community resources to prevent relapse.

At the time, Aġenzija Appoġġ was asked to provide a part-time Social Worker from the Cottonera Community Service. However, eventually, it was decided that although the close link with CCS would be maintained, the Social Worker would receive supervision from the Coordinator of the Qormi Health Centre, whose experience in community-based service provision for persons with mental health problems would be an asset to the Social Worker. Therefore, the Social Worker moved out of the CCS team.

With the introduction of a new community based team of mental health professionals in the Bormla Health Centre, the Cottonera Community Team saw the importance of formalising working relationships between the two teams, particularly because of the high rate of CCS service users having different levels of mental health problems. A meeting was held in 2009 and it is expected that a working protocol would be drawn up for easier communication and a more comprehensive service to the residents.

In the meantime, however, the presence of the psychiatric team has been a great help and support to the CCS Social Workers who sometimes find difficulties in dealing with certain situations on their own.

2) Community Development

The basis of community development is the empowerment of the local residents, by organisation and skills training, to improve the quality of life of the community through collective action. Community development seeks to identify the community’s potential, to strengthen it and to facilitate local participation in addressing issues that are affecting the community. Consequently, a number of community
work projects were developed along the years focusing on literacy, employment, leadership skills and informal education among others, which have been identified throughout the years as priority issues in Cottonera.

i) Education

a) Progetto Taglilm
This project aims to assist primary school children with their homework once a week, after school hours. The project involves young volunteers between the ages of 16 and 20 years who are mostly, though not exclusively, post-secondary students attending De La Salle College. Progetto Taglilm is a good example of how community resources meet the needs of the community.

This project started in 2002 and initially targeted children from Senglea, thanks to the informal work carried out by a Jesuit residing there. Once the Community Worker started tapping in resources, first offered by a De La Salle brother, through the College students, the project was able to expand to the other communities. In fact, in 2003, the Birgu Primary school was included in the project. In the following years, Bormla and Kalkara were included. The Kalkara Primary school’s participation was not as consistent as the others. However by 2008, all the Primary schools in the Cottonera and Kalkara area were benefiting from this project.

Throughout the years, the project assisted an average of 30 children from each Primary school with the help of a group of 25 volunteers. Unfortunately, once the volunteers leave Sixth Form, it would be difficult for them to maintain contact and therefore, the volunteer turnover could be a bit of a setback. However, the disruption for the children is minimal, since it is based on a scholastic year and so, both children and volunteers would be changing every scholastic year.

Progetto Taglilm has become a very important project that has been accepted by the local primary schools, with around a hundred children from all schools benefitting from it. The CCS aims to increase the involvement of the St
Margaret College, since it deals directly with educational matters. In 2009, there were talks between ACCESS, the College Principal and the CCS with the idea of having a more incorporated approach to the project.

b) Klabbsajf

*Klabbsajf* is a summer club that provides creative and educational activities for children with the assistance of volunteers from the community on a twice-weekly basis. Through *Klabbsajf*, the participants aged between 6 and 12 years, enjoy a safe environment and informal education activities. The children learn through activities such as art, crafts, drama, sport and dance. This is an integral part of this project which ends with a talent show produced by the children themselves. In 2007, the team and the Management decided to recruit a resident from the community with adequate skills as a coordinator to assist the Community Worker. This proved to be very helpful to the latter as well as empowering for the resident. It was also a step towards increasing the ownership of the project, that is, there was the direct and valuable input on a managerial level from a person in the community.

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*Figure 56: Rate of children and volunteers participating in Klabbsajf, 2006-2008*
As one can see from Figure 56, the rise in children participating in the project is evident. After operating for years, *Klabbsajf* continues to be a project which the families in Cottonera seek each year. Along the years, the organisation has changed but the general output has been maintained, with constant efforts to provide best activities possible.

As in *Proġett Taghlim*, the CCS started to have talks with St Margaret College, again, with the idea of increasing its involvement in the project. As a result, the College agreed to provide a coordinator who would help in the leadership of such project. It is hoped that in the future, further collaboration would be strengthened for the benefit of the children participating in Klabbsajf.

c) FAACT: FES-Appoġġ-ACCESS Coordination Team
In 2006, three main entities got together to form a coordination team with the idea to oversee any initiatives related to education. This team incorporated the Foundation for Educational Services, Aġenzija Appoġġ (through the Cottonera Community Service) and ACCESS Community Resource Centre. To this effect, an Empowerment Programme was organised – parents and volunteers were provided with training in empowerment to take community-based action, thus addressing needs in their community such as education. There were 9 participants, who, after fourteen sessions, took part in a 40-hour practicum. They were encouraged to keep a weekly journal about their activities and reflections. With the help of this course, the participants were able to involve themselves in community projects, such as *Klabbsajf*.

Although FAACT ceased to operate, the Cottonera Community Service maintained a very good working relationship with St Margaret College and the Foundation for Educational Services. In fact, in 2008, discussions initiated between the College, Foundation for Educational Services (FES), ACCESS and CCS on how the College and FES can better support the community projects, namely *Klabbsajf* and *Proġett Taghlim*. This would strengthen the input because of the resources provided by FES in
particular, and would also strengthen the educational element in both projects, which is the specialisation of the said entity.

**ii) Employment**

a) **Women in Work**  
The Cottonera Community Service has also been actively engaged in the development of specific projects in partnership with other entities at ACCESS including the Employment and Training Corporation. One such project is the Women in Work project that seeks to motivate and empower women to become more active in the labour market.

In 2006, there were two focus groups – one for female registrants with ETC and the other for the general public (targeting women). The aim of the focus groups was to see what barriers women face when seeking and maintaining jobs. The focus groups were followed by a number of training sessions, designed with the involvement of the participants. There were 11 participants, 3 of which found employment. 6 participated in the Work Start Scheme (ETC) and 1 participant received sponsorship by ETC for training in hairdressing.

In 2007, there was a restructuring of the project. It was divided into three phases. The 1st phase consisted of the focus groups; again, the aim being to identify the stumbling blocks that women face to seek employment or to re-enter the labour market. The next phases of the project were planned to target the needs identified.

A training programme, constituting the 2nd phase followed. This included a total of 8 sessions. Topics covered included empowerment, social security benefits, ETC schemes and women’s rights.

The 3rd phase was a profiling exercise, which was conducted with each participant to identify areas of interest for future training.
Following the success of the project in 2007, there was an attempt to repeat it in 2008. However, unfortunately, the participation was very poor and hence it was agreed by the two main partners, that is, ETC and CCS, that the decision to plan and implement another project would be delayed by a year. The need for such a project would be assessed and another Women at Work project planned accordingly.

**Table 26: Breakdown of participation in the project Women in Work**

<table>
<thead>
<tr>
<th>Status</th>
<th>No. of participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employed</td>
<td>5</td>
</tr>
<tr>
<td>Referred to Work Start Scheme</td>
<td>3</td>
</tr>
<tr>
<td>Referred to ECDL course</td>
<td>5</td>
</tr>
<tr>
<td>Referred to Empowerment course / To make contact again</td>
<td>1</td>
</tr>
<tr>
<td>Finished Nail Technician course / Waiting to get her own tools</td>
<td>1</td>
</tr>
<tr>
<td>Referred to Care Worker’s course (apart from being employed/referred to Work Start Scheme)</td>
<td>2</td>
</tr>
<tr>
<td>Terminated contact</td>
<td>1</td>
</tr>
</tbody>
</table>

b) **REACH**

REACH is another project that was implemented with a number of partners, through European funds. The main partners were CCS and ETC, together with the Area Secondary schools Fortini Boys’ Secondary School and Erin Serracino Girls’ Secondary School. The project targeted those young people who were regularly absent from school, or those at risk of dropping out of school.

In 2006, a study carried out by the ETC revealed that those students who dropped out of school early were more likely to experience long-term unemployment.

Therefore, the aim of the project was to address the obstacles a student may face or is facing to maintain
regular school attendance. These were mainly related to the family environment and the integration at school. Thus, the project developed two courses of action: the first was the recruitment of school mentors, who were to assist the young people at school, help them adapt better to the school environment and make sure they benefit from the resources within the school by receiving individual attention and yet not moving away from the idea of integration. The second action developed later, as the project was broadened to include the family element. Consequently, there was the introduction of the family worker who would complement the work carried out by the learning mentors by carrying out interventions with the families of the young people.

By addressing individual, family and school factors, the project reduced the incidence of absenteeism and improved the educational and employment prospects of these young people. Apart from being involved in the planning and monitoring of the project, the CCS Community Worker supported the learning mentors in their work within the schools. The learning mentors were responsible for providing the support, labour market skills and alternative forms of education to the young people. They were also
responsible to keep contact with and update the CCS Community Worker with the progress at schools. The programme provided an alternative form of education which was well received by the young participants. In fact, 32 students from Form V (19 girls and 12 boys) and 15 Form IV students (8 girls and 7 boys) participated. 31 Form V students sat for their annual examinations and obtained their school leaving certificate.

3) Other Initiatives

i) Progett Dawl
The project was launched on the 8th May 2008. Progett Dawl was originally launched by SOS Malta in partnership with Paulo Freire Institute (Zejtun), the Mosta Local Council, Friends of the Earth (Malta) and the Ministry for Rural Affairs and the Environment, partly financed by the European Social Funds. The aims of the project were twofold:

• To raise awareness on energy saving techniques – to demonstrate cost-effective measures which low income households can take to lower their monthly water and electricity consumption, resulting in savings in energy and water expenditure in the household. This was done by involving a group of unemployed women who were being assisted to re-integrate in the labour market. Therefore, the second aim was
  • To increase the employability of the women by providing hands-on training about energy saving techniques which they would, in turn, pass on to households which would benefit from such techniques.

The experience these women gained in such a project helped their personal development and thus prepared them better to seek a suitable and stable job.

6 women who were registering for work with ETC were identified and trained in communication skills and energy saving techniques. These women were included in the Work Start Scheme and their intervention consisted of visiting 60 families from Cottonera in pairs, training them
in energy saving techniques. The women also distributed 4 energy saving bulbs to each family. The project was partly sponsored by Vodafone Foundation as well as the Birgu and Kalkara local councils.

ii) ABACUS – Community Drama Group
ABACUS is a small drama group which has been involved with the Cottonera Community Services for a number of years. Between 2006 and 2008, they put up a number of forum theatres, held in local Primary and Secondary schools aiming to enhance awareness of psycho-social issues such as bullying and relationships among children and parents. During 2008, through the CCS Community Worker, ABACUS initiated contact with Sedqa Prevention team, which in turn invited the drama group to perform on the topic of addictions through forum theatre.

The group agreed to this and received a large number of requests to perform in many Primary schools across Malta. Although initially the group was supported by the CCS, over the years, it became more independent. This is a good example of how community development helps to empower people, by making them more independent and active in the community.

iii) The pre-adolescents programme
Towards the end of 2006, the Cottonera Community Service benefited from funds to target a small group of pre-adolescents. Since the funds were very limited, the project lasted only a few months and had to be terminated. However, it was considered a good opportunity to pilot the idea of targeting young adolescents, aged between 11 and 13 years. The reason why this age was specifically targeted was because of the difficulties these young people face while in transition to adolescence, especially when there is no attention given to them at home. The transition from a Primary school to a Secondary school may be particularly difficult, especially when they have other issues to deal with.
The aims of the pre-adolescent project are mainly to offer the young participants with:

- space for creativity and self expression
- informal formative education, to teach them how to think for themselves and challenge their environment
- room where to observe, learn and practice social skills
- information regarding issues pertaining to youth
- healthy activities such as drama, sports, and art
- integration within the community.

The young people who were targeted were approached by 2 project workers, one of which was a Youth Worker. There were personal contacts as well as contacts with the families, who, in general, supported the idea. A total of 8 children (5 boys and 3 girls) benefited from the pilot project which spanned along 10 sessions, and included 5 outdoor activities.

The outcome of the project went beyond the expected targets; the young people increased their self-confidence and learned to interact better with others in a group. They used creativity and learned new information including how to browse the internet.

Due the fact that there was a time when there was only one Community Worker within the CCS, the project for pre-adolescents could not be continued. However, in 2009, the CCS was able to utilise a worker who had a background in youth work. Therefore, the project was re-started, with a group of young people, aged between 11 and 13 years, who were mainly children of CCS service users. The project worked on the lines of the previous project and it is hoped to become another ongoing project.

iv) Mental health

Through contacts with the Day Centre for persons with mental health problems in Bormla, the Appoġġ Cottonera Community Service organised an awareness seminar on mental health at the Fortini Boys’ Secondary School. The seminar was organised upon a request from the school and was attended by 30 Form V students. The aim was to target students affected by mental health, either directly so as a
prevention from deterioration of their health, or indirectly through experiencing mental health problems of a relative.

The subject on mental health was introduced during this seminar by a Psychiatrist, following the screening of part of the film *About a Boy*. The participating students were split into workshops, facilitated by professionals from the CCS, the Bormla Day Centre and the Qormi Day Centre.

The issues discussed included:

- whether the film *About a Boy* reflects reality
- the roles and feelings of Markus (the child protagonist in the film whose mother suffers from depression and has attempted suicide)
- the thoughts and feelings of persons suffering from mental health problems
- brainstorming regarding ways and means of helping persons suffering from mental health problems and their relatives
- the difference between depression and feeling down
- the stigma linked to mental health illnesses.

It is hoped that this seminar is repeated, if the schools request it and once the links with the community-based mental health services strengthen further.

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\textbf{v) Sports Budz}

In 2008, the Cottonera Sports Complex organised various sports activities for children and young people. One project in particular was targeted towards children who have less opportunity to practice sports mainly due to their home environment. A number of entities were approached to assist in the organisation activities for these children, such as the Missionaries of Charity. The Management of the Cottonera Sports Complex asked for assistance in dealing with the social aspect of the project, since the participating Coaches did not have such skills to deal with potential issues. The participation in the project from the CCS community was optional and was carried out after working hours. However, it was a good initiative from a community-based resource that aimed to integrate children who were facing social exclusion due to various factors.
vi) Supporting local initiatives
Since 2006, the Community Worker has been regularly supporting two volunteers who facilitate a group of women from Senglea who have social problems. The same participants initially attended Family Workshops organised by the Appoġġ Smartkids Child and Family Support Centre and consequently they kept on meeting once a week within their community. The Community Worker assists the leaders in the planning and preparation stages of the sessions. The CCS team also give direct input by delivering sessions every now and then on various topics such as communication skills and budgeting skills.

vii) Housing Community Worker
Cottonera ranks amongst the highest areas with sub-standard housing in Malta. Being an Inner Harbour area, and having passed through various housing problems for decades, the majority of the houses or flats – which are usually rented – lack the necessary facilities, are often overcrowded because of the little space provided, and offer very poor, if not dangerous, physical environment. These factors all contribute towards problems for those people occupying the premises while compounding the problems they already face.

Therefore, along the years, the CCS has built close ties with the Housing Authority which offered schemes and, more significantly, the Care and Repair Service, targeted at people who for various reasons are unable to apply for other schemes and would need more support in having their house or flat refurbished. These people mainly include the elderly, people with health or mental health problems, as well as low-skilled people, amongst others.

Therefore, the need to support these people to maximise the benefits of the services offered and to assist the Housing Authority to offer a more personalised service, were fundamental. Thus, the idea of the Housing Community Worker developed. The idea was well received by the Housing Authority and a Community Worker was employed first for 8 hours, then 12 hours a week, to assist those people with housing problems. The Housing
Community Worker was also able to assist persons needing to apply for alternative accommodation.

Unfortunately, the problem with the Service lay with the recruitment and retention of the Community Worker, since it was only for a few hours. There was a period of time where the service was not being given, due to lack of persons interested in occupying the post for only a few hours a week. Therefore, by agreement with the Housing Authority, the number of hours was increased to 20 hours and a person was selected on a part-time basis. It is hoped that this arrangement would help in retaining the Housing Community Worker, whose value has been increasing throughout the years.

**Way Forward**

The demand for the Appoġġ Cottonera Community Services keeps growing. Notwithstanding the limited resources and difficulties it faces, the team continues reaching out to more residents, targeting the most vulnerable. With the presence of Community Development Workers in the team, the interventions with the residents are varied and flexible and draw upon the resources within the community.

One of the biggest challenges is to reach out to the most marginalised – residents who are at the periphery of their community, some of which are hidden and have no voice, others who find it difficult to seek help or integrate in any project or activity.

Strengthening the community resources is a major objective – that is, giving the residents the tools they need to take more control of their situations and improve their quality of life and that of the community. The team must be innovative, sensitive to the way people respond and what the people wish. Involving them from the outset in any activity or project remains a fundamental task for the team.

Finally, the CCS keeps striving to strengthen relationships with other service providers and stakeholders, and build new ones where these are not in place. It is important
Foundation
Social Welfare Services

to encourage more relevant and personalised service provision, for the ultimate benefit of the residents.

The Appoġġ Cottonera Community Service has gone through staff changes, has faced high waiting lists, complex cases, lack of resources and other difficulties, yet it continues to manifest the importance of being close to the community, to keep striving to strengthen the community’s potential. The principles that are the basis of the service should be replicated in other communities so that, hopefully, other communities may benefit from a shift in service provision on a national basis to one that is closer to the community, and hence more preventative and empowering.
Paulo Freire Institute

The Paulo Freire Institute (PFI) was set up in 2001 by the Maltese Jesuits in Żejtun.

The Maltese Jesuits decided to have a small community in Żejtun with the purpose of living closer to the people and hence working on social inclusion of those around them. Upon setting up their contacts there, the problem of illiteracy became evident, and it was decided to embark on projects that would promote literacy amongst children and adults. Through this work, with the help of a constant healthy number of volunteers, the Paulo Freire Institute continued to reach the residents, and those living in neighbouring villages, to target social exclusion and work on integrating the most vulnerable groups in the community.

Objectives of the Service

The main objectives of the Paulo Freire Institute are:

• to provide formal and non-formal literacy projects – for children and, in partnership with the ETC, adults
• to work on community projects that are not necessarily linked to literacy but to empowering the local community
• to provide a social work service, offering assistance not only to those participating in the projects, but also those who would seek assistance themselves.

Aġenzija Appoġġ has been involved in this project from the outset, providing community work and social work services. It is important to note that, due to very limited resources, Paulo Freire Institute works with part-time staff and volunteers. The Director is a Jesuit who is mostly, though not exclusively, dedicated to the work carried out at the Centre. Fortunately, in 2007, a Social Worker was seconded from the Education Welfare Unit. This meant that PFI had an extra 40 hours of social work input.
Performance Review and Analysis

1) Community Work Projects

The Community Worker employed by Aġenzija Appoġġ to service Paulo Freire Institute works around 10 hours a week on community projects. This means that her time is very limited and is spent on overseeing projects or applying for EU funds for new projects. However, there is a number of on-going projects at Paulo Freire Institute which service the community directly.

During the period under review in this report, the Community Worker was mainly involved in the following:

i) Bum Bum Adolexxenti – a Grundtvig Project carried out in partnership with Slovenia, Romania and Italy (Verona and Ancona) that ran from 2006 till July 2008. The project targeted parents of adolescents who experience difficulty coping with their children’s teenage years. It aimed at teaching skills to equip parents in order to address their children’s issues better. Part of the project involved the creation of an e-manual which provides guidelines for parents and trainers who, in turn, provide such training to other parents.

ii) Proġett Dawl – a project implemented through an ETC - Local Council partnership and was run in tandem with another Proġett Dawl in Mosta. This aimed at teaching families, particularly low income families, energy-saving techniques. This project was later replicated by the Cottonera Community Services, again with the help of the Employment and Training Corporation.

iii) Skills Training Courses:
• Information Technology courses in collaboration with MCAST and the Foundation for Educational Services (added by 15-20 people)
• Entrepreneurship Course in collaboration with MCAST, Mosta and Żejtun Local Councils – targeting young, unemployed people. The course focused on increasing self-confidence, assertiveness, decision-making, and basic
computing and numeracy, amongst others. 20 young people attended
• Two empowerment courses for women, with 7 participants in each course
• A parental skills course, facilitated by the community Social Workers.

iv) Action 5 – a training project for young people who work with other young people.

v) The CoMin – Minorities in One’s Country European Project – In the first level, 4 service users (literacy classes) over 50 years old are identified and given training and support to prepare focus groups for Somali people living in various open centres. The aim of the focus group is to get to know the Somali culture. Together with foreign partners in the projects, they design a way of representing the Somali culture. The participants decided to organise an exhibition which is planned to be held in 2010 and shall be displayed in all participating countries.

Other on-going work includes:

i) Non-formal literacy project
A project that caters for a group of 80 children in winter and 120 children in summer. This project, which is co-ordinated by the Community Worker, is run with the help of a team of around 30 young volunteers, mostly recruited from St. Aloysius College. This project was also extended to children of illegal immigrants residing at the Open Centre. This was meant to help the integration of the foreign children with the local children.

ii) One-to-one literacy programme for children
Around 20 primary school children and 9 secondary school students benefit from professional individual help. The professionals, who do their work on a voluntary basis, are helped by other volunteers. The parents are also involved in the project.
iii) Adult literacy courses
Courses run in partnership with the Employment and Training Corporation, targeting the unemployed. Such courses are attended by around 90 people per year.

iv) Networking with the local community
• Unità 15 – a network of parishes (Żejtun, Ghaxaq, Gudja, Marsaxlokk)
• School Council – organising empowerment courses for mothers, in collaboration with Caritas, to involve them in the school council. The mothers were involved in organising a petition on reducing stress for children at school. The Community Worker continued to support the mothers in their involvement with the school council. The group adds up to around 20 mothers.

2) Community Social Work

The accessibility of a Social Worker in the Żejtun community continues to help people feel comfortable seeking support and guidance when they feel they need it. The central location (close to Parish Church), the informal and familiar environment of the office and the various activities held there, are all important factors that make the service more approachable. The social work service has reached 69 hours weekly input between 2007 and 2009, as a result of the secondment of a full-time worker. The Social Workers have familiarised themselves with the needs of the community, and have made themselves as available as possible for their needs.

This means that the demand for the service has increased over the years. Prior to 2007, the Social Workers, both part-timers, had a caseload of around 40-45 cases between them. However, in 2007, when the full-time Social Worker was seconded, the total caseload went up to 60-65. The caseload has a “shared” element, in the sense that since one worker is more available because she works 40 hours while the others work on a part-time basis, some of the tasks are shared. This arrangement is an informal one and it happens only when it does not hinder the relationship with the service user. Many service users feel comfortable with
either Social Worker, which is one of the benefits of having a community-based service just as Paulo Freire Institute offers.

Furthermore, there are instances where the Social Workers carry out joint home visits, either because of safety issues or because the complexity some situations present merits an added input from an accompanying Social Worker. Thus, the service users would be familiar with either Social Worker and would refer to any one who is available should they need it.

The life situations of Paulo Freire Institute service users include substandard housing, unemployment, relationship breakdown, health difficulties, large family households, financial difficulties and poor social skills. Consequently, the nature of cases dealt with varies considerably. It ranges from adolescents with emotional and behavioural difficulties, children at risk, persons with mental health difficulties, child care issues, family problems and difficulties associated with ageing. The exposure to these diverse situations has led the Social Workers to build and widen a healthy knowledge base. A good part of the work involves networking with other entities in the community, for example, the local schools, to give a more comprehensive service to the service users. They also make very good use of resources outside the community including the Community Chest Fund, Housing Authority, Aġenzija Sedqa, Aġenzija Appoġġ and Aġenzija Sapport services in the best interests of their clients. All this indicates that the aims of community social work are being reached since the intervention, which complements traditional social work, aims to help the individual function better within his or her community, to build support networks, and make best use of the services available.

The Social Workers’ daily schedule varies and includes home visits, school visits, advocating on behalf of clients, telephone calls, writing requests and reports on the clients’ behalf, and reminding them of important appointments, as well as accompanying them when necessary. The main aim is to support them to improve their quality of life and
to become more independent, with the help of a healthy social support network. The Social Workers regularly attend SENT (Special Education Needs Team) meetings at the Żejtun primary school. These were multi-disciplinary meetings where the situations of children in need of special care would be discussed and a plan of action is drawn up by the professionals involved. The team was set up by the Education Department with the purpose of getting significant professionals working in the community to address problems faced by a number of children at school. The PFI Social Worker was invited to participate.

A major part of the Social Workers’ time is taken up by “drop-ins”, that is, when people come without an appointment people pass by not only when they have a problem that they need to discuss, but also to “touch base” with the workers about their situation. Sometimes they bring information about what is going in the community – the Social Workers have to deal with this information very carefully, especially when it relates to someone else, particularly another service user.

Although it is not always possible to see to their needs there and then (due to other commitments), the Social Workers do their best to give quality service and make them feel welcome. This reflects the good relationship that exists between Paulo Freire Institute and the Żejtun community.

Paulo Freire Institute benefits from the services of a Psychotherapist, who offers some of her time on a voluntary basis. The Psychotherapist does not work in isolation and holds case discussions on a regular basis with the Social Workers also involved in the case.

Aġenzija Appoġġ supports Paulo Freire Institute on a day-to-day basis in complex cases, supervision of the staff and regular meetings with the Director, in order to ensure the best possible service provision to the community. Aġenzija Appoġġ also offers training opportunities to the staff.

In 2007, there was a change of leadership. Fr. Edgar Busuttil SJ, who was the key person in the setting up of
Paulo Freire Institute, and who had been working in the community for some 10 years, was replaced by Fr. Vincent Magri, also a Jesuit. Fr. Magri had previous experience in the Żejtun community. Therefore, although he had been absent for a number of years, he was familiar with much of the work that is being done.

Way Forward

Paulo Freire Institute continues to provide an invaluable service to the residents of Żejtun and the surrounding areas. With the help of the Community Worker and some European funds, the projects continue to operate to meet the needs of the people.

The social work service, however, faces a challenge since the increase in Social Worker input only came about through a secondment, which is renewed each year, without any guarantee of further renewal. In fact, the position remains very uncertain since the secondment was renewed a second time in 2008 for 2009, with the chances of another renewal being very slim. This would mean that the active caseload of around 60 would have to go down to 40, leaving around 20 people without a Social Worker or on a waiting list.

The solution to the growing demand for the social work service is not easy, since Paulo Freire Institute relies on NGO funds and fundraising activities, and hence, expansion in the social work service is remote. Having said that, the presence of the Social Worker at Paulo Freire Institute is a fine example of the importance of having an accessible and comprehensive service, for, notwithstanding its limitations, the people feel that they can find support and assistance within their own environment.
Adolescent Outreach Service

Over the years, despite the considerable number of specialised services introduced, professionals were noticing a lack of services targeted towards adolescents in need, particularly those with emotional and behavioural difficulties.

In order to address this situation, Aġenzija Appoġġ launched the Formula One programme in November 2001. Formula One was a residential programme for male adolescents with challenging behaviour. Along with the residential programme, the service also had an outreach programme, that is, a non-residential service for young people with challenging behaviour, extended also to female service users. Due to a number of factors and unforeseen circumstances, the residential programme was deemed no longer sustainable and it closed its doors towards the end of the year 2003.

However, a decision was taken in favour of maintaining the outreach service, since it had better prospects at being successful and effective with such adolescents.

Objectives of the Service

The main aims and objectives of the Adolescent Outreach Service are to deliver professional social work services to adolescents whose needs are not being met by specialised services. This includes assessments, short and long-term interventions, and the formulation of mutually agreed upon care plans.

Working in partnership and within stipulated time frames with the service user is a key element of the Adolescent Outreach Social Worker’s role. Engaging with adolescents is the key to a successful working relationship with this target audience client group rather than audience. Social Workers within this team try to link service users to other resources or services in the community and work towards the development of existing strengths of adolescents.
Performance Review and Analysis

The Adolescent Outreach Service aims to provide a social work service to young people (who in their majority would still be minors) who are facing a number of difficulties that require assistance and support.

There is a variety of presenting problems which the service may come across, ranging from addiction, mental health issues, criminality, emotional instability, behavioural difficulties and homelessness.

In order to address the above mentioned difficulties in the best way possible, the service is provided with three main factors in mind:

• It is essential that the service is provided with the young person’s consent and that an individual care plan is formulated conjointly with the service user

• This service also recognises the importance of working and liaising with other entities which may also play an important role in the care plan of service users, such as, Aġenzija Sedqa, Education Services, ETC, Juvenile Court and Probation Services. Thus, the service strives at building a very positive working relationship with the mentioned entities in order to provide the best possible service to the young people and their families

• The service provided is very focused. It is not just a service for young people it specifically targets those who present serious behavioural problems, lead a chaotic lifestyle, are possibly delinquent, are at high risk of offending, are aggressive, experiment with substances, and also who sometimes need to leave home because the situation would be so precarious either because of abuse they receive or because they are abusers themselves.

The Social Worker supports the young people in many ways, helping them improve their inter-personal relationships, especially with the family, and helping them integrate better at home, in their community, at school or
in other meaningful activity, and preparing them for a more independent life. This is mostly done by aiming at modifying their behaviour and helping them find more stability in their lives. Because of the young people’s chaotic lifestyles, many interventions carried out by the Social Workers are actually crisis interventions.

In 2007, the team grew from a team of two Social Workers to a service with a full-time Coordinator, 2 full-time Social Workers, and 1 part-time Social Worker. Experience is underlining the importance of working with the families, and also addressing their needs. By reaching the family, we will be influencing the service user’s environment, and encouraging the family to be more active in their child’s care plan.

The role of the Coordinator within the Adolescent Outreach Service, which came into force in 2007, is to support the growing team, which is facing new and more complex challenges, and to support the Service Area Leader who has the responsibility of three other services. In addition, the Coordinator also carries an active caseload. In 2008, the Generic Services were split up and the Adolescent Outreach Service became part of the Courts Services. The new Service Area Leader is now responsible for the Court Services, Supervised Access Visits, Court Monitoring besides the Adolescent Outreach Service.

Due to a number of circumstances, the service ceased to benefit from the service of a Psychologist as part of the team. However, the team receives great support from the Agency’s therapeutic services, namely, the Psychologists and the Family Therapists, who make themselves available for guidance, consultations and referrals.

The role of the Psychologist within the Adolescent Outreach team – who worked for 10 hours a week – was to carry out psychological assessments of service users (when required) and at times even joint assessments with Social Workers within the team. The Psychologist would attend case reviews and case conferences and keeps records of the daily sessions held with adolescents. The
Psychologist formed part of the Adolescent Outreach team and was a key element in intake meetings whereby cases of adolescents were discussed between Social Workers, Psychologist and other professionals involved such as Police Officers, Probation Officers, school personnel etc.

Although there were plans to enhance the team with a Youth Worker, this never materialised due to lack of funds. It is the Social Workers who, whilst engaging with the service users, use the flexibility in their role to carry out such tasks as accompanying service users to extracurricular activities for the benefit of the service user.

In 2008, the Coordinator had the opportunity to attend a week’s training in Ireland, through the Leonardo Da Vinci Mobility Project 2008. This was an excellent opportunity that has helped the team learn more about successful operations in Ireland.

The main limitation being encountered is the lack of a residential programme targeted at adolescents with emotional and behavioural difficulties. There are a number of adolescents who need a secure and therapeutic residential facility because of their delinquent or aggressive activity, but, due to lack of such facility, are ending up imprisoned with much older hardened criminals. Some homeless adolescents are ending up in homeless shelters for adults since these are the only ones available – and even these are not always available. Being targeted for adults, these shelters do not have the resources to offer a structured programme for adolescents. Throughout these 3 years under review, Aġenzija Appoġġ has referred service users of its Adolescent Outreach Service to the residential facilities offered by YMCA, Dar Leopoldo and Dar Tereża Spinelli. An agreement was reached with Fondazzjoni Suret il-Bniedem through which Dar Leopoldo and Dar Tereża Spinelli provided 4 beds for adolescents who due to their behaviour and other social problems, ended up homeless. A similar agreement was made with YMCA.

In 2009, around 18 adolescents were admitted in care either at YMCA, Suret il-Bniedem or Dar Tereża Spinelli; some
of them for a long-term placement but others as a short-term measure until they could return back with their family or carers. In all, these 18 adolescents spent around 2,061 nights in these residents.

In 2007, a new Referral Form and a Prioritization Form were introduced. This gave a better view of the work that outreach Social Workers are involved in. Through the Referral Form, workers from other agencies were guided to give a holistic picture of the adolescent’s situation and his/her support structure. This involved a rating system thus the Adolescent Outreach Service would be in a better position to assess and prioritise cases before these are actually allocated. This was done as the team was feeling that there was not enough awareness amongst professionals of the work carried out by this specialized service, thus through the Referral Form and the Prioritization Form, workers were helped to identify the needs of the adolescents and how these can be addressed.

The Outreach Service case turnover had been increasing since 2004, but in 2008 it decreased by 8% in comparison to 2007 (Figure 57). The reason could be that cases required more long-term intervention from Social Workers and were thus unable to take in new cases.
Throughout these years, the team tried to work very closely also with the adolescent’s family and support systems. Taking a holistic approach when focusing on the adolescent’s issues and difficulties, helped a lot in some of the cases that workers intervened in.
Service openings (Figure 58) have decreased in 2008 by 27% whilst the service closures (Figure 59) increased by 40%. The large amount of cases opened in 2007 meant that fewer cases could be taken on in 2008 whilst many cases activated in previous years were closed in 2008. The number of referrals received has also been declining since 2007 and it decreased by 30% in 2008 over 2007, and 30% in 2009 over 2008.

