Foundation for Social Welfare
Services Report 2010 - 2011
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List of Abbreviations

ADHD Attention Deficit Hyperactivity Disorder
AGCT Alcohol & Gambling Community team
AIDS Acquired Immune Deficiency Syndrome
CCF Corradino Correctional Facility
CCS Cottonera Community Services
CPI Crisis Prevention Intervention
CPS Child Protection Service
DCT Drugs & Court Community Services
DV Domestic Violence
DVS Domestic Violence Services
DVU Domestic Violence Unit
E4L Embark for Life
EMCDDA European Monitoring Centre for Drugs & Drug Addiction
ESF European Social Fund
ESP Employee Support Programme
ESPAD European School Survey Project on Alcohol & other Drugs
ETC Employment & Training Corporation
EU European Union
EUPA European Union Programme Agency
EY2010 European Year for Combating Poverty & Social Exclusion
FES Foundation for Educational Services
FESAT The European Foundation for Drug Helplines
(Fondation Européenne des Services D'Aide Téléphonique Drogues)
FOI Freedom of Information
FSWS Foundation for Social Welfare Services
Hep B Hepatitis B
Hep C Hepatitis C
HIV       Human Immunodeficiency Virus
HSS       High Support Service
ICT       Information & Communication Technology
IHRMS     Integrated Hotline Reporting management System
IMU       Information management Unit
INHOPE    Association of Internet Hotline Providers
IRS       Initial Response Service
ISP       Individual Support Plan
KNPD      Kummissjoni Nazzjonali Persuni b’Diżabilità
KSM       Komunità Santa Marija
LAC       Looked After Children Service
LGBT      Lesbian, Gay, Bisexual, & Transgender
MCA       Malta Communications Authority
MDH       Mater Dei Hospital
MOU       Memorandum of Understanding
NCPE      National Commission for the Promotion of Equality
NGO       Non-Governmental Organisation
PAHRO     Public Administration Human Resources Office
PAP       Prospective Adoptive Parent/s
PHRF      Physically Handicapped Rehabilitation Fund
PR        Public Relations
PSD       Personal & Social Development
PTA       Parent-Teacher Association
PUD       Programm Ulied Darna
S.A.F.E.  Substance Abuse Free Employees
SAC       Service Allocation Committee
SAL       Service Area Leader
SAV       Supervised Access Visits
SMOPU     Substance Misuse Out-patients Unit
STARR     Strengthening Transnational Approaches to Reducing Re-offending
<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tr>
<td>SVPR</td>
<td>Saint Vincent de Paul Residence</td>
</tr>
<tr>
<td>T.F.A.L.</td>
<td>Tfal Favur Ambjent Liberu</td>
</tr>
<tr>
<td>UHM</td>
<td>Union Ħaddiema Magħqudin</td>
</tr>
<tr>
<td>UN</td>
<td>United Nations</td>
</tr>
<tr>
<td>UNAIDS</td>
<td>Joint United Nations Programme on HIV / AIDS</td>
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<td>UNICEF</td>
<td>United Nations International Children’s Emergency Fund</td>
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<tr>
<td>VCS</td>
<td>Valletta Community Services</td>
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<tr>
<td>WHO</td>
<td>World Health Organisation</td>
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<td>YIF</td>
<td>Youth in Focus Service</td>
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Message from the Chief Executive Officer, Foundation for Social Welfare Services

Persons in need and in vulnerable situations not only fall within the responsibility of social services but also that of society and its citizens: a society that nowadays understands that vulnerable persons should have the opportunity to integrate themselves and be active within their own community. This was one of the main goals of the Foundation for Social Welfare Services during the period under review. The Foundation, through its Agencies Appoġġ, Sapport and Sedqa, carried out various projects, services and advocated for developments and changes in legislations and policies related to the safeguarding of an inclusive society.

The Foundation for Social Welfare Services continued working towards achieving its mission by giving priority to those mostly in need, in order to help individuals and/or groups fit within society in a way that they are accepted and integrated without the need of being excessively dependent on the State. This was done thanks to the commitment of all employees, who despite the limited resources available, contributed with dedication and enthusiasm. The Foundation surely cannot reach its targets without the work of its members of staff. This report in fact provides clear evidence of the work carried out by the Foundation’s employees throughout 2010 and 2011, which left a difference in these person’s lives and society as a whole. It is also important to acknowledge various entities that team up with the Foundation on a regular
basis, thus providing an extension to the services we provide in a collaborative manner.

In the period before the years reviewed in this report, the Foundation identified various challenges that were addressed and dealt with seriously. To start with, we felt the need for more awareness about the fact that vulnerable persons can contribute towards society and the importance of discarding the mentality that the State is fully responsible to provide for these persons. Even though the integration of vulnerable persons has long been discussed, more awareness was needed on how vulnerable persons can be integrated in a practical way into the labour market. *Embark for Life* and *Me2* are two projects that were implemented during the period covered by this report which reflected this vision. Both where co-financed by the European Social Fund and assisted vulnerable young people and persons with disability respectively, to integrate themselves within the labour market. This not only served as an investment towards the country’s economy but also helped beneficiaries feel valuable and to improve their work opportunities through training and job experiences. Even though these projects did not solve all economic problems, they created a practical model of how vulnerable persons can, in practice, be included in the labour market. Thanks to the *Me2* project, a cooperative was also set up where persons with disability, their families, and carers experienced in the sector, are working together on an equal basis to generate more work opportunities for persons with disability.

In past years and previous reports, the need of more services within the community was also already highlighted. The Foundation thus emphasised on this, and during the period under review, continued investing in its community services. These provided support to persons, groups and families facing various difficulties to find the necessary support. This was possible since services are easy to access and offered in a professional and dedicated manner. It is also important to acknowledge the input of a good number of
volunteers – thanks to their input, the services reach many children and families. The Foundation invests in and facilitates voluntary work, which is an important and useful resource in today’s society. During the period covered by this report, over 260 volunteers have contributed towards the services offered by Aġenzija Appoġġ, Aġenzija Sapport and Aġenzija Sedqa within the Foundation for Social Welfare Services. To commemorate the European Year for Volunteers in 2011 and also to thank these volunteers for their dedication, the Foundation organised an activity where all volunteers had an opportunity to meet and share their experiences.

The Foundation is also giving due attention to families and children, and their protection. This is being done not only through the provision of services that safeguard families’ and children’s rights, but also through initiatives that promote positive parenting. In fact, during the period under review, various campaigns on positive parenting were organised. These included discussions on TV and radio stations, printing and dissemination of informative material, and articles on newspapers, amongst others. Other initiatives included Parenting Skills Courses – Inrabbu ’l Uliedna Ħjar – organised by Aġenzija Sedqa. It is worth mentioning that during the period under review, this Agency coordinated 37 parental skills courses, reaching more than 670 parents. On the same note, in 2011 a Social Worker from Aġenzija Appoġġ attended training in Lithuania on family workshops, with the aim that the Agency also starts offering this service. These family workshops provide practical support and skills to families who find themselves in difficulties in the upbringing of their children. These can also be of help for the family by empowering the parents to develop skills to overcome their difficulties. This serves as another way how to avoid family breakdowns and the risk of having children living away from their natural parents. It is satisfying to note that these family workshops were welcomed positively and are providing vulnerable families with the opportunity to regain control of their lives.
Keeping on the same lines, I cannot not mention those children who for some reason or another, it is not in their best interest to continue living with their natural families and thus fall under the responsibility of the State. While some of these children are lucky enough to have been found a foster family, such possibility is not always an option for all children. There are various reasons for this, including lack of foster carers, difficult behaviour resulting from the traumas they would have been through, disability, and also cases where the biological parents would be finding it difficult to accept that it is in their children’s best interest if, at least for a while, they live with another family. For this reason during these two years, Aġenzija Appoġġ launched a new service – the Out-of-Home-Care Programme – which works with children who cannot live with their natural family and for whom, for one reason or another, an alternative family is not found. The Out-of-Home Care Programme promotes *specialised foster care*, with the main aim to find families for children with various difficulties. It is also the aim of the Out-of-Home Care Programme to identify children who can benefit from an adoptive family, even if their biological parents for some reason would be finding it difficult to understand that their children would benefit more if they are adopted.

Another challenge which the Foundation faced was that of increasing the accessibility to professional services available to children and young people in difficulty. Nowadays most young people use various technological media to communicate. Thus the Foundation did its utmost to use these methods of communication in a positive way, so that children and adolescents express their opinions and problems in a safe way. Together with the Salesian Community in Malta, SOS Malta and Aġenzija Żgħażagh, Kellimni.com was launched. Thanks to this website, children and adolescents have the opportunity to voice problems they are facing. This way, they reach the right professionals who run this service, who in turn can refer them to more specialised services.
As I have already mentioned, the internet provides various ways and levels of communication. However it also offers challenges which might be of risk to children and young people. Thus, we continued to build on the project Safer Internet Plus – Stop Child Abuse over the Internet which came to an end in 2008. Another application was submitted for EU funds, which allowed us to continue building on this service. This new project – Besmartonline! –creates awareness amongst children, young people, and also parents who make use of the internet to communicate with other persons online. It is in everyone’s interest to protect minors from any type of online abuse. Just like the project Safer internet Plus, Besmartonline! continued developing an online reporting system for victims and also continued collaborating with the Cyber Crime Unit within the Malta Police Force. This project is being led by the Malta Communications Authority.