**Programm BUDZ**

*Programm BUDZ* is a programme targeted at adolescents with behavioural and emotional difficulties, with the aim of working at building structure in their life whilst teaching them essential life skills. The programme was implemented in conjunction with Aġenzija Sedqa. In 2007 and 2008, the Appoġġ and Sedqa teams responsible for *Programm BUDZ* reviewed the work that had been prepared in previous years and started to implement the programme. Two workers from the Adolescent Outreach team dedicated 8 hours per week each to the programme whilst another 8 hours was being contributed by one of the Cottonera Community Service’s Social Workers.

1) The aims of BUDZ are:

- To prevent or stop behaviours such as substance misuse before they become an addiction
- To address deviant and challenging behaviour
- To help in the rehabilitation of first-time offenders
- To address involvement in/close to prostitution
- To prevent the long-term consequences when acute crisis arise in the young person’s social structures.

2) Objectives:

- To bring structure and stability in the lives of the service users
- To help them develop and maintain relationships with healthy individuals, family, groups and society at large
- To help them become aware, reflective and responsible of their actions through the teaching of particular life skills appropriate to their needs.
Programm Budz was spread over two consecutive years, 2007 and 2008. Prior to its implementation, Adolescent Outreach workers were liaising constantly with the Cottonera Community worker and with Sedqa workers in order to plan sessions and finalise the assessment tool that was going to be used for the programme. Preparatory work also included liaising and networking with other agencies working with adolescents such as YMCA, Child Guidance, Probation Services, and other services.

The aim was for 8 participants to participate in each group, however, after some time, some participants dropped out. On-going evaluation took place to establish to best way to engage with adolescents in order to have the maximum benefit of the programme.

The Adolescent Outreach Service had quite a number of long-term cases in 2009. This is reflected in the number of case openings and closures during 2009 when compared to previous years. Cases of adolescent with very challenging behaviour became more complex and entailed intensive work from Social Workers to engage and support these adolescents. Intensive work was also carried out with the adolescents’ family and although this is a long term process, it is proving to be effective and gave some positive results as well.

In all, there were 39 referrals to the service in 2009 - a decrease of 17 cases over 2008. As already highlighted, although there was a decrease, the cases required intensive work and in the same year Social Workers conducted around 390 individual interventions with adolescents within their home environment. Joint interventions add to this number with a further 337 home visits.

In 2009, more joint work with the Sedqa Teen Support Service took place. Workers started to feel that in some cases there was duplication of work and at times the aims and objectives of both services were not so clear. This has been felt even in previous years when joint work was carried out within the BUDZ programme. In 2009, an evaluation on BUDZ was carried out and an action plan was set up.
3) Challenges and Achievements

In 2009, the coordinator of the Adolescent Services had an opportunity to visit Ireland with the Leonardo Da Vinci Project. He visited and experienced the work carried out by professionals in Belfast within the service of Include Youth. It was a very enriching experience and workers from Include Youth had the opportunity to come over to Malta to share their experience and get exposed to the work that FSWS conducts with adolescents who are exhibiting challenging behaviour.

The EU project Embark for Life, which saw the collaboration of Appoġġ, Sedqa, ETC and Housing Authority, was launched following various meetings and preparatory work by all the stakeholders. The Service Manager of the Appoġġ Adolescent Services served as a link between the Project Coordinator and the various services of Appoġġ who worked closely with this project. The Service Manager was also involved in a number of interviews whereby professionals responsible for the project were recruited.

The Service Manager of the Adolescent Services, together with team members and other members from the Management, was also requested to provide feedback on the white paper issued by government on Restorative Justice. Participation in a conference on criminology organized by the Criminology Department within the University of Malta was also attended.

Way Forward

Like other services, the Social Workers have to respond to growing demands with limited resources. However, there is much that can be done that would maximise the output notwithstanding the limitations:

- Continuing to develop working relationships with other main entities in this line of work, in particular: ETC, Education Department, Aġenzija Sedqa, Juvenile Court, and Probation Services
• Continuing to provide a professional service to the young service users and to their families

• Continuing to put pressure for a residential facility and other services targeted at adolescents which will better cater for our service user’s needs.

The year ahead will see further discussions together with the Management of Sedqa, Appoż, and the CEO of the Foundation regarding the amalgamation of the Appoż Adolescent Services and the Sedqa Teen Support Services. This need has been felt and a possible way of making better use of the resources available as well as developing a common structure and way of working could be taken up by the initiative of joining the two services.

More collaboration with other entities such as Juvenile Courts, Probation, schools, and the Police will further help in developing good and common practices in identifying the needs of these adolescents as well as that of identifying ways and common grounds of intervening immediately in order to prevent future criminal behaviour and sanctions onto these adolescents.

The need for residential placements including a secure unit for male and female adolescents is highly essential and its need has long been felt. Proposals and suggestions have been put forward.
Prison Services

Appoġġ Social Work Services at the Corradino Correctional Facilities (CCF) aims at providing social work interventions to inmates by supporting them during their stay in prison, preparing them for release from custody and assisting them in their reintegration back in the community. Ongoing support and after care service are vital in the reintegration of clients back in the community. Family support and other forms of social support also help reduce the risk of re-offending upon their release.

The Social Worker within CCF, who works on a part-time basis for 20 hours a week, assesses cases that are referred by the Director of the facility or his delegate. Following assessment, together with the service user, the Social Worker establishes a care plan based on the needs of the client. The Social Worker liaises continuously with the director and other professionals within the correctional facility so that a holistic service is provided to the service user. Once the needs of the service user are identified, the Social Worker tries to link the person with other services available such as drug/alcohol rehabilitation programmes, psychological support and others.

Throughout 2006, 2007 and 2008, the Social Worker within CCF offered continuous support to inmates and even to their families even though no after care service was available. A number of housing reports were presented to the Housing Authority especially on behalf of inmates who were about to be discharged from CCF and had no residence. The Social Worker was also a good liaison between the inmate and his/her family. Further to this, inmates who required assistance in Court hearings received the adequate support that they needed.

In 2006, the case turnover (number of cases worked with) continued to increase over the previous year, and increased further in 2007. However, a decrease of 42% was seen in 2008 over 2007. Service openings had also been steadily increasing since 2005 but in 2008 this decreased by 43%
over 2007 (Figure 60). This may be because the Social Worker’s caseload was remarkably high. Furthermore, the 20 hours of social work intervention terminated towards the end of summer of 2008 following the resignation of the Social Worker. Since then, there has been no replacement.

**Figure 60: Number of cases opened (including new and re-activated cases) by the Prison Social Work Service, 2005-2008**

<table>
<thead>
<tr>
<th>Year</th>
<th>No. of cases</th>
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</thead>
<tbody>
<tr>
<td>2005</td>
<td>194</td>
</tr>
<tr>
<td>2006</td>
<td>335</td>
</tr>
<tr>
<td>2007</td>
<td>482</td>
</tr>
<tr>
<td>2008</td>
<td>276</td>
</tr>
</tbody>
</table>

In 2006, the average number of active cases that the Social Worker handled every month was 25. This increased considerably in 2007 and 2008 with an average of 38 active cases per month during both years. This shows that the demand for social work interventions increased and the service users who were referred required long-term support and interventions.

**Figure 61: Number of cases closed by the Prison Social Work Service, 2005-2008**

<table>
<thead>
<tr>
<th>Year</th>
<th>No. of cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>2005</td>
<td>15</td>
</tr>
<tr>
<td>2006</td>
<td>7</td>
</tr>
<tr>
<td>2007</td>
<td>6</td>
</tr>
<tr>
<td>2008</td>
<td>5</td>
</tr>
</tbody>
</table>
Case closures continued the downward trend in 2008 and decreased further by 17% over 2007 (Figure 61), indicating that the Social Worker’s caseload remained more or less the same since cases required long-term intervention. A good number of cases were carried forward from 2007 to 2008 since inmates referred for social work intervention had long-term sentences and required further psychological and emotional support.

The number of referrals has also continued the downward trend and decreased further in 2008 by 67%. This decrease in referrals is also due to the high number of cases carried over from one year to the next, which places limitations on the number of new referrals the service can receive. This in view of the fact that referrals for social work intervention are done by the Director, who was informed of the worker’s caseload and the amount of interventions that active cases required. The Social Worker’s caseload, as indicated above, continued to increase.
During the years under review, the Social Worker tried to, when possible, hold case reviews and case conferences at the correctional facilities to help other professionals understand better the nature of the work carried out at CCF. This helped also to reduce the stigma that inmates carry. The Social Worker worked continuously on supporting clients and advocating on their behalf with other professionals. The Social Worker received regular supervision from the Generic Service Area Leader. This ensured a better and more efficient service. The Service Area Leader was also the link between the CCF Social Worker and other Social Workers within the Agency.

Aftercare service, which is not available, was also carried out in some way or another since clients who were reintegrated back into the community continued to seek the services of the prison Social Worker.

As from October 2008, the service was suspended following the Social Worker’s resignation. Since then, the Agency is still awaiting further developments in this area from the Operations of the Corradino Correctional Facilities.

**Way Forward**

Considering the demand and success of this service while it was still in place, the way forward would be that of strengthening further the liaisons with the Prison Director and other personnel regarding the service agreement between the two parties. Such efforts aim to re-activate the service that was being provided in the past. Furthermore, this would be done aiming for the possibility of increasing the number of hours thus more inmates will be offered the service. From then onwards, the aim would be to plan ahead to ameliorate the service from what it was by providing after care services to inmates and their families.
Hotline

The Hotline for Child Abuse over the Internet initiated in February 2006 with co-funding from the European Commission. This service was provided in partnership with the Ministry for Industry, Investment and IT (MII&IT).

This was a new service addressing an issue that no entity in Malta had yet started to address. The problem in itself, that is, the misuse of modern technology for the purpose of abusing or attempting to abuse children, was still an emerging problem in Malta. Other European countries were starting to become more aware of the growing problem that arose from a variety of factors:

• Modern technology is designed to be used for educational and recreational purposes; however there is always a number of people who would misuse this technology for purposes of fraud, deceit and abuse of minors and vulnerable people

• People abusing children over the internet and other criminals always seem to be steps ahead of law
enforcement agencies thus making the problem more difficult to address

- Through the internet, people can be in touch with others all over the world; they can fake their identity for deceitful purposes. The internet is fast becoming part of the everyday lives of families, meaning that perpetrators can craftily enter the privacy of homes through their deceitful tactics.

- Children may not feel that they are being abused since the abuse mostly takes place in their own home, and are only in contact with their abuser through a webcam or other technology. Sometimes it is difficult for them to understand the extent of the harm that they have encountered.

- Children and young people are generally adventurous and unable to calculate or even identify risks.

- Several parents are still not confident with the use modern ICT equipment, and may find it difficult to understand the extent of the uses and misuses of the internet or other technology and therefore are at a disadvantaged position to protect their children.

- On the other hand, children and young people are mostly very acquainted and knowledgeable about the use of internet and modern technology and are therefore far ahead in the use of ICT than their parents.

- Moreover, when children find difficulties in the use of ICT, they are reluctant to turn to their parents/carers for guidance or advice since they think that they do not understand ICT enough, or are not in a position to answer questions that the children/young people pose.

With these issues in mind, Aġenzija Appoġġ set out to implement the Safer Internet project. The project had two nodes – the Hotline (that is, dealing with reports of online abuse) and the awareness node, mostly taken care of, though not exclusively, by the Ministry of Investment, Industry and Information Technology.
Objectives of the Service

• To set up an on-line reporting system, accessed from the Appoġġ website www.appogg.gov.mt

• To set up an Advisory Board, made of major local stakeholders, including representatives from the Department of Education, Parent Leaders and Parent Associations, the Office of the Children’s Commissioner, Aġenzija Sedqa, the Cyber Crime Unit of the Malta Police Force, and the local Internet Service Providers. The Advisory Board met on a monthly basis and would discuss trends, arising problems and ways of addressing them

• To organise activities to mark the Internet Safety Awareness Day, celebrated in February

• To participate in awareness raising activities in the media, namely, attending radio and television programmes to talk about internet safety, as well as writing articles for newspapers and other local publications

• To participate in school meetings for children, parents and teachers about internet safety

• To view the reports of alleged abuse received by the Agency and referring to the Cyber Crime Unit when appropriate

• To keep a database and other relevant information for the purpose of keeping statistics, and ensure that each piece of information received is dealt with aptly and safely and that no unnecessary data is kept

• To support local victims of online abuse. (Generally, these are supported by the Appoġġ Child Protection Services).

Other tasks related to the provision of the service include:

• Sending feedback to people submitting a report, in cases where they leave their contact details. Most people who send reports do so anonymously
• Dealing with technical problems pertaining, amongst others, to full access of internet and receiving commercial websites through the online reporting system.

Performance Review and Analysis

The Hotline team set up the service in summer 2006. The major tasks that were carried out included:

• Setting up the section in the Aġenzija Appogg website, which included information on the service, tips on internet safety, and the online reporting system

• Making the necessary contacts with stakeholders, some of whom were also involved in the e-Security group (which dealt with the use or misuse of internet for commercial purposes)

• Training the Supportline 179 staff and volunteers on how to deal with calls pertaining to internet child abuse

• Holding talks with parents, teachers and children on issues of internet safety

• Maintaining contacts with the Cyber Crime Unit regarding reports received and the European Commission for reporting on the service

• Participating in the media to raise awareness on Internet Safety

• Participating in the Internet Safety Day celebrations, which involved fun activities for children while interacting them in educational sessions about abuse on the internet and internet safety measures

• Participating in a Train the Trainer course, organised by the Ministry for Infrastructure, Investment and Information Technology, and delivered by Childnet, from the UK. The event was attended mainly by teachers from both Primary and Secondary schools.

The Hotline became an INHOPE member. INHOPE is an
association for International Hotlines. Being a member of INHOPE meant having to meet and maintain the standards established by the International Association, attending meetings, receiving training and liaising where necessary, thus ensuring the best quality in service provision.

A six-month extension was requested for the project, with the full project coming to an end in February 2008. Unfortunately, the new application for funds for another 30 months of the project was turned down by the European Commission.

However, Agenzija Appoġġ decided at the time that the online reporting system would not be discontinued, thus leaving the public with the option to report if they need to. The basic remaining Hotline service was passed on to the Services Manager who had previously overseen the whole project.

Although awareness campaigns were halted, reports kept coming in and Appoġġ created a provisional team of two people, including the Services Manager responsible for the service, mostly to view the reports and to pass the
potentially illegal material to the Cyber Crime Unit. It turned out, however, that the members of the Advisory Board felt that it was necessary to continue to meet. Therefore, a minimal service continued throughout 2008.

Regular meetings were held with the Advisory Board, with the aims of exploring possibilities of obtaining funds, dealing with matters arising on the issue of child abuse over the internet, and, importantly, to maintain interest in the issue amongst the major local stakeholders.

2007 was a full year of service from the Hotline team, since the project initiated during 2006 and was terminated in February 2008.

Figure 63 shows the number of reports received in 2007 and those forwarded to the Cyber Crime Unit (Malta Police Force). The total of reports received was 234, while those forwarded totaled 58, that is, 25% of the reports received.
Figure 64 compares the amount of reports received in the first four months of 2008, compared to those received in the first four months of 2007.

Between September 2006 and May 2008, 363 reports were received, out of which 261 were potentially harmful reports, mostly child pornography sites. 9 reports involved other types of child abuse. During the mentioned period, 89 reports were forwarded to the Cyber Crime Unit. At the end of April 2008, there was a technical problem with the decryption of the reports that were being received, for which period data is not available.

It is important to note that, due to the lack of resources, it was not possible to keep the statistics updated.

**Way Forward**

With the use of internet increasing rapidly throughout households in Malta, and with the schools supporting the use of the internet for educational purposes, the exposure of children and young people to abuse is inevitable. It is therefore imperative that attempts are made to address this growing problem, which also includes the use of mobile phones and other modern communication technology. Members of the Advisory Board, particularly the Commissioner for Children and the Head of the Cyber Crime Unit, have joined Aġenzija Appoġġ in highlighting the
problem of child abuse through modern communications technology.

In 2009, work commenced on the preparation for a new application for funds from the European Commission in order to set up the service once again. The application includes a partnership between the Malta Communications Authority, the Foundation for Social Welfare Services (through Agenzija Appoġġ), the Directorate for Education, and the Commissioner for Children. It is hoped that the service would not depend solely on external funds, but that the Maltese society would take the complete responsibility to protect its children from yet another form of abuse.
Adult and Family Services

During the four years under review, the Appoġġ Adult and Family Services continued to maintain a high level of operations as can be seen through the cases dealt with over this time period. This section of services was comprised of a total of sixteen services: three Domestic Violence Services (the Domestic Violence Unit, Għabex Shelter, and the Perpetrators’ Service); the Psychological and Family Therapy Services; six Health Social Work Services (based at Mater Dei and Boffa Hospitals, Qormi Health Centre, Saint Vincent De Paule Residence, Bormla Day Centre, and the Community Mental Health Outreach at Mount Carmel Hospital); three Smartkids Child Care and Family Support Centres (based at Birgu, Birkirkara and Qawra) the Refugee Service, and the Liaison post on Human Trafficking.

Objectives of the Services

The Appoġġ Adult and Family Services also continued promoting their profile especially within the Agency. This was mainly achieved by advocating working in a more integrated and family-oriented approach with the support of the Operations Director; in the face of other challenges, such as, the political prioritisation of the Agency’s Children’s and Community Services. They also maintained the implementation of service delivery through the overall aims of the services, which are:

• Offering specialised services to vulnerable adults and families at risk and or experiencing crisis situations, and who are at possible risk of social exclusion
• Providing therapeutic services to abused and traumatised children, adults and families in vulnerable and high risk situations
• Working jointly with other services within and outside the Agency, in order to provide a holistic family-oriented service to those seeking assistance from Appoġġ.
Performance Review and Analysis

The cases dealt with during this period, ended in a slight increase of under 1% in 2008, which officially stood at 3,864. However, the former number of cases increased to 4,662 when the cases of the Refugee Service and Smartkids were included. In 2009, there was again an increase of under 1% from the number of cases in 2008; with the number of cases being 3,874 (excluding Smartkids and the Refugee Service, as the latter was no longer under the auspices of Appoġġ). It is important to note that the 2009 data was exclusive of Benniena Service, as there were technical difficulties with the databases of this Service and thus data could not be updated in time for the purposes of this report. This increase between 2008 and 2009 took place inspite of challenges such as a fluctuation and decrease in human resources as well as other resources, but in addition also partly due to some staff replacements as well. Maintaining this level of operations was attributed to the “higher efficiency and effectiveness resulting from the experienced workforce, which permeates teams within the Adult & Family Services” (Appoġġ Trends Report, 2008).

<table>
<thead>
<tr>
<th>Year</th>
<th>Case Turnover</th>
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<tbody>
<tr>
<td>2006</td>
<td>3,742</td>
</tr>
<tr>
<td>2007</td>
<td>3,837</td>
</tr>
<tr>
<td>2008</td>
<td>3,864</td>
</tr>
<tr>
<td>2009</td>
<td>3,874</td>
</tr>
</tbody>
</table>

Table 27: Case Turnover for Adult & Family Services, 2006-2009. These figures do not include the caseload of the Refugee and Smartkids Services

The portfolio of the Adult and Family Services experienced both change and growth during this period, with the handover of the Refugee Service to another entity, then falling under the then Ministry of Family and Social Solidarity; the addition of Smartkids Child Care and Family Support Centres in Birkirkara and Qawra; the expansion of Community Mental Health Services; and the post of Liaison Person for cases of Human Trafficking. Towards
the end of the period under review, work also started on plans to affect the transfer of the Smartkids service to the Foundation of Educational Services under the same Ministry (MEEF). All Adult and Family Services also participated in the Foundation of Social Welfare Service’s evaluation of services.

The Service Manager took up duties as Acting Director for five months, as part of her respective turn, during the temporary absence of the Operations Director, and at the same time maintained the Health Social Work Services’ teams during the 4-month gap in the transition of leadership in this Service, carrying out supervision, and holding meetings, among other responsibilities, as well as managing her portfolio of services. She was requested to make a contribution as an expert to the Rapporteur on an Opinion of the European and Economic Social Committee on Migration and International Protection held in Brussels; represented the Agency on the Committee for the Malta-Tunisia agreement on the Advancement of Women, Family and Children; as well as on an Inter-Ministerial/ Stakeholder study and information visit to Brussels, part of which related to irregular immigration. She continued her work on the Council of Europe’s group of Experts on Integrated Social Services till 2007; was appointed as Malta’s National Focal Point for the Council of Europe’s Blueprint on the Campaign to combat violence against women including domestic violence; and as the Agency’s Liaison Officer on Human Trafficking cases; all of which were additional duties over and above the regular ones.

In the last year under review, the Service Manager was also nominated on the Domestic Violence Commission’s Sexual Assault Response Task Force, to submit a proposal for the setting up of a Sexual Assault Response Team which would provide an inter-disciplinary service to victims of sexual assault. She was also nominated as a representative on the same Commission’s sub-committee on awareness-raising, whose remit was to work on the content of a year-long campaign, to further enhance the Maltese public’s awareness on DV issues; and on the criteria for a Tender for the implementation of this campaign. As part of the National
Training Team which had received Train the Trainer training on Human Trafficking, the Service Manager was involved in the dissemination of this training to professionals within and outside the Agency, which will be further elaborated upon in the section on Human Trafficking in this report.

In addition to Adult and Family Services having kept a relatively stable case turnover, cases opened in 2009 increased by 31% over 2008 which had declined by 23% over 2007 (the figures compared both excluded Smartkids and the Refugee Service). This may also indicate that more cases were being worked with on a long-term basis.

<table>
<thead>
<tr>
<th>Year</th>
<th>Services opened</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006</td>
<td>2,190</td>
</tr>
<tr>
<td>2007</td>
<td>2,263</td>
</tr>
<tr>
<td>2008</td>
<td>1,733</td>
</tr>
<tr>
<td>2009</td>
<td>2,263</td>
</tr>
</tbody>
</table>

*Table 28: Number of services opened (new and re-activated cases) by the Aġenzija Appoġġ Adult & Family Services, 2006-2009. These figures do not include those of the Refugee and Smartkids Services*

Also, several other factors may have contributed to this decrease in 2008, including referrals being placed on waiting lists and not being allocated due to a lack of resources; the move of the Health Social Work Service from St. Luke’s Hospital to Mater Dei Hospital (MDH), which had an impact on service delivery during the period of transition; as well as the new MDH Policy re particular type of social cases of elderly persons being allocated to another social work service in the main; waiting lists having been introduced in the Domestic Violence Services for the first time, and the lower profile maintained on awareness campaigns in this area to minimise the impact on the reduced human resources.

In comparison to 2008, which registered a decrease in referrals by 8% (main reason being reflected in the Hospital Social Work Services due to the above-mentioned reasons), the number of referrals received in 2009 within the Adult &
Family Services decreased by 25% (again, this is comparing the figures in both years of services excluding Smartkids and the Refugee Service) as shown in Table 29. Some of the above-mentioned reasons also continued to contribute to this.

<table>
<thead>
<tr>
<th>Year</th>
<th>Services opened</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006</td>
<td>2,167</td>
</tr>
<tr>
<td>2007</td>
<td>2,518</td>
</tr>
<tr>
<td>2008</td>
<td>2,301</td>
</tr>
<tr>
<td>2009</td>
<td>1,727</td>
</tr>
</tbody>
</table>

Table 29: Number of referrals to the Appoġġ Adult & Family Services, 2006-2009. These figures do not include those of the Refugee and Smartkids Services

The Services also experienced a marked 23% decrease in new cases in 2008 (Table 30), but in spite of this maintained high average caseloads of 50-60 cases and over. However, despite the decline in referrals in 2009, the number of new cases registered decreased by less than 1% in comparison to 2008 and remained comparable to those registered in 2008 (once again, this is comparing figures of both years which exclude Smartkids and the Refugee Service).

<table>
<thead>
<tr>
<th>Year</th>
<th>Services opened</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006</td>
<td>2,158</td>
</tr>
<tr>
<td>2007</td>
<td>1,723</td>
</tr>
<tr>
<td>2008</td>
<td>1,326</td>
</tr>
<tr>
<td>2009</td>
<td>1,325</td>
</tr>
</tbody>
</table>

Table 30: Number of new cases that started receiving a service by the Appoġġ Adult & Family Services, 2006-2009. These figures do not include those of the Refugee, Smartkids and Psychological Services
Again this decrease in 2008 is attributed to the reasons mentioned above, as well as the possibility of statistics not being accurate for all the Services, particularly the outreach services, as a result of ICT difficulties which resulted in disconnections from the main Agency network, as well as databases not being regularly updated due to human resource problems. However, alongside the decreases in referrals and new cases opened, the service provider was still able to focus on providing a better quality service to the current caseloads. Despite a decrease in referrals, there was an increase in cases registered in 2009. This can be explained by an increase in the referrals of a particular service.

During the period up to 2008, there was an overall decrease in interventions and in the amount of hours spent on these interventions (Figure 65) by the Appoġġ Adult and Family Services. This can be explained by a decrease in human resources vis-à-vis hours not being replaced and/or delays in replacement of members of staff who leave the Services.

Figure 65: Number of intervention hours by type, delivered by the Appoġġ Adult & Family Services, 2006-2008
With regards to home visits, there was a slight decrease from 2007 to 2008, again due to a decrease in human resources. However, in 2006 and 2007, there was an increase in office and residential visits, which can be attributed to the impact of the DV campaign. However, the number of hours for the interventions decreased as there were more short-term interventions being done. These visits again decreased from 2007 to 2008 due to a decrease in human resources. In relation to Court interventions, a sharp decrease was witnessed in 2008 over the previous year, mainly due to curtailing the practice of Social Workers accompanying victims of violence to Court unless the case was extremely dangerous (Figure 66). Yet, the hours spent in Court with clients remained the same, because although workers were going less frequently to Court, accompanying victims in dangerous cases meant that the worker would stay with the client for a longer period.

Office visits continued to remain the predominant mode of intervention, followed by home and residential visits. This is probably due to the nature of interventions in the Adult and Family Services being in the main office and related to residential visits, whether it is with victims of violence, clients of Psychological and Family Therapy Services, dealing with hospital in-patient through hospital services, or children attending Smartkids Centres.
In spite of the challenges in human resources in the Adult and Family Services and the impact/demand this brought about on operations, these Services made significant contributions to the FSWS Marketing Office, through participating in 73 television and radio programmes and 18 newspaper and magazine articles between 2006 and 2008. This is not to mention talks given to community groups and schools, and training to other professionals such as the police and doctors. In 2009, this contribution comprised of 21 television and radio programmes from the Domestic Violence, Health, Psychological, and Smartkids Services.

**Way Forward**

The Aġenzija Appoġġ Adult and Family Services will continue to strive to improve and provide quality services in the face of the ever-limited and dwindling resources. This challenge will require us to be more creative and versatile than we have already been, but this in itself may not bring about the desired outcomes.

In the area of the Domestic Violence Services, work will continue in conjunction with other stakeholders, such as the Domestic Violence Commission, to promote the issue of domestic violence as a priority on the political agenda. For example, further meetings with the Parliamentary Social Affairs Committee are to be scheduled. This is with the ultimate aim of convincing the authorities that resources need to be invested in this area, such as more Social Workers, so that victims of violence in Malta and Gozo will have immediate access to the services, without the need to create waiting lists, and be given quality services in accordance with EU directives. The fact that this particular Service had to introduce a waiting list for the first time during the period under review, due to a lack of human resources, is a move in the opposite direction from accessible and quality service provision.

The widening of the definition of who is a victim of violence in the new DV Legislation of March 2006 has wide implications for operations. Domestic Violence within the legislation is no longer recognized as just happening within
the context of an existing intimate relationship between a couple, but covers other relationships between persons in a household – between parents and children and vice versa; ex-spouses and ex-couples up to a period of time; brothers and sisters; the unborn child, etc. Meeting the needs of this wider spectrum of potential clients will require extra resources for services across the board within the Agency, and not just within the Adult and Family Services.

Regarding the DV Legislation, the aim is to also continue working with stakeholders to advocate for better implementation and/or review of aspects of the legislation. Although the introduction of the legislation was a big step forward and there have been improvements in its implementation, there are still gaps in the proper implementation. For example, insufficient amounts of Treatment and Protection Orders are being implemented, resulting in perpetrators not facing the legal sanctions and treatment/assistance that they need as a consequence of their illegal actions; and victims and children continuing to have to leave their homes. This places the rights of Maltese victims of violence as inferior to those of many of their European counterparts, where the legislation gives the authority to the police to remove perpetrators and face the consequences of their actions.

With regards to the Shelter for victims of violence, efforts will continue via private-public partnerships through Corporate Social Responsibility to carry out major maintenance works at the Shelter, and acquire donations for needed items, in order to create more pleasant and comfortable surroundings for those women and children who have to leave the comforts of their home due to violence. In financially difficult times, these Corporate Social Responsibility initiatives are more difficult to achieve, due to entities not coming forth and the competition between entities to obtain them.

Training opportunities abroad is another initiative which will continue to be explored through EU projects, especially for Perpetrators’ Services within the Domestic Violence Services. This is particularly important in this Service, as
unlike the Domestic Violence Unit – which has at least other Social Workers working for Shelters for victims run by the Church or NGOs with whom they can share their work experiences, the Perpetrators’ Service is the only one of its sort on the Maltese Islands. Also, it is the service within the Appożj Domestico Violence Services that has had no training opportunities abroad. Overall, more needs to be invested in the training and supervision of staff.

The emphasis on the Appożj Psychological and Family Therapy Services will be about replacing vacant hours in order to attempt get full staff complement, which is difficult especially in the light of recruiting Psychologists. This is in order to be able to tackle more efficiently and effectively the waiting lists. Also, it is aimed to review the way of working as a pilot study, in terms of doing joint assessments and interventions, again as another measure to make the most effective and efficient use of human resources, in the face of limited numbers. It is envisaged that these two teams will also have more opportunities to contribute to the training of and give consultation to the Agency’s staff, also as a gain for them in terms of motivation and relief from the trauma-filled nature of therapeutic work.

Among the future aims for the vast number of services in the Health Social Work Services is to continue liaising closely with the relevant health authorities to always improve on the quality of service; but also to address the issues faced by these services, such as the ever increasing demand for Social Workers to be attached to various wards in Mater Dei Hospital where there is not already social work input, as well as the increasing caseloads of the Social Workers. The move of certain departments from Boffa Hospital to Mater Dei Hospital will be another challenge requiring social work input, especially in the light of the proposed expansion of the Oncology Department. Social Workers in the various health services will also continue to contribute to the various task groups / committees on the national policy on elder abuse, among others.

Work on the total handover of the Smartkids Centres to the Foundation of Educational Services will be carried out. The
challenges of ensuring that the Centres meet the physical standards (apart from the educational aspects), in order to safeguard the security of children, require a vast amount of investment of time, energy and resources, but will continue to be met. These require continual maintenance which cannot always be met immediately. In light of all this, regular assessment reports carried out by the Department for Welfare Standards and Health and Safety will also continue to take place, as well as meetings re the handover and deployment of staff.

The Service Manager as the Liaison Person for the Agency on Human Trafficking (HT) will continue to liaise closely with other stakeholders working in the field, especially the Police, International organisation of Migration (IOM) and other NGOs, in order begin to tackle this issue. This will involve being available for consultations regarding the assessments of possible trafficking cases, being involved in disseminating further training, advocating for a review of the Memorandum of Understanding between the current Ministry for Education, Employment and the Family, and the Police, the establishment of national indicators on HT and national referral mechanism, as well as for further training for staff involved in the area; and contributing to the Trafficking in Persons Report (TIP Report) produced by United States state department through the U.S. Embassy in Malta.
Domestic Violence Services

DOMESTIC VIOLENCE UNIT

Objectives of the Service

This service continued to implement its service delivery through its main objectives of:

• Supporting, guiding and empowering its service users to make informed decisions for themselves and their children (if any) about their domestic violence situation
• Enhancing service users’ awareness and skills in safety planning
• Providing emergency accommodation for as many service users as possible who are at risk
• Advocating with entities in relation to protection for Court hearings; housing, financial, health, employment and education issues; as well as tackling obstacles to these in aiming to ensure service users’ access to them
• Creating an awareness regarding domestic violence among potential service users and the general public, conveying the message of zero tolerance to violence, within the limitations of what the service can contribute to this at any point in time.

Performance Review and Analysis

The operations of the service continued to be characterised by predominantly the short-term and re-activated crisis nature of the work, as well as longer term intervention. For the first time since its opening, the Service had to introduce a waiting list, which stood at only 16 by the end of 2008.

Overall, the Appoġġ Domestic Violence Unit which had been previously had a stable team for many years, experienced a relatively high staff turn-over during this period. A total of seven members of staff left on maternity and parental leave, resigned or requested to move to other services within the Agency. This was combined with periods, sometimes lengthy, of replacements due to
new procedures required by external forces outside the Foundation. All these factors had a negative impact on operations. But the motivation of team was increased with an incoming new staff member as a replacement, after being short staffed for some time.