Services aimed at young people also went through a period of change. This helped to improve service provision and make it more efficient. Whilst Aġenzija Appoġġ was providing the Youth Outreach Service for young people with various difficulties, Aġenzija Sedqa was offering another service – Teen Support Service – for young people with a substance abuse problem. During the period covered by this report, these two services where amalgamated into one service, Youth in Focus. As a result of this restructuring exercise, resources are now being utilised more efficiently and effectively. Thanks to this new service, those young persons experimenting with drugs which were previously being referred to a specialised service aimed at persons with a substance abuse problem are now being professionally followed before they actually develop an addiction. At the same time, other difficulties and needs, such as emotional and behavioural problems, are also being addressed. It is important to note that the services need to reflect the value of integration. The Foundation within its own systems has the responsibility that the services it offers do not discriminate or label its service users, especially in cases where minors would have to bear this stigma for the rest of their lives. The fact that
the Foundation incorporates three agencies makes these internal changes possible and thus it serves as a way how to make best use of resources, especially human resources, in the most efficient way.

I also need to recognise several developments in the addiction field. In August 2010, the substance Mephedrone, also known as *Meow Meow*, was listed as an illegal substance. The law which regulates the sale of alcohol was amended in June 2011 and now prohibits such sale from confectioneries after 9pm. Aġenzija Sedqa also welcomed the amendments proposed to the Criminal Code related to drug abuse, which amendments state that drug possession and trafficking should be treated differently. The setting up of a Drugs Court was also proposed, with the aim to facilitate sittings related to drug abuse. These measures helped Aġenzija Sedqa to continue developing the work it carries out. In addition, in June 2010 the Agency opened the new premises for *Dar l-Impenn*, which can now accommodate up to 9 clients at a time. *Dar l-Impenn* offers an intensive residential detoxification programme from drugs and/or alcohol, as well as provides monitoring and supervision to persons with a substance abuse problem according to their needs. This service, which operates on a 24-hour basis, is run by professional staff, including Care Workers and Nurses, and also provides medical and psychiatric support as the need arises. Throughout their stay at *Dar l-Impenn*, clients are also followed by a Social Worker.

Another objective for the Foundation between 2010 and 2011 was to continue safeguarding the interest of persons with disability and improve the services addressed to them. Ten years have passed since Aġenzija Sapport was set up. During this period, the Agency’s head office started working on a project which aimed at grouping all its departments under one roof. The Agency also strived to move towards the individuality of the person with disability. This involved the drawing up of Individualised Support Plans for all the persons with disability attending its Day Centres. Thanks to the *Me2* project, Aġenzija
Sapport continued to strengthen the concept of integrating persons with disability in society. Apart from this, thanks to the work carried out by persons with disability and staff within the Day Centres, Ħaż-Żerqa Sapport won the President’s Award for Creativity, which project was aimed to be completed by 2012.

I mentioned several times the employees’ contribution within the three Agencies within the Foundation for Social Welfare Services. The Foundation invests in its employees in different ways such as through training opportunities, supervision and also possibilities for promotions. This is done so that employees’ qualities and dedication are not only recognised thanks to the effective service they provide and the improvement of their clients’ quality of life, but also through possibilities of career advancement. Performance appraisals for all the Foundation’s employees have been introduced for this reason. For this to be implemented, standardised policies were established as guidelines to Managers within the respective Agencies. Amongst the policies introduced there was the Teleworking Policy which enables employees, if their work permits, to work from home. This is also considered as a family-friendly measure. Another element that affects employees’ productivity is the conditions they work in. Thus when the Foundation saw the need for Ħaż-Żerqa Appoġġ’s premises to be expanded, primarily due to developments within its services, works started at the Agency’s main building in G’Mangia. During the same time, sites for the new Foundation’s head office were also being explored.

During these two years, the Foundation was awarded the Equality Mark certificate from the National Commission for the Promotion of Equality. The Foundation was among the first group of eight local entities to receive this official recognition. The Equality Mark is given to those entities who truly offer equal opportunities for all. The Foundation had to pass through an extensive process in order to receive this certificate. Officials from the National
Commission for the Promotion of Equality carried out inspections to determine if the criteria set to reach this mark were being observed by the Foundation. The criteria include documents and practices which prove that the Foundation values equality principles amongst its members of staff, both those already employed and those who apply for different kinds of posts with the Foundation.

As one can see, the work carried out during 2010 and 2011 was intensive and focused on various sectors. This is because the Foundation believes that the services it offers have the obligation to serve society. Thus I would like to take the opportunity to thank all members of staff and volunteers within the Foundation since without their valuable contribution, the services and also new initiatives would not be able to operate in society’s best interest.
Messaggio mill-Kap Eżekuttiv, Fondazzjoni għal Servizzi ta’ Ħarsien Soċjali


Fil-perjodu qabel is-snin koperti f’dan ir-rapport ġew identifikati diversi sfidi li l-Fondazzjoni ħadet b’serjetà u għamlet dak kollu li huwa possibbli sabiex jiġu indirizzati. Nibda biex insemmi l-bżonn li tiċħol iktar il-mentalità li persuni

Sedqa, fi ħdan il-Fondazzjoni għal Servizzi ta’ Ħarsien Soċjali. Sabiex tiġi mfakka s-Sena Ewropea tal-Volontjarat 2011, kif ukoll jintwera apprezzament lejn id-dedikazzjoni murija minn dawn il-voluntiera, il-Fondazzjoni organizzat attività fejn il-voluntiera kollha kellhom iċ-ċans jiltaqgħu flimkien u jaqsmu l-esperjenzi tagħhom.


La semmejt it-trobbija tat-tfal ma nistax inħalli barra lil dawk it-tfal li għal xi raġuni jew oħra, u minkejja l-isforzi neċessarji, ikun fl-aħjar interess tagħhom li ma jibqgħux jghixu mal-familja naturali tagħhom u għalhekk dawn it-tfal ikunu qed jiġu mħarsa mill-Istat. Filwaqt li wħud ikunu fortunati biżżejjed li tinstab familja ghalihom, mhux it-tfal kollha jirnexusilha jaslu sa hawn.


Bhalma għedt diġà, l-internet filwaqt li joffri mezz ta’ komunikazzjoni varji u fuq livelli diversi, joffri wkoll sfdi għat-tfal u ż-żgħażagħ, liema sfdi jistgħu

li l-fatt li l-Fondazzjoni tinkorpora tliet aġenziji, tagħmel dan it-tibdil intern possibbli u ghalhekk il-Fondazzjoni qed isservi bħala mezz ta’ kif riżors, speċjalment dawk umani, jintużaw bl-aħjar effiċjenza possibbli.


Matul dawn is-sentejn, il-Fondazzjoni ġiet mogħtija ċ-ċertifikat tal-marka ta’ kwalità (Equality Mark) mill-Kummissjoni Nazzjonali għall-Promozzjoni tal-Ugwaljanza. Il-Fondazzjoni kienet mal-ewwel grupp fost tmien entitajiet lokali li nghataw dan ir-rikonoxximent. Il-marka ta’ kwalità tinghata lil dawk

Corporate Services
Objectives of the Services

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

The sole aim of the Division is that of providing service to all Agencies within the Foundation for Social Welfare Services (FSWS). The service provision and adaptability vary according to the emerging needs of the same Agencies. Throughout the period in question, the Division worked on four major projects, namely:

- the transfer of Aġenzija Sedqa in-patient detoxification centre from Ἡαl Farruġ to an adjacent building previously availed of by Prevention Services within Sedqa;
- the extension of Appoġġ Head Office in G’Mangia – Galatea;
- the transfer of Aġenzija Sapport operations office from Mtarfa to Santa Venera; and
- the refurbishment of Sedqa’s main rehabilitation centre – Santa Marija Complex at Ἡαl Farruġ.
Information & Communication Technology

On the Information & Communication Technology (ICT) front, the years 2010 and 2011 were a consolidation of previous years. Various new personal computers and laptops were purchased to replace the ones that had served their purpose. Others which still could be utilised were upgraded to render the expected service.

Any move in personnel and service provision infringe drastically on the ICT infrastructure. During the governing biennial period, the FSWS ICT team was directly involved in the procurement, process and installation of ICT services at Galatea (new Appoġġ premises), and at the new Sapport Operations Offices in Santa Venera, and also in the preparation of the possible relocation of FSWS Head Offices. 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.

The ICT staff was also involved in creating various databases for different services. These include a database for the collection of data for the Research Department.

During the recorded period, the ICT team gave its support in the setting up of necessary IT equipment for various conferences and events organised by FSWS and any Agencies, including training courses and seminars organised in-house by the FSWS Human Resources Division and other initiatives by the FSWS Marketing team. Furthermore, ICT support was rendered to Me2 and Embark for Life both EU projects lead by FSWS. Support was also rendered during the Children’s Day activities held each November, with the ICT team setting up equipment required by the Foundation during such initiatives when necessary.
Throughout the recorded period, various meetings were held with the Information management Unit (IMU) within the former Ministry for Education, Employment and the Family 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 Disability to the FSWS, and the Content management System. Several meetings were held in preparation for the latter.

Another major challenge is the procurement and installation of two new servers for FSWS and Appoġġ. This entailed a lot of planning in order to have as little disruption as possible among knowledge workers.
Administration

Concerted efforts were undertaken to consolidate the work that had already been established within this department and augment it to facilitate pathways for a more efficient service. Of major relevance was the Foundation’s option to institute the office of its Precincts’ Officer which also factors the health and safety remit and maintenance coordination.