However, at the end of 2009, the team was aware of the imminent departure of its two most mature age and experienced Social Workers (with the exception of the Service Area Leader), a full-time and part-time one, one of whom was the Coordinator, due to forced retirement, which again had a negative impact on the morale of the team. The team had suddenly lost some of its most experienced workers and for the first time in a long period did not have the mix of mature age and young workers, and returned to being a young team (again with the exception of the SAL). In spite of this, this challenge was surmounted and the team continued with its work in a determined and professional manner.
In terms of case turnover, the Service experienced a substantial decrease in 2007 from 2006, the latter recording the highest case turnover since the initiation of the Service. However, at the end of 2009, the team was aware of the imminent departure of its two most mature age and experienced Social Workers (with the exception of the Service Area Leader), a full-time and part-time one, one of whom was the Coordinator, due to forced retirement, which again had a negative impact on the morale of the team. The team had suddenly lost some of its most experienced workers and for the first time in a long period did not have the mix of mature age and young workers, and returned to being a young team (again with the exception of the SAL). In spite of this, this challenge was surmounted and the team continued with its work in a determined and professional manner.

The latter was probably due to experienced staff leaving the Service, and cases not being able to be closed in the beginning of 2006. This is because members of staff who leave may not have had the time to work on the closure of cases through supervision, and these cases are left dormant on the active caseloads, adding to the case turnover numbers. However, with staff replacements during the year, more cases were also able to be allocated, which also contributed to the high case turnover. Case turnover increased again slightly in 2008, probably due to the replacement of a staff member earlier in the year, and was on par with those previously experienced from 2003-2005. In 2009, the case turnover continued to experience a steady increase, increasing its operations by a further 6% in comparison to 2008, and the second highest ever since 2000. This could be partly explained by some staff replacements, and hence being able to absorb more cases. Also, the departure of the two workers who retired was not till the end of the year, and so the impact of this was not felt until after their departure.

The year 2006 also saw the highest number of cases opened in the period under review, and on par with the years 2001-2004 (Figure 68). This again could have been due to the replacement of two staff, hence more case were
able to be allocated. By 2008, cases opened decreased by 18%, again affected by a decrease in human resources. However, in spite of this, average caseloads stood at 50 cases and over per worker, which is high compared to the official Agency average caseload of 40. In 2009, the number of opened cases increased slightly over 2008. The replacement of a staff member may have contributed to this, due to the fact that this staff member was placed on the intake system and being able to take on a caseload.

Case closures were the highest in 2006 since 2001, but decreased by 27% by 2008. With the replacement of two workers, the Service was able to focus on closing cases through supervision, which no longer required social work intervention. However, with the departure of other workers from the Service during periods in the subsequent two years, case closures were not able to be carried out at the same level. Although in 2009 service closures increased slightly in comparison to 2008, the low number of closures is probably due to not all staff replacements having been affected, hence impacting on case closures being able to be carried out.

Throughout the period under review, referrals were the highest in 2006, during which the number was on par with the previous years of 2002-2003, but decreased in 2007, culminating in a 9% decrease in 2008 (Figure 69). This could
be explained by the marketing exposure and subsequent public awareness in 2006 leading to an increase in referrals. This level of marketing could not be kept in subsequent years due to the operational impact that such exposure has. We strongly hold that once we embark on such awareness we need to ensure that we have sufficient resources in place to meet the requests for our services. The continued initial screening of some domestic violence cases by the Appoġġ Initial Response Service, and the waiting list may also have contributed to the decreases in the number of referrals in 2007-2008. The number of referrals continued to decline in 2009, with a 5% decrease in comparison to 2008. The continuous filtering of cases by the IRS service and the more paced exposure of marketing campaigns may be contributing factors to this.

The numbers on the waiting list in this service is not a reflection of what it should be. This is because of the reluctance of staff to place even the non-urgent victims of violence on a waiting list, due to the commitment and belief that these often distraught women cannot be made to wait once they have summed up the courage often in the face of risks. This is also in line with the EU directives on the rights of victims of violence to have easy access to services. All those involved would not negate this in principle. However, in reality, the other side of this is that, not keeping a waiting list or keeping it at a very low level, results in workers continuing to add cases to their existing high caseloads, and the needs of the service being hidden, and hence perhaps not getting the attention that is warranted from higher authorities.
Among the highlights and achievements of the Service were:

- The enactment of the DV Legislation to which the service had contributed feedback, and training conducted in association with this
- The appointment of Appoġġ as the designated Agency within the DV Legislation
- Meetings with the new Domestic Violence Commission to establish the way forward in working together
- The submission of a target measure to the Better Regulations Unit (under the Management Efficiency Unit), to improve delays in the waiting period for allocation of legal aid to victims of domestic violence. This delay would have been caused by the counterpart (victim’s partner) having to be informed of the victim’s application for legal aid. The legislation concerned was amended doing away with this practice – which was also a potentially dangerous one – hence legal aid being allocated to victims of domestic violence within days instead of weeks
- The exercise focusing on the closure of cases that had been left dormant on workers’ caseloads, or due to workers leaving the Service; which led to reducing workers’ caseloads to an average of 45-50 as opposed to 90-100 and over
- The appointment of a Coordinator for the Service
- Continued efforts to try and finalize protocols with Aġenzija Sapport within the Foundation for Social Welfare Services and Merħba Bik Shelter
- Providing support to the Domestic Violence Commission in setting up an exhibition on domestic violence, and the children’s art competition on the theme of domestic violence and jointly organised the White Ribbon Campaign to raise awareness amongst men in the fight against domestic violence
- Participated in high profile TV shows on the issue of domestic violence; and worked with the FSWS Marketing team on finalising informative leaflets about domestic violence
- The Service Area Leader was nominated to represent the Agency on Social Assistance Board of the Department for Social Security, as well as on the DV Commission’s sub-committee on service development
The re-submission of the UN Trust Fund about the prevention of violence against women and children
- The acceptance of an invitation by the Archbishop’s Office’s for training on domestic violence to be part of the training schedule for parish priests and seminarians
- The in-house training organised on issues arising from the DV Legislation provided by a legal representative
- Organised a support group for the team to process the impact that the nature of the work has on them
- The attendance of the team at the National Conference on Domestic Violence Working Together organized by the DV Commission with a foreign Judge as a keynote speaker
- The procurement of an EU Socrates Project placement in Italy on Acting on the background for a higher climbing of women survivors of violence, which saw the Service Area Leader of the Service attending this training, as well as the training opportunity under the EU Grundtvig ‘Train the Trainer’ Project on post-traumatic stress disorder (suffered by most victims of violence). The outcome of this latter training was the dissemination of 10 workshops to professionals within and outside the Foundation
- Joint presentation with the DV Commission to the Parliamentary Social Affairs Committee on the impact of DV on children and families
- The team had opportunity to attend another annual seminar on DV held by the DV Commission, and be exposed to foreign speakers from the London Vice Squad and Women Against Violence Europe (WAVE) organisation
- Under another Grundtvig EU project, gained the opportunity to have a foreign expert trainer linked to WAVE, deliver training on DV. This was a unique opportunity
- Another member of staff nominated on the DV Commissions sub-committee-standards in residential care
- Inspite of pacing more slowly the exposure on media, the service continued to contribute to media articles, TV & radio programmes.
Way Forward

As can be seen from the statistics above, there is a direct relationship between the staff complement and operational output. Where there are decreases in human resources, certain operational output tends to decrease, and therefore one of the main future challenges for the Appoġġ Adult and Family Services, and particularly in the Domestic Violence Services, is to continue advocating with the appropriate authorities for the need for more resources to be able to meet the demand, and focus on a giving a quality service.

Another challenge is to also continue advocating with the stakeholders concerned for the better implementation of the DV Act, in the best interests of our service users. Aġenzija Appoġġ was also appointed as the designated Agency within the DV Legislation, to be responsible “for the provision of preventative, therapeutic, and/or treatment programmes for victims and perpetrators of domestic violence” (Subarticle 1 in Part III, Point 9), which refers to the Minister designating agencies. Also Subarticle 4 (a) states “[...] also provide for funding by the Minister”.
However, Aġenzija Appoġġ, as the designated Agency, has never received any of these funds.

There are plans to make the review the Service’s manual of procedures and the waiting list system, an ongoing process. Furthermore, the Service will be evaluated, while the operations will be examined / reviewed vis-à-vis victims who want a service jointly with their partner when there is no fear, risk or danger; and examine in what ways with another service to formalise creating an opportunity for the perpetrators in these situations to have the opportunity to also be heard prior to possible referral to the perpetrator’s service. It is hoped that some work can be done in the area of prevention via educational awareness, especially targeting teenagers and youth in their relationships, and even to younger children, through the amalgamation of resources and prevention strategies with Aġenzija Sedqa.

It is aimed that the protocol with Aġenzija Sapport and Merħba Bik will be finalized, and planned to start one with the Appoġġ Initial Response Service regarding dealing with perpetrators on the above-mentioned issue, as well as with Dar Qalb ta’ Gesù. This is always with the aim of continuing to improve service delivery for our service users.

Continuing to advocate for and create training opportunities for staff remains another challenge within the continual limitation of resources. In this light, several applications for EU-funded projects were submitted and granted, as above-mentioned. However, the joint Daphne Project application with the DV Commission was not accepted. Applications for EU projects will continue in the coming years. Additional challenges are: attempting to address gaps in operational needs, such as ‘co-couple counselling’ for when the victim and the perpetrator have completed their involvement with the respective services but there would still be the need to address issues in the relationship; as well as the gap for working with teenage perpetrators.

There is also the priority of looking after the well-being of staff members in this very demanding work, where
there are often issues of burn-out and secondary post-trauma, among other issues to deal with. This could be addressed through the provision of support groups, among other options. This can only be sustained if the resources continue to be given to the Agency in order to invest in its staff.
Għabex Emergency Shelter Service

Objectives of the Service

- To provide emergency accommodation and a safe, temporary refuge to a maximum capacity of 17 women and their children who are victims of violence, as regularly as possible
- To provide this accommodation in accordance with set professional and other quality standards
- To provide professional support to women and their children leaving abusive relationships, by helping them deal with the effects of abuse, and also work towards making appropriate future plans
- To increase women’s and children’s awareness of the dynamics and adverse effects of violence, helping them to understand that abuse is never acceptable or justified.

Performance Review and Analysis

Over the four year period under review, the shelter service experienced the highest case turnover in 2006. There was a decrease in case turnover during 2007, which continued by 5% during 2008. In 2009, this decline continued by 2% in comparison to 2008. This pattern reflects the same variations in the Appoġġ Domestic Violence Unit (DVU) during the same period, and thus decreases observed in DVU may have led to decreases in demand for the Shelter Service. The Shelter Service is determined by the residential occupancy and the number of beds available, thus a decline in case turnover is in itself not necessarily that indicative of Shelter occupancy. The statistics in the case of the Shelter reflect only the number of female victims, but the Shelter also accommodates children who accompany the victim into shelter (Figure 70).
The number of cases opened (including new and re-activated cases) increased in 2006, on par with 2002 and 2003, but decreased by 9% in 2008 (Figure 71). Again, this increase reflects that with the changes in staff complement in the Domestic Violence Service in 2008 and hence less operational time, this probably reflected in and could be the explanation for the decrease in services opened in 2008. In 2009, the number of services opened increased by 6% over 2008, again probably reflecting the staff replacement in DVU which were able to absorb more cases, some of which consequently required shelter accommodation.
The number of referrals increased in 2006, tapering off in 2007 and slightly increasing in 2008 (Figure 72).

Figure 72: Number of cases referred to Ghabex, 2001-2009

Again, these first two years reflect the pattern in the Appogg DV Unit. The number of referrals in 2009 increased by 13% over 2008. This again reflected the pattern in DVU, as with the increase in the number of opened cases in this Service, this would lead to the likelihood of more referrals to Ghabex.

Among the highlights and achievements were:

- The submission of a proposal under the EU ERDF Project for works required at the Shelter
- The jointly organised Walkathon *Women for Women* in collaboration with MTStyle Clinic, to raise awareness on DV and in aid of the Shelter
- The first official visit by His Excellency the Archbishop and the Minister for Social Policy of the time to the Shelter in conjunction with the Social Corporate Responsibility activity by seven local companies
- The presentation of the funds raised from the two-year Body Shop Campaign on domestic violence
- The acquisition of funding from the HSBC Care for Children’s Fund for a portable swimming pool at Ghabex and its installation, which made a difference to the quality of life of the residents and their children
- The appointments of key residential Social Workers
Foundation
Social Welfare Services

- Attendance at two National DV Conference organised by the DV Commission
- Meetings with the FSWS Research Executive regarding the terms of reference for the Shelter’s evaluation
- Recruitment of a facilitator each for the women’s and children’s support groups.
- Training under the Daphne EU project- a foreign expert trainer linked to the WAVE agency, delivered training on DV
- The commitment of one of the Diplomatic institutions to having the crew of the next visiting ship to do works at the Shelter.

Way Forward

The challenges being faced by this Service include the prioritisation in the expenditure of funds raised so far, in order to continue improving the environment of the Shelter for the benefit and well-being of the service users. As well, efforts will continue to be made to attract Social Corporate Responsibility activities by private entities that will help to address the ‘poor’ physical state of the Shelter, in order to maintain a quality standard of premises and living, again for the best interest of the users. The latter has become more of a challenge in the light of the recession.
The training needs of staff working in this setting are also a priority, especially given the demands that residential work brings with it. Staff needs to be exposed to current models of working in a Shelter, and such issues as supporting / empowering victims in dealing with their emotionally disturbed children. A successful application to the WAVE agency in Austria, under the Daphne Project, gave an initial exposure for staff to the training required, began to address these issues.

This service will also be involved in a service audit. Among other issues that need to be solved, is the burning issue of children of victims not being able to change schools whilst at the Shelter unless with the consent of both parents when there is joint care and custody. This has been raised in meetings with representatives from the Education Department, but no solution has yet been found. The issue of ongoing investment in continuing to look after the well-being of staff members as mentioned above, applies here as well. The issue of the possibility of a pool of relievers also needs to be explored, due to some difficulties experienced in replacing staff on shifts.
Perpetrators’ Service

Objectives of the Service

• To enable perpetrators of violence to take responsibility for their violent behaviour
• To enhance their awareness and understanding about their attitudes and actions of violence
• To provide perpetrators’ programmes and support groups based on behaviour modification/psycho-educational models, in which facilitators can challenge the perpetrators’ behaviour, work towards the understanding and awareness, and move on from violent to respectful relationships
• To provide social work assessment as to the suitability of the perpetrator as a potential Programme member
• To provide social work intervention and support to individual perpetrators in crisis, and to those who are in need of such intervention in between Programmes
• To provide feedback to the Appoċċ Domestic Violence Unit, if the perpetrator’s partner is being followed by a Social Worker from this unit.

Performance Review and Analysis

Since the set up of the service, the case turnover in the Appoċċ Perpetrators’ Service was at its highest in 2006-2007, and on par with 2004; this decreased by 13% in 2008 (Figure 73).

The latter was probably due to the service being also dependent for referrals from services such as the DVU and Għabex, and so if these latter services experience a decrease, then this will be reflected in the Perpetrators’ Service. Moreover, the support group was temporarily suspended in 2008 and there was also a temporary lowering of the profile of the service vis-à-vis media exposure thus minimising the impact this can have on the service. All these factors have impacted service output. However, in 2009 case turnover in the Perpetrators’ Services increased by 22% over 2008, due to the resumption of the programme and support group.
The number of cases opened in 2006 (i.e. number of new cases together with re-activated cases) was on par with the previous year, but increased in 2007. This increase was probably due to the recruitment of an additional part-timer in the Service who was able to take on more cases, and due to more media exposure that year. However, 2008 saw the number of cases opened decreasing by 44% due to the temporary suspension of part of the service. But in comparison to 2008, the number of services opened increased considerably during 2009, again due to the resumption of this part of the service.

The number of referrals to the Perpetrators’ Service in 2007 increased over that in 2006, but decreased again in 2008 by 52% (Figure 74). Contributing factors which caused this decrease in the number of referrals in 2008, and the considerable increase again in 2009, are mentioned above.
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The highlights and achievements of this Service include:

• The recruitment of an additional part-timer to assist the Coordinator in this service. This post filled the hours that had been vacant for years.
• The recruitment process to expand the pool of Facilitators for the programme and support group.
• The rotation of Facilitators in having run all the groups in the Service was completed.
• Assistance in the preparation for and appearances on high profile media programmes.
• Worked through the challenge of having to temporarily suspend the support group, as well as the resignation of the Service’s external supervisor. The group began running again once a new supervisor was identified and joined the Service.
• Attendance at the two National DV Conferences organized by the DV Commission.
• Training under the Daphne EU project- a foreign expert trainer linked to the WAVE agency, delivered training on DV.

Figure 74: Number of referrals to the Appoġġ Perpetrator’s Service, 2001-2009

No. of cases

<table>
<thead>
<tr>
<th>Year</th>
<th>Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>2001</td>
<td>49</td>
</tr>
<tr>
<td>2002</td>
<td>57</td>
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<tr>
<td>2003</td>
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</tr>
<tr>
<td>2008</td>
<td>23</td>
</tr>
<tr>
<td>2009</td>
<td>53</td>
</tr>
</tbody>
</table>
Way Forward

One of the future aims of this Service would be to re-run an updated training programme for the staff in this Service, including the current Facilitators and potential Facilitators. Preliminary meetings started to be held to this effect. Also, the WAVE training contributed towards meeting some of these needs, in exposing the staff to current models and techniques of practice in the Perpetrators’ Services.

An associated challenge with the above-mentioned is to recruit new Facilitators so as to increase the existing pool of Facilitators, and maintain them. It is important to have a pool of Facilitators to rotate between the Programme and the support group where assessed as appropriate, so that staff can be relieved and also remain motivated with new challenges. The issuing of an Expression of Interest in working towards creating this pool of Facilitators has been requested.

Continuing to reach out to more perpetrators by focusing on the topics related to them through the media, may also be another way forward. Fostering continued liaison with particular members of the Judiciary for more referrals to the Service through Court-ordered Treatment Orders under the DV Act, was maintained during this period under review, and needs to be continued.

Investing in looking after the well-being of staff members as previously mentioned, also applies very much also to this Service, given the very demanding work here involved.
Psychological and Family Therapy Services

Objectives of the Services

These Services have continued to play a pivotal role in providing support to the other services within the Agency, via their focus on delivering therapeutic services to child and adult victims of abuse and trauma, to re-constituted families and adults in distress and crisis, in the main. The work in these Services is characterised by the long-term nature of therapeutic work with very complex and traumatised service users, and therefore one will not see a high turnover of cases in these Services.

During the period under review, the Psychologist providing psychological support services within the Oncology Centre at Boffa Hospital also fell partly under the remit of the Appoġġ Psychological Services. The primary aim of this Service is to provide direct help to service users, their family members and significant others who are struggling with emotions brought about by the service users’ diagnosis and illness. Additional aims are to enable service users to deal with their emotional suffering and to strengthen communication between family members; and provide bereavement support to the family members after the death of the service user.

Performance Review and Analysis

Between 2006 and 2008, both these Services – which previously had relatively stable teams – experienced a fluctuation in human resources, losing some of the most experienced staff, bringing with it an impact on operations. In the first half of 2007, the Psychological Service saw the departure of two experienced staff. These were the Service Area Leader, who had held the post on a full-time basis for some years, and another Psychologist. They were replaced almost immediately by a new Leader on a part-time basis (also an experienced worker), as well as two other full-time
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and relatively experienced Psychologists. However, one was a replacement for a full-time Psychologist who had left in 2006.

The first quarter of 2008 marked the departure of another two experienced psychotherapeutic professionals who were replaced at the end of the year. The hours of another Psychologist who had left over mid-way through 2006, had taken a long time to be replaced. One of the reasons for the delay in recruitment was the difficulty in finding replacements. When the Appoġġ Psychological Service was set up in 2001, it gave 250 operational hours per week. At the end of 2008, these were reduced to 140 hours per week, plus the forty hours of the worker who has since gone out on parental leave. This decrease is also attributed to members of the team having reduced their working hours, and hours being lost when staff is not replaced.

As a result of the difficulties in finding staff replacements in this area, the system of outsourcing services to Psychologists outside the Agency on a contract basis, was set up and continued during this period. The adopted system, although having its difficulties, helps especially in some urgent cases which cannot be placed on a waiting list. In 2008 there was also the loss of a full-time post for a Child Psychologist which had been granted.

Family Therapy Services (FTS) also experienced a fluctuation in human resources during this period. The resignation of the Service Area Leader in 2007 also impacted this service as her hours were split between two services. In the same year, another two experienced Family Therapists went out on maternity leave, and another Family Therapy worker ceased her hours as a contractee, with one full-timer on board as a replacement. The year 2008 marked the departure of yet another experienced Family Therapy worker, the reduction in hours of three workers and another contractee. Hence, this Service, which was set up in 1994 with 200 operational hours per week, was now operating at 105 hours per week, with 65 hours still to be replaced. In 2009, there was a further reduction in staff hours due to staff on maternity and parental leave, as well as reduced
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hours. However, the vacant hours in FTS were utilised to create a full-time post for a Psychologist (due to an even greater difficulty in recruiting family therapy workers / family therapists), and this was filled.

Hence, at the end of 2009, the waiting lists in these two Services stood at 180 cases for the Psychological Service, and around 55 for the Family Therapy Service, as the complement of workers could not absorb the demand on the services.

Over the year 2008, the Service Area Leader of the two Services initiated a change in operational strategy as a pilot experiment. This involved merging the two teams in holding meetings together, and discussing new referrals jointly so as to assess which service interventions would most effectively meet the needs of the service user. The year 2009 saw the emergence of preliminary thoughts and discussions re the possibility of amalgamating these two services with the same services in another Agency within the Foundation.

The case turnover within the Psychological Service has shown a steady increase in the last few years. The number of case dealt with has increased by 21% in 2008 over 2007, which in turn had a 29% increase over 2006 (Figure 75). This was probably due to an accumulation of cases from staff that had left, and were left pending; the long-term nature of the work; and new staff within the Service who were not able to absorb a full caseload of approximately 20-25 cases (which is high in these settings of long-term therapeutic work) immediately, but which they eventually did within a short period of time. The number of cases continued to increase by 13% in 2009 over 2008, for similar reasons as those mentioned above.
The number of cases opened (new and re-activated cases) by this Service increased slightly in 2007, probably due to the staff replacements who took on a caseload. However there was a decrease in 2008 (Figure 76). This was again due to staff departures during this particular year, meaning that the caseloads had to be transferred and the present staff could not be allocated further cases from the waiting list; and also due to the long-term nature of Psychological Service cases, resulting in fewer cases allocated in 2008. It needs to be understood that the cases that are referred to this Service are often victims of abuse and/or trauma in the main, and therefore require long-term therapeutic work. Hence, new cases cannot be allocated as frequently as in services where the nature of the work is short-term. In comparison, 2009 over 2008 saw another decrease in the number of cases opened. This again is attributed to staff departures due to long leave and reduced hours; and the fact that the new recruit joined the team late in the year, thus the initial uptake of cases could only be gradual.
The number of referrals decreased slightly in 2007 from 2006, but increased again in 2008, being on par with 2005 and 2006 (Figure 77). The former may have been due to other services in the Agency not referring cases, being aware of the staff changes in this Service, but increased their referrals again once the new Child Psychologist came on board. Referrals increased further by 7% in 2009 in comparison to 2008. Again, the knowledge of a staff replacement in the team probably encouraged professionals to continue to refer, but also cases across the board in the Agency are becoming more complex and crisis orientated in nature, requiring more psychological intervention.
In the Appoġġ Family Therapy Service, a significant decrease in case turnover was seen in 2007 (Figure 78). This can be attributed to the fact that the focus during that period was on the existing caseload, as more cases were closed than opened due to staff movements. The Service then saw an increase of 16% in case turnover in 2008, and 2009 also registered another increase of 21% over 2008, probably due to staff replacements and staff returning from long leave during this period, which meant that cases could be taken up and worked on.

The number of new and re-activated cases (service open) dealt with in 2006 was on par with 2004 and 2005 (Figure 79). Yet, this reduced drastically in 2007 as a result of staff leaving the service and others reducing their hours, and thus there were fewer staff to allocate cases to. These case openings increased significantly again in 2008 on par with 2006, as a result of staff returning to the Service and a full-time post being filled, which hence allowed for more cases to be allocated. The number of opened cases increased by a further 34% in 2009 in comparison to 2008. This can be attributed to the above-mentioned reasons that led to an increase in 2008.
Referrals decreased in 2007 due to a decrease in operational time and people not referring to the Service. However, with an increase in operational time in 2008, the number of referrals made to the service increased (Figure 80). In contrast, the number of referrals received in 2009 decreased by 31% over 2008. This again could be due to the knowledge that there were further reductions in staff’s hours, as well as re the numbers on waiting lists which may have discouraged referrals.
The highlights and achievements of the Appoġġ Psychological and Family Therapy Services included:

- The waiting list of the Psychological Service was reviewed due to concern about it and the number of children on it
- The FTS waiting list was reviewed and reduced from around 80 down to 49 in 2008. Individuals/families on the waiting list were all contacted, and found either to have sought alternate help from other entities, or couples had separated, or gave feedback that they no longer needed help. This is an exercise that is carried out regularly
- Commenced the process of examining the Psychological Service’s criteria and implementing the new operational strategy as described previously
- The running of the Tavistock training continued
- The attendance of the previous Service Area Leader at the International Conference on the Child and Adult Victims of Trauma in the Netherlands
- The current SAL, at the 11th ISPCAN European Regional Conference on Child Abuse and Neglect in Portugal
- Other members of staff attending the International Conference of Family Therapy in the U.K., and another attended the International Social Services meeting in Turkey, with one of the themes being The differences between Family Therapy, Mediation, and Counselling, and their Application in the Social Field
- The completion of the Pamphlets on the services’ and the installation of new sound system for FTS ‘one-way’ mirror mode of practice
- The acquisition of a Playmobil donation of a doll’s house for the children’s’ therapy room.

**Way Forward**

The correlation between staff complement and operational output was very evident in both these Services as well. Hence, one of the major challenges here is to continue to advocate for additional resources at least to address the growing waiting list of children and adults in trauma. This has been requested in capacity building exercises, and it is hoped that it will come into fruition. The challenge to recruit and maintain staff in this area is further doubled in the face
of competition with the working conditions that private practice offers. Another challenge which placed additional pressure on the limited human resources within these Services was the increase in requests towards mid-2008 and subsequently for their involvement with families who had been victims of tragedies, and who had not previously been service users of the Agency. This work was absorbed over and above the workers’ existing caseloads and cannot continue to be sustained without additional resources.

Regular reviews of criteria in both Services are all part of future plans. The Leader’s initiative of the two Services working together needs to also be more formalised. A proposal regarding the role of therapeutic services in the new community teams as a pro-active, preventative and hence more effective measure is being worked on between these two Services and other services within the Agency. If this were to be implemented, it would also require additional resources.

Advocating for training opportunities in these Services is also a priority so that the staff can keep abreast of professional developments in their areas of specialisation, which in the long run, this would be for the benefit of the service user. Many of the staff personally invest in this area and this needs to be acknowledged; the Agency needs to be continually supported in providing regular training opportunities also. The issue of looking after the well-being of staff members is also important here, given the continual work with service users who are traumatised and in crises. The staff within these Services also benefit from external supervision given the specialisation of their profession in a predominantly social work agency.

The possibility of an amalgamation of these two Services with their equivalent Services in another Agency in the Foundation, as a means of further making them effective and efficient for service users, as well as heightening the profile of these two professions within the Foundation, also needs to be explored.
Health Social Work Services

MATER DEI HOSPITAL

Objectives of the Service

- To provide a holistic service in order to improve the quality of life of the service users during their stay in hospital and after discharge for up to one month
- To work together with other professionals, allied professionals and service user’s family in order to meet the service user’s needs in a holistic way
- To provide assistance in the care/discharge plan of the service user in order to obtain maximum levels of functioning for the service user
- To liaise with entities for community services if required, to ensure the service users’ smoothest return and adjustment back home or in an alternate setting.

This service in Mater Dei Hospital offers social work intervention in an acute hospital setting, with Social Workers being allocated to the various wards such as medical, surgical, paediatrics, and gynaecology and obstetrics, among others.

Performance Review and Analysis

Since its inception, the Service had its highest case turnover in 2007, with 871 cases (Figure 81). This was probably due to a variety of reasons, namely: the Service’s relocation and transition from St. Luke’s Hospital to the new hospital, and this impacting on operations because of its higher profile; more awareness about the Service thus leading to more referrals; as well as workers not being able to work on closing cases during this period due to the investment of time and energy that the transition from one hospital to the other took. These two factors lead to the addition of cases to the current caseload. There was also a change in leadership, so this, together with a four-month waiting period for the replacement, as well as a long gap for the replacement for a 20-hour post, would also have had an impact on operations.
In 2008, the case turnover decreased by 15% (Figure 81), although the number of cases standing at 739 was still the second highest amount since the outset of the Service, but also relatively on par with 2004-2006. Contributing to this decrease was possibly the factor of the replacements of the outstanding staff posts in the Service. Hence, cases could be allocated and closed, and by then the Service’s profile had stabilised. In fact, referrals decreased in this year.

Services opened decreased by 32% in 2008. That is, cases opened (Figure 82) decreased as referrals decreased. However, as was observed with the case turnover, it is almost on par with 2005 and 2006, indicating that the increase in 2007 was an exception and was most likely due to the impact of the relocation of the Service, as previously mentioned.
Referrals decreased in 2008 as compared with 2007, registering a 15% decrease probably due to a stabilisation of the Service after the initial heightened awareness and exposure (Figure 83). As previously mentioned, the increase in referrals in 2007 may have been because of this exposure surrounding the relocation of the hospital service and the consequent increase in demand of this service. Although in 2008 this decrease is noted in comparison to 2007, it is still higher than 2001-2006, indicating a continued high demand for the service.
The highlights and achievements of this Service include:

- Meetings held with Primary Health Care Authorities for the introduction of social work services in primary health settings; a proposal for the service was drawn up
- Commenced the writing of the Procedures Manual
- The completion of the protocol between MDH Social Work Service and the Appoġġ Child Protection Service Seminar held with Social Workers from the Department for the Elderly and Community Care, regarding practices of better networking
- Service Area Leader’s involvement with MDH Management about the planning of the transition to the new hospital and bed management, and on proposal to coordinate inter-disciplinary assessment
- Service Area Leader’s training in the U.K. on Fast Track Discharge and bed management
- An increase in ward meetings and case conferences within the wards, contributing to the development of an inter-disciplinary approach, as well as to the continued demand for the service
- Involved in the setting up of the Nursing Patient Assessment Form (to ensure early referrals to professionals)
- Service Area Leader as the social work representative on the Clinical and Social Support Services Advisory Group (CSSSAG), which works on establishing better ways of inter-disciplinary working and professional development
- An increase in individual requests for social work assistance from medical staff, indicating that the raised awareness about the Service was having an impact
- Request from the hospital’s Volunteer Service Vol-Service to train its volunteers about identifying social issues
- The social work office gaining the highest positions in the Customer Care Statistics for the first to deal with telephone queries, and taking the least time to answer
- Social work representation on the Hospital’s Green Committee
- Social Workers representing the service on the Working Group on Elder Abuse which is now working on a national level to develop a national policy on this issue
• Service Manager and SAL met with the new Medical Superintendent to introduce and explain the social work service and discuss shared expectations and future plans
• The completion of Boffa and Qormi Health Centre’s Draft Manual of Procedures
• Meeting with CEO, MDH, re requests from the Admission and Emergency and Paediatrics wards for a social work service, and the commencement of joint proposals to this effect.

Way Forward

In line with the requests of health professionals from the Admission and Emergency, and Paediatrics wards for the Social Work Service to be allocated to their wards. Joint proposals are to be finalised and submitted to the MDH CEO. A similar request was forwarded by the Sexual Assault Response Team (SART) Task Force for the proposal of a SART at Mater Dei Hospital, and the outcome of this is to be seen after the Task Force submits its report in 2010. This is a strong reflection of the positive impact the social work service at MDH has made, and how its input is valued by the medical and allied professions. However, these requests must be met with the addition of human resources and not from the existing ones; given that the
latter are stretched to capacity due to the crisis, short-term and high-turnover nature of their work, with no waiting list. Individual workers are carrying caseloads of 60 and over, compared to the Agency’s official maximum caseload of 40. If approval is granted for additional human resources, then additional support for the Service Area Leader is essential, especially in the light of her responsibility for 6 health social work services.

Discussions with the MDH authorities will continue with respect to establishing clearer policies and procedures in dealing with assessments of social cases in relation to cases of elderly service users; as will Social Workers participation in the different Committees and Groups, further establishing networks and promoting the service. The new Medical Superintendent had made a request for the work of the Social Work Service to be promoted even more through the media, so that the public gain a further understanding of the service, and to do even more justice to the service. This has already commenced with some articles already having been published.

The Service Manager and Service Area Leader also need to further explore options in order to address the Social Workers’ continual increasing caseloads, as a result of having to take on every case that is referred to them and not being able to have a waiting list due to the short-term nature and crises nature of the patients’ stay in hospital. The current situation cannot be sustained any more. One strategy being worked on is that several wards have requested Social Workers to be attached to them, and the Service Manager and SAL will support proposals submitted to back-up these requests. They will also make arguments for additional social work resources for some wards where currently workers are allocated but the numbers are not sufficient enough. These steps are essential in order to prevent ever having to create waiting lists.

Providing for the welfare of staff and their training needs are also an ongoing priority. An advantage that Health Services have over the other services in Appoġġ is that they also can gain opportunities for training that the Health sector provides.
BENNIENA

Objectives of the Service

- To offer social work support to pregnant women and their families who are facing crisis and or social problems in pregnancy, and assist them to adjust to the situation
- To offer information re any social benefits, resources and community services that will support these service users
- To offer guidance to the parent(s) about the baby and legal rights, where appropriate
- To assess the state of the mother and develop a care plan to ensure security and protection for the mother and baby.