During the period in question, the Foundation operated from the following sites:

<table>
<thead>
<tr>
<th>Agency</th>
<th>Premises</th>
<th>Premises Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foundation for Social Welfare Services</td>
<td>Head Office</td>
<td>2 &amp; 3, Braille Street, Santa Venera</td>
</tr>
<tr>
<td>Aġenzija Appoġġ</td>
<td>Appoġġ Head Office</td>
<td>36, St Luke’s Road, G’Mangia</td>
</tr>
<tr>
<td>Aġenzija Appoġġ</td>
<td>Galatea</td>
<td>Galatea Apartments, St Luke’s Road, G’Mangia</td>
</tr>
<tr>
<td>Aġenzija Appoġġ</td>
<td>Cottonera Community team</td>
<td>AĊĊESS Complex, Triq San Dwardu, Vittoriosa</td>
</tr>
<tr>
<td>Aġenzija Appoġġ</td>
<td>Birkirkara Community team</td>
<td>Ġnien I-Istazzjon, Birkirkara</td>
</tr>
<tr>
<td>Aġenzija Appoġġ</td>
<td>Qawra Community team</td>
<td>Qawra AĊĊESS Centre, Triq il Frejgatina, Qawra</td>
</tr>
<tr>
<td>Agency</td>
<td>Community/Team</td>
<td>Location</td>
</tr>
<tr>
<td>--------</td>
<td>----------------</td>
<td>----------</td>
</tr>
<tr>
<td>Aġenzija Appoġġ</td>
<td>Valletta Community team</td>
<td>Valletta AĊĊESS Centre, Melita Street, Valletta</td>
</tr>
<tr>
<td>Aġenzija Appoġġ</td>
<td>Msida Community team (new)</td>
<td>Msida AĊĊESS Centre, 168, Valley Road, Msida</td>
</tr>
<tr>
<td>Aġenzija Appoġġ</td>
<td>Health Social Work Office</td>
<td>Boffa Hospital, Floriana</td>
</tr>
<tr>
<td>Aġenzija Appoġġ</td>
<td>Health Social Work Office</td>
<td>St Vincent de Paul Residence, Triq l-Ingiered, Luqa</td>
</tr>
<tr>
<td>Aġenzija Appoġġ</td>
<td>Health Social Work Office</td>
<td>Qormi Health Centre, Victory Road, Qormi</td>
</tr>
<tr>
<td>Aġenzija Appoġġ</td>
<td>Health Social Work Office</td>
<td>Mater Dei Hospital, Tal-Qroqq, Msida</td>
</tr>
<tr>
<td>Aġenzija Appoġġ</td>
<td>Garage</td>
<td>3, Gardenia Street, Santa Luċija</td>
</tr>
<tr>
<td>Aġenzija Appoġġ</td>
<td>Domestic Violence Shelter</td>
<td>Address disclosed</td>
</tr>
<tr>
<td>Aġenzija Appoġġ</td>
<td>Dar Bina</td>
<td>25, Triq Nelson, Cospicua</td>
</tr>
<tr>
<td>Aġenzija Appoġġ</td>
<td>Home-Start Malta</td>
<td>Hubbard Flats, Flt 2, Blk 11, Alexandra Street, Cospicua</td>
</tr>
<tr>
<td>Aġenzija Sapport</td>
<td>Sapport Operations Office</td>
<td>Aġenzija Sapport, 1, Triq Patri Ġwann Azzopardi, Santa Venera</td>
</tr>
<tr>
<td>Aġenzija Sapport</td>
<td>Dar Andrew Residence</td>
<td>19, Dar Andrew, Triq il-Madonna tal-Grazzja, Cospicua</td>
</tr>
<tr>
<td>Aġenzija Sapport</td>
<td>Vajrita 1 Residence</td>
<td>Vajrita 1, Triq Nigel Dennis, Marsascala</td>
</tr>
<tr>
<td>------------------</td>
<td>---------------------</td>
<td>----------------------------------------</td>
</tr>
<tr>
<td>Aġenzija Sapport</td>
<td>Vajrita 2 Residence</td>
<td>Vajrita 2, Triq Nigel Dennis, Marsascala</td>
</tr>
<tr>
<td>Aġenzija Sapport</td>
<td>Fgura Residence</td>
<td>Entrance 2, Flat 1, Triq Mary Carter, Fgura</td>
</tr>
<tr>
<td>Aġenzija Sapport</td>
<td>Kirkop Residence</td>
<td>Entrance 2, Flat 1, Triq Danny Cremona, Kirkop</td>
</tr>
<tr>
<td>Aġenzija Sapport</td>
<td>Villino Maria Residence</td>
<td>Villino Maria, Triq San Oswald, Mtarfa</td>
</tr>
<tr>
<td></td>
<td>Client’s residence</td>
<td>Maisonette, 18, Triq ir-Refuġjati, Mosta</td>
</tr>
<tr>
<td></td>
<td>(not managed by FSWS)</td>
<td></td>
</tr>
<tr>
<td>Aġenzija Sapport</td>
<td>Ħal Far Day Centre</td>
<td>Industrial Estate, Ħal Far</td>
</tr>
<tr>
<td>Aġenzija Sapport</td>
<td>Mtarfa Day Centre</td>
<td>St Oswald Street, Mtarfa</td>
</tr>
<tr>
<td>Aġenzija Sapport</td>
<td>Marsascala Day Centre</td>
<td>25, Vajrita Street, Marsascala</td>
</tr>
<tr>
<td>Aġenzija Sapport</td>
<td>Fleur De Lys Day Centre</td>
<td>Ċentru Tahriġ, 226D, Fleur-de-Lys Road, Fleur-de-Lys, B’Kara</td>
</tr>
<tr>
<td>Aġenzija Sapport</td>
<td>Cottonera Day Centre</td>
<td>AĊĊESS Complex, Triq San Dwardu, Vittoriosa</td>
</tr>
<tr>
<td>Aġenzija Sapport</td>
<td>Swatar Day Centre</td>
<td>Triq Balliju Guttenberg, Swatar</td>
</tr>
</tbody>
</table>
### Table 1: FSWS services / offices addresses

All the above sites were provided with support and assistance whenever the need arise. This work was coordinated by the Administration Senior Manager, whereby priority was give to the most urgent matters. The task of maintaining...
such premises is an arduous, costly and sturdy one to sustain. Yet with good financial management, and dedicated staff, the Foundation can boast of good operational standards all throughout.

Four of the biggest challenges of this department were:

- the transfer of Sedqa’s in-patient detoxification unit;
- the extension of Appoġġ Services to Galatea Building in G’Mangia;
- the transfer of Aġenzija Sapport Operations Offices from Mtarfa to Santa Venera; and
- the refurbishment of Sedqa’s rehabilitation centres at Komunità Santa Marija, Ħal Farrug.

Several departmental tenders were issued for the alterations and refurbishment of premises. Departmental tenders for structural works, painting and plastering, installation of electricity, supply and installation of air conditioning systems, and installation of lifts, were among the tenders issued and awarded. A lot of planning was done in order to run all four projects as smoothly as possible. One should commend the Projects Executive who has been indispensable in coordinating works for all the
required. Of pivotal importance was the contribution of the Administration Executive to the Senior Manager to issue all tenders and requests for quotes on time and process within established time frames to ensure that the projects in hand are not hindered by same procurement process delays. All works carried out were monitored and endorsed by the Foundation’s architect, who has also contributed to ensure compliancy and adherence to agreed deliverables and plans, and issue the required works certification to settle payments. The input of all the Administration Department staff was central in ensuring the smooth transition and the concerted efforts proved successful.

**Purchasing & Procurements / Calls for Service**

As already highlighted earlier on, the period covered by this biennial report offered a myriad of challenges in all aspects. One of these was the streamlining with legal obligations in issues pertaining to purchasing and procurement of goods and services within the Foundation. In June 2010 the Public Procurement Regulations Act (LN296) came into force and thus all procurements and supplies operations of all Agencies within the FSWS were facilitated by this Department in line with such regulations.

The list of requests for quotes and tenders follows. This reveals the considerable amount of work that was invested in the preparations of the required documents, the procurement process, contracting thereof and implementation.
<table>
<thead>
<tr>
<th>FSWS Registration Number</th>
<th>Service / Supply Required</th>
<th>FSWS / Agency Requiring Service / Supply</th>
</tr>
</thead>
<tbody>
<tr>
<td>FSWS/10/01</td>
<td>Swivel chairs</td>
<td>Appoġġ, Head Office</td>
</tr>
<tr>
<td>FSWS/10/02</td>
<td>Supply and installation of sanitary ware and tiles</td>
<td>Sedqa, Dar l-Impenn</td>
</tr>
<tr>
<td>FSWS/10/03</td>
<td>Supply, trenching and laying of drainage system</td>
<td>Sedqa, Dar l-Impenn</td>
</tr>
<tr>
<td>FSWS/10/04</td>
<td>Services of an architect</td>
<td>FSWS</td>
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<tr>
<td>FSWS/10/05</td>
<td>Provision of venue / refreshments – 4th March FSWS Strategy Day</td>
<td>FSWS</td>
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<tr>
<td>FSWS/10/06</td>
<td>Supply and delivery of stationery</td>
<td>FSWS</td>
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<tr>
<td>FSWS/10/07</td>
<td>Supply and delivery of consumables</td>
<td>FSWS</td>
</tr>
<tr>
<td>FSWS/10/08</td>
<td>Security fencing and gates</td>
<td>Sedqa, Dar l-Impenn</td>
</tr>
<tr>
<td>FSWS/10/09</td>
<td>Bedroom furniture</td>
<td>Sedqa, Dar l-Impenn</td>
</tr>
<tr>
<td>FSWS/10/10</td>
<td>Provision of Supervised Access Visits Supervisors by individual service providers</td>
<td>Appoġġ</td>
</tr>
<tr>
<td>FSWS/10/11</td>
<td>Trainers – Alcohol, Drugs and Driving Programme</td>
<td>Sedqa</td>
</tr>
<tr>
<td>FSWS/10/12</td>
<td>Trainers – S.A.F.E. Programme</td>
<td>Sedqa</td>
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<tr>
<td>FSWS/10/13</td>
<td>Facilitators – <em>Inrabbu 'l Uliedna Ahjar</em> programme</td>
<td>Sedqa</td>
</tr>
<tr>
<td>FSWS/10/14</td>
<td>Facilitators – <em>Programm ghal ġenituri li ghandhom adoloxxenti</em></td>
<td>Sedqa</td>
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<tr>
<td>FSWS/10/16</td>
<td>Catering – EY2010</td>
<td>FSWS, EY2010</td>
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<tr>
<td>FSWS/10/17</td>
<td>Photocopiers</td>
<td>FSWS</td>
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<tr>
<td>FSWS/10/18</td>
<td>Procurement of PCs</td>
<td>FSWS</td>
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<td>FSWS/10/19</td>
<td><em>Klabbsajf</em></td>
<td>Appoġġ</td>
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<tr>
<td>FSWS/10/20</td>
<td>Roofing works (membrane)</td>
<td>Sedqa, <em>Dar l-Impenn</em></td>
</tr>
<tr>
<td>FSWS/10/21</td>
<td>Drivers duties</td>
<td>Sapport</td>
</tr>
<tr>
<td>FSWS/10/22</td>
<td>Facilitator – Year 6 Prevention Programme</td>
<td>Sedqa</td>
</tr>
<tr>
<td>FSWS/10/23</td>
<td>Complaints Handling Officer</td>
<td>FSWS</td>
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<tr>
<td>FSWS/10/24</td>
<td>Psychologist – Group Facilitation for Youth Service</td>
<td>Appoġġ</td>
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<tr>
<td>FSWS/10/25</td>
<td>Part-time Occupational Therapist for Rehabilitation Services</td>
<td>Sedqa</td>
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<tr>
<td>FSWS/10/26</td>
<td>Psychotherapist</td>
<td>Appoġġ</td>
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<tr>
<td>FSWS/10/27</td>
<td>Clinical / Counselling Psychologist</td>
<td>Appoġġ</td>
</tr>
<tr>
<td>FSWS/10/28</td>
<td>PCs and Notebooks</td>
<td>FSWS</td>
</tr>
<tr>
<td>Number</td>
<td>Description</td>
<td>Responsible Party</td>
</tr>
<tr>
<td>-------------</td>
<td>-------------------------------------------------------</td>
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<tr>
<td>FSWS/10/29</td>
<td>Supply of 2011 diaries</td>
<td>FSWS</td>
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<td>FSWS/10/30</td>
<td>New photocopiars</td>
<td>FSWS</td>
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<td>Lot 1 &amp; 2</td>
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</tr>
<tr>
<td>FSWS/10/31</td>
<td>Structural works</td>
<td>Sapport, Santa Venera Head Office</td>
</tr>
<tr>
<td>FSWS/10/32</td>
<td>Supply and installation of passenger lift</td>
<td>Sapport, Santa Venera Head Office</td>
</tr>
<tr>
<td>FSWS/10/33</td>
<td>Finishing works</td>
<td>Sapport, Santa Venera Head Office</td>
</tr>
<tr>
<td>FSWS/10/34</td>
<td>Alternations and finishing works of restrooms</td>
<td>FSWS</td>
</tr>
<tr>
<td>FSWS/10/35</td>
<td>External auditors</td>
<td>FSWS</td>
</tr>
<tr>
<td>FSWS/10/36</td>
<td>Roofing works (membrane)</td>
<td>Sedqa, Dar I-Impenn</td>
</tr>
<tr>
<td>FSWS/10/37</td>
<td>Catering service – standing-up function</td>
<td>Appoqġġ, Fostering Service</td>
</tr>
<tr>
<td>FSWS/10/38</td>
<td>Biennial report 1</td>
<td>FSWS</td>
</tr>
<tr>
<td>FSWS/10/39</td>
<td>Biennial report 2</td>
<td>FSWS</td>
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<td>FSWS/10/40</td>
<td>Store partitions</td>
<td>FSWS</td>
</tr>
<tr>
<td>FSWS/10/41</td>
<td>Rent of hall</td>
<td>Sapport</td>
</tr>
<tr>
<td>FSWS/10/42</td>
<td>Transport – Department of Contracts</td>
<td>Sapport, issued by Department of Contracts</td>
</tr>
<tr>
<td>FSWS/10/43</td>
<td>Methadone cups</td>
<td>Sedqa, Detox Centre</td>
</tr>
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<td>FSWS/11/01</td>
<td>Family Therapy Supervisor</td>
<td>Sedqa</td>
</tr>
<tr>
<td>FSWS/11/02</td>
<td>Facilitators – Perpetrators’ Programme / Support Group in the Perpetrators’ Service</td>
<td>Appoġġ</td>
</tr>
<tr>
<td>FSWS/11/03</td>
<td>Lift</td>
<td>Sapport, Santa Venera Head Office</td>
</tr>
<tr>
<td>FSWS/11/04</td>
<td>Supervisor – Supervised Access Visits</td>
<td>Appoġġ</td>
</tr>
<tr>
<td>FSWS-RFQ/11/05</td>
<td>Plastic cups</td>
<td>Sedqa, Detox Centre</td>
</tr>
<tr>
<td>FSWS/11/06</td>
<td>Insurance policies</td>
<td>FSWS</td>
</tr>
<tr>
<td>FSWS/11/07</td>
<td>Legal service tender</td>
<td>FSWS</td>
</tr>
<tr>
<td>FSWS/11/08</td>
<td>Call for Nursing Services</td>
<td>Sapport</td>
</tr>
<tr>
<td>FSWS/11/09 Lot 1</td>
<td>Air conditioners / maintenance repair and purchase</td>
<td>FSWS</td>
</tr>
<tr>
<td>FSWS/11/09 Lot 2</td>
<td>Air conditioners / maintenance repair and purchase</td>
<td>FSWS</td>
</tr>
<tr>
<td>FSWS/11/10</td>
<td><em>Programm Ulied Dama</em> furniture / goods transport</td>
<td>Appoġġ</td>
</tr>
<tr>
<td>FSWS/11/11</td>
<td>Supervisor for Social Workers</td>
<td>Sapport</td>
</tr>
<tr>
<td>FSWS/11/12</td>
<td>Support Worker</td>
<td>Sapport</td>
</tr>
<tr>
<td>FSWS/11/13</td>
<td>Services for parental skills</td>
<td>Sedqa</td>
</tr>
<tr>
<td>Reference</td>
<td>Description</td>
<td>Supplier(s)</td>
</tr>
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<tr>
<td>FSWS/11/14 Lot 1</td>
<td>Consumables &amp; stationery – supplies</td>
<td>FSWS</td>
</tr>
<tr>
<td>FSWS/11/14 Lot 2</td>
<td>Consumables &amp; stationery – supplies</td>
<td>FSWS</td>
</tr>
<tr>
<td>FSWS/11/15</td>
<td>Clinical Supervisor – Hotline</td>
<td>Appoġġ</td>
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<tr>
<td>FSWS/11/16</td>
<td>Lift</td>
<td>Appoġġ, Galatea</td>
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<tr>
<td>FSWS/11/17</td>
<td>Civil works</td>
<td>Sedqa, Komunità Santa Marija</td>
</tr>
<tr>
<td>FSWS/11/18</td>
<td>Roof works</td>
<td>Sedqa, Komunità Santa Marija</td>
</tr>
<tr>
<td>FSWS/11/19</td>
<td>Community Worker</td>
<td>Appoġġ</td>
</tr>
<tr>
<td>FSWS/11/20</td>
<td>Care Workers</td>
<td>Sedqa</td>
</tr>
<tr>
<td>FSWS/11/21</td>
<td>Request for quote – Aluminium material</td>
<td>Appoġġ, Galatea</td>
</tr>
<tr>
<td>FSWS/11/22</td>
<td>Request for quote – double glazing</td>
<td>Appoġġ, Galatea</td>
</tr>
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<td>FSWS/11/23</td>
<td>Administrator – Klabbsajf</td>
<td>Appoġġ</td>
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<tr>
<td>FSWS/11/24</td>
<td>Trainers for talks</td>
<td>Sedqa</td>
</tr>
<tr>
<td>FSWS/11/25</td>
<td>Supply of floor and wall tiles</td>
<td>Appoġġ, Galatea</td>
</tr>
<tr>
<td>FSWS/11/26</td>
<td>Laying of floor and wall tiles and supply of adhesive material and grouting</td>
<td>Appoġġ, Galatea</td>
</tr>
<tr>
<td>FSWS/11/27</td>
<td>Aluminium apertures supply and installation</td>
<td>Appoġġ, Galatea</td>
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<tr>
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</tr>
<tr>
<td>FSWS/11/28</td>
<td>Galatea – PABX and ICT network cabinet requirements</td>
<td>Appoġġ, Galatea</td>
</tr>
<tr>
<td>FSWS/11/28 Lot 2</td>
<td>Galatea – PABX and ICT network cabinet requirements</td>
<td>Appoġġ, Galatea</td>
</tr>
<tr>
<td>FSWS/11/29</td>
<td>SQL Server 2000 &amp; Methadone Dispensing Systems Software Installation and Maintenance Agreement</td>
<td>Sedqa, Detox Centre</td>
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<tr>
<td>FSWS/11/30</td>
<td>Support Workers for residential homes</td>
<td>Appoġġ</td>
</tr>
<tr>
<td>FSWS/11/31</td>
<td>Supply of trunking and UTP cable</td>
<td>Appoġġ, Galatea</td>
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<tr>
<td>FSWS/11/32</td>
<td>Supply of material</td>
<td>Appoġġ, Galatea</td>
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<tr>
<td>FSWS/11/33</td>
<td>Provision of venue and refreshments for a day’s conference – 6th October 2011</td>
<td>FSWS</td>
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<tr>
<td>FSWS/11/34</td>
<td>Provision of insurance services</td>
<td>FSWS</td>
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<tr>
<td>FSWS/11/35</td>
<td>Venue for national conference</td>
<td>Sedqa</td>
</tr>
<tr>
<td>FSWS/11/36</td>
<td>Supply and installation of kitchenettes</td>
<td>Appoġġ, Galatea</td>
</tr>
<tr>
<td>FSWS/11/37</td>
<td>Pharmacist</td>
<td>Sapport</td>
</tr>
<tr>
<td>FSWS/11/38</td>
<td>Supply of stationery</td>
<td>FSWS</td>
</tr>
<tr>
<td>FSWS/11/39</td>
<td>Expression of interest – appointment of Insurance Brokers</td>
<td>FSWS</td>
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<tr>
<td>FSWS/11/40</td>
<td>Request for quote – neon tubes energy savers 2x28W</td>
<td>Appoġġ, Head Office</td>
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<tr>
<td>FSWS/11/41</td>
<td>Request for quote – Me2 one night stay at hotel for 23 persons</td>
<td>Me2, ESF3.62 Project</td>
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<tr>
<td>FSWS/11/42</td>
<td>Supervisor – Supervised Access Visits</td>
<td>Appoġġ</td>
</tr>
<tr>
<td>FSWS/11/43</td>
<td>Request for Quote – Me2 Flights to Bristol, October 2011</td>
<td>Me2, ESF3.62 Project</td>
</tr>
<tr>
<td>FSWS/11/44</td>
<td>Supply of 2012 diaries</td>
<td>FSWS</td>
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<td>FSWS/11/45</td>
<td>Services for parental skills speakers – second call</td>
<td>Sedqa</td>
</tr>
<tr>
<td>FSWS/11/46</td>
<td>Trainers for talks</td>
<td>Sedqa</td>
</tr>
<tr>
<td>FSWS/11/47</td>
<td>Steps and floor polishing</td>
<td>Appoġġ, Galatea</td>
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<tr>
<td>FSWS/11/48</td>
<td>Coach driver</td>
<td>Sapport</td>
</tr>
<tr>
<td>FSWS/11/49</td>
<td>Re-construction of existing ramp</td>
<td>Sapport, Fleur de Lys Day Centre</td>
</tr>
<tr>
<td>FSWS/11/50</td>
<td>Tender for the provision of cleaning services</td>
<td>FSWS</td>
</tr>
<tr>
<td>FSWS/11/51</td>
<td>Security services</td>
<td>Sedqa, Detox Centre</td>
</tr>
<tr>
<td>FSWS/11/52</td>
<td>Gypsum partitions – moisture resistant boards including Rockwool</td>
<td>Appoġġ, Galatea</td>
</tr>
<tr>
<td>FSWS/11/53</td>
<td>Aluminium or pre-fabricated doors</td>
<td>Appoġġ, Galatea</td>
</tr>
<tr>
<td>FSWS/11/54</td>
<td>Scaffolding</td>
<td>Sapport, Santa Venera Head Office</td>
</tr>
<tr>
<td>FSWS/11/55</td>
<td>Façade bonding agent and graffiato rendering</td>
<td>Sapport, Santa Venera Head Office</td>
</tr>
<tr>
<td>FSWS/11/56</td>
<td>100 chairs</td>
<td>Sapport</td>
</tr>
<tr>
<td>FSWS/11/57</td>
<td>Psychologist</td>
<td>Appoġġ, Out-of-Home Care Programme</td>
</tr>
<tr>
<td>FSWS/11/58</td>
<td>Supervisors for Supervised Access Visits</td>
<td>Appoġġ</td>
</tr>
<tr>
<td>FSWS/11/59</td>
<td>Support Worker – Gozo</td>
<td>Sapport</td>
</tr>
<tr>
<td>FSWS/11/60</td>
<td>Rent of office space</td>
<td>FSWS</td>
</tr>
</tbody>
</table>