Performance Review and Analysis

This Service showed a marked decrease of 38% in case turnovers in 2008, which stood at 137 cases (Figure 84). As with the Mater Dei Social Work Service, this was due to the abnormally high case turnover of 222 cases in 2007 due to the hospital’s relocation, as well as the departure in 2007 of the full-time Coordinator of the MDH Social Work Service. The latter primarily worked on this Service as well, and not having been replaced until 2008, may have led to cases not being able to be closed, thus increasing the caseload. The replacement of this worker in 2008, together with another worker coming on board, would have led to a focus and filtering of cases being worked on including closures, as well as the stabilisation of referrals, hence leading to a decrease in case turnover. In addition, there were less referrals from the Gynaecology Outpatients.
The number of services opened in 2008 continued a downward trend, for some of the above-mentioned reasons (Figure 85).

The number of referrals in 2008 has continued a downward trend but remained relatively constant with only a 5% decrease over 2007 (Figure 86), and this was probably due as above-mentioned to a stabilising of the Service after the exposure that the relocation brought with it, but also due to continued and regular exposure leading to only a slight and not a marked decrease.

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1 No official data was available for Benniena Service in 2009, as there were technical difficulties in the databases, which could not be resolved in time for the writing of this report.
The highlights and achievements of this Service were:

- The Service continued to consolidate its work and focus on providing a quality service. The new Social Worker who took on the post in this Service also has qualifications in family therapy, which is an asset in working with pregnant mothers and their partners and families. The other part-time worker in this Service is also a mature and experienced Social Worker having had experience in various social work fields. Apart from this Service they are also allocated to other wards in MDH.
- The contribution of these experienced workers led to the profile of the Service being heightened, and to more relevant referrals.
- Improved working relationships and networking with other relevant stakeholders in this area.
- This Service was also featured in the new leaflet produced by the FSWS Marketing team about the MDH Social Work Service.
- The SAL and full-time Social Worker were instrumental in setting up the Substance Misusing Mothers Committee.
- One of the Social Workers received an award for outstanding practice in the health field.
- One social worker allocated temporarily to assist in paediatric oncology/paediatric diabetes, in the interim of the submission of proposals for social work services to be attached to this ward.

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2 No official data was available for Benniena Service in 2009, as there were technical difficulties in the databases, which could not be resolved in time for the writing of this report.
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Way Forward

The way forward for the Benniena Service is to continue consolidating and provide a quality service for the service users. The Service Manager and SAL also need to address the extremely high caseloads of 120-130 between 1.5 workers in this service, as this is not sustainable in terms of the impact on the workers, as well as on the quality of the service.

Requests for the extension of a social work service have also been made from the Paediatric Diabetes and Paediatric Oncology, and although some hours have been devoted to the former, the medical and allied professionals are jointly working with the SAL of the Social Work Service on the submission of formal proposals to their health authorities.

There will also be advocacy for changes in the legal system, which needs to be implemented in order to address some injustices to the service users and their children.
BOFFA HOSPITAL

Objectives of the Service

• To provide practical help and support to patients suffering from oncological, neurological, and dermatological related health problems, and their families, where the illness and medical treatment are complicated by social or emotional problems. This includes information regarding social benefits and community services, among others
• To work with the medical and allied professions, as well as service providers in the community, in order to formulate the best care plan for the service user so that they may regain their physical and mental health, and achieve the smoothest return to the family and community whenever this is possible
• To provide social work intervention during periods of acute stress through the provision of services to improve the quality of the service user’s life during their stay in hospital, and/or referral to services designed to enhance the long-term quality of the patients’ life.

Performance Review and Analysis

This Service continued to give a valid contribution in an acute and rehabilitative setting for mainly oncology, dermatology and spinal injury service users.

The case turnover of Boffa Hospital Social Work Service rose progressively since the Service opened, and the highest rate was recorded in 2008, as the number increased by 23% to 550 over 2007 (Figure 87). Contributing to this was an increase in cases open and referrals. The addition to the service of 40 operational hours in 2006 contributed to this increase; and the introduction of a Social Worker in the dermatology section, saw an increase in referrals.
In 2008 the number of service openings increased significantly (Figure 88) and service closures nearly doubled the amount observed in previous years. This would indicate that some short-term work with clients occurred in 2008, and probably in conjunction with a focus on closing cases through the context of supervision.

The referrals have reached an all time high in 2008 as it increased by 47% in comparison to 2007 (Figure 89). The high number of referrals was reflected in an increase in case openings, which indicates that the referrals were taken up immediately, since there are no waiting lists pertaining to the Health Services. This increase in referrals can be attributed to the Service continually promoting its profile with the medical and allied professionals, as well the Social Workers making up part of the hospital’s treatment plan.
Highlights and achievements of the Service include:

- Increased the social work input by a twenty hour post
- The 3 Social Workers were assigned to a new system of Oncology, Neuro-rehabilitation and Dermatology specialisation
- The Social Work Service established recognition to the extent that it forms an integral part of the Boffa Hospital Treatment Plan (through inter-disciplinary meetings and ward meetings)
- The Senior Social Worker in the Service was nominated for the Clinical and Social Support Services Advisory Group (CSSSAG) worker of the year
- Initiated training programmes together with the medical profession for oncology patients and their families
- The Coordinator of the service (also being the Senior Social Worker), worked together with the health authorities on submission of proposals for the planning of the move of the departments at Boffa hospital to MDH.
Way Forward

The Social Work team has been involved in the drafting of policies regarding service provision and service accommodation in the light of the move of Boffa Hospital to the extension of MDH; and work on plans will continue right up to the move and the settling in process. The Coordinator of the Service, in planning with the SAL, aims to hold more in-house training for the team on oncology social work and bereavement, in particular. The promotion of the Service through inter-disciplinary work and networking will continue; as well as the possibility of more training programmes for service users and their families. There is also the possibility that the Health authorities will be making a request for more Social Workers.
QORMI HEALTH CENTRE

Objectives of the Service

• To provide the best care in the community to prevent service users with mental health problems having to receive treatment in hospital, as far as is possible
• To form part of an inter-disciplinary team to formulate action plans in the best interests of the service users
• To provide support to the service user, their families and/or their carers.

Performance Review and Analysis

This Service continued to develop and consolidate its Primary Mental Health Care (PMHC). Social Workers worked with nurses, general practitioners, and psychology graduates who form the PMHC team, which aims to help persons with mental health difficulties at the community level, and prevent admissions to the mental health hospital as far as possible.

The Qormi Health Centre (QHC) has continued a trend of decline in case turnover. In 2008, with 176 cases between 2.5 workers (with the worker on part-time hours also being the Coordinator of the Service), there was a 9% decrease over 2007 with 194 cases, which respectively had a 10% decrease over 2006 with 216 cases (Figure 90). The decline in the case turnover is reflected in the decline in all aspects of this Service’s operations. The introduction of a waiting list – although short – and working in an interdisciplinary team, has led to more filtering of referrals and hence more relevant case intervention, hence partly explaining the decrease in case turnover.
Services opened (new and re-activated cases) also reflected the trend of decline observed from case turnover. A slight decline was registered in services opened, with a 9% decrease in 2008 (Figure 91). This may indicate a focus upon quality service provision over quantity, as above-mentioned, and clients are being worked with more on a long term basis, which reflects the nature of the work with the service users in this context.

Referrals to the Service also reflected a decline of 14% in 2008 over 2007, and 41% decline in 2007 over 2006 (Figure 92). This decline could be a reflection of the Service having changed it mode of operations, in that it started working in an inter-disciplinary model, with referrals being screened and referred to the more appropriate professional disciplines.
As can be seen, the Service experienced a reduction in service provision in the areas mentioned above. Another aspect which may have contributed to this could have been that whereas previously Psychiatrists would refer every case irrespective of the workers’ caseload, recently they may have been more conscious of staggering referrals according to timing and numbers.

The highlights and achievements of this Service were:

- Support group for service users was set up
- Commenced process for setting up support group for carers
- Journal Club set up – the inter-disciplinary professionals meet at intervals to discuss professional articles to enhance their working together
- Received the Best Community Team Award, as part of the PHMC community team that they form
- The setting up of an inter-disciplinary Primary team comprising of social work professionals as well, in addition to the Secondary team, in which referrals would be assessed and followed-up by the inter-disciplinary team
- The Health authorities are setting up models in other community Health Centres based on the success of the Qormi Pilot Project.
Way Forward

The service will continue to consolidate the inter-disciplinary way of working, which is now well-established, as reflected in the award that the team received. Efforts need to be made to maintain the Social Workers’ office space, as there are requests to change this, and to address issues experienced with one psychiatric firm.
HEALTH COMMUNITY SERVICES

During the period under review, there was an expansion of the Health Social Work Services, with the addition of the social work input in the Bormla Mental Health Day Centre, and the Mount Carmel Hospital Community Outreach Service.

Objectives of the Service

1) Bormla Day Centre
To provide a structured setting for service users with mental health challenges in which activities, including craft-making, cooking, talks, outings etc., are organised; in order to give the service users a routine of activities of daily living, enhance their social, inter-personal, physical and mental skills; and with the aim of preventing isolation in their homes and the community and possible admission or re-admission to the mental health hospital.

2) Mount Carmel Hospital (MCH) Outreach Service
To support service users with mental health challenges who have been discharged from MCH, and require high support and monitoring in re-adjusting and re-starting their lives back in the community.

Performance Review and Analysis

The Bormla Mental Health Day Centre since its opening in 2008 has catered for 35 clients at any one point in time. The Social Worker together with the Occupational Therapist, ran the Centre, and with the support of the carers and volunteers, provided the service users with the structure mentioned above. The Appoż Social Worker concerned, left the service in 2009 and was missed by the Service. MCH replaced the worker with their own recruit and so the Service no longer fell under the responsibility of Appoż.

The Social Worker in the MCH Community Outreach team forms part of an inter-disciplinary team, whose role among the assessment of cases on intake is to conduct home visits to service users in the community, and assess their progress and needs. The Social Worker has a caseload
which is maintained at around 12 cases, and at face value this seems a low amount, but these are highly intense cases of service users with challenging mental health problems, some of whom require daily visits, and working with them can be extremely demanding.

The highlights and achievements of the Service include:

- The service users attending the Bormla Day Centre were able to sell the products that they made, and also became more independent
- Two MCH Psychiatrists initiated the Community Outreach Service, recognising the value of the social work input and the inter-disciplinary team approach. As a result of this service, some service users who had been institutionalised on a long-term basis, were able to return to live in the community
- Mount Carmel authorities had made a request to purchase the service of the Social Workers in these new contexts through Aġenzija Appoġġ, again valuing the contribution this profession had to offer in this area as well.

**Way Forward**

It was planned that the Health authorities will be replicating the Bormla Day Centre inter-disciplinary model, including the social work aspect, in other Health Centres, again based on the success of the Bormla Centre. However, as mentioned above, as the Appoġġ Social Worker left the Service and was replaced by an MCH recruit, the Service no longer made up part of Aġenzija Appoġġ’s Health Social Work Services.

Regarding the MCH Community Outreach team, the consolidation of the inter-disciplinary way of working via better work practices will continue, as well as aiming to have more service users re-integrated back into the community. Security issues regarding professionals such as Social Workers conducting home visits on their own is being looked into, and vis-à-vis clients themselves.

It is important to note that the Health Social Work Services are funded by the Health Department. The Department reimburses Aġenzija Appoġġ for the provision of social work personnel.
**ST. VINCENT DE PAULE RESIDENCE (SVPR)**

**Objectives of the Service**

- To support elderly service users who are new to SVPR, in adjusting to the residence
- To act as a focal point of reference for elderly service users
- To identify the needs and social problems that elderly service users are facing, assist them in working through these, as well as working with family members and/or carers in achieving this where appropriate and possible
- To motivate and enable elderly service users to live an active and independent life as much as possible.

**Performance Review and Analysis**

The St. Vincent de Paule Social Work Service (SVPR) recorded an increase of 9% in case turnover in 2008 (Figure 93). This was probably due to the accumulative impact of a high case turnover in 2007, the third highest since the opening of the Service, plus the second highest number of case openings and referrals in 2007. Thus, these accumulated on the 2008 caseload of the two workers, with probably little opportunity for case closure. The Service then recorded a slight decrease of 3% in case turnover in 2009 in comparison to 2008, but became the second highest since 2000. This may have been due to the workers focusing on new cases which comprised the majority of the referrals, as well as trying to deal with the accumulation of long-term cases from the previous year. The workers’ participation in several policy working groups may have also taken time form working on the turnover of cases.
In 2008, the services opened decreased from the previous year. However, it is relatively comparable to 2005 and 2006 (Figure 94). The abnormally high number of cases opened in 2007 was due to the re-location of the St. Luke’s Hospital, with the impact of social cases of the elderly for admission in to SVPR. During the transition of St. Luke’s Hospital to Mater Dei, there was an increase of elderly social cases being left at hospital by their families, as it seemed that their perception was that St. Luke’s was going to be made into a residence for the elderly. For example, the number of referrals to the Social Work team on one day was 40. Hence, there was an increase in referrals to Social Workers to write social reports for referral to SVPR, if assessed as an appropriate course of action. In 2009, the number of services opened registered a decline compared to 2008, due to a drop in referrals as a result of the decreased pressure and referrals from the MDH bed manager regarding ‘bed blockers’, the role the rehabilitation hospital at Karen Grech played, and fewer referrals from the SVPR admission ward.
The number of referrals have been relatively stable in previous years but it decreased by 31% in 2008 in comparison with 2007 (Figure 95). The number of referrals in 2008 was also almost equal to the number of new clients, indicating that clients were receiving short-term intervention. Referrals continued to decrease by 8% in 2009 in comparison to 2008. Possible reasons for this were as explained in relation to Figure 94; as well as the above-mentioned.
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Highlights and achievements of this Service include:

• Social Workers were involved in the Working Group on Elder Abuse, which is now working on a national level to develop a national policy on this issue
• A Social Worker from the team was involved with the medical and allied professions in research on the Respite Service at SVPR. The study was published in the Malta Journal of Medical Science
• A Social Worker from the team represented the Service on a Working Group to study the Restraint Policy
• Social Workers represented on Clinical Health Meetings to discuss SVPR issues in general
• Commenced work on a Charter of Rights for residents.

Way Forward

The Working Group on the Restraint Policy study as well as the National Working Group on Elder Abuse will carry on with their work until their outcomes are achieved. Work on the Charter of Residents’ Rights with the Superintendent of the Residence should be re-generated in the near future. Continuing to consolidate the service will be an ongoing process.
Aġenzija Appoġġ started offering childcare services in Cottonera with the Smartkids Daycare and Family Support Centre in Birgu in 2001. As the Service obtained an excellent reputation, two other Centres have since been opened, one in Birkirkara and another in Qawra.

Appoġġ Smartkids supports the family from its early stages. The Centre responds to the need of supporting parents in their role, especially with families becoming more nuclear in nature, more women joining the workforce, and with an added awareness about the need of parenting skills, together with knowledge that quality childcare is beneficial for children. The Centres provide quality childcare to children between the ages of 1.5 years to 3 years (and up to 5 years in certain circumstances).
Smartkids Centres cater for all types of children and families, but priority is given to:

- Children who due to specific family circumstances, would benefit from spending periods of time away from home
- Children whose parents require respite
- Children of single parents
- Children experiencing delays in aspects of their development (e.g. speech delays, etc), who need some more time and more personalised attention before being amalgamated into mainstream kindergarten
- Children whose parents/carers are attending family workshops (aimed at enhancing personality development) offered by the Centre
- Children of working families.

Children are assigned to a trained child carer on a key worker basis. The child: key worker ratio, which never exceeds the EU stipulated 1:6 ratio, enables the assigned key worker to evaluate the child on a continuous basis and to report to the Smartkids Coordinator or Service Area Leader regularly on the progress of the child entrusted in their care. Daily programmes of activities ensure that children’s development milestones are exposed to the best possible stimuli. Parents are kept continuously abreast of their child’s progress within the Centre. They are also given the opportunity to consult at any time on any particular behavioural management or parenting skills difficulties that they might be encountering.

The childcare development programmes offered at Smartkids focus on creative, cognitive, socio-emotional, physical development, communication, language development skills, and pre-mathematical thinking skills. With the help of these programmes, children find it easier to integrate themselves when they move to the conventional school set-up. They are observed to be more emotionally stable and have better communication and learning skills.

The childcare development programmes are run simultaneously with parenting skills sessions. Here, Smartkids promotes equality between parents. Such
sessions provide fathers with the opportunity to involve themselves more in the lives of their children. Moreover, Smartkids works hand-in-hand with grandparents, who in the Maltese culture still have a very important role in the upbringing of the child.

Smartkids is giving a chance to families and single parents having social difficulties, to break up the cycle of social poverty. Leaving children in good quality care at Smartkids empowers parents to further their studies or else seek employment. In this manner, the family is given a chance to improve its financial situation and thus reducing the risk of poverty and social exclusion.

**Objectives of the Service**

- To ensure that children (under five years of age) in need gain maximum life chance benefits from learning opportunities, health and social and psychological care
- To work in partnership with parents, and provide a range of family support services tailored to the needs of the individual child and family, within the Centre and to strengthen parents’ ability to cater for their children. Also, to work in partnership with other professionals in achieving this objective
- To actively involve parents/carers, to work with other professionals (where or when needed) in tailoring individual packages of care for children and families
- To engage appropriately-skilled workers and to ensure a continuous training programme to train or retrain workers.

**Performance Review and Analysis**

This Child and Family Support Service continued to be a model of excellence in the area of the provision of childcare for children mainly between the ages of 1.5 years and under 5 years of age. The distinguishing features of this Service in comparison to other childcare centres are that it is not just a child-minding service, but one that monitors and stimulates the physical, socio-emotional, milestone development of children, keeping individual care plans on them, as well as providing Family Support Workshops and Parenting Skills
sessions for the parents. Another feature is that it creates an environment where the children come from a mix of socio-economic backgrounds, giving priority to families with social problems, single parent families where the parent may also need to work or re-enter the workforce, as well as to working parents.

The recognition of this quality service culminated in the Service being granted an Award for Best Practice in the promotion of gender equality by the National Commission for Promotion of Equality (NCPE), while it was also nominated for the best practice in the Euromed through the then Ministry for Social Policy and Social Solidarity. Although Smartkids did not gain this award, the Service came in the top three places. Mention of the Service was also made in Dr. Angela Abela and Rev. Dr. Charles Tabone’s latest publication on poverty, as a service having contributed to positive change in Bormla.

The period under review saw the expansion of the Service’s Centres in Birkirkara and Qawra. The planning process for both these Centres required a great investment of time and energy, especially on the part of the Service Area Leader, due to the complexities and works involved in the renovation of the venues, in liaising with Ministries, and in the recruitment process for staff. The teams of workers during this period were made up of a complement of a Coordinator at the Birgu Centre with 5 childcare carers, 4 carers at the Birkirkara Centre with the Service Area Leader of the three Centres being based there, and another 4 carers and a Coordinator at the Qawra Centre. In all, over 240 children were catered for.

The Service also faced a number of challenges. These were: the streamlining of the carers’ hours between the Centres, for which proposals had to be submitted to FSWS CEO and Human Resource Senior Manager; dealing with staff Union’s issues; the post of a carer remaining vacant for a year; the lack of the installment of a lift (the latter two at the Birkirkara Centre); the growing waiting lists (Table 31); and the planning towards the move to the Foundation for Educational Services, under the same Ministry for Education, Employment, and the Family.
With the expansion of the number of Centres, the SAL had to decrease the Family Workshops, but rather focused on parental skills courses. The latter also required an adjustment from short course to half-day seminars, to accommodate more the needs of the parents. However, there was also the setting up of a summer school. This had commenced at the Birgu Centre as a pilot project, and then repeated at the Qawra Centre with some adjustments. The original aim was to offer summer school placements to children who had since left the Smartkids Centre and were attending school; to monitor and assess the continuity of their progress if any, or otherwise; as well as to offer parents in the area some respite in summer, by keeping the children occupied and stimulated.
1) Waiting Lists

<table>
<thead>
<tr>
<th>Year</th>
<th>Birgu</th>
<th>Birkirkara</th>
<th>Qawra</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006</td>
<td>120</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>2007</td>
<td>80</td>
<td>22*</td>
<td>-</td>
</tr>
<tr>
<td>2008</td>
<td>46</td>
<td>200</td>
<td>80**</td>
</tr>
<tr>
<td>2009</td>
<td>62</td>
<td>75</td>
<td>14</td>
</tr>
</tbody>
</table>

Table 31: Waiting lists for the Smartkids Service by Centre, 2006-2009
* Centre opened in November 2008
** Centre was officially opened in March 2008, but became operational in June 2009

The decrease in the waiting list in the Birgu Smartkids Centre in 2008 can be attributed to a combination of factors, including the intake of children in the two yearly intakes, as well as other children having reached school-attending age whilst on the waiting list, hence no longer requiring the service. It increased again slightly in 2009 probably due to more children of child care age being registered, and the exposure child care centres had in the media. The Birkirkara Centre had a low waiting list as at November 2007 when it had just opened, but this list increased drastically when the Centre became operational and people in the community saw for themselves and heard by word of mouth what a very good service is being offered, and hence the large demand. The Centre is also very visible and central, being situated in the old railway station (Ġnien l-Istazzjon).

During the period 2008-2009, some of this waiting list was absorbed over 4 new intakes, and in addition was reduced due to the removal of children’s names from the list as they had reached school-attending age. Regarding the Qawra Centre, in just over the year between its official opening and it beginning to function operationally, the waiting list had risen to 80. Again, there is a great need for this type of service in this area, and when people saw the quality service being offered, the demand for the service increased. By the end of its first operational year in 2009, this Centre had absorbed over a quarter of the waiting list. The remainder had either found alternative child care
arrangements, or the family moved out of the area, or again, the children had reached school-attending age.

2) Highlights and Achievements

- Reviewed operational procedures whereby exception criteria for children outside the service’s catchment area were introduced. These children would need to be accompanied by a parent so to be able to access the service. This was set-up so that parents in need of childcare who lived in the surroundings of the catchment area of the Service – and thus would not normally have been as yet eligible for the service – would have their needs met. This was one way of extending the service, as there was the space to accommodate more children, but insufficient staff to extend the service outside of the catchment area through normal means.
- The SAL, then Coordinator of the Service, participated in the Technical Committee of the Ministry for the Family and Social Solidarity, aimed to set a National Policy and Standards for Childcare.
- Planned Terms of Reference for and evaluated summer school for children aged between three and five years, held at the Birgu Centre for the first time in 2005, and took a decision to re-run it in 2006.
- Mid-2009, the Qawra Smartkids Centre became operational, and the summer school and parenting skills group were also pioneered at this centre.
- Submitted ESF proposal to extend child care centre services and family workshops, which however was not approved.
- Amalgamated 2 part-time posts into one 30-hour post, due to difficulties in recruiting for posts under 30 hours.
- Birgu Smartkids carers qualified in the ETC Childcare Course.
- Staff trained in food handling and hygiene, and attended a First Aid refresher course.
- Staff attended a Health and Safety course.
- Extension of the service by the opening of Smartkids in Birkirkara, November 2007.
- SAL’s contribution to the proposals of the new Smartkids Centres in Birkirkara and Qawra, and her active involvement in setting up these up.
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• Gained the Award for Best Practice for Promotion of Gender Equality by the NCPE
• Coordinator of Birgu Smartkids Centre promoted to Service Area Leader of the three Centres
• Participated in the EU Peer Review Project, held at ACCESS Community Resource Centre in Birgu
• The then Coordinator/SAL gave a presentation at the Eurochild International Conference held in Malta, which was very well received.
• New Coordinators for Birgu and Qawra Centres recruited, as well as a team of child carers / Support Workers for the latter Centre.

Way Forward

During the latter part of the period under review, the Smartkids Centres were officially placed under the Ministry of Education, Employment and the Family. When the Smartkids Service moves totally to MEEF, it will be a loss for Aġenzija Appoġġ and FSWS, as the Service is a flagship and is one of the more rewarding services, as well as providing a mix of positive relief from all the trauma and social ills that the Agency normally deals with.

One of the main challenges that remains is with the demand outweighing the supply, as reflected by the waiting lists. There is a need for more Centres. Another challenge is that the lift issue at the Birkirkara Centre still has not been resolved. If another Service such as the Appoġġ Community team wishes to operate from the same building, then the installation of the lift is essential, so that it would provide this other service with a separate entry as required by the National Standards on Childcare.

Finally, the Service will continue to deliver a quality service, as undoubtedly it has proven, and over and above, through the awards it has received.
Refugee Service

Objectives of the Service

The Refugee Service was set up in mid-July 2004. The then Ministry for the Family and Social Solidarity (MFSS), set up this service through Aġenzija Appoġġ, to provide for the welfare needs of all irregular immigrants. The Service comprised of an administrative and social work delivery aspect, as well as the residential aspect of an accommodation Centre, which was to run along the lines of a community Centre. The Service started with a staff complement of only 4 persons, including the Service Area Leader, a Social Worker, an administrator, and a coordinator for the accommodation Centre. During the period until the Service was handed over to another entity in March 2007, the complement only increased by an additional part-time Social Worker and three maintenance persons at the Centre.

The Service’s objectives included:

- Contribute to policy formulation, such as the document Irregular Immigrants, Refugees & Integration 2005
- Formulate a five year plan regarding services to irregular immigrants for the Office of the Prime Minister
- Manage, run on day-to-day basis and monitor the accommodation Centre – Hal Far Open Centre – for irregular immigrants released from detention
- Be responsible for carrying out, organising and overseeing structural refurbishment in aiming to improve the quality of living standards at the accommodation Centre
- Provide active representation on the NGO Forum on irregular immigration.
- Carry out social work intervention (particularly work with the more vulnerable cases, such as children, pregnant women and single mothers, couples with children) and assessments for the issuing Care Orders with regard to unaccompanied irregular immigrant minors, as well as making referrals to other services (medical, psychological, educational, etc.)
Initiate training in order to best meet the training needs of the staff working in this challenging new area of multi-ethnic work.

Performance Review and Analysis

In the first few weeks of its outset, the Refugee Service had already had 137 residents at its residential Open Centre, out of a capacity of 170. Previously the Centre had been under the auspices of the Malta Police Force. The running of the Centre was one of the Service’s most challenging aspects. The aim of the Centre was to create a community atmosphere among the residents, with each building having its elected spokesperson who would be a link with the staff of the Centre on issues effected the Centre, and to involve the residents to set up shops, among other facilities. However, this was difficult in the face of challenges such as the diversity of residents due to the different nationalities, religions, and cultural differences of the irregular immigrant residents; the monitoring of the movements in and out of the Centre with a limited number of staff; the issue of children being left unaccompanied by their parent/s who were working; as well as the lack of security (no security personnel nor fencing), which meant that after the official working hours of the staff, anyone could enter the Centre, creating elements of exposure and vulnerability for the residents.

In spite of these difficulties, however, a register of the resident population was set up, with the Centre’s ID cards issued for residents, and the setting up of a shop, mosque and doctor’s room, with weekly doctor’s visits taking place; as well as the achievement of the refurbishment of most of the Centre through the ERF EU Projects.

27 referrals of claims of unaccompanied minors for assessment had also already been in the pipeline in the first few weeks of the service. One of the areas of work in the Refugee Service involved the assessment of claims from irregular immigrants stating that they were unaccompanied minors. The Refugee Service would receive requests for the assessment of such claims referred from the Refugee
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Commissioner’s office. An interviewing board comprising of Refugee Service Staff and representatives of OIWAS would interview the irregular immigrant claiming the status of a minor. Those individuals who were assessed to be definitely minors would be recommended for Care Order procedures; those about whom there would be doubt, would be referred for a ‘Further Age Verification’ medical test; and those who were not eligible were informed accordingly. Up to 20-30 referrals on any one day could be received from the Refugee Commissioner’s office, which added pressure to the already large workload, especially given the limited human resources.

As previously mentioned, the Service was handed back to MFSS in March 2006, as a specialised entity to deal specifically with irregular immigrant service users was set up. Table 32 shows the number of cases dealt with by the Appoġġ Refugee Service between its onset in August 2004 until end of September 2006.

<table>
<thead>
<tr>
<th>Cases-type</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social work cases;</td>
<td></td>
</tr>
<tr>
<td>Care Order cases;</td>
<td></td>
</tr>
<tr>
<td>vulnerable cases in detention</td>
<td>638</td>
</tr>
<tr>
<td>Minors</td>
<td>409</td>
</tr>
<tr>
<td></td>
<td>(average of 15 per month)</td>
</tr>
</tbody>
</table>

*Table 32: Cases dealt with by the Appoġġ Refugee Service, August 2004-September 2006*

This caseload was quite high given the limited human resources in the team and the very complex nature of the work when dealing with clients from a different culture to that of the practitioner, with clients that experienced the trauma of civil wars, persecution, and poverty, among other factors; as well as the clients as a client group hailing from different countries, nationalities, cultures, languages and religions.
However the Service still managed to achieve the following:

- Dealing with placement issues at the Open Centre and liaising with MFSS regarding demands on the service
- Managing the situation with the lack of Coordinator and staff
- Overcoming difficulties in identifying appropriate Coordinator for Hal Far
- Finalising protocol with *Dar is-Sliem*
- Costings exercise and identification of resources required identified to manage the Tent Centre, as requested by MFSS
- Liaison with MFSS re policy formulation – payment policy for open centres, vulnerable cases, admission and referrals to Open Centres etc.
- Twinning Light Project Training with Greece
- Visit of Dutch Delegation, which aimed to identify training for Open Centres
- EQUAL Project
- ERF 1 and 2
- February / March 2006 – the Service Manager made a representation as expert for Rapporteur on Opinion of European Economic and Social Committee on Migration and International Protection
- Briefings with the CEO regarding the Central Agency for Asylum Seekers (COA - Dutch NGOs Missions regarding the implementation of Central Registration system for Open Centres & Service Agreement, in conjunction with MFSS)
- Meetings & Seminar during COA missions 2 & 3 about the planning & implementation of the above-mentioned
- COA placement with staff at the Open Centre regarding a database for the Central Registration system
- Provision of feedback to MFSS on COA reports
- Meetings & Seminar with IOM about Assisted Voluntary Return
- MFSS Seminar on Integration
- Meetings with a delegation from Berlin regarding a country report on unaccompanied minors
- Provision of feedback to MFSS (through CEO) concerning draft policies
- Drafted Policy on Age Assessment of Unaccompanied Minors
• Drafted points on major issues effecting the Refugee Service Area (RSA) for memo to CEO
• Involvement in external investigation of staff member and support of staff throughout investigation
• SAL filling-in for temporary Coordinator at Hal Far’s Open Centre, as well as carrying own workload, during Investigation, with the support of the Service Manager
• Support of staff and residents through crises / incidents e.g. attempted suicide of resident, threats to staff, etc.
• Liaison with Training & Corporate Executives regarding the planning of CPI training for staff
• Continued work on EU Projects – EQUAL and ERF – including related meetings and site visits
• Further recruitment in relation to the Equal Project
• Continued attendance at NGO forums and Open Centre meetings coordinated by the MFSS
• Worked with the FSWS Marketing Team and MFSS public relations office about foreign TV interviews.

Way Forward

In March 2006, the Service was handed back to MFSS, since a specialised entity to specifically deal with irregular immigrant service users was set up within the same Ministry.
Human Trafficking

The area of Human Trafficking fell under the responsibilities of Aġenzija Appoġġ and the portfolio of the Adult and Family Services Manager around mid-2008.

In March 2008, a Memorandum of Understanding (MoU) between the Malta Police Force and the Ministry of Social Policy through Aġenzija Appoġġ, as the national social welfare agency, was signed in relation to the area of Human Trafficking. The spirit of this Memorandum is that both entities will continue to develop and expand the framework of cooperation in relation to the provision of social services to potential and actual victims of trafficking. In line with the MoU, both entities nominated a Liaison person to facilitate the purpose of the Memorandum.

Objectives of the Service

• To ensure the provision of social support services for victims and potential victims of human trafficking
• As a Liaison, to be a point of contact in order to facilitate communication and exchange of information
• To act as the contact for the Malta Police Force in cases of trafficking identified by them, for the provision of social support
• To provide social work intervention including assessment, and if required, other forms of counselling and support.

If the Police identify a suspected case of human trafficking, they will liaise with Appoġġ’s Liaison person to ensure that the victim is given all the social welfare services required. One of the main roles of this person is to receive referrals from the Police and from professionals within and outside the Agency regarding cases of human trafficking, as well as to refer cases to the Police and or other professionals to ensure the best liaison and coordination for intervention and follow-up in such cases, for the protection of victims.
Performance Review and Analysis

• A leaflet on Human Trafficking was published in March 2008, in collaboration between the Ministry of Social Policy, the Ministry of Justice and Home Affairs, and the Foundation for Welfare Services through Agenzija Appoġġ. The aims of the leaflet were to raise the awareness of the public on the social issue of human trafficking to assist the public and professionals in identifying victims of trafficking; and provide information about how victims can be supported.

• In November 2008, three Maltese professionals representing the social welfare sector (Appoġġ’s Liaison person), Police, and NGO sectors were trained as a national team, along with a team from another European country, on the Train the Trainer EU AGIS Project in collaboration with IOM, on ‘Preventing and Combating Trafficking in Human Beings and Enhancing Victims Protection through Operational Networking and Cooperation and Joint Multi-Disciplinary Trainings for Counter-Trafficking Specialists in EU Member States, Candidate and Neighbouring Countries’. The theme of the training workshop was Best practices to prevent, identify and protect victims of human trafficking. The teams received training from an international expert and consultant on the subject. One of the pre-requisites of the training was that the trainees would disseminate training to others in the field, by conducting at least 2 training seminars.

• In 2009, under the EU AGIS Project, the IOM Office Malta met the pre-requisites of the above-mentioned training by organising a two-day training session on human trafficking in conjunction with the members of the national training team (the Liaison person on human trafficking from Agenzija Appoġġ, as well as representatives from the Malta Police Force and the NGO People for Change Foundation). This training covered topics on definitions, EU and local legislation, victim identification and assistance, among others. It was attended by approximately eighty government and non-government Social Workers, as well as other professionals, including those who work with the irregular migrant population.
• In 2009, members of the national training team attended one of the Regional Networking Seminars under the above-mentioned EU AGIS / IOM Project in Rome to address issues such as: the implementation of the European Council Directive on Temporary Residence Permits for Victims; developing national indicators on sexual and labour exploitation for the identification of victims of human trafficking profiling and implementing pro-active monitoring; implementation of trafficking indicators; and the Memorandum of Understanding as a tool for enhancing coordination in the protection of victims and prosecution.

• In the latter part of 2009, this national training team disseminated a training session to the volunteers of the Appoġġ Supportline 179 service.

• Also, the latter part of 2009 saw Aġenzija Appoġġ embark on the launch of an awareness campaign with Body Shop (Malta), as part of a Body Shop (Europe) Campaign, to contribute towards the fight against the trafficking of children and adolescents for the purpose of sexual exploitation. A leaflet was produced by Body Shop and distributed with the assistance of Aġenzija Appoġġ. Part of the proceeds from Body Shop sales of a particular product
were meant to go towards financing urgent medical, psychological, psychiatric and accommodation needs of victims of human trafficking.

• The Liaison person on human trafficking was involved in several meetings with representatives of the U.S. State Department and U.S. Embassy in Malta, as well as other stakeholders regarding the drafting of the Trafficking in Persons Report, issued by the U.S. State Department

• The Liaison person was also involved in meetings with IOM and other NGOs about the development of a national action plan, including a more comprehensive Memorandum of Understanding (MOU), a national referral mechanism, and the development of national indicators on human trafficking

• Consultation meetings with NGOs were also held about the identification of suspected victims of human trafficking

• A joint proposal between IOM, Ministry for Justice and Home Affairs (MJHA) and Aġenzija Appoġġ for an EU Project under ‘Criminal Proceedings 2007-2013’ was submitted, however this was not accepted.
Way Forward

The Agency’s Liaison person will maintain close links with IOM Malta, MJHA, and other stakeholders on discussions surrounding the setting up of a national taskforce on combating human trafficking. Some of the remits of this taskforce would be to develop a national action plan on human trafficking, national indicators for the better identification of victims and development of victim and trafficker profiles, as well as the possible review of the Memorandum of Understanding.

Further training opportunities for the national training team will be sought, as well as those for the dissemination of further training. The setting up of an intra-Agency database as well as a referral system for the Service will be sought.
Aġenzija Sedqa

Matul it-tliet snin hidma koperti minn dan ir-rapport, l-Aġenzija Sedqa kompliet issahħaħ u tikkonsolda l-operat tagħha f’diversi lati. Dan għamlitu kemm fuq livell nazzjonali f’dak li ghandu x’jaqsam mal-materji li jirrigwardaw l-operat tagħha, jiġifieri l-abbuż ta’ droga, l-alkohol u l-logħob tal-ażżard, u wkoll f’dak li ghandu x’jaqsam mat-tishih tal-operat intern bil-ghan li tipprovdi servizzi dejjem aħjar u effettivi kemm lill-pubbliku ingenerali u dawk li huma partikolarment milquta b’dawn il-problemi soċjali.

Fuq livell nazzjonali, l-iktar żewġ avvenimenti ta’ relevanza li graw matul dawn is-snin fuq livell nazzjonali kienu l-emendi li jirregolaw il-konsum tal-alkohol minn minuri taħt is-sbataxis-snin u t-tnedija tal-Politika Nazzjonali dwar id-Droga. Għal numru ta’ snin il-liġijiet tagħna kienu jipprojbixxu l-bejgh ta’ alkohol lill-minuri taħt is-sittax-il sena izda ma kienux jirregolaw ix-xiri u l-konsum mill-istess minuri. B’dawn l-emendi, impressqa minn dak li kien il-Ministeru għall-Familja u s-Solidarjetà Soċjali, il-liġi ghent bil-bosta biex
toħloq kuxjenza u twassal messaġġ iktar konsistenti dwar ir-relazzjoni bejn l-alkohol u l-minuri, li l-evidenza qed turi li aktar ma jmur qed issir aktar problematika, speċjalment minħabba l-fenomenu tal-"binge drinking". Il-pubblikazzjoni tal-Politika Soċjali dwar id-Droga mill-istess Ministeru kellu importanta u impatt sinifikanti fuq l-operat tal-ġenżija Sedqa. Din il-Politika Nazzjonali għandha l-ġan li gżib flimkien diversi dipartimenti u ġenżija statali u għaqdiet volontarji sabiex, b’mod ikkoordinat, jaħdmu flimkien biex jikkontrollaw il-hsara kkawża ta’ minn dawn is-sustanzi. Nawguraw li din il-Politika Nazzjonali għandha l-gan li ġeb flimkien diversi dipartimenti u ġenżija statali u għaqdiet volontarji sabiex, b’mod ikkoordinat, u allura aktar effettiv, bejn l-entitajiet ikkonċernati iżda wkoll se sservi ta’ opportunità sabiex nitgħallmu jahdmu flimkien.


F’dak li għandu x’jaqsam iktar b’mod direkt mal-operat, matul dan il-perjodu it-taqsim tal-Prevenzjoni Primarja kompliest tikkonsolida l-programmi li kienu diġà stabbiliti

Meta nħarsu lejn it-taqsiima tas-Servizi ta’ Kura naraw li servizz li gibed ammont konsiderevoli ta’ klijenti kien dak li jiġi offrut fiċ-Centru tad-Detox fi Gwardamangia. L-ifsidiedda tagħna f’dan is-servizz hi li naraw kif noffru firxa dejjem usa, u fl-istess hin integrata, ta’ servizz li dawk il-persuni li qed jattendu dan is-servizz. Kemm is-servizzzi ibbażati fil-komunità kif ukoll dawk residenzjali żammew ritmu tajjeb ta’ xogħol minkejja bdil ta’ staff minħabba ragunijiet varji.

Nixtieq nikkonkludi billi minn qiegħ qalbi nIRRINGRAZZJA lill-istant kollu tal-Aġenzija Sedqa għax-xogħol sfiq tagħhom u ghas-sens kbir ta’ sagrifċċju u professjonalità li juru fil-hidma tagħhom.
Prevention Services

Whilst the principal mission of the Sedqa Primary Prevention team is that of targeting the universal population through ongoing educative prevention programmes, experience and social needs are indicating that a more selective and focused prevention strategy is needed to tackle the ever increasing number of people within certain vulnerable groups and social settings.

Consequently, during these three years under review, the Sedqa Primary Prevention team opted to discuss drugs and alcohol misuse in a wider context. Instead of concentrating exclusively on drugs and alcohol and the symptoms they incur, the need was felt to approach these themes within a wider and a more holistic approach. To this effect, we started to discuss more on addictions rather than concentrate on alcohol and drugs alone. Consequently, the prevention programmes started to include other themes, such as anti-social behaviour, bullying, stress, gambling, various levels of abuse, technology abuse, healthy lifestyles, health and safety at the workplace, and others. In doing so, we tackled the issues of drugs and alcohol in a holistic way with very positive response from the participants.

Objectives of the Service

One can outline the strategic objective of the Sedqa Prevention Services as promoting healthy lifestyles amongst the general and selective populations. This is achieved through multi-sectoral short and long-term prevention programmes. These programmes are aimed at reducing the demand and consumption of alcohol and other drugs and the proclivity for addictive behaviour.

Through preventive programmes, the Agency also aims to raise the level of general awareness on other social problems, such as gambling.
1) Areas of Intervention

To attain our strategic objectives, the Prevention team is subdivided into four areas of interventions. Whilst retaining their autonomy and having their own strategies, the four areas of intervention work closely together so to ensure that a global approach is achieved. These four areas of interventions are:

i) The Primary School team, which focuses on prevention work with students at primary level, teachers, and parents
ii) The Secondary School team, which focuses on students at the secondary level, teachers and parents
iii) The Community interventions team, which liaises with local councils, NGOs and tertiary students’ organisations
iv) Workplace interventions targeted both at employers and employees.

2) Salient Developments

While during the 2007-2009 period all prevention programmes which fall into the four main categories above were consolidated and some of them updated and expanded as it is being reported further on, some salient developments did occur and influenced the course of the operational plans.

i) Human resources

Whilst the staff complement was restored following a number of staff resignations, a period of transition and some instability did occur in 2007. Another change occurred in 2009 with the community executive resigning in March and eventually replaced in December. This created a vacuum in the progress of community initiatives. The secondary school team also suffered lack of human resources during the period September to December 2009 with the peripatetic teachers from the Education Directorate joining the team in the second term of the scholastic year rather than in the beginning of scholastic year 2009. By the end of 2009, the staff reached its full complement.
Foundation
Social Welfare Services

**ii) Relocation**
In 2007, the Sedqa Prevention Services were relocated from Hal Farrug to a new office at Santa Venera. The main reason behind this transfer was for our services to become more accessible to the general population and to enable us to organize various educational activities for school children, teachers and parents.

**iii) Training**
During this time, various training initiatives (both locally and abroad) were taken both on a personal level and also as a group. The following are some of them.

- **Youth at Risk Seminar**
- **Stress Management Seminar**
- **Crises Prevention Intervention**
- **Leonardo Da Vinci Mobility**
- **EUPA-funded study visit**
- **Seminar on Sexual Health of Young People**
- **Computer Addiction Seminar**
- **Seminar on Enhancing Relationships**
- **Participation in IFCO**
- **Participation in Eurochild Conference**
iv) Research
In conjunction with the National Commission on the Abuse of Drugs, Alcohol and Other Dependencies, the Sedqa Prevention team worked on a national study about the use of cigarettes, alcohol and drugs among Form 3 students. The results are not available to date. This evaluation study was being conducted co-jointly by all entities providing such prevention programmes on the Maltese Islands, namely Aġenzija Sedqa represented by the FSWS Research Office and the Prevention Team, Caritas, OASI Foundation, and the Education Directorate, together with the National Focal Point for Drugs and Drug Addiction.

v) Interactive CDs
Since today’s children/adolescents are becoming more computer-friendly than ever, Sedqa Prevention team has embarked on its second initiative to produce educational material containing an interactive CD. After the success of the first interactive TFAL (Tfal Favur Ambjent Liberu) 1 CD, during 2007 TFAL 2 CD was launched, aimed at pupils in Year 2. During 2008, the Prevention team launched the third TFAL CD named L-Avventuri ta’ Max u Amy for Year 4 students. The feedback and the response for these CDs were encouraging as it could be used in classrooms and between the parent and the child to enhance personality skills and values.

During 2007, a CD Inħobbu l-hajja was launched. This CD was targeted mainly for young adolescents, and was made up of songs with positive themes written by various young artists. This CD was launched as part of the Milied Flimkien Campaign, organised by the Malta Community Chest Fund.
vii) Policy
In an attempt to have the local educational campuses committed to providing a drug-free environment for all students and employees, and to adopting a zero-tolerance policy towards drugs and other illegal substances, the Sedqa Prevention Services in collaboration with the former Ministry of Education, Youth and Employment, concluded a Substance Abuse and Procedures Policy. The Agency’s aim is also to reach an agreement that prevention interventions should become compulsory for all students.

vii) New Parental Skills Course
To reach out more to parents of adolescents, a new parental course was offered. Various topics that are closely related in understanding adolescents were identified. The topics covered during this new course included: understanding the development of adolescents; communicating with your adolescent; peer pressure and sub-cultures; understanding teen sexuality; and the challenge of addictions. Each session was delivered by professional personnel and educational material was distributed to the participants. The feedback was very positive in such a way that the course was repeated the following month.
viii) New printed material
In a constant effort to have our educational material reflecting the new social and medical trends, the Sedqa Prevention team re-designed and printed booklets, classroom booklets, calendars, year planners, leaflets, flyers, a set of postcards, bookmarks, banners and other educational material. The themes were: alcohol misuse, parental issues, leisure, gambling, caffeine, health issues, pregnancy, smoking, driving, bullying and general information regarding addictions. All material was aimed at specific audiences – children, young people and adults.

Performance Review and Analysis

The accomplishments made by the Sedqa Prevention Services are listed hereunder, according to the respective area of intervention.

1) Primary School Level

i) Tfal Favur Ambjent Liberu (TFAL)
This initiative is a 6-year programme aimed to accompany children throughout their Primary school years, from Year
1 to Year 6. Year 1, Year 2 and Year 4 programmes are delivered by the class teacher with the help of a booklet produced by Sedqa and distributed to each student every year and lesson notes given to teachers. During 2007 and 2008, around 60,000 booklets were distributed to almost all the Primary schools. In 2009, the number of booklets distributed was 15,000. Workbooks for Year 3, Year 5 and Year 6, which accompany the programme delivered by the Prevention staff, were reviewed and updated to be more attractive and adequate for the children’s needs. The characters featuring in the booklets for Year 1 and Year 2 – Max, Amy and Gremx, introduced in 2002 – were highly appreciated both by teachers and the pupils themselves. Lesson notes accompanying all books were also produced and distributed. An evaluation form was also included in the pack for teachers to provide feedback on the programme. Now these books are complemented by an interactive CD as a teacher’s resource.

**ii) BABES programme**

This is one of the mainstays of Sedqa’s Prevention programmes in Primary schools and it has been popular since its introduction in 1995. This 6-session programme, facilitated by the prevention staff, is aimed at Year 3 pupils and while it uses puppets as a medium, it deals with various life-skills issues such as self-esteem, peer pressure, coping skills, and private body parts. During 2007, 187 BABES programmes were delivered to 4,000 pupils in 66 schools; in 2008, were delivered to 209 BABES programmes to 5,000 pupils in 69 schools; and in 2009, 234 BABES programmes reached 4,900 pupils in 98 schools. Accompanying this programme, a parents’ meeting is held in which the Prevention Facilitator meets parents / carers. During the years 2007, 2008 and 2009, a total of 230 parents’ meetings were held in which over 4,500 parents participated. These parents’ meetings also operate as a platform for promoting parental skills programmes.
iii) Parental Skills Courses – Inrabbu ‘l Ulbjidna Ahjar
This programme is made up of six week-long programmes of 90-minute sessions. Sessions are video based. A new video, adopting a more modern approach to the issues involved and reflecting the current situation of family composition, was produced with two new corresponding booklets: a reader and an exercise book as reported in the last biennial report. Although this programme is primarily marketed to parents whose children have been exposed to one of the preventive programmes in the primary level, other parents from other age groups, also participated. 83 Parental Skills Courses were offered during this time under review, with the participation of over 1,250 parents.

iv) Familja Wahda
Since 2002, members from the Sedqa Prevention team have been guests on a fortnightly basis on a popular radio magazine programme, Familja Wahda, hosted by Ms Lilian Maistre on PBS. Since this programme has a wide audience, it reaches out to different persons, in particular parents. The Prevention team also participated in various other radio or TV programmes to discuss parental issues in relation with substance misuse.
v) BABES Follow-up
As from 2004, a second Personal Social Development (PSD) teacher was seconded to the Sedqa Prevention Services to help in the execution of prevention programmes in Primary schools. This made it possible to target all Year 5 pupils in state schools and some pupils in Private and Church schools. This programme was eventually delivered in 176 schools, reaching 448 classes with the participation of over 11,000 pupils by the end of scholastic year 2008. Besides meeting the students, the Primary School team also coordinated and delivered 175 parents meeting with the participation of over 2,000 parents. During this four-session programme, topics such as self-esteem, alcohol abuse, smoking, peer pressure, and problem solving were discussed. Referrals to other FSWS services were made when deemed necessary. An evaluation form was also included in the pack for class teachers to give feedback on the programme. The response to this programme was highly encouraging by both pupils and parents alike.

vi) Programme for children in residential settings or at risk groups
This programme entitled Nikber Ahjar was offered in 2007, 2008 and 2009 to children residing in residential homes. The children were very eager to discuss certain topics related to them and actively participated in all the activities presented to them. An evaluation report for this project was compiled and positive feedback was received from the carers. 8 residential homes participated with the children receiving 6 sessions in each group. In 2009 this same programme was also offered to St Augustine parish in Valletta targeting at risk groups identified by the parish priest.

vii) Abacus
This programme consists of a group of parents who use drama as a medium to steer up discussions with other parents who identify themselves with the stories presented. Dramas are also offered to children about substance abuse and bullying. A total of 74 schools were visited during the period under review. Feedback from parents, children and schools was highly positive.
viii) Qed Nikber Programme
This is another educational programme aimed at Year 6 pupils. The focus of the programme is to help the students understand that they have choices to make in life and that addictions are the result of wrong choices. The programme aims at helping the pupils to learn decision making skills, assertiveness skills and how to deal with peer pressure. The Sedqa Prevention Primary team visited 32 schools, reaching around 1,252 pupils in scholastic year 2007-2008. In scholastic year 2008-2009, a Facilitator was contracted to deliver this programme and 44 schools were visited, delivering 115 programmes to 2,726 students. 20 talks to parents were also conducted within schools receiving this programme.

ix) Skola Sajf
During the summer months, the Prevention team participated again in Skola Sajf. As in the years preceding the period under review, Aġenzija Sedqa was invited by the Education Directorate to hold its preventive 5-week programme. This programme was run by the BABES facilitators. Topics discussed were: family, school, sports, friends, drugs information, and alternative leisure. 24 state summer schools were visited, with the participation of around 1,500 students. The feedback, both from teachers and pupils themselves, was highly encouraging. Skola Sajf each year came to an end by Festa Tfal, during which children from various participating schools took part in a half-day of fun activities.
x) One-off talks
Various Primary schools invited Sedqa Prevention staff to deliver one-off talks to parents on various occasions. While the themes chosen were mostly related to parenting skills, general awareness regarding healthy lifestyle was given and an increase of demand for information about internet safety was noted.

xii) School Council and Head Teachers’ Seminar
A number of Heads from Church and Private schools participated during this Seminar, coordinated by the Sedqa Prevention Services. Unfortunately, although invited, the Heads of state schools were not able to attend for this event.

Primary schools were also given additional support through a number of staff development seminars, two in-service training held in July and September respectively, and other meetings held with small groups of teachers, especially during Staff Development sessions held in various schools.
2) Secondary Schools

i) Training for PSD teachers
Training was also provided for Personal Social Development teachers. During these six sessions, lectures in the field of alcohol and other drugs were presented. The material, developed specifically for these sessions, is currently being updated.

ii) LifeForce International
As in previous years, a group of young Canadians presented short sketches to Secondary Schools students. Using drama as a medium, the LifeForce group highlighted the importance of life skills and positive attitudes towards life itself. During these three years under review, they gave performances in almost 53 different schools, reaching 8,388 students. The feedback received was highly positive. Performances were also staged for residents at Komunità Santa Marija – Sedqa’s residential drug rehabilitation programme – who responded with great enthusiasm.

iii) CrossRoads
After the launch of the resource pack for teachers of PSD and Maltese, during this time under review the Prevention team also produced and launched a resource pack for teachers for Home Economics. Material was produced with the collaboration of University students of the said subject within the Faculty of Education. Work on another resource pack for teachers of Social Studies was initiated in 2009 and will be launched in 2010.

iv) Staff Development
Unfortunately, only nine staff development training sessions were held in secondary schools during the period covered by this report, reaching around 350 teachers. While it is important to emphasise the significance of such meetings since they empower teachers who are in constant contact with students, logistics problems as regards to planning always turn out to be the major obstacle in having such meetings organised.
v) Seminars
Two teachers were seconded by the Education Directorate to deliver interventions for Secondary schools students throughout the scholastic years starting in 2007 and 2008; however they were not available at the beginning of scholastic year 2009-2010. New teachers were only provided in December 2009 with the result of less input from Sedqa into Secondary schools for the first scholastic term. The seminars organised during these last three scholastic years were:

- **Ghini Nikber Ahjar** based on life-skills related to healthy lifestyle and aimed at Form 1 and 2 students at boys’ and girls’ Secondary schools
- **Jien u l-Oħrajn**, a two-day seminar for Form 3 students
- **Alcohol and Drugs information Seminar** aimed at Form 3, 4 and 5 students
- The fourth seminar is the **Prefect and Leadership Course** aimed to bus prefects, class prefects and students councils. All 3 seminars are tailored-made according to the various needs and circumstances of each and every school.

As regards to **Ghini Nikber Ahjar**, the team visited all boys’ and girls’ Area Secondary schools. As regards to **Jien u l-Oħrajn**, the Prevention teachers went to nine schools, having the participation of 346 students, while the Alcohol and Drugs Seminar was held for 7,310 students. The Prefect and Leadership Course reached 710 students.

vi) Awareness and information lectures
The Prevention Secondary team gave various awareness and information lectures to several Secondary schools on a wide range of topics. During this period under review, around 110 schools were visited. Topics discussed were: misuse of ICT, various forms of addictions, gambling, alcohol, drugs, the wise use of medicinals, and delinquency. Using various media during these sessions, our Secondary Schools team encouraged open discussions. Some students came forward to receive more information and assistance. Some were referred to the Sedqa Care Services, in particular to the Agency’s Teen Support Service, or other helping Agencies.
vii) Others
Other educational talks for parents were delivered to some other schools. Most of these interventions were one-off talks. These talks are organised mostly in response as a crisis intervention rather than a well-planned educational strategy.

Another highly popular programme at Secondary level is Testimonials – sharing of experience of residents undergoing residential rehabilitation at Komunità Santa Marija (KSM). It involves a deep discussion between students and the KSM residents attending for this programme. Since the latter share their own experience and insights regarding life, the drug problem and what it entails, students react very positively by asking questions. Within this context, a video based on interviews with some of the residents was produced so that this could be used for discussion with Secondary students when the attendance of a KSM resident might not be possible. This video was appreciated both by students and teachers however the need for review of this video was felt in 2009. In fact, an update of this video is currently under progress.

Parents’ meetings, staff development meetings, school exhibitions, a more information and factual-based approach to students in particular to Forms 4 and 5, and some prevention manuals for teachers, are some of the recommendations being put forward for the coming years.

viii) Networking
A presentation meeting for Secondary schools representatives was held during every scholastic year within the period under review. The aim of such meeting is to update the schools with Sedqa’s new programmes available before the next scholastic year. 39 schools were represented. From such meetings, the Prevention Secondary school team not only consolidates its presence in schools, but fosters a certain educational continuum between the interventions delivered by Sedqa staff and those delivered by the school teachers.
3) Prevention Interventions in the Community

Community prevention is another façade of primary prevention in which prevention takes the form of community animation, dissemination of information, empowerment, and support to the community leaders and promoters through various media, such as printed material and talks.

i) Grants
One way of empowering and encouraging young people to be innovative and pro-active in their respective communities or youth groups, is through the Sedqa Grants Scheme. This initiative aims to assist and support youth organisations either through monetary grants; through provision of educational material such as leaflets, booklets and equipment; or through direct interventions by our staff members. During this period under review, the Sedqa Prevention Services managed to support close to 48 youth organisations and other NGOs. This initiative was improved by the beginning of 2009 with closer review for a more focused educational purpose. Due to lack of financial resources, this initiative was not implemented during 2009.

ii) Distribution of educational preventive material
Information material has been distributed to all local councils and Health Centres, with visits to such centres happening at least once every six weeks. Over 100,000 leaflets, booklets, posters and other material were distributed over this period under review.

iii) Talks with the elderly
The elderly could also be considered as a vulnerable group. For those living alone, feelings of loneliness and low self-esteem are common. Such feelings can give rise to alcohol abuse, predominantly by the male elderly. Use of medicines is another occurrence amongst this segment of our population. Low self-esteem and lack of appreciation are other contributing factors. Within this context, members of the Sedqa Prevention team visited all the elderly day centres and also met other advanced citizens gathered through parish organisations. Such interventions are based
on a holistic approach in as much as we promote a healthy lifestyle, even as this stage in life. This programme reached around 5,000 elderly.

iv) Parish outreaches
During spring/summer of 2007, the staff from the prevention team worked together to visit a number of parishes on Sunday and organised outreaches on the Church’s parvis. Educational preventive material was distributed and handed to people as soon as they were leaving the Church’s services. While it proved to be another initiative to reach out and meet the locals, it also served as an opportunity to engage in one-to-one conversations, some of which led to a referral to other services. After visiting eighteen parishes, this initiative had to be suspended due to financial constraints.

v) Alternative leisure activities
Various initiatives were taken to create alternative leisure to alcohol consumption amongst young people. The aim is to create awareness on a change in culture. Within this context, the Prevention Services teamed up with NSTS to organise alcohol-free activities targeting young people aged between 13 and 16 years. These initiatives included the active participation of young people. A series of get-togethers entitled Teen Centrals, were held. These were much appreciated both by the young people themselves and by their parents. Other youth organisations such as scouts, girl guides, and local councils, have asked for our help to organise such events or similar healthy alternative leisure such as hikes.

vi) Encouraging and promoting sports activities
Sports activities are considered by all as a very effective means of prevention. Consequently, the Prevention Community Executive not only promoted sport activities, but also organized tournaments and events with the collaboration of sports clubs. Different disciplines were chosen so to offer a wide variety of sports, including handball, athletics, swimming, volleyball, judo, football, and table tennis. Various youths participated.
vii) Mocktails training
The Sedqa Pay it Forward mocktails project was one of the most popular community projects. Various requests for training were received from various NGOs so as to empower young people to learn about alternative drinks to alcohol and how they could produce and present them to their own peers.

viii) Computer addiction seminar
In collaboration with Kummissjoni Djocesana Zghażagh, the Community Executive organised a seminar aimed for Youth Workers and youth leaders. The theme chosen was computer addiction and the consequences this new form of addiction involve. The response to this seminar was very positive, in such a way that we had to organize a follow-up seminar.

ix) Local councils
Various efforts were made to work and liaise with various local councils. Meetings were held with representatives from various councils to encourage them to engage in prevention initiatives. This was particularly successful with the Valletta, Mosta, and Birgu councils in Malta, and that of San Lawrenz in Gozo. The Valletta council, through the community network and St. James Cavalier, organised a
seminar entitled *Drug Update*. The Mosta council organised *Żogħżija Mostiża* Awards. These awards are given to young people who somehow made an effort in creating a positive difference within the society they form part of. The Birgu council organised their yearly summer *Birgufest*, where we had an opportunity to make contact with the local population through an exhibition and engage in one-to-one conversation with the locals. The San Lawrenz council held a day seminar for the local youth. Various youth issues – such as alcohol abuse, peer pressure, self esteem, youth subcultures and trends among young people were discussed. Other activities were held in collaboration with Bormla, Tarxien, Dingli, Żabbar, San Gwann, Żejtun, St. Julians and Qormi local councils.

**x) International Day Against Drug Abuse and Illicit Trafficking**

On the occasion of the United Nations International Day Against Drug Abuse and Illicit Trafficking which is commemorated on the 26th June of every year, the Prevention Community section coordinated an outreach at the Valletta City Gate. The aim of this outreach was not only to reach out to people coming in and out of our city, but also to convey a message of empowerment to young people. For this reason, various youth organisations took part.
xi) Meeting with students organisations
Other attempts were made to continue building on the relationship with various students organisations. Of particular interest were the meetings held with students’ organisations from the University of Malta, Junior College, MCAST student council, National Youth Information Centre, and Institute for Tourism Studies (ITS) students. Several activities were held as result of such meetings. A day seminar was held for the University students, during which drug information was given and non-alcoholic activities were also held. A three-day seminar was held with the MCAST student council, and later during the year the National Youth Day was organised in conjunction with this body. An outreach was held with ITS students during Notte Magica, which turned out to be very successful. Alcohol-free cocktails were served. The Prevention Executive responsible for Community Interventions built good working relationships with the National Youth Information Centre which, in turn, served as a platform to meet students. Such positive networking helped to be in a better position to reach out to young people.

xii) Facebook profile
In an attempt to reach to young people, the Prevention Community Executive launched a Facebook profile. The aim of such profile is to pass on informative messages. By means of such medium, young people and others will get information on different activities that the Prevention team embarks on from time to time. While such initiative is a step towards the right direction, but the need to have a more interactive website addressed to youths is strongly felt. Having such a website dedicated exclusively to youth issues, would help Sedqa to connect with the young generation more effectively.

xiii) Articles and participation in media
Another initiative worth mentioning was the production of articles on issues relating to alcohol and drug abuse in both Maltese and English. Such articles are for publications issued by local councils, band clubs and other NGOs. Other articles were written in issues of MCAST Link (a magazine published by MCAST) and on local newspapers. Various
members of the team also participated in various radio and television programmes to promote the services and to convey preventive messages.

xiv) Smash TV programme
A new television programme was produced and presented by the Prevention Community Executive in collaboration with the Malta Judo Federation in 2008. The aim of the television programme was to promote Judo as an alternative entertainment for young people. The programme used to feature an interview with various persons participating in this sport while attaching a positive value message to youth in general.

4) Workplace

i) S.A.F.E. programme
The Substance Abuse-Free Employees (S.A.F.E.) programme is Sedqa’s main prevention programme at the workplace. Since 1996, this programme has achieved considerable credibility with the employers who ask to have such programme at their workplace. The S.A.F.E. programme is a comprehensive programme divided into four phases. Ideally, each workplace goes through all four phases, however, the programme is designed to enable an enterprise to host one phase or more without going through the whole programme.

Phase One consists of a stand being put up in a prominent place within the company’s premises. Phase Two consists of training for management, frontline supervisors, and foremen. Topics discussed include: alcohol and its effects, drugs and their effects, stress management, and approaching the problem employee. In Phase Three, informative sessions are held for employees. Topics discussed include alcohol and drugs awareness, gambling and other addictions. In Phase Four, the company involved is encouraged to introduce a formal policy on the use of alcohol and other drugs at their workplace, and the procedures to be employed in the case that such use is identified. This phase is considered to be the climax of the whole programme as it seeks to reinforce the interventions
conducted during the previous three phases. A resource pack is distributed during the S.A.F.E. programme and a Certificate of Participation is given to all participants. In 2009, this programme was implemented also at Institute for Tourism Studies and included within the students’ curriculum. This was an initiative where the S.A.F.E. sessions were adapted for students to reach the need of the future employees within the entertainment industry.

**ii) Statistical data**
As part of Phase One, 63 exhibitions were held in different workplaces over 2007, 2008 and 2009. In Phase Two, 39 courses were held with the participation of 685 managers, frontliners and supervisors. In Phase Three, 167 courses were held, reaching 2,854 employees. Regarding the final phase, it must be noted that although a draft copy of the substance abuse policy is always presented and discussions are held in this regard, somehow companies are still to be convinced of the positive outcome if they implement this policy. The main stumbling block is regarding the issue of drug testing.

**iii) Articles**
Another initiative taken during this time under review is the writing of articles in magazines or newsletters published by the companies. The aim of such articles is to inform and educate employees about drug and alcohol abuse, drink driving and other addictions such as gambling. A total of 36 articles have been published in various publications.

**iv) Printed material and Billboards**
During this time, a resource booklet for employees participating in Phase 3 was printed. Other material produced were two booklets – one in Maltese and the other in English – regarding signs and symptoms of drug usage, 2 leaflets about gambling, and another 2 about binge drinking and 6 informative inserts.

At the end of 2009, two billboards were produced in two highly frequented localities displaying a preventive message regarding drink driving. This was part of the annual Christmas Campaign organised by Sedqa, in collaboration...
with Rotaract La Vallette Malta, to raise awareness about alcohol abuse especially during the festive season.

vi) Appreciation Ceremony
In order to acknowledge the companies’ participation in the S.A.F.E. programme and also to acknowledge their effort to have a substance abuse-free environment at the workplace, an appreciation ceremony is held regularly. While it serves as a marketing exercise, it also serves as a positive reinforcement to those companies who choose to have the S.A.F.E. programme organised at their workplace. 16 companies were awarded certificates of appreciation in 2008.

Way Forward

1) Prevalence survey about drug and alcohol abuse at the workplace

In order to make our prevention initiatives at the workplace more relevant and thus reach the desirable outcomes, it is of paramount importance that we invest – both in terms of financial and human resources – to have an independent survey which gives us the actual reality of the workplace regarding substance misuse. Up to now, our programmes at the workplace have little scientific base. It is due time to have such survey conducted in order that our interventions be more credible, convincing and effective.

2) Closer collaborations with youth organisations and students’ councils

To reach out to more young persons, we need to have good working relationship and networking with existent students’ organisations and students’ councils, especially at tertiary level. Although at this age, young people tend to be more informed and aware of the dangers of alcohol and drug abuse, due to various social and personal variables they are considered as a very vulnerable cohort. Up to 2009, the team had very good preventive initiatives in primary and secondary level but it is somehow lacking at the tertiary level. Sedqa needs to invest both financial and human...
resources if it wants to reach out to this cohort. Speaking from experience, reaching them within the community is somehow very difficult since most young people whom we want to reach out to, are unfortunately not involved at community level.