*Table 2: Requests for quotes, calls for services and tenders, 2010-2011*

The above list reveals the extent of work carried out by the Administration department within the Foundation. Needless to say that each item listed, whether tender or request for quote, by nature necessitates preparation, implementation, evaluation, contracting and settlement.

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. In issues related to supplies the Procurement and 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.
Social Marketing & Communications

Introduction

The Social Marketing and Communications function within the Foundation for Social Welfare Services is a role that has been through continuous development since the inception of the Foundation and its Agencies. Its importance and relevance lie in its mission to:

- see to corporate positioning of the entities it represents;
- maintain a philosophy which needs to be practiced by all levels of staff and frontliners in delivering our services;
- analyse audiences and develops strategies that best reach the intended groups; and
- deliver initiatives aimed at informing and educating the general public about its welfare, accessibility of services, and reaching out to prospective service users.

Service Overview and Objectives

Social marketing involves the planning and implementation of initiatives designed to bring about social change. Thus all our actions are dictated by this main concept.

During the period under review in this report, the FSWS Social Marketing and Communications team was comprised of two full-time members of staff. The team coordinates most of the public relations interventions and campaigns for the Foundation, and is the focal point for all media, representing the FSWS and its Agencies. This department within FSWS oversees the above function and gives such service to the Agencies incorporated within the Foundation,
by using marketing tools such as advertising, public relations, promotion, direct marketing, and public-private partnerships.

The work involves a wide spectrum of initiatives, constantly developing to address the emerging needs gauged in the social welfare field and parallel to the development of the services within FSWS and its Agencies. The following are the salient points covering 2010-2011 for ĦażŻenija Appoġġ, ĦażŻenija Sapport and ĦażŻenija Sedqa.

**Review and Analysis of Service**

For the FSWS Social Marketing and Communications team (henceforth, Marketing team), the period under the review meant further development of its various skills and expertise in the communication field. Of significant importance were the support given to the various EU projects undertaken by the FSWS and its entities, whereby the Marketing team gave its input throughout the projects – thus supporting the programmes embarked on while gaining more knowledge and increasing its flexibility.

1. ĦażŻenija Appoġġ

ĦażŻenija Appoġġ by far makes up the larger portion of the Marketing team’s workload. Incorporating such a vast array of services and programmes, it is the most demanding of marketing services over the other Agencies.

The following lists the most salient initiatives that the Marketing team coordinated during the period under review.
i. **Blue Ribbon Campaigns**

In May 2010, the first Blue Ribbon Campaign was launched by the FSWS during a press conference that took place in a school in the presence of various stakeholders including children, parents, educators, and professionals working in the field. The aim behind this initiative was to promote positive parenting amongst parents and carers of children, focusing on giving out tips and information as a way to prevent child abuse, through several media. A lot of groundwork was done before the launch of the first ever Blue Ribbon Campaign in 2010, starting from the setting up of a committee with professionals from various services within Aġenzija Appoġġ and Aġenzija Sedqa, coordination of training for FSWS staff and Supportline 179 volunteers, producing an informative leaflet about positive parenting and disseminating it amongst the general public, reproducing a booklet about child abuse and disseminating it amongst children in colleges, and also compiling a document about the most important aspects in positive parenting that served as the basic reference in the campaign.

The success of the initiative and the way it was received encouraged us to include this campaign in the list of yearly initiatives and thus it has been marked every May since then. The campaign is symbolised by the blue ribbon — wearing a blue ribbon shows one’s commitment towards protecting children and the will to spread the message that abuse is never tolerated or justified. Thus blue ribbons are disseminated to all TV stations during the campaign period to help generate more awareness.
ii. **Fostering Campaigns**

One of the most prominent and regular campaigns on the team's agenda is the Fostering Campaign. Without fail, this features regularly in each year's operational plans, emphasising on the importance of having a regular flow of requests from prospective foster carers to address the need of placements. The Marketing team coordinates this campaign in collaboration with the Fostering team within Appoġġ, whose members are directly involved mainly through media appearances, interviews for the press and participation in outreaches.

Ongoing efforts throughout the year to increase awareness about fostering are improved from one year to the next, which in turn also influence the number of requests received by the Appoġġ Fostering Service from prospective foster carers.

A remarkable effort was done particularly in January 2010 when in collaboration with the then Ministry for Social Policy, the Marketing team organised a business breakfast for major stakeholders about the needs of fostering, on the eve of an important conference hosted on the same topic by the Ministry. An intensive campaign, including the production and transmission of an audio-visual production, aimed to increase awareness about foster care followed.
iii. *Launch of Out-of-Home Care Programme*

In October 2011, Aġenzija Appoġġ launched a new service – the Out-of-Home Care Programme, which offers various services to children and young people living in out-of-home care, including specialised care placements. The Marketing team coordinated the launch of this Programme and since then, has embarked on ongoing awareness initiatives that are aimed towards encouraging members of the general public to participate in such project by accommodating and caring these children and young people within their homes.

iv. *Volunteer Recruitment Campaigns*

Another regular initiative is the Volunteer Recruitment Campaign. This campaign aims to increase the pool of volunteers for the Appoġġ Supportline 179 and *Programm Ulied Darna* services. Another yearly campaign with this purpose is that aimed to increase the pool of volunteers for Home-Start Malta.

v. *Children’s Rights Campaign*

Another yearly campaign is the Children’s Rights Campaign, previously within the remit of Aġenzija Appoġġ but which eventually was put on the Foundation’s agenda and marked by all its Agencies throughout the month of November to coincide with the World Children’s Day, however with most input coming from Appoġġ professionals who work directly with children and families. During this particular month, efforts to promote children’s rights are enhanced over the rest of the year mainly through an increase in media exposure advocating for the recognition of children’s rights.
vi. *Children’s Day*
Children’s Day, internationally marked on 20\textsuperscript{th} November, is also an event marked by the FSWS. The Marketing team coordinates the participation by FSWS and its Agencies in national events intended as fun events for all the family to celebrate children and children's rights. During the period under review, the FSWS participated in events organised by the Office of the Commissioner for Children and the then Ministry for Education Employment & the Family. In 2010, the event organised by the Office of the Commissioner for Children also marked the 20\textsuperscript{th} Anniversary from the ratification of the UN Convention for Children’s Rights.

vii. *Safer Internet Day*
The Marketing team also coordinates media interventions to promote safer internet use by children, in collaboration with the Agency’s Hotline team. The topic is emphasised particularly in February when Safer Internet Day is marked. The initiatives coordinated by the Marketing team complement the main awareness campaigns coordinated by the *Besmartonline!* Project Leaders – the Malta Communications Authority – of which the Appoġġ Hotline Service is partner with. This project was launched in 2011.
viii. **Body Shop Campaign**

Following the awareness campaign about human trafficking entitled *Stop Sex Trafficking of Children and Young People* embarked on by The Body Shop Malta in 2009, 2010 saw the continuation of this initiative and the presentation of a donation to Aġenzija Appoġġ, proceeds from the sale of a hand cream that was produced as part of this campaign. The donation was targeted 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.

ix. **European Year for Volunteers**

2011 was themed as the European Year for Volunteers, thus the topic was also more popular in media exposure coordinated by the Marketing team. The team also coordinated an event in March of the same year that saw around 260 volunteers who give a service to the FSWS’ Agencies, grouped together for a social activity that
recognised and celebrated their important role within the social welfare services.

x. 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 Appoţţ Cottonera Community Service in collaboration with other entities, with the help of a number of volunteers. Towards September, the Marketing team also covers the Talent Show produced by the Klabbsajf team to mark the end of their summer project. Support was also given for the promotion of a fund-raising BBQ organised in summer 2011.

xi. Media assessments
Another task coordinated by the Marketing team is that of media assessments. Programme producers refer to the team as directed by the Broadcasting Authority regulations to assess minors and vulnerable adults prior to media exposure. Such task is carried out in collaboration with the Service Manager in charge of the Appoţţ Children’s Services Manager and a group of professionals. Between January 2010 and December 2010, 55 screenings were coordinated by this office, and an additional 35 were coordinated between January and December 2011.
In August 2011, an important milestone in this regard was also achieved. The Broadcasting Authority hosted a seminar for all media producers mainly focusing on quality productions and dealing with sensitive issues in TV programmes. The Appoġġ Children’s Services Manager and the FSWS Marketing team had a very active role in this seminar and also presented two sessions to the participants of the seminar about issues dealt with during the screenings carried out by Appoġġ and also giving an in-depth insight into the procedure for media assessments, respectively.

xii. PR support

The Marketing team also offers continuous support in PR matters related to Appoġġ. 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 to various initiatives such as, but not exclusively to:
• Ongoing Children’s Fund fundraising activities, including both initiatives aimed towards FSWS staff, and also other public activities such as the yearly Disney event, together with presentation of donations.

Figure 12: Step into Wonderland, an activity in aid of Children’s Fund, 2010

• Home-Start Malta events such as yearly fundraising activities, together with the programme’s Annual General Meeting, and presentation of its Annual Report to the main sponsors HSBC Malta Foundation and Vodafone Malta Foundation.

• Donations to services and Corporate Social Responsibility Days by private companies, such as the donation of a doll house by Playmobil Malta to be used during therapy sessions with children, and the donations by Rotary La Valette Malta and St. Paul’s Bay Lions Club to Ghabex for a refurbishment project of the shelter in 2011.

Figure 13: Rotary Club La Valette Malta presenting a donation to Ghabex
- Certificate-giving ceremonies held for Tavistock post-graduate diploma in Systemic Theory, and community projects coordinated by the Appoġġ Community Services such as Proġett Tagħlim, Klabbsajf, Women at Work, and Tlett Kwarti ta’ Spazju Għalija.

- In 2010, Middlesea Insurance plc gave a sponsorship to Aġenzija Appoġġ which helped in the initiation of a new programme for parents making use of the Agency’s services, the Family Workshops. This was a project developed by the then Appoġġ Generic Service and which the Marketing team supported through public relations initiatives.

- AĊĊESS Vittoriosa Open Day in 2011 to mark Children’s Day.

- Outreach by AĊĊESS Valletta about social poverty.

- Pre-adolescent groups in collaboration with Aġenzija Sedqa.
xiii. Production of material

During the period under review, the Marketing team also continued working on enhancing the printed informative material for many of the Agency’s services. During these two years under review, apart from reviewing and reprinting existing material, the Marketing team also produced new leaflets about the Adoption service and about the Children’s Fund.

Such publications are regularly disseminated by the Marketing team not only as part of pre-planned campaigns but throughout the year in public areas such as Health Centres, various hospital’s sections, local councils, AĊĊESS centres, colleges, etc.

In 2010, the Marketing team was also instrumental in obtaining rights for footage about adoption to be used during the training for prospective adoptive parents by Aġenzija Appoġġ.

2. Aġenzija Sedqa

The Marketing team gives simultaneous support to all Agencies and the FSWS as necessary throughout the year. Thus during the period under review and concurrently to initiatives mentioned above, the Marketing team also coordinated campaigns and initiatives for Aġenzija Sedqa. The following are the most salient points in this regard, covering 2010 and 2011.
i. Alcohol Campaigns
A standard yearly campaign is that about alcohol abuse. Although there is regular awareness throughout the year, the campaign peaks in summer and in December. The Marketing team coordinates initiatives such as radio and TV advertising about responsible drinking and promoting messages against drinking and driving, posters in popular party venues, TV and radio programmes, newspaper and magazines interviews and write-ups, and online promotion amongst others. A regular feature is also the yearly collaboration with the Health Department and various other stakeholders – including Transport Malta, the Civil Protection Department, Malta Police Force and Malta Touring Club – that come together for a press conference and a joint campaign every December promoting messages against drinking and driving.

ii. Hepatitis C Campaign
In 2010, the Marketing team also supported Sedqa’s collaboration in a campaign by the Health Promotion Department about Hepatitis C, which also saw the involvement of Medical Doctors from the Agency. The campaign also included the production of informative printed material and participation in the press conference that launched the initiative.
iii. *Inhalants Campaign*

Based on feedback from scientific studies such as the European School Survey Project on Alcohol and other Drugs (ESPAD) Report that show the popularity of the abuse of inhalants by school children especially adolescents, the Marketing team in collaboration with the Agency’s Prevention team embarked on a campaign to educate young people and parents about this substance and its harms. As part of this campaign, two leaflets were produced – one aimed towards parents and another version aimed towards secondary school students. The Prevention team teamed this initiative with informative sessions in schools.

iv. *Launch of new premises*

In June 2010, Aġenzija Sedqa launched new premises for its residential detoxification programme, *Dar l-Impenn* during a press conference in June 2010. This centre, forming part of the Agency’s Hal Farrug complex, was launched by the then Minister for Employment, Education & the Family during a press conference held on site in the presence of various staff from Sedqa and also representatives from other entities that refer clients to this service, such as OASI and Caritas.
v. Launch of educational tools

- **Facts, not Fiction**

For the past years, the Sedqa Prevention team has been regularly producing a number of educational tools for use by students, teachers and parents alike. Various educational interactive packs and printed material have been produced even during the period under review. These include the CD entitled *Facts, not Fiction* with useful information about substance abuse. This product, produced in collaboration with Rotaract Club Malta La Valette, was launched during a press conference coordinated by the Marketing team in June 2010 as part of the initiatives to mark the International Day Against Drug Abuse as a prevention tool for young people, especially aimed to minimise the risks of social exclusion. This initiative was also held in light that during the same year, the FSWS was leading the celebrations of the European Year for Combating Poverty and Social Exclusion and the ESF project *Embark for Life*. This event was also teamed with the publication of leaflets and newspaper articles, participation in TV and radio programmes, and use of the internet, to reach the intended target audience.

*Figure 17: Screenshot from ‘Facts, not Fiction’ CD*
Another event in 2010 launched two educational tools by the Agency’s Prevention Services – the E-handbook for parents and the Crossroads pack for teachers of Social Studies in secondary schools. This initiative and especially the E-handbook, built further on the FSWS earlier campaign in the same year on positive parenting.