3) Compulsory alcohol information

We need to work harder to encourage the Transport Malta to make a session on information related to alcohol and driving compulsory for new car license applicants. Although we lack scientific data, it seems that a significant number of the traffic accidents which occur on our roads are related to excessive alcohol consumption. Since prevention is better than cure, we feel duty bound to encourage the said authority to make alcohol information compulsory to new applicants a part of the licensing process.

4) School policy

In conjunction with representatives from the Education Directorate, the Sedqa Prevention Service is drafting a Substance Abuse Policy and Procedures in Schools. This proposed policy is to encompass all the scholastic years from primary to secondary level, and includes policies regarding the subject, prevention issues and clear procedures in case of illicit substances found on school premises. This policy is aimed both at students and at staff (academic and non-academic). It is being proposed that the policy is to be compulsory in all schools, thus having a uniform prevention and procedure policy across all schools in Malta and Gozo.

5) Prevention programmes in Gozo

As a national Agency that has its remit to convey primary prevention to all, we feel that Gozo is not given the attention that it is due. While demand for our primary prevention programmes is increasing and many schools and NGOs in Gozo ask us to deliver programmes, we still have no human resources to cover such requests adequately. We feel it is unfair on the Gozitans, both children and
adults, that they are not given the same treatment as those residing in Malta.

As a concluding note we would like to mention that during these years under review, all the Prevention personnel worked hard in their respective roles and gave their utmost. For this, we thank them.
Sedqa Care Services

Objectives of the Services

Aġenzija Sedqa seeks to fulfil its mission to assist those who misuse substances and problem gamblers – and their families – in various ways. Interventions with clients who require help are guided by the principle that assistance should be given at the level which least disturbs the lives of those who receive it, provided that effectiveness can be reasonably ensured. Individuals with problems are more likely to come forward if they know that they can receive treatment without having to disrupt their patterns of daily living. For these reasons and also because they are more economic in terms of use and financial resources, Community Services account for a very substantial part of the services provided by the Agency.

Performance Review and Analysis

Sedqa’s Community Services are made up of no less than 6 units / teams comprising 48 workers. They cater for the needs of some 1,500 different users / gamblers each year, and in many instances, their significant others as well.

The Community Teams’ work often involves collaboration with services outside Sedqa, particularly the Child Protection Services and the Domestic Violence Unit from Aġenzija Appoġġ, the Psychiatric Services, the Probation Services, and NGO’s, notably those based on the 12-step programme and philanthropic organisations.

In 2007, the Sedqa Alcohol and Gambling Community team, the Psychology team and the Family Therapy team (all previously operating from a house in Lija), together with the Sedqa Drugs Community team and the Teen Support Services, moved into new premises in Santa Venera. Once the logistical difficulties connected with the move and the inevitable teething problems were solved, this development proved to have been a wise one. It brought together five Community teams and facilitated collaboration and communication between them in a more client- and worker-friendly environment.
Way Forward

As will be seen from the report below on each individual community service, the three years under review were marked both with satisfaction and disappointment. We lost the services a number of experienced workers – mainly for reasons connected with maternity, or because people moved to other jobs offering new challenges and better remuneration – but we also recruited a number of motivated and skilled individuals eager to prove themselves in this field.

Both these new workers and our highly-valued experienced workers must be nurtured and helped to hone their skills. Training is to be provided mainly in response to requests by what the workers themselves who undoubtedly possess the awareness necessary to realise which weaknesses are to be worked on, and which strengths can be developed further. In this regard, some themes – psychopathology, dual diagnosis, how to deal with suicidal clients, and the latest developments in the drug field – are recurrent. This need must be satisfied utilising, wherever possible, in-house resources in order minimise expense.

Secondly, the workers themselves must be helped to grow both professionally and personally. Supervision will continue to be provided, but ways will have to be found to curtail costs. No self-respecting entity can dream of not offering supervision, but it must do its utmost to tap home-grown capabilities without, if possible, reducing resources available for work with clients.

Thirdly, our workers will be encouraged to work in as eclectic a manner as our necessarily specialised roles allow them. The reality that the Agency is part of a Foundation which comprises another two agencies offering a number of services in some ways similar to ours, offers possibilities of synergistic mixing and matching which have to be creatively explored if rationalisation of services is to truly be the hallmark of the Agency’s operations.
Sedqa Community Services

ALCOHOL AND GAMBLING COMMUNITY SERVICE

Objectives of the Service

Over the years, this team’s objectives have remained broadly the same:

• To respond to requests from help by drinkers, gamblers and their relatives
• To assess referred individuals and to direct them towards the services they require
• To support and help drinkers, gamblers and relatives through counselling and other interventions
• To offer aftercare to drinkers/gamblers who have undergone rehabilitation

The team comprises five full-time workers and one part-time worker, many of whom have years of accumulated experience in the field. While assessment, counselling, social interventions and crisis interventions, make up the bulk of the team’s operations, referral to other units – mainly to the Sedqa In-Patient Alcohol Residential Rehabilitation, Family Therapy and Psychology Services – is a very important feature of the team’s function. Liaison with other professionals is therefore essential and takes place on a continuous basis. In this regard, communication with Sedqa’s Doctors and with the two Psychiatrists who render a service to our clients, is of crucial importance.
1) Alcohol

Performance Review and Analysis

<table>
<thead>
<tr>
<th>Year</th>
<th>Referrals</th>
<th>Group Attendances</th>
<th>Individual Sessions</th>
</tr>
</thead>
<tbody>
<tr>
<td>2007</td>
<td>298</td>
<td>5,409</td>
<td>2,005</td>
</tr>
<tr>
<td>2008</td>
<td>243</td>
<td>5,582</td>
<td>1,434</td>
</tr>
<tr>
<td>2009</td>
<td>282</td>
<td>3,953</td>
<td>1,733</td>
</tr>
</tbody>
</table>

Table 33: Number of actual referrals, group attendances and individual sessions dealt with by the Alcohol & Gambling Community team to persons with an alcohol problem, 2007-2009

The most striking feature of the statistics pertaining to the 3 years under review presented in Table 33 is the decrease in the number of referrals in 2008. This represents the lowest number of referrals we have had since Sedqa’s inception. A possible reason is that the long waiting time for a first appointment, resulting from the fact that for a considerable portion of this 36-month period the team was not functioning at full strength, put off potential clients from seeking help (we have long realized that word of mouth is a very potent advertisement). Referrals recovered during 2009, when one of the vacancies was filled.

The lower number of referrals, and the fewer number of workers, is also reflected in the number of sessions carried out with clients in 2008, with the figure improving in 2009 under the impetus of an increase in human resources. Group attendances were very high in 2007 and 2008, but dropped significantly in 2009 partly because, for financial reasons, as from September, we had to cut down the number of weekly groups from 7 to 4; and partly due to a change in therapists - new facilitation styles may take time to be accepted.
Way Forward

The experience of the three years under review, especially when compared to previous years, indicates that the timing of the delivery of the service is not only essential with regard to the clinical and therapeutic effectiveness of the intervention, but also has implications for the readiness of clients to approach the Service. This Community team will be doing its utmost to do away with waiting lists, since these are inimical to the very notion of a user-friendly service. However it will be able do so only do that if the necessary resources are provided.

The Agency will also do its utmost so that the National Policy on Alcohol is launched for consultation, brought up to date and published.

2) Gambling

Performance Review and Analysis

<table>
<thead>
<tr>
<th>Year</th>
<th>Referrals</th>
<th>Individual Sessions</th>
</tr>
</thead>
<tbody>
<tr>
<td>2007</td>
<td>47</td>
<td>128</td>
</tr>
<tr>
<td>2008</td>
<td>48</td>
<td>114</td>
</tr>
<tr>
<td>2009</td>
<td>42</td>
<td>119</td>
</tr>
</tbody>
</table>

Table 34: Number of actual referrals and individual sessions dealt with by the Alcohol & Gambling Community team to persons with a gambling problem, 2007-2009

Referrals were pretty constant over the three years, but the number of sessions decreased in 2008 and 2009 when one would have, everything else being equal, expected it to rise (Table 34). However, everything else was not equal, because, as explained in the section on Alcohol, the Sedqa Alcohol & Gambling team (AGCT) was for some time quite severely depleted, and therefore could not deliver the full extent of the service expected of it. Neither could it, in those circumstances, be expected to address the question of whether to institute new services or not. By the end of 2008, new staff had been recruited and had settled in,
but the team was not yet functioning at full complement. In 2009, one of the vacancies within the AGCT was filled, and the increased person-power was reflected in a slightly greater number of contacts with clients, compared to previous years despite a lower number of referrals.

Virtually all the clients who were referred to Sedqa or received a service were gambling in the gambling-machine shops which at that time were proliferating all over the island, or else on the machines available in many clubs, bars and hotels, ostensibly for amusement purposes, but which in reality are being used for gambling. However, on a positive note, we could not but notice that a groundswell of public opinion against these establishments rapidly gained momentum, and was undoubtedly influential in bringing about the closure of the gambling arcades in the summer of 2009.

**Way Forward**

Through its daily contact with the pathological gamblers, the AGCT must continue to provide the evidence which can contribute to convince the authorities to clamp down on the gambling establishments and to seriously regulate their operations. The Agency should be pressing for the formulation and adoption of a National Policy on Gambling, on the same lines as the one regulating drugs, but which should be drawn up in consultation with operators in the field of professional assistance and pathological gamblers and their families.

The Alcohol and Gambling Team must be properly trained to deal with the realities its members face very day. The newer members of the team must be provided with training about the nature of gambling and effective techniques which can be applied with clients.
DRUGS AND COURT COMMUNITY SERVICE

Objectives of the Service

The Sedqa Drugs and Court Services Community team’s (DCT) functions are the following:

- intake and assessment of those referred to the DCT for help
- referrals for medical assessment and treatment (if necessary)
- drawing up of a care plan (in collaboration with medical professionals and other colleagues)
- providing counselling and social interventions
- referral to other services (within/outside of the Agency) as necessary
- act as key-worker (focal person) to clients at whichever phase of their therapeutic itinerary within Sedqa structures.

The DCT workers carry out the interventions outlined above in function of the stated objectives of providing a professional service to drug misusers and their relatives.

This team is made up of ten workers, one of whom works 30 hours per week. During the three years under review, the team enjoyed a considerable degree of stability.

Besides rendering a direct service to drug abusers and significant others through the functions listed above, one member of this team devotes 75% of her time to representing the Agency and its clients in Court in matters related to drug abuse, alcohol abuse and problem gambling.

As with other teams, liaison with Sedqa Doctors and various Psychiatrists is crucial, as is co-operating with professionals from other agencies and sectors. Moreover, DCT members, besides grooming (some) clients for residential rehabilitation, provide those clients who have completed residential rehabilitation with aftercare.
Performance Review and Analysis

<table>
<thead>
<tr>
<th>Year</th>
<th>Referrals</th>
<th>Individual Sessions</th>
<th>Total no. of clients seen</th>
</tr>
</thead>
<tbody>
<tr>
<td>2007</td>
<td>334</td>
<td>4,953</td>
<td>480</td>
</tr>
<tr>
<td>2008</td>
<td>343</td>
<td>5,358</td>
<td>505</td>
</tr>
<tr>
<td>2009</td>
<td>300</td>
<td>5,283</td>
<td>449</td>
</tr>
</tbody>
</table>

Table 35: Number of actual referrals, individual sessions and total number of clients dealt with by the Drugs & Court Community Services, 2007-2009

Table 35 indicates that although the number of cases referred to the DCT was quite constant, the number of clients seen in 2008 rose by 5% and the number of sessions – a reliable gauge of output – by 8%. By these measures, the DCT performed to a high standard, aided by the fact that the team enjoyed a considerable degree of stability over the years under review. However, in 2009, the departure of 3 highly experienced workers, only 2 of whom had been replaced by the end of the year, took its toll on the team’s performance, although there is only a marginal decrease in the number of individual sessions carried out.

During this period, a decision was taken to do away with one of the programmes run by this time: the Naltrexone programme, which catered for heroin addicts who had opted to take an opiate antagonist drug prescribed by the Agency’s Doctors in order to counter the effects of heroin. Due to the fact that that many Naltrexone clients opted out of the treatment, and that Naltrexone fell out of favour when a new type of drug with somewhat different effects – Buprenorphine – became available, there seemed little point in continuing with this programme.

In 2007, 79% of sessions held by DCT were with clients experiencing mainly heroin-related problems, while clients whose primary drug of abuse was cocaine amounted to 9% of the total number of clients. In 2008 we witnessed a slight decline in the number of sessions with clients whose drug of choice was heroin to 75%, and an increase to 14% in the
number clients who use solely or mainly cocaine. In 2009, the proportion of sessions with clients experiencing mainly heroin-related problems decreased further to 70% of total, while cocaine-users required more than 14% of sessions carried out. These differences in the type of clients seen, taken in conjunction with observations in other spheres of activity, show that cocaine use is increasing and that in the future DCT may have to devote a greater proportion of its efforts than hitherto to clients who abuse this stimulant.

**Way Forward**

Because of the DCT’s many strengths, most notably its stability and experience, there are hopes that this team will in future take up the challenge of group-work in order to extend its already considerable array of skills and therapeutic tools. For this to occur, care must be taken to maintain its composition and limit the inevitable movements out of the sector and out of the profession which characterise current substance-abuse services. Apposite training in the latest developments in substance-abuse and counselling techniques, together with the provision of software which will facilitate inter-agency communication, recording and data collection should enhance this team’s effectiveness even further.
TEEN SUPPORT SERVICES

Objectives of the Service

The mission of this team is to provide both secondary (targeted) prevention and treatment services to young people. This in recognition of the fact that the teenagers have particular needs because they may be exposed to an environment where substances are regularly misused or where problem gambling is present, may have personality characteristics that may make them more vulnerable to developing this sort of behaviour themselves, or may be in the grip of social factors such as negative peer pressure. It works with both considerable numbers of students at the same time – whole classes in fact – and also individual teenagers who are already developing problems.

The team has five members, one of whom – an experienced Youth Worker – acts as Team Leader. The team’s activities can be broadly divided in three categories:

- Delivery of the Booster Programme to Form 4 students in government, church and private schools. This programme is available on request. This programme, carried out with the assistance of Guidance Teachers, invites students to reflect on situations which may lead them to experiment with substances and teach coping skills. Very importantly, these sessions help identify individuals who are particularly at risk, who may then be offered personalised help.
- Individual work with students who are experimenting with, or regularly abusing, drugs or alcohol. These would have been identified through the Booster Programme or referred to the Services through other channels. Parents and other significant others are often offered help because they would require it in their own right, and also because the young person who is receiving treatment would benefit from a healthier family milieu.
- BUDZ, a 17-week programme, offered in conjunction with the Appoġġ Adolescent Outreach Service, aimed specifically at teenagers who have been misusing drugs or alcohol, are first-time offenders, displaying challenging behaviour, are involved in anti-social or dangerous activities like...
Foundation
Social Welfare Services

prostitution, or have serious family problems. Participants would be helped to achieve more structure and stability in their lives to improve relationships and to become more self-aware through the teaching of life skills.

Performance Review and Analysis

<table>
<thead>
<tr>
<th></th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Referrals</strong></td>
<td>86</td>
<td>100</td>
<td>68</td>
</tr>
<tr>
<td><strong>Individual Sessions</strong></td>
<td>1,054</td>
<td>1,412</td>
<td>1,429</td>
</tr>
<tr>
<td><strong>Total no. of clients seen</strong></td>
<td>126</td>
<td>143</td>
<td>101</td>
</tr>
<tr>
<td><strong>No. of Booster Sessions</strong></td>
<td>53*</td>
<td>202</td>
<td>186</td>
</tr>
</tbody>
</table>

Table 36: Number of referrals, sessions and clients dealt with by the Teen Support Services, 2007-2009.
*Data for Booster sessions in 2007 refers to the October – December period since the programme was introduced in October of that year.

The statistics pertaining to the three-year period under scrutiny (a sample of which is reproduced above) show that this team’s activity increased quite in line with the rise in demand for its services, in 2008. It must be said that in the first half of 2007, this team’s composition fell well short of its complement. However as vacant posts were filled, its output rose correspondingly the following year. Somewhat inexplicably, indicators declined in 2009, although it should be pointed out that the basic source of operations, i.e. referrals, is largely beyond control, depending as it does, on a number of entities external to this team, and to Sedqa itself. However, output, as measured by the number of contacts (sessions) in 2009, actually saw a slight rise over the preceding year.

The Booster programme was launched in 2007, and delivered to a rather small number of students in various schools. The number of sessions in 2008 quadrupled in respect of the corresponding period in 2007. In 2009, the number of sessions was lower than the previous year, but remained satisfactorily high. The demand for this programme is high, and most schools are eager to have their students receive the programme. As the Social
Workers who carry out gain in experience and knowledge, their efficiency is visibly increasing.

We had very high hopes for the BUDZ programme, but it had to be suspended due mainly to a low rate of take-up. A profound and no-holds-barred analysis was undertaken and that conclusion was that the low level of participation was caused by a number of factors, primary among which was the inadequacy of the premises – two rooms at Head Office – which puts off potential candidates in many ways, not least because it was impossible to utilise the informal drop-in system so congenial to the type of client this programme should be serving.

**Way Forward**

The main challenge ahead is the revival of the BUDZ programme, the need for which is incontestable. However, the appropriate resources for which have so far proved hard to come by. Even though it looks likely that the immediate future ahead will be characterised by an overriding need to rationalise resources, the indispensability of this service makes it incumbent on the Agency to somehow locate suitable premises and equipment to re-launch a revamped version of BUDZ.

With regard to the Booster programme, the desire is to increase the number of schools where this programme is delivered. The workers responsible for the facilitation of this programme are eager and prepared to work in as flexible a manner as possible, but the plan to reach a much wider group of students will come to fruition only if more material resources become available. Moreover, the Agency will do its best to offer training in group work, with an emphasis on the skills required to manage group dynamics, to the workers responsible for the delivery of this programme.

The consolidation of the knowledge and experience gleaned so far, through the provision of training for the workers is a necessary goal for the future. Even more importantly is the nurturing of the members of this team through appropriate support services.
SUBSTANCE MISUSE OUT-PATIENTS UNIT

Objectives of the Service

Sedqa’s Substance Misuse Out-Patients Unit (SMOPU, or as it is more commonly called, Detox Out-Patients), provides services to a great number of clients, who, for the most part are dependent on heroin. These services comprise primarily of opiate substitution and maintenance. Users of cocaine are, on the other hand, offered symptomatic treatment.

These services are provided by an equipe of Medical Officers, all highly experienced in the field, aided by a team of Nurses and other workers most of whom have been employed in the field for many years. Besides individualised treatment, screening for HIV, Hepatitis B and Hepatitis C – not to mention routine blood tests – are also carried out. An immunisation service for Hepatitis B is also delivered. Since the incidence of psychiatric co-morbidity within the drug-abusing population is high, this Unit also provides a psychiatric service to a considerable number of users.

While many of clients who are referred to this service are interested mostly in being treated with methadone in order to alleviate symptoms or to reduce physical or psycho-social harm, Sedqa provides a motivational counselling service to those who appear likely to benefit from it. Social work services are also part of the gamut of services a Unit of this kind should provide. Most of our patients’ medication is supplied by the Unit’s own Pharmacist. Finally, and very importantly, a Well Woman Clinic offering services for pregnant drug users is also available at SMOPU.
Performance Review and Analysis

<table>
<thead>
<tr>
<th></th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total no. of Clients seen</td>
<td>1,086</td>
<td>1,085</td>
<td>1,112</td>
</tr>
<tr>
<td>New Clients seen</td>
<td>82</td>
<td>76</td>
<td>74</td>
</tr>
<tr>
<td>Psycho-Social Sessions</td>
<td>2,223</td>
<td>2,492</td>
<td>2,226</td>
</tr>
<tr>
<td>Smear Tests</td>
<td>47</td>
<td>40</td>
<td>31</td>
</tr>
</tbody>
</table>

Table 37: Number of clients, tests and sessions dealt with by SMOPU, 2007-2009

The high, often frenetic, level of activity which has characterised this Unit since its inception, continued unabated during the period under review. Although there was a marginal decrease in the number of new clients seen, the total number of users who accessed this service remained practically the same (Table 37). However the number of therapeutic contacts (psycho-social sessions) carried out by all staff increased by over 12%. In 2009, this indicator reverted to the 2007 level, despite the increase in number of clients seen that year. This was almost certainly due to the fact that, because his services were in demand in various levels of Agency management and operations, the Clinical Director of Sedqa could devote less of his valuable time to seeing clients.

This rise in 2008 is partly explained by the fact that as from that year Sedqa Detox Out-Patient Services could count on the services of two visiting Psychiatrists rather than one. Even this increase was hardly enough to cope with demand for this service, and at times, waiting time was slightly longer than we would have liked it to be. In this regard, it should be stated the relationship and collaboration with Mount Carmel Hospital, particularly with the Dual Diagnosis Unit, has been strengthened to the benefit of our drug-using clients who suffer from concomitant mental health problems.

The rising demand has placed a lot of strain on the service structures, particularly on the work-load of Medical Doctors. As a result, the drop-in service which enabled old and new
clients to come and ask for help without a prior appointment on certain days of the week, had to be reviewed, at least in so far as access to the Medical Doctors is concerned.

Heroin continues to be far the major cause of addiction problems among the clients of the Substance. Suboxone, a refinement on Subotex on which Sedqa reported in some depth in the previous biennial report, was introduced during this period. It is increasingly being prescribed, both on its own (as a methadone substitute) and in conjunction with other substances (sometimes Methadone itself), since, in relation to heroin, it possesses both agonistic and antagonistic properties.

During 2008, a multi-disciplinary team meeting chaired by Dr. Anna Vella – a Sedqa Doctor – started being held. This team is made up of Midwives and Heads of various nursing units from Mater Dei Hospital, together with a Caritas representative and a worker from Sedqa Community team, a Paediatrician, a hospital-based Social Worker, and the leader of the Appoġġ Child Protection Service. The aims of this team are to ensure a multi-angled approach to patient care and to draw out comprehensive plans for drug-abusing mothers. This mechanism has facilitated the adoption of a common approach, thus enhancing the level of cooperation from this client group.

A recent development in treatment of offspring born to opiate-dependant mothers at Mater Dei Hospital is that these babies are no longer treated with methadone. Our medical staff advised that a treatment protocol be drawn up whereby morphine syrup is used instead of methadone. Detoxification with this compound is shorter, and therefore the process is less stressful to babies and mothers alike. Moreover hospital beds can be freed earlier.

A large proportion of the smear tests carried out at the Sedqa Well Woman Clinic result in tracing infections (17 in 2007, 19 in 2008 and 14 in 2009). This rate of infections is much higher than that found in the general female population. All infected individuals are offered treatment until the condition clears up, and are counselled about less risky behaviour.
At SMOPU, occasional outbursts of violence occurred during this period under review, although none had serious consequences. The presence of security officers, reluctantly introduced some years ago after a particularly nasty incident, was not as regular a feature of daily life at SMOPU as we would have liked it to be, and in terms of our concerns for the safety of our workers, this is worrying. It is a fact the Agency has had to accept that the availability of police officers, and their regular presence, even if for brief periods, on and around the premises is the only effective deterrent to manifestations of aggression which a few individuals of the 700-odd clients who come daily to the Unit are prone to.

**Way Forward**

The management of the growing caseload in the face of diminishing resources is probably the major challenge facing this Unit in the next biennium. Moreover, a number of the more experienced staff is approaching retirement age, and the training of new staff will take some time. This is expected to increase the strain on an already stretched team of nursing, medical and other workers at the Unit. For this reason, these workers, individually and collectively, should be supported by all the means our resources allow us to muster. If sufficient resources are allocated to the Agency, Sedqa shall seek to increase sorely-required medical input.

On an operational level, we should be looking at strengthening the social work presence at Detox in order to ensure that clients’ needs are met as comprehensively as possible. Moreover, the management of each client – who quite often would access a number of services – has to be rationalised through the extension of the key-worker system, whereby one of the Community Workers, would be responsible for the coordination of all tasks carried out in respect of that particular client.
PSYCHOLOGICAL SERVICE

Objectives of the Service

The objectives of this team are:

- To provide psychotherapy to substance-abusing clients and/or to family members
- To conduct psychological assessments
- To provide individual and team supervision to Sedqa staff.

This team has been functioning since 2001. It currently consists of 4 full-time Psychologists and two part-timers. While two of the Psychologists devote most of their time to clients in residential rehabilitation at Komunità Santa Maria, the other two full-time Psychologists mainly conduct sessions with Community clients. One of the part-time Psychologists provides a substantial proportion of the services this team offers to Sedqa workers, while one other part-time worker devotes the whole 9 hours she is employed for, to provide psychotherapeutic assistance to children of our clients.

Performance Review and Analysis

<table>
<thead>
<tr>
<th></th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Referrals</td>
<td>90</td>
<td>86</td>
<td>62</td>
</tr>
<tr>
<td>Clients Seen (Monthly Average)</td>
<td>97</td>
<td>113</td>
<td>106</td>
</tr>
<tr>
<td>Sessions with Clients</td>
<td>2,207</td>
<td>2,685</td>
<td>2,408</td>
</tr>
<tr>
<td>Sessions with Staff</td>
<td>190</td>
<td>279</td>
<td>269</td>
</tr>
</tbody>
</table>

Table 38: Number of referrals, clients and sessions dealt with by the Sedqa Psychological Service, 2007-2009

The first two years covered by this report were characterised by a substantial degree of stability within this team, in that no major change took place within its composition after April of 2007. However, the number of Psychologists was patently insufficient in proportion to the cases referred, mainly because the team itself lost 2 members in 2006, but only one Psychologist was recruited as a replacement.
As the team honed its skills and blended in the experience acquired, its work-rate increased. This is indicated by that there was a 22% increase in the number of sessions carried out in 2008 compared to the previous year (Table 38). However, by nature, the psychotherapeutic process is longer than other types of therapeutic interventions, and therefore the take-up of new cases could not keep up pace with referrals. Despite the valiant efforts of this team, the result inevitably is a very long waiting list. The decrease in the number of sessions in 2009 is attributable to the fact that one worker had to reduce the number of hours he works for Sedqa, and the resignation of another part-time Psychologist.

One very important aspect of this team’s contribution to Agency operations is the provision of supervision (both team and individual) to Sedqa staff. The type of supervision provided by the Psychologists is an essential tool in the support of Sedqa workers who sometimes have to contend with work-related emotional problems or difficult situations which can impinge on their performance. This contribution is almost certainly one of the factors why Sedqa has enjoyed a relatively low turnover over the past years. Psychologists themselves are also in receipt of supervision, which is provided by other experienced Psychologists external to the Agency. It is therefore most unfortunate that the psychologist entrusted with the task of supervising the bulk of Sedqa employees resigned in late 2009.

The major challenge in the months ahead is to find suitable replacement of members of a profession which is in notoriously short supply in Malta.

**Way Forward**

The very long waiting list (inevitable, given the fact that the team is operating with many hours short of its complement), is the biggest challenge the Agency is facing with regard to this service. It defies easy solution but the Agency will definitely do its utmost to find other ways to reduce waiting time if humanly possible without upsetting the current set-up in away will cause greater
disruption. One possibility, which will be discussed with the Psychologists themselves, is the delivery of group psychotherapy in lieu of a number of individual sessions and the eventual employment of allied professionals such as psychotherapists.

The highly valuable work with supervision of Sedqa staff must be resumed as soon as possible and be consolidated. The psychological and professional needs of the Psychologists themselves need to be nurtured to ensure they are in a position to continue carrying out their duties effectively.
FAMILY THERAPY SERVICE

At the end of 2009, the Sedqa Family Therapy team, which has been in existence for 7 years, comprised of a Psychologist and three psychology graduates (two of whom have acquired post-graduate qualifications) in Family Therapy. One of these acts as Team Coordinator. All workers are individually, and as a team, supervised by two highly-qualified therapists.

Objectives of the Service

This team aims at:

• Providing systemic family therapy services to clients and to significant others
• Providing couple therapy where appropriate and necessary
• Providing facilitation of groups for parents / family members of drug clients in residential rehabilitation (till 2007).

Performance Review and Analysis

<table>
<thead>
<tr>
<th></th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Referrals</td>
<td>58</td>
<td>30</td>
<td>59</td>
</tr>
<tr>
<td>Families Seen (Monthly Average)</td>
<td>26</td>
<td>26</td>
<td>31</td>
</tr>
<tr>
<td>Sessions with/about Clients</td>
<td>1,373</td>
<td>1,664</td>
<td>1,993</td>
</tr>
</tbody>
</table>

Table 39: Number of referrals, clients and sessions dealt with by the Sedqa Family Therapy team, 2007-2009

As can be seen from the statistics presented in Table 39, 2008 was characterised by a lower demand for services, when compared to 2007 and by more intense work by the Family team. It must be remembered that for a good part of the time, this team was short of its full complement. In 2009, the human resources situation improved somewhat by the recruitment of a part-time worker, but there is still a rather long waiting list for this Service, made up of families of individuals who are undergoing residential rehabilitation and also of Community clients. As in all other contexts,
Foundation
Social Welfare Services

A long period of waiting sometimes results in a loss of interest and motivation by clients.

Since 2008, this team no longer provides group therapy for parents and other significant others of residential clients. These groups are still held, but are facilitated by staff from the residential facility itself. The decision to entrust the facilitation of these groups to other workers was motivated by a number of factors, among which was the need to allow this team to concentrate on the families who required individual family work in a bid to reduce the waiting list.

Family interventions of this type require an intensive input of resources; suffice it to say that almost all sessions require two workers: one to conduct, the other to observe and to provide live feedback. In other words, this kind of service comes at a substantial cost. However, it has so far been deemed essential to provide Family Therapy, since addiction problems are often rooted in, or intimately connected with, maladaptive family dynamics which must be corrected if there is to be enduring change.

Way Forward

The number of families requiring help will almost certainly continue to rise. In this particular field, the problem of resources available to cope with the increase in potential clients is twofold: the perennial one of the shortage of funds and – peculiar to this area – a severe dearth of suitably-qualified therapists capable of working with this particular client-group. It is a challenge which must be tackled creatively, if a solution is to be found.

The Agency must also ensure that the members of this team, particularly any newly-recruited workers, are equipped with the technical knowledge necessary to work well in this area. Moreover, it must also provide training on aspects of work which may not be central to Family Therapy, but are nonetheless related to the situations members of Sedqa’s Family Therapy team may face during the course of their work.
Way Forward for the Community Services

Once all vacancies are filled, and newly-recruited staff is trained and has acquired the necessary assessment and engagement skills, Community Teams will be able to concentrate on delivering a first-line service in an effective manner as much as possible. The availability and flexibility which has characterised these services is to be strengthened, however without jeopardising the structural elements which are essential to professional interventions. Continuous training about new substances – such as mephedrone and khat, which are likely to feature in the local scene in the next few years – and in new knowledge about classical substances jostling for positions of prominence among users in Malta, must be a constant in the Community Teams’ professional preparation. Added to this emphasis on training about substances, a readiness to muster new techniques and to hone traditional ones must characterise the collective mindset of the workers making up these teams.
Sedqa Residential Services

Objectives of the Services

Residential services find their justification in the pervasive and intractable nature of addiction. Some highly-dependant users will not shake off the habit and the attendant anti-social and destructive behaviour unless they are given the opportunity to live a structured life which counteracts the chaotic and self-indulgent lifestyle that so often typifies addiction. In many cases, the attempt to inculcate structure into lifestyle must be complemented by psychotherapy which seeks to address internal conflicts that may have led or contributed to the establishment of the addiction.

Sedqa offers a residential programme at Komunità Santa Marija (KSM) in Hal Farrug for users who are addicted to drugs, and one at Dar iż-Zerniq, also in Hal Farrug, for clients who are severely dependant on alcohol. Residential rehabilitation programmes are typically quite long, 12 months being the minimum stay. Drug rehabilitation also involves a period of gradual re-integration into society which follows the residential period, while Dar iż-Zerniq incorporates this part of the rehabilitative process within the 12-month period of stay.

The Agency’s Hal Farrug complex also houses Sedqa’s in-patient detoxification services, which are delivered from a unit called Dar l-Impenn. Detoxification of alcoholics and drug addicts can take place within the same structure, although the treatment required differs considerably, both in length and in the type of medication prescribed and medical / nursing interventions required.
KOMUNITÀ SANTA MARIJA

Objectives of the Service

The main objective of this service is to help severely-addicted clients to change their often chaotic lifestyle to a more ordered one by following a structured programme which aims at inculcating responsibility, honesty, commitment and consistency through confrontation by peers and staff and self-reflection. Psychotherapy is often an indispensable component of this programme, as is family involvement. Educational, spiritual and other programmes also form part of the clients’ KSM experience, which seeks to address all aspects of a client’s life.

This programme is structured in a number of phases which begins with what is known as the Merhba (Welcome) phase and ends with aftercare. In between, the client progresses through stages of ever-increasing challenges and degrees of responsibility, including a semi-residential phase known as Sfida (Challenge) by which time he or she are expected to be in employment or in full-time education.

The team which runs KSM is made up of the Unit Leader, a Programme Coordinator, and eight Care Workers. Care Workers work in pairs, one supervising the Merhba phase, the other the Formazzjoni phase. The programme activities can also count on the very important input of a number of contractees and volunteers who contribute their skills to the various programmes. Among these are teachers and priests.

Performance Review and Analysis

<table>
<thead>
<tr>
<th></th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Admissions</td>
<td>66</td>
<td>62</td>
<td>60</td>
</tr>
<tr>
<td>Clients dealt with</td>
<td>93</td>
<td>93</td>
<td>79</td>
</tr>
<tr>
<td>Completed Programme</td>
<td>11</td>
<td>15</td>
<td>13</td>
</tr>
</tbody>
</table>

Table 40: Number of new admissions, clients dealt with and clients who successfully completed the programme at KSM, 2007-2009
This three-year period was characterised by a great deal of intensive work on all levels, which culminated in the larger number of successful completions of the programme in 2008. Compared to 2007, 2009 saw a decline, but the number of clients who completed the programme was still higher than in 2007. This may be partly due to the fact that by mid-2008, most of the Care Workers had completed their Certificate in Care Work training at the University of Malta, while one was in the process of doing so. There were times – particularly in 2007 - when demand for this service was so high that not only was KSM experiencing full occupancy, but a rather worryingly long waiting list formed. The management of this situation required a great deal of cooperation between KSM and the Agency’s Community Services. The trend has changed 2008 and 2009 years, possibly due to the fact that shorter (and thus more attractive) programmes are on offer on the island.

KSM’s work has been attracting attention from a number of quarters. The UK-based Malta Charities once again donated a generous sum of money, which enabled the embellishment of parts of KSM as part of a project of physical restructuring of a considerable magnitude undertaken not only to enhance the functionality of the place, but to enable it to cope with the increase in demand for rehabilitation services.

A small chapel was also built in order to ensure that the spiritual needs of residents would also be catered for. The recognition of the importance of the spiritual aspect of treatment was reflected in a number of activities, supported by a cadre of priests who freely see to the residents’ spiritual needs. The spiritual side represented only one aspect of the programmes on offer. For example, throughout this time there was an educational programme on offer which, among other things and depending on the human and physical resources available, helped residents familiarise themselves with computers and taught basic literacy and numeracy skills.
Way Forward

KSM’s experience in the provision of residential rehabilitation for drug addicts is now well-established and has yielded good results over the years. The programmes on offer must however adapt themselves to changing social situations. It has been felt for some time that these services are not catering adequately for a number of female clients, particularly those with children. In the next two years, this problem must be tackled, and possible solutions analysed.

The re-entry phase of the programme may need to be more closely supervised, while still respecting the high degree of independence of this phase of the programme. Re-entry is in many senses the crucial phase of the programme where the patterns of living learnt in the programme are tested in the community. The presence of a member of staff with whom to discuss plans and obtain timely feedback from would probably enhance the effectiveness of this stage in the therapeutic itinerary.
SUBSTANCE MISUSE IN-PATIENTS UNIT

Objectives of the Service

The Substance Abuse In-Patients Unit is situated within the Sedqa complex at Hal Farrug and consists of a six-bedded unit called Dar l-Impenn. This is staffed by a complement of 4 Nurses and 4 Care Workers. Its purpose is to provide detoxification to drug-dependant individuals (Sedqa or Caritas clients) and to alcohol-dependant Sedqa clients. These individuals will have normally been assessed by Sedqa or Caritas Community Workers, and examined and referred to Dar l-Impenn by Sedqa Doctors.

Detoxification is not normally a long process, but it requires quite intensive medical treatment in a bid to reduce or counter withdrawal symptoms. While being detoxified, clients undergo other medical tests and fine-tune their treatment-plans with their key-workers. According to our philosophy of care, detoxification should never be viewed as an end in itself, but as a stage of the treatment process which often include residential rehabilitation as the next phase.

Dar l-Impenn also offers a crisis intervention service, mainly for clients who require short-term treatment, and also day detoxification or stabilisation programmes for some clients on Suboxone. Clients may also be admitted to Dar l-Impenn for time-out, if the Doctor in charge of their treatment deems this fit. Treatment with Naltrexone also featured during this triennium, but the downward trend in the utilisation of this compound for treatment of heroin addiction noticed in the previous biennial report, was confirmed.

Finally, for many years, Dar l-Impenn provided a helpline service for clients at night and during weekends, but ceased to do so in February 2008 when Supportline 179 (a service provided by Aġenzija Appoġġ), took over the service.
Performance Review and Analysis

<table>
<thead>
<tr>
<th></th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clients admitted</td>
<td>257</td>
<td>254</td>
<td>234</td>
</tr>
<tr>
<td>Care days</td>
<td>1,999</td>
<td>2,053</td>
<td>2,103</td>
</tr>
<tr>
<td>Completed Detox Programme</td>
<td>241</td>
<td>239</td>
<td>206</td>
</tr>
</tbody>
</table>

*Table 41: Number of clients admitted to Dar l-Impenn, total number of care days provided and number of clients who completed the detoxification programme, 2007-2009*

In 2007, of the clients who completed the detoxification programme at Dar l-Impenn and went on to a residential rehabilitation programme, 32 entered Sedqa’s KSM, while 23 opted for either Caritas or OASI (in Gozo). While in 2008 36 clients joined the KSM programme, 15 entered either the Caritas programme or OASI. The corresponding figures for 2009 were 20 (KSM) and 26 (Caritas or OASI). As can be seen, although run exclusively by Sedqa, this Unit offers an essential service to other therapeutic communities as well.

The main problem encountered with regard to the services offered at Dar l-Impenn is the size of the premises, which is manifestly not spacious enough to accommodate five or six clients and at least 2 members of staff at one time. Community Workers sometimes have to interview clients in bedrooms, while non-smoking clients and staff have to spend hours in an atmosphere dense with smoke. It is believed that a number of clients have actually left the programme prematurely precisely because of these conditions.

Despite these difficulties, client outcomes can be said to be very positive especially when one considers the very high proportion of completed detoxifications in relation to the number of clients admitted. Certainly the fact that the medical, nursing and care work staff are quite highly experienced, coupled with the modern detoxification methods being used, makes for shorter admissions that are nonetheless successful.
Way Forward

Because of the high medical and nursing input required for the safe and successful detoxification of physically-dependent individuals, Dar l-Impenn is probably the most expensive among the range of services offered by Sedqa. However, these in-patient detoxification services are considered to be essential for many clients’ well-being and to enable them to come off drugs completely. However, ways of providing the same service at a lesser cost should be looked at.

The issue of adequate premises which make for a more therapeutic environment and which could also influence the outcomes of attempts at detoxification more positively, should be solved by mid-2010. It is believed that we would achieve an even greater proportion of successful attempts at treatment and rehabilitation, once the goal of building premises more adequate for the delicate purpose of detoxifying substance-dependant individuals will be reached.
ALCOHOL RESIDENTIAL PROGRAMME

Objectives of the Service

This programme saw its inception in January of 1995. For the past four years or so, this service has been based at the KSM complex in Hal Farruġ, in a section known as Dar iż-Zerniq. During the 36-month period under review, this service offered a residential service and a day programme, both of one year’s duration. The aim of these programmes is to rehabilitate severely-dependant drinkers through structured community living, counselling and therapy, and social support. Counselling and therapy are offered on both the group and individual level to clients and also to significant others.

Social Workers, Care Workers, a Psychologist, an Occupational Therapist, a Doctor and, at times, a Psychiatrist, form the multidisciplinary team responsible for the delivery of this service, although the core team is actually made up of a Unit Leader (a Social Worker by profession), four Care Workers, aided by a Psychologist and an Occupational Therapist who are employed part-time.
Counselling and therapy are offered on both the group and individual level to clients and also to significant others. In cases where complex inter-personal or intra-personal issues are detected, family therapy and in-depth psychotherapy are also offered. Family members are expected to participate in parts of the programme (groups and some individual sessions) both because this participation is of help to the resident and also because family members often require support in their own right. Clients are encouraged to go back to work or to seek a job in a relatively early phase of the programme.

**Performance Review and Analysis**

<table>
<thead>
<tr>
<th></th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Admissions (Day/Residential)</strong></td>
<td>20</td>
<td>16</td>
<td>17</td>
</tr>
<tr>
<td><strong>Sessions with clients</strong></td>
<td>488</td>
<td>438</td>
<td>365</td>
</tr>
<tr>
<td><strong>Group attendances</strong></td>
<td>5,409</td>
<td>5,582</td>
<td>3,953</td>
</tr>
</tbody>
</table>

*Table 42: Number of admissions to the Day and Residential programmes at Dar ċ-Żerniq, number of sessions with clients and number of group attendances, 2007-2009.*

*Note: Group attendances include also Community clients*

As can be seen in Table 42, there was a drop in clients entering the residential programme in 2008 when compared to 2007. 2009 figures are comparable to 2008. This is quite likely attributable to two factors:

- The Sedqa Alcohol and Gambling Community team, which prepares clients and refers them to the rehabilitation programme at Dar ċ-Żerniq, was operating at a very reduced manpower level for most of 2008. This meant fewer clients could be seen and assessed for their suitability as clients of Dar ċ-Żerniq.
- The departure of the Head of Dar ċ-Żerniq – a highly experienced and skilful worker left a period of instability in its wake. By the end of the year, a suitable replacement had not been found, but the situation was successfully addressed in early 2009. However, the Alcohol Community Team – the main source of referrals was not fully functional in 2009, and this almost certainly had an effect on referrals.
• Clients tended to be retained for longer periods of time within the programme. This is obviously a highly desirable state of affairs but it does have its negative side: there are less vacancies available for those awaiting admission to the programme.

It should be pointed out that the above figure for group attendances refers to groups which cater for both residents and Community Services clients, as Sedqa practitioners have found that this is a healthy therapeutic mix. Groups, three of which were held every week at the Alcohol Rehabilitation Unit, have for long formed the core of therapy we offer to drinkers and their significant others, encapsulate many of the elements and characteristics of the therapeutic philosophy Sedqa embraces: an atmosphere of mutual support built on trust where confrontation is possible because it is clear that it emanates from genuine concern. Professional facilitators use their expertise, the drinkers’ and relatives’ highly valuable personal experience while harnessing the powerful forces present in group dynamics to bring pressure to bear upon members to change in a desired direction. The ever-increasing participation in groups indicates that clients are finding them helpful and effective.

**Way Forward**

The way forward for Dar iż-Zerniq is clearly one of consolidation with an ongoing evaluation of the various services provided so as to remain relevant for the current needs and challenges presented from time to time according to the ever-changing profile of our client group.

Since there are times when clients have to be put on waiting lists, with possible deleterious effects on motivation, this service may have to reconsider the length of the programme and look at whether it is possible to provide an effective programme over a shorter span of time.
The Way Forward for Residences

As far as residences are concerned, the period under review was one of contrasts. Almost certainly the main reason for the decrease in 2008 was that Sedqa’s Community teams were beset with problems of resignations or of workers going out on long periods of leave (both mainly due to pregnancy), and workers moving on to better-paid or simply different jobs. These moves decimated the teams, on which residences rely completely for the referral of suitable candidates for detoxification and/or rehabilitation. Recruitment of staff was generally not possible due to financial constraints or a dearth of suitably-qualified staff, particularly in the first half of 2008. The situation improved in the last months of 2008, when new Social Workers were taken on.

The residences generally will benefit from further training which will enable them to keep abreast of new developments in both the drug scene and the treatment field. Efforts will have to be made to locate the finances to provide the Dar l-Impenn with better premises. Moreover, the Agency will have to rationalise the KSM and Dar iż-Żerniq programmes and operations without compromising standards and effectiveness in a climate where resources will be harder to come by.
Aġenzija Sapport


Aġenzija Sapport Report
2007-2009

1st August 2001 saw the birth of the Supported Living Division which was then set-up as the forerunner of Aġenzija Sapport, taking on the specific task of addressing and providing support to individuals with disability particularly persons with challenging behaviour, high needs, or who are at risk.

Launched officially in 2003 as Aġenzija Sapport, its drive has been its commitment to enhancing the quality of life of persons with disability through innovative personalised support, expertise, and advocacy. Throughout its seven years of service, the Agency’s vision has been, and still is, that of working with persons with disability and their families to secure the means, opportunities and services whereby they can execute their right to fully participate in community life.

The Agency has built its foundations on four core values, namely:

- equality, choices and opportunities
- inclusion of persons with disability in all aspects of society
- a holistic, person-centred approach rooted in the principles of shared power and self-determination
- mutual support and interdependence, giving and receiving, based on the understanding that both the person with disability and society stand to gain through the advancement of persons with disability as contributing members of society.

The Agency is managed by a Chief Operations Officer who works together with his Operations Team, ensuring the adequate running of Agency services as well as the development of new services necessary in order to address clients’ needs. Moreover, the Chief Operations Officer forms part of the Management Team of the Foundation for Social Welfare Services, and works hand-in-hand with the
Chief Executive Officer to establish direction for the three Agencies that fall within the Foundation.

**Objectives of the Services**

Sapport is committed to address the needs of persons with disability through its main services:

- Social Work Services
- Day Services
- Community Services
- Residential Services
- Resource Services

as well through other work that may not fall under the above services.

Clients are eligible to access Sapport services not only if they live in the community, but also if they are residing in government institutions such as Mount Carmel Hospital, Saint Vincent De Paule Residence, and Care Homes for Older Persons, as well as from other organisations as long as the person is below 60 years of age. Persons with challenging behaviour, persons who are at risk of institutionalisation, persons whose parents or carers are elderly, as well as those who have already been admitted to an institution because of lack of an adequate housing and support alternative, are given priority by the Agency.

The services mentioned are also subject to regular review for evaluation purposes, in order to gather feedback from the client and to discuss any change in the person’s circumstances.
Service Allocation Committee (SAC)

Performance Review and Analysis

Back in 2003, the Agency had set up a semi-independent body, namely the Service Allocation Committee, in order to ensure that, subject to government legislation, every person with disability has an equitable opportunity to be considered for the various services available at Sapport, and to ascertain that all services provided are within the scope, ability and resources of the Agency. This Committee is responsible to examine all requests for services, specifically Community and Residential Services. Members of the Committee scrutinise each and every application which is presented to them by the person requesting service or his/her carers, together with the Agency’s Social Worker as their advocate, and decide on allocation based on the needs of the individual and the Agency resources available at that point in time.

The Service Allocation Committee is composed of:

- One professional from the community in a related field;
- Two representatives of persons with disability from the community (KNPD)
- One parent from the community (KNPD) representing those persons with disability who cannot speak for themselves
- Two representatives from Sapport, one of whom is a Services Manager or his/her delegate
- One member of staff from the Sapport Social Work Unit who would have carried out the initial assessment of the client (Sapport).

The Social Work Unit staff member has no vote since s/he is representing the client.
Throughout the period 2007-2009, the Committee convened 24 times. In the said meetings, the Committee examined 139 situations; 80 of these persons were presented for service for the first time, while the other 59 consisted of reviews (Table 43).

<table>
<thead>
<tr>
<th></th>
<th>Residential Service</th>
<th>Community Services</th>
<th>Residential &amp; Community Services</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>New Presentation</strong></td>
<td>41</td>
<td>34</td>
<td>5</td>
<td>80</td>
</tr>
<tr>
<td><strong>Reviews</strong></td>
<td>-</td>
<td>59</td>
<td>-</td>
<td>59</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>41</td>
<td>93</td>
<td>5</td>
<td>139</td>
</tr>
</tbody>
</table>

*Table 43: Number of situations presented to the Service Allocation Committee, 2007-2009*

122 of these were all considered deserving and were therefore approved service, while only 12 were refused service (Table 44). Another 5 were pending – usually because of further information that is required by the Committee. As mentioned above, persons are presented in front of SAC for Residential or Community Services. Moreover, a few are presented for both services usually because the person would necessitate Community Services until Residential Services are available.

<table>
<thead>
<tr>
<th></th>
<th>Residential Service</th>
<th>Community Services</th>
<th>Residential &amp; Community Services</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Approved</strong></td>
<td>41</td>
<td>76</td>
<td>5</td>
<td>122</td>
</tr>
<tr>
<td><strong>Not Approved</strong></td>
<td>-</td>
<td>12</td>
<td>-</td>
<td>12</td>
</tr>
<tr>
<td><strong>Pending</strong></td>
<td>-</td>
<td>5</td>
<td>-</td>
<td>5</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>41</td>
<td>93</td>
<td>5</td>
<td>139</td>
</tr>
</tbody>
</table>

*Table 44: Outcome of situations presented to the Service Allocation Committee, 2007-2009*
When comparing the work of the Service Allocation Committee throughout 2007-2009 with that of the previous years, one notes a decrease in presentations. The main reason behind this lies in the fact that when the services were newly set up, the Agency was inundated with requests. Hence, the initial two years were the busiest for the Committee following which, the amount of requests seems to have reached a constant. Moreover, it is worth mentioning that the resources allocated to the Agency are limited, which in reality means that the Agency must be more rigorous in its service allocation.

Table 45 provides a better view of the work of SAC throughout the years it has been functioning.

<table>
<thead>
<tr>
<th></th>
<th>2003</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
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<tr>
<td>No. of SAC meetings held</td>
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<td>10</td>
<td>9</td>
<td>6</td>
<td>10</td>
<td>8</td>
</tr>
<tr>
<td>No. of situations presented to Committee</td>
<td>105</td>
<td>88</td>
<td>62</td>
<td>49</td>
<td>35</td>
<td>54</td>
<td>50</td>
</tr>
<tr>
<td>No. of persons approved service</td>
<td>95</td>
<td>78</td>
<td>53</td>
<td>44</td>
<td>32</td>
<td>48</td>
<td>42</td>
</tr>
</tbody>
</table>

*Table 45: Service Allocation Committee overview 2003-2009*
Way Forward

Sapport plans to strengthen the role of SAC within the Agency through:

• Regular yearly reviews of the SAC process in meetings held with the Chairperson of the Committee
• Evaluation of the procedure utilised by the Social Work Service when presenting situations to SAC through regular discussion forums between SAC members, Agency management and the Service Area Leader of the Social Work Service
• Confirmation of appointments of board members, and timely replacement following any resignation
• Analysis of the SAC process of appeal.
Social Work Service

Performance Review and Analysis

It has been explained in previous Biennial Reports that the Social Work Service for persons with disability was transferred from Aġenzija Appoġġ to Aġenzija Sapport back in 1st January 2003. This Service has a principal role as the first point of reference for every person in need of service. In fact, the Agency’s Social Workers coordinate services through assessment, short-term and long-term interventions to meet the desired objectives of the client and his/her family/carer. Following initial contact, the Social Worker acts, among others, as the clients’ advocate in rights-based issues as well their broker for both services provided by the Agency and by other entities. Furthermore, through its Residential Social Worker, the Agency residential clients’ right to good quality service is ensured.

The efforts of the Social Work Service are based on the principle that the person with disability has a right to live a full life as an active member of society. Hence, the work is directed at ensuring the realisation of such right. The Agency believes that society is more whole, more complete, through the participation and contribution of its members with disability. The Social Work Service aims at facilitating such active involvement. Hence, the objectives of the service are as follows:

• to assist persons with disability in addressing in an effective way, any social issues they may encounter
• to support persons with disability in recognising their rights as citizens and help them in ensuring the acquisition of such rights
• to support persons with disability in their process of self-advocacy and advocate with them when such assistance is requested
• to work with the persons with disability in strengthening their informal networks, the carers and entities in their lives which make up their circle of support
• to impart information about any necessary formal supports and assist persons in the process of referral for services
It is also the responsibility of the Social Work Service to assess the situation of persons who approach the Agency for support. Such role involves:

- the provision of information regarding the Agency and its Services
- the evaluation of the person’s needs and wishes, and the presentation of service requests to the Service Allocation Committee (SAC) when these are related to Community and/or Residential Services
- the implementation of SAC’s decisions and recommendations
- the possibility of representing the person with disability for any appeal that may be requested in the case of a client who is not satisfied with the initial decision taken by SAC.

Since it was originally set up back in 1996, the Social Work Service established contact with 2,272 persons with disability and their families. 213 of these were actively receiving assistance through the input of a Social Worker at the end of 2009. Several other persons had undergone an initial assessment and had to be placed on a waiting list due to service limitations; in fact, the year 2009 closed with 10 persons on the waiting list for casework and another 115 on the waiting list for presentation to Table 46 summarises the work of the Social Work Service throughout the years 2007-2009, including the number of presentations to the Agency’s Service Allocation Committee.
Table 46: Social Work Service overview, 2007-2009

Way Forward

The Social Work Service plans to develop its service provision through the:

- consolidation of the Residential Social Work Service
- harmonisation of Social Work Service offered through the main social work office and that offered within Sapport Day Services
- initiation of Social Work Service specifically with persons utilising Community Service to assist in the review of such service
- regeneration of the Service’s intake system
- involvement of persons with disability in the evaluation of the Social Work Service being offered.
Community Services

Performance Review and Analysis

Sapport offers different community services with the aim of providing persons with disability with the support necessary to continue to live their life in the environment of their choice, either independently, with their families, or with significant others. This is seen as a more adequate alternative to institutionalised or residential, more-restrictive settings.

At the end of 2009, the Agency was providing such services to 105 persons with disability through a total of 643 hours of service a week. Such service is provided through the input of Support Workers or members of the Agency’s Resource Team. The type of input may be distinguished under three main categories as follows:

1) Personal Assistance

Personal Assistance refers to the service provided to persons who require support to carry out daily activities such as bathing, toileting, dressing and undressing, and feeding, and whose quality of life is significantly improved when they are provided with such support. Moreover, such service may be provided both in the person’s home and in the community, and could also include assistance provided to a client for appointments that may range from a medical appointment to a night out at the theatre, if it is established that the person necessitates such assistance to pursue such tasks. The Agency attempts to do all that is possible to address the needs and wishes of the individuals to whom it provides service. Hence, the support provided is as flexible as possible in order to ensure that the service is given on the day and time that the client most requires it and, where possible, by the employee of the person’s choice.
Personal Assistance aims at:

- providing necessary support to persons with disability in activities of daily living, both within the home environment and in the community
- ensuring that assistance is targeted to enable service users to live as independently as possible
- building support based on the person’s abilities, needs and wishes, which assistance guarantees their right to an ordinary life.

At the end of 2009, Sapport was providing Personal Assistance Services to 44 persons through a total of 323 hours of service a week.

2) Intervention

Intervention takes the form of facilitating a defined strategy of activities, based on an individualised programme. It refers to the services offered to persons with disability, which are geared at involving them in activities of a personal, familial, and social nature of the person’s choice. These services aim to utilise ordinary daily activities in the person’s natural environment to assist the person to acquire and practice skills such as budgeting and money-handling, road safety, riding a bus, shopping, going to a restaurant, and the like. Intervention services are built on the philosophy that the acquirement of certain skills may give the person greater autonomy and that the balance of self-sufficiency and support should be individualised and attuned to the requirements of every person with disability the Agency offers a service to. The family members or carers of the person with disability are involved in the intervention in order to ensure greater consistency in the person’s skills-acquisition process.

Hence, in more specific terms, the Intervention Service aims at:

- ensuring more active participation of persons with disability in the community
Foundation
Social Welfare Services

- facilitating the acquirement of necessary social and community skills to allow for more functional involvement in society
- enhancing learning of basic daily living skills to develop independence as much as possible.

At the end of 2009, Sapport was providing the Intervention Service to 43 persons through a total of 199 hours of service a week.

3) Combined Personal Assistance & Intervention

This refers to the service provided to persons whose hours of community service are divided between personal assistance and intervention, that is, the input provided to clients who need a combination of both these services. Such an arrangement is provided when it is established with the client that it would prove more beneficial for them. At the end of 2009, Sapport was providing a combination of Personal Assistance and Intervention Services to 18 clients, totalling 121 hours of service per week (Table 47).

<table>
<thead>
<tr>
<th></th>
<th>No. of Clients</th>
<th>Hours per week</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal Assistance</td>
<td>44</td>
<td>323</td>
</tr>
<tr>
<td>Intervention</td>
<td>43</td>
<td>199</td>
</tr>
<tr>
<td>Combined Personal Assistance &amp; Intervention</td>
<td>18</td>
<td>121</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>105</strong></td>
<td><strong>643</strong></td>
</tr>
</tbody>
</table>

*Table 47: Community Service Distribution, 2007-2009*

Table 48 indicates the service expansion throughout the last years. In fact, when compared to the end of 2006, one notes that there is an increase of 25 persons receiving Community Services from 80 to 105). One may also observe that the weekly hours of service have risen from 600.5 to 643, an increase of 42.5 hours. It is important to remark that throughout the years covered by this report,
efforts were made to redistribute the hours of Community Services within resource limitations. Hence, the service is reaching substantially more persons with no significant upsurge in the number of weekly hours of service provided.

<table>
<thead>
<tr>
<th></th>
<th>2006</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Number of Clients</strong></td>
<td>80</td>
<td>105</td>
</tr>
<tr>
<td><strong>Hours of Service per week</strong></td>
<td>600.5</td>
<td>643</td>
</tr>
</tbody>
</table>

*Table 48: Development of Sapport Community Services, 2006-2009*

In spite of the significant expansion in Community Services over the years, there are still a number of persons who have been approved the service and are still on the waiting list. In fact there are 21 persons waiting to receive a service. Moreover, since it is only the urgent situations that are presented to the Service Allocation Committee (SAC), there is also a waiting list of 46 persons who asked for this service and are awaiting presentation in front of the Committee. Table 49 depicts statistics for waiting lists related to Community Services.

<table>
<thead>
<tr>
<th></th>
<th>End-2009</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Number of persons who have been approved but are still awaiting service</strong></td>
<td>21</td>
</tr>
<tr>
<td><strong>Number of persons awaiting presentation to SAC for Community Services</strong></td>
<td>46</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>67</strong></td>
</tr>
</tbody>
</table>

*Table 49: Waiting lists of the Sapport Community Services, end 2009*

4) Ad Hoc Personal Assistance

The Agency acknowledges its responsibility to assist persons with disability who are travelling abroad for study or leisure purposes, visiting the island, or who are attending training programs and who require personal assistance throughout their stay. Through Community Services, persons with disability receive ad hoc Personal Assistance support wherever this is required allowing
them to participate in educational activities, such as through seminars and continued education, as well as leisure pursuits such as the participation in holiday tours. Such endeavours are considered as average in the life of non-disabled person; thus, it is the right of the person with disability to receive whatever support is necessary to participate in such normalised activities. Throughout the years 2007-2009, at least 24 persons (21 locals and 3 foreigners) benefited from such service.

**Way Forward**

Within the next two years, the Sapport Community Services will endeavour to:

- establish and sign a service agreement with every Community Service user and/or their carers to verify the expectations from such service, of both clients and the Agency
- continue building on its well-established review system whereby persons in receipt of service have the opportunity to provide feedback in a formal manner once every six months
- collaborate with the Agency’s Social Work Service where reviews are concerned in order to widen the scope of such exercise, whereby client needs are also reassessed and the service altered according to changing needs
- strengthen the service back-up system whereby clients who are only assisted by one support worker are encouraged to be open to the idea of training a second person since this would allow for less dependence on one individual and greater continuity of service should the trained person be indisposed
- initiate concept of service to groups of individuals whereby clients who wish come together for a common scope, such as practicing a shared hobby, may have the opportunity to do so
- resource-permitting, address the needs of clients on waiting-list for Community Services, some of whom have been awaiting such service since approval by the Service Allocation Committee in 2005.
Day Services

Performance Review and Analysis

April 2007 marked another milestone for Sapport with the incorporation of the Day Services within its service repertoire. The Day Services, formerly known as Adult Training Centres, previously fell under the Department for the Elderly and Community Care within the then Ministry for the Family and Social Solidarity. However, following the release of government policy to have state services for persons with disability streamlined within one Agency, Sapport was given direction to assimilate the administration of the Day Services within its already vast repertoire. The integration started gradually through the efforts of a change-Manager employed specifically for such purpose. As one would expect, changes can be difficult and arduous both for the authorities implementing them, as well as the persons who are delivering. The years 2007-2009 were marked by active exercises towards this amalgamation and the challenges faced in moving towards harmonisation of principles in service provision.
The Day Services aim to:

- provide support throughout the day for persons with disability who would have completed their schooling, through engagement in meaningful activities
- allow individuals with disability to engage in educational, social and recreational activities through individually-based programmes
- promote clients’ inclusion in the community through their development of independent-living skills
- guide persons with disability towards sheltered or open employment, where possible, depending on the individual’s specific interests and skills.

There are currently 8 Centres fully operated by Sapport: 4 large Centres at Fleur-de-Lys, Hal Far, Marsascala and Mtarfa, and 4 smaller Resource Centres at Cottonera, Mtarfa, Santa Venera, and Swatar. Furthermore, the Agency also administers and runs a 9th Day Centre in Paola, in collaboration with the NGO Physically Handicapped Rehabilitation Fund (PHRF). The latter is the most recent one to open; in fact, it was inaugurated in November 2007, when it started to take in its first service users.

Throughout 2009, one of the smaller Centres based in Pembroke was closed and the clients were relocated to another Centre, due to the fact that it was not proving viable.

At the end of 2009, 401 persons were in receipt of Day Services (Table 50).

<table>
<thead>
<tr>
<th>Large Centres</th>
<th>Resources Centres</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fleur de Lys</td>
<td>68</td>
</tr>
<tr>
<td>Hal Far</td>
<td>82</td>
</tr>
<tr>
<td>M’Scala</td>
<td>61</td>
</tr>
<tr>
<td>Mtarfa</td>
<td>95</td>
</tr>
<tr>
<td>TOTAL</td>
<td>306</td>
</tr>
<tr>
<td>Cottonera</td>
<td>16</td>
</tr>
<tr>
<td>Mtarfa</td>
<td>20</td>
</tr>
<tr>
<td>Paola</td>
<td>23</td>
</tr>
<tr>
<td>St. Venera</td>
<td>19</td>
</tr>
<tr>
<td>Swatar</td>
<td>17</td>
</tr>
<tr>
<td>TOTAL</td>
<td>95</td>
</tr>
</tbody>
</table>

Table 50: Distribution of clients receiving Day Services, end of 2009
The Sapport Day Services are open to adults from the ages of eighteen upwards. They cater mainly for persons coming from the community although persons with disability living in institutions or residential settings may also access such services. As can be seen in Table 51, at the end of 2009, 357 clients attended from the community while another 44 hailed from Institutions and Residential Homes.

<table>
<thead>
<tr>
<th>Centre</th>
<th>Service Users’ Present Dwelling</th>
<th>Community</th>
<th>Institutions &amp; Residential Homes</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fleur de Lys</td>
<td></td>
<td>67</td>
<td>1</td>
<td>68</td>
</tr>
<tr>
<td>Hal Far</td>
<td></td>
<td>80</td>
<td>2</td>
<td>82</td>
</tr>
<tr>
<td>M’Scala</td>
<td></td>
<td>49</td>
<td>12</td>
<td>61</td>
</tr>
<tr>
<td>Mtarfa</td>
<td></td>
<td>80</td>
<td>15</td>
<td>95</td>
</tr>
<tr>
<td>Cottonera</td>
<td></td>
<td>8</td>
<td>8</td>
<td>16</td>
</tr>
<tr>
<td>Mtarfa Resource Centre</td>
<td></td>
<td>18</td>
<td>2</td>
<td>20</td>
</tr>
<tr>
<td>Paola</td>
<td></td>
<td>22</td>
<td>1</td>
<td>23</td>
</tr>
<tr>
<td>St. Venera Blind Centre</td>
<td></td>
<td>17</td>
<td>2</td>
<td>19</td>
</tr>
<tr>
<td>Swatar</td>
<td></td>
<td>16</td>
<td>1</td>
<td>17</td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td>357</td>
<td>44</td>
<td>401</td>
</tr>
</tbody>
</table>

*Table 51: Current residence of clients attending the Sapport Day Services*

As with other services, there are a number of persons waiting to access Day Services. In fact, December 2009 closed with a waiting list of 157 persons (Table 52), some of who are still attending a Special School pending the possibility of benefiting from such service.

<table>
<thead>
<tr>
<th>Persons on Waiting-List</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>87</td>
<td>137</td>
<td>157</td>
</tr>
</tbody>
</table>

*Table 52: Waiting lists for Day Services as at end 2009*
A number of programmes are organised by the Sapport Day Services in order to reach their aim of providing service users with a chance to retain their skills, whilst gaining additional ones, and an opportunity to enhance their social inclusion. Furthermore, these programmes supply clients with an opportunity to spend their time constructively while carrying out meaningful activities that add to their current abilities for independent living and employment.

A description of some of these programmes follows:

- **Literacy & Numeracy Programme**: Three teachers, who are employed through the Education Department, provide their services to Day Centres’ clients. Their services aim to increase the users’ abilities to improve / acquire new literacy and numeracy skills.

- **Pottery Programme**: Clients benefit from this programme on several levels. While all benefit on a therapeutic level, some, and according to individual ability, benefit from the continuous encouragement to explore and enhance their current pottery-making skills.

- **Razzett tal-Óbiberija Programme**: Clients from two Centres attend on a weekly basis and benefit from use of the swimming pool, IT room, gym room, horse riding classes, and the multi-sensory room.

- **Independent Living Skills Programme**: This is aimed at helping clients attain new skills with regards to everyday basic living and includes personal hygiene and house keeping instruction together with social skills lessons that cover training in using public transport and communication skills.

- **Leisure and Cultural Programme**: The organised outings have a social, recreational, educational, and/or cultural focus. These outings are intended to amplify the social inclusion of clients within their respective communities.