Most tools mentioned above are available for download from www.sedqa.gov.mt. The Marketing team facilitated all launches and collaborated with the Prevention Services for the presentation of such tools.

vi. Parenting Skills Campaigns
A regular campaign that is developing yearly into more intense exercises is the Parenting Skills Campaign. This yearly feature aims at raising awareness about such courses that Sedqa offers to the general public, and also at encouraging parents to attend such courses. The Marketing team does all the promotion of such intakes in collaboration with the Agency’s Prevention team. In 2010, this campaign was repeated in January and in September, and once in 2011.
vii. National Conference

In November 2011, the Agency hosted a national conference in collaboration with the Office of the Commissioner for Children. *Parenting towards Resilience* was aimed at achieving better parenting for our children and it also served as a means through which the FSWS marked Children’s Day in 2011. The Marketing team had a very active role in promoting and coordinating this conference in collaboration with Aġenzija Sedqa’s Prevention team and representatives from the Office of the Commissioner for Children.

viii. Other initiatives and PR support

The Marketing team also offers continuous PR support to numerous other initiatives, particularly those 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* 2010 and 2011
- S.A.F.E. Awards Ceremony 2010
- 26th June initiatives to mark the International Day against Drug Abuse & Illicit Trafficking
- various seminars for youth, parents, members of the general public, and professionals and entities
- community programmes and initiatives in various localities and in collaboration with several entities
- pre-adolescent groups in collaboration with ġejna Aġenzija Appoġġ
- community interventions by the Canadian drama group Life Force International in 2010
- Fresher’s Week at the University of Malta campus
- yearly graduation ceremony of clients who would have successfully completed a residential rehabilitation programme at Komunità Santa Marija
- presentation of a donation by Malta Charities Foundation in 2010
- production of leaflet about the Agency’s Family Therapy Service
- production of informative booklet aimed for pregnant drug users
- updates and reprint of publications
- in collaboration with Sedqa’s Prevention team, the Marketing team facilitated a competition aimed at children on Favourite TV. A member from the Prevention team attended and facilitated a sessions with children present during the programme on a pre-agreed topic. The Marketing Department coordinated these weekly slots and also uploaded relevant information and also a competition for children on the Agency’s website.
3. Ġenzija Sapport

Ġenzija Sapport also receives the services of the Marketing team, especially through public relations support to the various yearly initiatives organised by the Agency’s Day Services. 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 disability, while promoting social inclusion. The Marketing team coordinates all PR and offers its support to such events, which during 2010 and 2011 included:

i. **Visit by the Archbishop to Vajrta**

An event of particular interest was the visit by His Excellency Archbishop Mons. Paul Cremona to Vajrta residence, where he met with staff and clients as part of his pastoral visit to Marsascala.

![Figure 22: Vajrta clients meeting the Archbishop](image)

ii. **10th Anniversary celebrations**

During 2011, Ġenzija Sapport held various initiatives to mark its 10th year anniversary. The main event was held in December 2011, aimed at staff and clients which was also attended by the Hon. Prime Minister. This was a milestone marked also by the Marketing team also through the various media opportunities surrounding that date. PR support was given to the other activities coordinated by the Agency, which also included a football marathon for staff members, and an exhibition of crafts produced by Sapport clients at Palazzo Ferreria in Valletta.
iii. **Other PR support**

During this biennium under review, the Marketing team also contributed with other PR support towards initiatives held by the Agency, especially the Day Services. These included:

- donation of turf to Mtarfa Day Centre in 2010;
- production and dissemination of an informative leaflet about Support services;
- participation in the 6th edition of Patches Market in May 2011;
- Swatar Day Centre Open Day in September 2011; and
- the yearly regular activities in the Agency’s calendar organised by the Day Services, which include the Carnival activity, Easter activity, Spring Fair, Summer BBQ, Methodians’ Fun Day, and Disability Week celebrations.

The message portrayed through the promotion of such initiatives serves to raise more awareness about the skills of persons with disability, promote social inclusion and ultimately focus on the abilities rather than disabilities of our clients.

### 4. Other Projects

i. **Media interventions**

Another function of the Marketing team is to oversee all PR and communications roles on behalf of the FSWS as a corporate entity. This is mostly through the coordination of regular programmes on TV and radio, with the participation of staff from the three Agencies, both as part of campaigns and ad hoc requests. The Marketing team strives to guarantee constant media presence throughout the years, as can be seen from Table 3.
TV Programmes & Radio Programmes

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>TV Programmes</td>
<td>205</td>
<td>196</td>
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<tr>
<td>Radio Programmes</td>
<td>87</td>
<td>117</td>
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</table>

Press Releases & Interviews

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Press Releases</td>
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<td>41</td>
</tr>
<tr>
<td>Interviews</td>
<td>13</td>
<td>26</td>
</tr>
</tbody>
</table>

Articles

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Articles</td>
<td>34</td>
<td>46</td>
</tr>
</tbody>
</table>

Table 3: Media coverage coordinated by the Marketing team, 2010-2011

The number of media interventions shown in Table 3 refers to the number of individual write-ups or interventions and not the number of times they were published. An additional 93 media requests for comments were dealt with in 2010 and 59 in 2011. These include also letters to the editors issued by the Marketing team in view of the Right of Reply to other published statements.

ii. **New website for FSWS**

2011 was especially marked with the creation of the first website for the FSWS (www.fsws.gov.mt), together with a new website for each of the Agencies (www.appogg.gov.mt; www.sedqa.gov.mt; www.sapport.gov.mt) replacing the previous sites. All coordination of the creation of these websites was undertaken by the Marketing team, which is also responsible for the upkeep of these websites. Thus it coordinates and carries out regular maintenance of these sites.

![Figure 23: FSWS new website](image-url)
websites by uploading all press releases issued by this department; details about forthcoming events; latest informative material produced; vacancies, expressions of interest, and requests for tenders and quotes; and most importantly, carries out regular updates of the information about the various services and contact sections for the attention of the public.

iii. **New logo for FSWS**

In 2011, the FSWS also launched its first corporate logo, encapsulating an image that incorporates the three Agencies – Appoġġ, Sapport and Sedqa – in its design. This logo symbolises the synergy existing between the three Agencies. The idea for the final logo selected originated from a member of staff within Aġenzija Sapport which was submitted through a competition that was open to all members of staff and volunteers, and selected by a Board that included also a representative of the Marketing team.

![Figure 24: Original design for the FSWS logo](image)

iv. **EU projects**

Ongoing PR and logistic support was also given to the FSWS EU projects, such as the *Me2* and Embark for Life projects, both launched in 2009 and running through the two years under review in this report. This included media interventions, press releases and newspaper features, and also support during the mid-term conferences. Support was also given to the Project Leader on the European Year for Social Exclusion and Poverty in 2010.
v. **Media training**

In the previous biennial report a particular need was highlighted – that of preparing more members of staff to be more media-friendly considering the number of media opportunities coordinated by this Office. Thus in 2010, three media training seminars were held, with the participation of producers and presenters from local TV stations / production houses, to over 110 members of staff. This training was very well received and more collaboration and interest has been seen from the different departments within the Agencies to represent the FSWS in media interventions since then.

During the period under review, the Marketing team was also responsible and/or involved in supporting and/or coordinating other initiatives, which included:

- the regular production of the FSWS newsletter as a way of keeping staff at all levels across the Foundation updated about current matters and projects;
- the production of corporate material and merchandise, such as corporate business cards, appointment cards, key chains, pens, etc;
- production of the FSWS bi-monthly page on the children’s newsletter *Taghna t-Tfal* and monthly contributions on the children’s magazine *Saghtar*;

*Figure 25: Members of staff participating during the media training*
production and coordination of all ad hoc advertising, which included the coordination of sponsored online banners on www.di-ve.com over a number of months. These were offered to FSWS on an initiative of the Marketing team and were utilised to promote fostering, responsible drinking and Sapport’s 10th Anniversary. Each rotating banner redirected browsers to the respective websites;

regular media monitoring and coordinating replies when necessary (refer to Table 3);

support to the FSWS Training Department in covering training initiatives for FSWS staff, such as Commonwealth and Leonardo da Vinci programmes;

PR and logistic support for the coordination of the FSWS Strategy Day held for staff in March 2010 and October 2011; and

constant communication and collaboration with respective authorities such as the Ministry responsible for social policy. This also entails production of speaking points for Ministerial personnel, compilation of reports, collaboration on media requests, etc.

**Way Forward**

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 positive profile for the Foundation, the three Agencies within its remit, and their services.
Looking back on all initiatives coordinated by the Marketing team is very satisfying, especially when there is positive feedback received from individual departments or services after particular campaigns. This way, the effectiveness of the initiatives is being gauged, especially those regarding fostering, volunteer recruitment, and other such campaigns that result in tangible feedback through an increase in applications or enquiries. Another satisfying point is that the tasks set for this biennium were on the whole accomplished while going through changes in the makeup of the team.

This was no easy feat especially when considering the tight deadline and the various ad hoc initiatives that the nature of the work dictates. Yet this proves the efficiency and solid teamwork that exists between all members of the Marketing office, who do their utmost to meet all pressing deadlines especially when dealing with the media and news items.

Ultimately, this is not to say that there is no room for further development in this field. The Marketing team does not only draw on past successful initiatives and replicates them, but is always striving to improve on them and move along with the necessities of the services operating within the FSWS while also tapping into new ways of communication. Operating within the social field still calls for the Marketing team to utilise effective channels considered mostly viewed by and persuasive with the target audience in mind.
Thus the way forward for the FSWS Marketing team includes some interesting tasks that will see yet further improvement and modernising of tactics used. These include:

- more use of social media networks to reach particular audiences especially when coordinating campaigns and promoting initiatives and causes;
- improve its coordination with the Agencies’ services to be able to combine use of media with community interventions for more effectiveness of the programmes coordinated by these services;
- better evaluation of marketing initiatives undertaken, possibly also through ways that would provide the team with direct feedback from the general public;
- further improvement on the internal communication aspect through the FSWS newsletter – FSWS link;
- further improvement in collaboration with other stakeholders when it comes to the protection of children and vulnerable persons prior to exposure in the media; and
- further improvement on its pro-active approach towards the media.