- **Information Technology Programme**: This serves to augment the clients’ IT skills while specialised software used helps them visualise the steps of skills being covered in the Independent Living Skills Program. It also affords clients the possibility to become capable of following a step-by-step procedure. Clients who do not have access to a computer outside the Centres are given the opportunity to learn the basics during this programme.
• **Handicrafts Programme:** The support workers sustain the clients’ efforts in the creation of handicrafts. Ganutell, stained glass, woodwork, and card making, to name a few, are some examples. These detailed activities help clients improve their fine motor and eye-hand coordination skills. Such skills are indispensable for living

• **Drama & Music Programmes:** Such creative arts help clients understand, function, and adapt to a team concept. Through repeated participation, clients learn the concepts of cooperation, turn-taking, and compromise

• **Physical Activity Programme:** This aspect is also given priority in the Centres. Clients make use of available gym equipment and are encouraged to partake in daily physical routines to promote a healthy living concept.

The year 2008 saw the introduction of the service of Social Workers in selected Centres. The purpose of such input was to ensure that clients are given adequate support in social issues as well as sufficient confidence to learn self-advocacy. Moreover, the Social Workers review the clients’ situations on a yearly basis to encourage and evaluate their progress, as well as their newly arising needs and wishes. Following review, adjustments in the clients’ Individual Care Plan are made to ensure continuous client growth. Hence,
when clients reach their intended goals, new challenges to stimulate the acquisition of new skills are discussed with them and commitment to their programme is renewed.

**Way Forward**

It is hoped that the future will provide more opportunities for the development of the Day Services mainly in these aspects:

- the consolidation of system of regular Case Reviews for all clients where the person’s Individual Care Plan is reviewed with them and changes made in order to promote development
- the strengthening of the social work input within Day Services with the hope of having such professional expertise spread over all Centres
- the introduction of a Parents’ Committee for Day Services, in every centre, and a new overriding Parents’ Committee with representatives from every Centre
- resource permitting, the strengthening of professional input both quantitatively and qualitatively
- resource permitting, the opening of a new Day Centre for adults with disability which would start to address the extensive waiting list for the service
- resource permitting, the initiation of non-centre-based Day Services within the Community
Residential Services

Performance Review and Analysis

The provision of Residential Services for persons with disability was one of the primary responsibilities given to Sapport. The idea came as a response to the long-standing concerns of parents with regards to the future welfare of their sons/daughters with disability, once they are no longer available or able to support them.

It is a fact that, in Malta, a number of persons with disability continue to live with their natural family, which arrangement serves both housing and support purposes. However, gradually, the complex reality of such living arrangements moved more to the forefront and a number of questions were being asked. Parents of persons with disability who had sole responsibility to support their son/daughter, started to question what was going to become of their child once they are no longer present or when they will not be fit enough to continue providing such support. In other situations, the carers did not have the opportunity to keep on offering such support to their relative for long because of deterioration in their health, physical or mental. Above all, some persons with disability themselves started to voice their wish not to continue being dependent on their family of origin for housing and support; several persons wished to move out and lead a more independent life.

If they are not provided with services to address their right to independent and community living, persons with disability have few alternatives. In fact, a number of persons with disability who required support in their day-to-day lives and whose immediate family was not in a position to provide this support ended up living in institutions such as the mental health hospital or in residences for older persons – dwellings that were far from appropriate or adequate.

Thus, the Sapport Residential Services emerged to start addressing the needs of persons who, either by default or by choice, required alternative living arrangements, where support is also provided according to their requirements.
Sapport provides residential services to a number of persons with disability through six residences based in the community, namely:

1) Fgura apartment (Housing Authority)

The Fgura residence opened in November 2002 whereby it received 3 persons who previously lived with their families. The same residents are still receiving service within this apartment until today. Although initially all 3 residents required intensive support, at the end of December 2009, the support levels of 1 client had registered a slight decrease to intermediate plus.

2) Kirkop apartment (Housing Authority)

The residence in Kirkop opened in February 2003 to house 4 persons with disability. The residents living in it have changed throughout the years, 2 of whom had in fact passed away. At the end of December 2009, 4 persons were residing in this apartment. One of the clients came to reside at Kirkop from Mount Carmel Hospital, 2 previously lived with their families, while the most recently accepted resident moved from Villa Chelsea. The support they require is as follows: 2 necessitate an intermediate level of support while the other 2 need basic support.

3) Villino Maria in Mtarfa

July 2003 marked the opening of this residence. Eight persons were in receipt of service within this house at the end of December 2009, one of whom is benefiting from a particular arrangement whereby his day is shared between Villino Maria and Mount Carmel Hospital in accordance with the client’s needs and wishes. From the total of 8 clients, 6 previously lived, or will be coming out of, Mount Carmel Hospital while another 2 resided with their families in the community. The residents in Villino Maria generally require a high level of support with 2 on an intensive level, 2 on intermediate plus, and another 2 receiving an intermediate level of support. Only 2 of the residents necessitate a basic level of support. The residence can take up to a maximum
of 8 clients; hence, at the end of 2009, it was at its maximum capacity.

4) Vajrita residence in Marsascala

This building comprises two separate residences, with twelve flatlets spread over two floors (six flatlets on each level). The two floors are administered separately.

Vajrita 1 (1st floor) was inaugurated in February 2003 with the first residents moving in throughout April of the same year. The maximum number of residents that it has housed is that of 15; following a restructuring exercise, it can now take up to 14 residents at any point in time. At the end of December 2009, there were 13 persons living in this residence. Unfortunately, the years 2007-2009 saw the passing away of 2 of the clients. Of the 13 service users, 5 were previously institutionalised in Mount Carmel Hospital, 1 formerly resided in a home for the elderly, while 7 lived with their families before moving to Vajrita. With regards to support levels as at end December 2009, 3 persons required intensive support and another 1 intermediate plus, 6 necessitated an intermediate level, while the other 3 needed a basic level of support.

The official opening of the other residence, Vajrita 2 (2nd floor), was held in December 2003 and it received its first residents in the same month. Following a restructuring exercise, the residence can now take up to 12 persons; at the end of December 2009, 9 clients were receiving service in this residence. There were several client movements within this residence. One client unfortunately passed away, while another resident was readmitted to Mount Carmel Hospital by his parent, even if the Agency did not concur with this decision. 2 other clients moved to Dar Andrew in Bormla. In order to fill these vacancies, 3 persons have been identified; 1 has moved in, while another 2 are in transition. When evaluating where the 9 resided before moving to Vajrita 2, it emerges that 2 lived at Mount Carmel Hospital, 1 had been institutionalised at Saint Vincent de Paule Residence, 3 came from Villa Chelsea, 1 had been on long respite at Dar il-Kaptan, while another 2 lived with their
families in the community. Similar to the reality in the other residences, the support levels of clients vary. At the end of December 2009, assessment indicated that 1 required intensive support and 4 intermediate, 2 necessitated basic plus support, while 2 needed just basic levels of assistance.

5) *Dar Andrew* (Housing Authority)

The most recent of the residences of Sapport, this residence can take up to 7 residents with potentially another 2 living in the separate semi-basement apartment. By the end of December 2009, the 7 persons identified to reside in the main residence had completed their transition programmes. 6 of these moved from the community while another 1 came from Mount Carmel Hospital. An evaluation of the support levels that the residents require showed that 2 need intensive support, 1 intermediate plus, and 2 intermediate, 1 needs basic plus and another requires just basic assistance. Such support levels may change on the basis of the continuous assessment carried out, since most of these residents are new to our services.
Sapport has also been given the responsibility by government to administer another thirteen residential placements within Dar Arka and Dar Pirotta. The agreement with the former entity was reached in 2003, while a more recent agreement with the latter organisation was finalised in 2007. Details of the service offered by these two organisations follow:

6) Dar Arka, Ghajnsielem

Since 2003, Sapport administered the provision of residential services to 6 persons within this complex, two of whom would require intensive support, 2 intermediate support, and another two, basic assistance. Throughout the years 2007-2009, 2 residents moved out; these were replaced by another 2 clients. At the end of 2009, all 6 residential placements were occupied. It is positive that for the first time, 1 of the clients receiving Residential Services within Dar Arka is, in fact, Gozitan. The clients residing at Dar Arka came from different dwellings: in fact, 1 moved from Mount Carmel Hospital, 1 from Gozo Hospital, and the other 4 from the community. Moreover, there is a seventh resident at Dar Arka who is also followed by the Agency, but who is funded through separate funding since he is a minor on Care Order requiring intensive support.

7) Dar Pirotta, Birkirkara

2007 witnessed the finalisation of the agreement with Dar Pirotta, which contract was based on conditions similar to those stipulated in the agreement with Dar Arka.

Sapport was again given the responsibility of identifying the clients to benefit from the service and formalise procedure for utilisation of such programme. 7 beneficiaries were identified, which clients moved into Dar Pirotta throughout the same year. 1 of these residents passed away throughout 2008; hence, another person was identified to fill in this vacancy. At the end of December 2009, all 7 placements were filled. Service users came mainly from the community; however, there was 1 person who moved from Dar il-Kaptan and another 1 who previously resided...
at Jeanne Antide Home for minors. Clients are funded depending on the level of support that they require. 2 of the residents at *Dar Pirotta* need intensive levels of support, 2 intermediate plus and another 1 intermediate, while 1 necessitates basic plus support, and 1 basic support.

<table>
<thead>
<tr>
<th>Residence</th>
<th>Intensive</th>
<th>Intermediate Plus</th>
<th>Intermediate</th>
<th>Basic Plus</th>
<th>Basic</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fgura Apartment</td>
<td>2</td>
<td>1</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>3</td>
</tr>
<tr>
<td>Kirkop Apartment</td>
<td>-</td>
<td>-</td>
<td>2</td>
<td>-</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>Villino Maria</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>-</td>
<td>2</td>
<td>8</td>
</tr>
<tr>
<td>Vajrta 1</td>
<td>3</td>
<td>1</td>
<td>6</td>
<td>-</td>
<td>3</td>
<td>13</td>
</tr>
<tr>
<td>Vajrta 2</td>
<td>1</td>
<td>-</td>
<td>4</td>
<td>2</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td>Dar Andrew</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>7</td>
</tr>
<tr>
<td>Dar Arka*</td>
<td>3</td>
<td>-</td>
<td>2</td>
<td>-</td>
<td>2</td>
<td>7</td>
</tr>
<tr>
<td>Dar Pirotta*</td>
<td>2</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>7</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>15</strong></td>
<td><strong>7</strong></td>
<td><strong>19</strong></td>
<td><strong>4</strong></td>
<td><strong>13</strong></td>
<td><strong>58</strong></td>
</tr>
</tbody>
</table>

*Table 53: Support levels required by residents & clients in transition, 2007-2008

* These programmes are not financed through Sapport’s budget
When comparing the number of clients who were receiving Sapport’s Residential Services at the end of 2006 with those of 2009, one notes an increase of 11 individuals. In fact, the number of Residential Services’ clients has risen from 47 to 58. This increase is considered substantial and is due to the new agreement with Dar Pirotta and the opening of the latest residence Dar Andrew.

Table 54: Sapport residents’ previous dwelling
* These programmes are not financed through Sapport’s budget
When looking at the daytime activities of clients living in Sapport residences, one notes that:

• 1 client has a full-time job with a local private company
• 23 persons receive Day Services through Sapport in one of its Day Centres (4 at Ħal Far, 4 at the larger centre in Mtarfa, and 1 in the Mtarfa Resource Centre, 6 at Aċċess in Birgu, 7 at M’Scala and 1 in Swatar)
• 4 are on a waiting list for Day Services
• 2 clients attend a Special School
• 1 attends a programme at Eden Foundation.

Apart from the ones identified above, there are a number of clients who have a programme which includes involvement in both household activities as well as pursuits in the community. It is the aim of Sapport that clients benefit from improved quality of life also by choosing their daily activities according to their needs and wishes and that persons learn new skills through their involvement in the residence and in the community. Such programmes include the learning of activities of daily living such as hygiene, doing the laundry and cleaning, development of communication and social skills, participation in therapeutic activities, whether physical or psychological, as well as involvement in sports and leisure and the pursuit of hobbies.

All Sapport residences are staffed 24-hours a day with support being provided by Support Workers to clients according to their individual programmes, which are based on their unique needs and wishes.

With respect to waiting lists for Residential Services (Table 55), at end of December 2009 there were 23 persons who have been approved such service by the Service Allocation Committee (SAC) and are still awaiting allocation. Another 69 were still waiting to be presented to the Committee.
Table 55: Waiting lists of the Sapport Residential Services, end 2009

Way Forward

Plans related to the Sapport Residential Services for the years 2010-2011 include:

- the completion of transition programmes for persons who are in the process of moving into one of the residences of Sapport
- the filling-in of the rest of the vacancies through the identification of persons who are of utmost priority to benefit from such service provided that there is a match between the person’s needs and the residence where the vacancy has arisen
- the improvement in formulation and implementation of individualised programmes for clients which would ascertain that service provision is more in line with its mission, that of being needs-led
- resource permitting, the strengthening of professional input both quantitatively and qualitatively
- resource permitting, the initiation of Residential Services for Minors with Disability who are at Risk within the Birzebbugia Apartments allocated to Sapport by the Housing Authority
- the resumption of discussions regarding Mount Carmel Hospital Joint Funding Project for the reintegration of fifteen patients living at MCH back into the community
- resource-permitting, the provision of Residential Services to clients on waiting list, some of whom have been awaiting such service since approval by the Service Allocation Committee in 2003.
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Resource Services

Performance Review and Analysis

Sapport strives to assist persons in an individualised manner in order to allow every client to have a vision for their lives and work towards their aspirations while ensuring the best quality of life. With such purpose in mind, the Agency had established the Resource Services which are provided by a team consisting of Leaders and Professional Support Workers who are all graduates from a variety of backgrounds, mostly Psychology and Social Work. The responsibilities of this team are several and include the following:

a) leading and administering the Residential and Community Services while ensuring that the mission and vision of the Agency are being achieved and that clients’ aspirations are reached

b) drawing up individualised programmes for clients with a particular responsibility for those utilising the Agency’s Residential and Community Services.

An important aspect of Sapport’s vision is that of having a Person Centred Plan for each and every client who is assisted by the Agency. Such programme is based on the person’s unique skills, needs and wishes, always within the limits of Agency resources. The aim is for the person to be living a fruitful and active life in they way that they wish. Client Programmes vary and include the various aspects of a person’s life and development such as educational, social, spiritual, psychological and emotional development as well as aspects related to work, independent living, developing healthy relationships, leisure, budgeting, as well as health issues. As far as possible, the Programmes address the person holistically in their totality.
The following are some examples of Programmes that have been devised and implemented with service users:

- **Independent Living Skills**: clients are taught skills to become more independent in their Activities of Daily Living, such as through learning personal hygiene, household chores, doing necessary errands as well as budgeting skills to be able to carry out their shopping.

- **Seeking & Retaining Employment**: clients who wish to engage in employment are encouraged to reflect more on their aspiration and are assisted in the process of registering with the Employment and Training Corporation and also to participate in any courses that would facilitate their process into employment. Moreover, if they become gainfully employed, they are given the necessary support to retain employment and ameliorate their skills as workers.

- **Health and Physical Activity**: clients are encouraged to be active and participate in physical exercise such as walking and swimming, or attendance at a gym, always in accordance with their skills and abilities. Throughout the years under review, one of the Resource Team members developed an Exercise Programme for clients interested to participate. The gym of Dar San Guzepp in Santa Venera was utilised for this purpose. The sessions ran for a whole year and proved very successful and fruitful with participants.

- **Participation in Exchange Programmes**: clients who wish to travel abroad, both through participation in an exchange programme or on an individual tour, are given the necessary support to entertain such dream.

- **Communication and Relationship Skills**: clients who wish to enhance their skills in communication and in building relationships are supported to engage in courses where they would learn more about themselves and develop skills in speaking for themselves.

- **Leisure and Socialisation**: clients who enjoy going out and socialising benefit from the organisation of outings that are coordinated in accordance with their interests.

c) provide On-Call Service with the responsibility of giving 24 hour support daily to Community and Residential Services. Through this essential Service, Support Workers
who will be on duty in the Agency’s Residences or with Community Services clients would be able to consult with a professional worker from the Resource Team in cases of difficulty or emergency. In fact, Resource Team members provide such service on a roster basis. The professional may even need to report on-site to provide direct assistance, if necessary.

**Way Forward**

The Resource Team recognises its responsibility to continue developing its services and visualises efforts on the following levels:

- consolidate its client programme review system whereby persons in receipt of service have their personalised care plan reviewed once every six months, or whenever requested by the client
- initiate group sessions for clients who wish to entertain a common interest. Such idea would be based on the success that was seen with the Exercise Programme mentioned above and would provide a diversity of outlets for clients receiving any of the other services of the Agency, as well as others who may not yet be in touch with the Agency
- facilitate team building exercises for the different teams of the Agency with the aim of promoting healthier team relations across the board
- continue to build on the already-solid staff induction and training programme whereby members of the Resource Team assist potential staff members in their observation period whereby the potential recruits learn what the typical work of a Support Worker. Resource Team members assess the work of candidates, especially throughout their training and probation
- develop a more structured staff training programme for Support Workers of different teams as well as a plan for timely performance appraisals of all Support Workers.
Human Resources and Training

1) Employees within Agenzija Sapport

At the end of December 2009, the Agency had a staff compliment of 336 employees categorised as follows:

<table>
<thead>
<tr>
<th>Role</th>
<th>Full-time</th>
<th>Full-time reduced hours</th>
<th>Part-time</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Management</td>
<td>4</td>
<td>-</td>
<td>-</td>
<td>4</td>
</tr>
<tr>
<td>Executives</td>
<td>2</td>
<td>-</td>
<td>-</td>
<td>2</td>
</tr>
<tr>
<td>Administration</td>
<td>11</td>
<td>1</td>
<td>-</td>
<td>12</td>
</tr>
<tr>
<td>Leaders</td>
<td>13</td>
<td>-</td>
<td>-</td>
<td>13</td>
</tr>
<tr>
<td>Coordinators</td>
<td>10</td>
<td>-</td>
<td>-</td>
<td>10</td>
</tr>
<tr>
<td>Social Workers</td>
<td>9</td>
<td>1</td>
<td>1</td>
<td>11</td>
</tr>
<tr>
<td>Professional Support Workers</td>
<td>11</td>
<td>-</td>
<td>-</td>
<td>11</td>
</tr>
<tr>
<td>Support Workers</td>
<td>173</td>
<td>3</td>
<td>63</td>
<td>239</td>
</tr>
<tr>
<td>Maintenance / Drivers / General Hands etc</td>
<td>20</td>
<td>1</td>
<td>2</td>
<td>23</td>
</tr>
<tr>
<td>Staff on maternity or parental leave</td>
<td>11</td>
<td>-</td>
<td>-</td>
<td>11</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>264</strong></td>
<td><strong>6</strong></td>
<td><strong>66</strong></td>
<td><strong>336</strong></td>
</tr>
</tbody>
</table>

*Table 56: Sapport Human Resources as at end December 2009*
2) Staff Training

In order to guarantee the highest level of service to its clients, the Agency gives importance to staff training on both a formal and an informal hands-on level. Staff members benefit from training that is provided by the Agency directly as well as through their participation in training organised by entities locally and internationally.

Staff training provided by the Agency assists employees to:

- understand Sapport’s philosophy and values to ensure that all staff members move in the same direction, towards a unified vision
- develop skills in their direct work with clients, particularly persons with challenging behaviour and those who may have complex medical needs
- build on their abilities to anticipate potential crises situations and be able to diffuse them, as well as to intervene in such situations when they escalate
- learn appropriate and professional methods of administration of medication
- ensure that clients are not victimised and are protected from any form of abuse
- advance the skills related to their specific role
- extend their abilities in teamwork and team building
- comprehend Sapport policies and procedures such that all employees abide by such directions and reach Agency expectations.

As has been mentioned above, workers also have the opportunity to attend seminars and programmes organised by other entities in order to progress in their process of professional and personal development. It is important to mention that throughout 2007, all frontline workers within Day Services engaged in a staff audit which also led to a training needs analysis of these employees.
Staff training throughout 2007-2009 included:

- Alternative and Augmentative Communication and Dysphagia Workshops
- *Autism Matters at Work* – Non-Violent Crises Prevention Intervention Seminar
- Autistic Spectrum Disorder Refresher Course
- Conferences for Leonardo Mobility Project EU-Funded Training Bursaries
- Conference in Social Inclusion
- Conference on *Work as a Right for Disabled Persons*
- Enhancing Support Worker / Care Worker Skills
- EU Funding Training Programme by MEUSAC
- Euro Change-over Training
- Eurochild Annual Conference
- Fire-Fighting Courses
- First Aid Training
- Food Handling Courses
- Information Session about the BOSTED Case Management System
- Keyword Signing Workshop
- Malta Association for the Counselling Profession (MACP) Training Week
- Moving and Handling Courses
- Non-Violent Crisis Prevention and Intervention Training & Refreshers (imparts strategies in working with persons with challenging behaviour)
- Non-Violent Crisis Prevention and Intervention Instruction (four Sapport employees successfully completed a train-the-trainers course provided in Malta by CPI International)
- Payroll Software Training Course
- Performance Appraisal Training
- Preparing and Handling Opportunities for Employment: saying “No” to Isolation and Xenophobia – PHOENIX Conference
- Project Management Information Session
- Psycho-Educational Course on Mental Health Issues
- Recent Research in the Development and Education of Children with Down Syndrome
- S.A.F.E. Programme for Middle Management
- Seminar on Being a Down-to-Earth Professional
- Seminar on Diversity
Foundation
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- Seminar on Health and Nutrition
- Seminar on Mental Health Issues Related to Adolescents
- Seminar on Understanding Schizophrenia
- SENSE Training
- Staff Development Days
- Staff Development Organisation Training on Basic Computer Skills
- Staff Development Organisation Training on Presentation Skills
- Supporting Individuals with Autistic Spectrum Disorder
- Talks on Epilepsy
- Team Building
- Train the Trainers - Training to run Parenting Skills Courses for Parents of Children with ADHD
- Train the Trainers Mosaic – One in Diversity
- Training in FSWS & Sapport Policies and Procedures
- Training in giving effective Supervision
- Training in Sign Language
- Training on Augmentative and Alternative Means of Communication
- Training on Benefits and Services for Persons with Disability
- Training on Person-Centred Planning
- Training Seminar on Human Trafficking – International Organisation for Migration
- Unit Days in various Agency Units
- Using Emotional Intelligence At Work for Senior Managers
- Women Against Violence Europe – Train the Trainers Seminar
- Working with Seriously Physically Ill People Workshop

The Agency, with the assistance of the Human Resource and Training Offices within the FSWS works to identify any international programme opportunities for training aboard that staff may benefit from to attain direct experience of similar and diverse services while exposing themselves.

Sapport also participated and contributed to various conferences and seminars. Moreover, it continued to encourage involvement in schemes such as Youth Exchange Programmes through the participation of a number of persons with disability and their assistants.
in programmes held in Britain and Germany. Such opportunities allow persons with disability to broaden their horizons and share experiences while exposing themselves to cultural, educational, vocational, recreational and social programmes with persons with disability from different countries. Table 57 depicts participation in programmes abroad for both training and exchange purposes.

<table>
<thead>
<tr>
<th>Programme</th>
<th>Country</th>
<th>Date</th>
<th>Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coultour Project – World not known enough. European Movement for diversity and understanding Caravam 2000</td>
<td>Gdansk, Poland</td>
<td>May 2007</td>
<td>5 persons with disability &amp; 3 employees</td>
</tr>
<tr>
<td>Empowerment in Action for Young Europeans with Intellectual Disability Youth Exchange Programme (Action 1)</td>
<td>Sheffield, England</td>
<td>June 2007</td>
<td>1 youth with disability &amp; 1 employee</td>
</tr>
<tr>
<td>Empowerment in Action for Young Europeans with Intellectual Disability Youth Exchange Programme (Action 1)</td>
<td>Sheffield, England</td>
<td>Sept 2007</td>
<td>7 youths with disability &amp; 3 employees</td>
</tr>
<tr>
<td>Empowerment in Action for Young Europeans with Intellectual Disability Youth Exchange Programme (Action 1)</td>
<td>Germany</td>
<td>June 2008</td>
<td>1 youth with disability &amp; 1 employee</td>
</tr>
<tr>
<td>Empowerment in Action for Young Europeans with Intellectual Disability Youth Exchange Programme (Action 1)</td>
<td>Germany</td>
<td>Sept 2008</td>
<td>7 youths with disability &amp; 3 employees</td>
</tr>
</tbody>
</table>
Table 57: International Programmes participated in by staff and persons with disability, 2007-2009

An essential point is that the above training on both a local and international level, is provided over-and-above other routine opportunities for staff development such as that of supervision held once monthly, or according to need, and regular staff meetings that take place on a weekly or fortnightly basis.
Way Forward

Aġenzija Sapport believes that its strength lies in its ability to continue to develop and evolve, and to address the new challenges arising within the disability sector. On these lines, throughout the next two years the Agency aims to:

• Secure the necessary financial resources in order to sustain its service provision and address more clients in need of its services
• Administer and maximise its Capital Fund, thus utilising it to its maximum, while also exploring alternative means and sources to supplement this fund
• Improve qualitative support levels by continuing to assist the FSWS Human Resources Office in the recruitment, selection and development process of paid and unpaid staff, guaranteeing that they have the relevant values, skills, knowledge and competencies to support service delivery to clients
• Strengthen the professional input quantitatively and qualitatively to realise optimal service standards
• Procure larger centralised premises to bring together the different sections of Sapport within one building
• Initiate the refurbishment and furnishing of the premises identified for the provision of residential services to minors with disability who are at risk and, resource-permitting, commence service provision
• Secure additional funding to address waiting lists for Social Work, Community, Day and Residential Services
• Implement Agency’s volunteers strategy
• Resume discussions regarding Mount Carmel Hospital Joint Funding Project for the reintegration of fifteen patients living at MCH back into the community
• Continue to secure any opportunities within EU initiatives and funding that can be of benefit to clients, employees and the Agency as a whole.
Finance

Over the years, the demand for the services given by the 3 Agencies within the Foundation for Social Welfare Services has been always on the increase. Also, the Agencies have become more dynamic and hence have increased and modified the services according to the demands caused by the social environment.

1) Budgets

To be able to cope with these changes, the Agencies required further funding by the government, which increased over the years as shown in the Figure 96.

The subventions shown above were always utilised in the best way possible to maximise the quality of the service given to our clients. In most cases, this is only achievable through a high number of professional employees and in a number of instances, the delicate and complicated cases would require one-to-one sessions; in some instances round the clock individual attention is also required. This, with an always increasing wage bill, makes the payroll cost across the Foundation the highest cost element.
This can be seen from the Figures below, where one can immediately notice that in the case of Aġenzija Appoġġ, payroll cost is on average five times as much as the cost of recurrent expenditure. In the case of Aġenzija Sedqa and Aġenzija Sapport, the payroll cost averages at three times as much as recurrent expenditure.

Whilst Figure 96 is illustrating the split between the Recurrent Expenditure and the Payroll Cost by Agency in 2007, Figure 97 is depicting the costs percentage when the three Agencies are combined for the same year.
Once again, Figure 98 is highlighting the fact that Aġenzija Appoġġ is by far more expensive to operate than the other Agencies.

Figure 99 below illustrates the split between the recurrent cost and the payroll cost by Agency for 2008. Figure 99 also shows a hefty shift in costs. The addition of the Day Centres for Persons with Disability within the Foundation’s remit has increased both the payroll costs and the recurrent expenditure of Aġenzija Sapplor, which undertook the responsibility of the Day Services. As a result of this, some of the employees which were on the books of Aġenzija Appoġġ, but were actually working for the Day Services, were transferred to Aġenzija Sapplor, causing the shift in the payroll cost from one Agency to another.

The consolidated recurrent costs and payroll costs of all three Agencies for 2008 are depicted in Figure 100, showing that the biggest portions go towards supporting the payroll cost of Foundation staff.
2) Cost per Client
Table 58 below, is highlighting and summarising the cost per service given by each Agency. As already mentioned above, the cost varies a lot between one service and another. This is also highly dependent on the number of persons receiving the service at each residence, especially in the case of Ażenzija Sedqa and Ażenzija Sapport.
The cost per client at Aġenzija Appoġġ varies a lot between one service and another. This is due to the fact that the number of persons making use of the Agency’s services varies together with type of intervention and professionals giving they service. In cases of services with a high number of service users, this results in a lower unit cost per client.

Table 58: Cost per client for Aġenzija Appoġġ, 2008

<table>
<thead>
<tr>
<th>Service Provided</th>
<th>Cost per case / client</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cottonera Community Service</td>
<td>525</td>
</tr>
<tr>
<td>Child Protection Service</td>
<td>392</td>
</tr>
<tr>
<td>Domestic Violence Unit</td>
<td>227</td>
</tr>
<tr>
<td>Family Therapy Service</td>
<td>1,456</td>
</tr>
<tr>
<td>Fostering</td>
<td>1,642</td>
</tr>
<tr>
<td>Għabex</td>
<td>3,263</td>
</tr>
<tr>
<td>Initial Response Service</td>
<td>172</td>
</tr>
<tr>
<td>Looked After Children</td>
<td>1,088</td>
</tr>
<tr>
<td>Psychological Services</td>
<td>272</td>
</tr>
<tr>
<td>Smartkids</td>
<td>4,881</td>
</tr>
<tr>
<td>Supportline 179</td>
<td>5</td>
</tr>
<tr>
<td>Youth Outreach</td>
<td>2,004</td>
</tr>
</tbody>
</table>

Table 58: Cost per client for Aġenzija Appoġġ, 2008
Table 59 above is showing that the residential programmes of Aġenzija Sedqa are clearly the most expensive of all the services provided by the Agency. The most expensive service is that being offered by Żerniq (Sedqa’s Alcohol Residential Programme) which reaches the 50% mark of the total cost of all the services. Next in line are Dar Impenn (Sedqa Detox In-Patient Service) and Komunità Santa Marija (Sedqa Drugs Residential Programme) which amount to 20.7% and 9.6% of the total cost of all the services respectively.

<table>
<thead>
<tr>
<th>Service Provided</th>
<th>Cost per annum per service user €</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol Community Services</td>
<td>1,557</td>
</tr>
<tr>
<td>Drugs Community Services</td>
<td>553</td>
</tr>
<tr>
<td>Detox Centre</td>
<td>448</td>
</tr>
<tr>
<td>Family Services</td>
<td>1,945</td>
</tr>
<tr>
<td>Dar Impenn</td>
<td>8,825</td>
</tr>
<tr>
<td>Komunità Santa Marija</td>
<td>4,100</td>
</tr>
<tr>
<td>Psychological Services</td>
<td>1,187</td>
</tr>
<tr>
<td>Teen Support Services</td>
<td>2,571</td>
</tr>
<tr>
<td>Żerniq</td>
<td>21,391</td>
</tr>
</tbody>
</table>

*Table 59: Cost per client for Aġenzija Sedqa, 2008*
Day Services for persons with disability

<table>
<thead>
<tr>
<th>Location</th>
<th>Cost per client €</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vittoriosa</td>
<td>8,054</td>
</tr>
<tr>
<td>Fleur de Lys</td>
<td>10,319</td>
</tr>
<tr>
<td>Hal Far</td>
<td>9,409</td>
</tr>
<tr>
<td>M’Sala</td>
<td>9,285</td>
</tr>
<tr>
<td>Mtarfa Centre</td>
<td>10,614</td>
</tr>
<tr>
<td>Mtarfa Resource</td>
<td>5,710</td>
</tr>
<tr>
<td>Pembroke</td>
<td>8,541</td>
</tr>
<tr>
<td>Paola</td>
<td>4,230</td>
</tr>
<tr>
<td>St. Venera</td>
<td>8,446</td>
</tr>
<tr>
<td>Swatar</td>
<td>7,540</td>
</tr>
</tbody>
</table>

*Table 60: Cost per client for Aġenzija Sapport Day Services, 2008*

Table 60 above lists the cost per client of the Sapport Day Services for Persons with Disability. The number of service users at these Centres varies from 13 at Pembroke to 96 at the Mtarfa Centre. This shows that the cost element at these Centres is rather fixed in nature.

<table>
<thead>
<tr>
<th>Service</th>
<th>Annual Cost per client €</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fgura</td>
<td>48,821</td>
</tr>
<tr>
<td>Kirkop</td>
<td>43,726</td>
</tr>
<tr>
<td>Mtarfa</td>
<td>54,806</td>
</tr>
<tr>
<td>Varjita 1</td>
<td>23,756</td>
</tr>
<tr>
<td>Varjita 2</td>
<td>23,802</td>
</tr>
<tr>
<td>Cospicua</td>
<td>46,074</td>
</tr>
<tr>
<td>Community Service</td>
<td>2,528</td>
</tr>
<tr>
<td>Social Work Service</td>
<td>1,473</td>
</tr>
</tbody>
</table>

*Table 61: Cost per client for Aġenzija Sapport Residential Services, Community Services and Social Work Service, 2008*
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Cost per client for the Sappor residences, Community Services and Social Work Service are listed in Table 61 above. Costs here are exorbitant. This is due to the high support service that is required by these clients; in most of the residential homes operated by the Agency, most clients generally require one-to-one support.

The Foundation for Social Welfare Services has thrived during the past years to find a balance between the provision of quality service and the limited financial resources, always ensuring the best interest of the client.
Foundation
Social Welfare Services
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