In order to reach its goals, the Marketing team after all needs the collaboration of other professionals from all three Agencies. Thus it is of utmost importance that it continues to strengthen and work closely with professionals from all the services because it is thanks to such collaboration that the Marketing team can ultimately be successful in its role of passing on messages to the general public, educate and be able to make a difference in society, especially when the aim is to reach out to individuals and families experiencing social difficulties.
## EU Projects

During the recorded period, the Administration, Social Marketing & Communications Division has been entrusted with various EU funded projects enlisted hereunder.

<table>
<thead>
<tr>
<th>Name of Programme</th>
<th>Details of the Awarding Body</th>
<th>Year of Award</th>
<th>Name of Project</th>
<th>Amount of Funds Received</th>
<th>Reference Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grundtvig Preparatory Visit</td>
<td>European Union Programme Agency (EUPA)</td>
<td>2011</td>
<td>Teaching of Basic Skills</td>
<td>€1,295.36</td>
<td>LLP/GRU/MT/PV/04/2011</td>
</tr>
<tr>
<td>Lifelong Learning Programme – Grundtvig In-Service Training</td>
<td>EUPA</td>
<td>2011</td>
<td>Parenthood: Psychological and educational approaches, techniques and methods to work in the network</td>
<td>€2,432</td>
<td>LLP/GRU/MT/IST/30/2011</td>
</tr>
<tr>
<td>Programme</td>
<td>Team</td>
<td>Year</td>
<td>Description</td>
<td>Amount</td>
<td>Code</td>
</tr>
<tr>
<td>------------------------------------------------</td>
<td>---------------</td>
<td>------</td>
<td>------------------------------------------------------------------------------</td>
<td>--------</td>
<td>--------------------</td>
</tr>
<tr>
<td>Lifelong Learning Programme – Grundtvig In-Service Training</td>
<td>EUPA</td>
<td>2011</td>
<td>Comprehensive Foster Care Preparatory Programme</td>
<td>€2,606</td>
<td>LLP/GRU/MT/IST/06/2011-002</td>
</tr>
<tr>
<td>Lifelong Learning Programme – Grundtvig In-Service Training</td>
<td>EUPA</td>
<td>2011</td>
<td>Comprehensive Foster Care Preparatory Programme</td>
<td>€2,606</td>
<td>LLP/GRU/MT/IST/05/2011-002</td>
</tr>
<tr>
<td>Lifelong Learning Programme – Grundtvig In-Service Training</td>
<td>EUPA</td>
<td>2011</td>
<td>Comprehensive Foster Care Preparatory Programme</td>
<td>€2,606</td>
<td>LLP/GRU/MT/IST/04/2011-002</td>
</tr>
<tr>
<td>Lifelong Learning Programme – Leonardo Da Vinci (Mobility)</td>
<td>EUPA</td>
<td>2011</td>
<td>Working Together to Develop and Provide more Supported and Sustainable Communities</td>
<td>€13,833</td>
<td>LLP/LDV/MT/MOB/VETPRO/04/2011</td>
</tr>
<tr>
<td>Youth in Action - Activity 1.1</td>
<td>EUPA</td>
<td>2011</td>
<td>Empowering Minds - Appreciating one’s own Culture, History and Environment through the Eyes of the Other</td>
<td>€16,909</td>
<td>MT-1.1-12-2011-R5</td>
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</table>

Foundation for Social Welfare Services
<table>
<thead>
<tr>
<th>European Year 2010</th>
<th>European Commission</th>
<th>2010</th>
<th>European Year for Combating Poverty and Social Exclusion</th>
<th>€140,290</th>
<th>EY2010 – MALTA</th>
</tr>
</thead>
<tbody>
<tr>
<td>ESF [2007-2013] / Malta Operational Programme II – Cohesion Policy 2007-2013: Empowering People for More Jobs and a Better Quality of Life</td>
<td>Planning and Priorities Coordination Division - Office of the Prime Minister (Malta)</td>
<td>2009</td>
<td>Me2: Integration of Persons with Disability into the Labour Market</td>
<td>€1,297,403</td>
<td>ESF 3.62</td>
</tr>
<tr>
<td>ESF [2007-2013] / Malta Operational Programme II – Cohesion Policy 2007-2013: Empowering People for More Jobs and a Better Quality of Life</td>
<td>Planning and Priorities Coordination Division - Office of the Prime Minister (Malta)</td>
<td>2009</td>
<td>Embark for Life - Integration of Young People into the Labour Market</td>
<td>€954,362</td>
<td>ESF 3.61</td>
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<tr>
<td>Lifelong Learning Programme – Leonardo da Vinci (Partnership)</td>
<td>EUPA</td>
<td>2009</td>
<td>FESAT Best Practice Exchange Partnership</td>
<td>€9,000</td>
<td>LLP/LDV/MT/PART/03/2009</td>
</tr>
<tr>
<td>Lifelong Learning Programme – Leonardo da Vinci (Mobility)</td>
<td>EUPA</td>
<td>2009</td>
<td>Safeguarding and Supporting Adults, Children and Families Living with Trauma</td>
<td>€17,842.64</td>
<td>LLP/LDV/MT/MOB/VETPRO/20/2009</td>
</tr>
</tbody>
</table>
Table 4: List of EU projects dealt with by the EU Department

Three of the most projects that necessitated considerable amount of energy and continual attention were the EY2010 Poverty project, the ESF 3.61 E4L Integration of Young People into the Labour Market and ESF 3.62 Me2 Integration of Persons with Disability into the Labour Market projects.

ESF 3.61, E4L - Integration of Young People into the Labour Market

The project provided individualised intervention and training to institutionalised youth, young people in risk of homelessness and those living in inappropriate housing. The project helped these young people to develop the necessary skills for their labour market integration and maintain suitable / stable employment. This was done through the assistance of the Professional
Foundation for Social Welfare Services

Youth Social Workers who supported the beneficiaries in settling into adequate living arrangements; in accompanying them to seek employment; and ensured follow-up of the skills obtained. Contracted trainers assisted the young people in addressing the skills needed in the world of work. Hence, the project’s overall objective was to support young people at risk of social exclusion, in getting into mainstream education and/or employment and to settle into an adequate housing arrangement, thus empowering beneficiaries to develop their social independence.

1. Project Purpose

This project intended to:

- bring structure and stability into the lives of young people at risk;
- help them become productive and independent by being actively involved in education and/or employment; and
- prevent their exploitation by the surrounding black market economy.

This project targeted young people who were either ending their placement from any institutional care (which provided them with shelter till the age of 16 years) or else were leaving any other care setting (mental care hospital, Corradino Correctional Facility, substance abuse programmes, and fostering), are homeless due to various reasons or were living in abusive / inappropriate situations. Kindly refer underneath for a detailed list of entities that have referred clients to the project.
2. Eligibility Criteria for the Project

All beneficiaries needed to meet set eligibility criteria in order to qualify to receive assistance that would be given to them through the Professional Youth Social Workers and the Psychologist across all actions of the project.

To be selected as a project beneficiary the individual had to be:

- within the target age group of 16-24 years old;
- homeless, at the risk of becoming homeless or living in an inappropriate housing arrangement;
- referred by a caring institution or youth agency; and
- committed and willing to find and keep suitable employment.

All beneficiaries who were referred and eligible to benefit from this project were accepted over and above the indicators’ ceiling.

3. Project Activities

Through daily living and relationships skills training, the project participants learnt the skills needed to maintain a healthy and secure lifestyle. They were taught skills such as budgeting, food preparation, personal relationship building and fostering, etc. The training was provided hands-on within the residence and at the E4L office where, for some, it offered the opportunity to engage in constructive activities outside their respective institutions.

This also included training in soft skills; that is, skills that help in personal relationships, dealing with stress, and managing difficulties in various life situations, particularly at the workplace. The duration of such training given to the clients spanned over the whole duration of their residential
phase. The frequency and the timing of the training given depended on the particular needs of the client and the assessment which will precede his/her admittance to the project and to the training module referred to. The popularity of such training was decreased from the beginning of the project. The need for participants to be engaged actively in the skills being facilitated was noted and hence various modalities were explored. Experiential learning activities were deemed necessary and as a result, the project contracted trainers who were willing and capable of taking the participants for outdoor activities like abseiling. These activities provided participants with calculated risk taking and helped them process the importance of the safety steps required for such activities. The ultimate aim was to allow participants to meet their need to engage in deviant activities in a socially acceptable way.

4. Preparation for Stable Employment and Skills Development

Young people were assisted in pursuing vocational training of their choice, and assisted all along the training delivery to ensure the quality of service delivered. The project offered nail technician training and hairdressing training where clients explored what is required out of such jobs before involving themselves into costs required from mainstream training. Marketing skills were also taught so that participants who had taken the mentioned vocational training could start building a client group for private practice.

The apparent limitation of such vocational training was the market value of such certification. This was because the project was not registered through the Malta Qualifications Recognition Information Centre and hence prospective employers might question the validity of such a certificate. Apart from that, participants needed the assurance that their effort is recognised. Where such assurance was offered – through the
food handling training – participants were more motivated for such training and indeed this training proved to be the most popular.

5. Car Driving Lessons

The fact that the project participants were not in possession of a driving license limited their opportunity of finding a job and hence clearance was acquired from the Managing Authority regarding such training. The following were the reasons behind the need for such opportunity:

- the beneficiaries’ chances of employment were always limited due to their living arrangements and instability in shelter, generally involved having to change work;
- participants had to resort to low income jobs such as cleaners and this, at times, required that they travel (by bus, meaning taking longer) to a number of places a day without being paid for it;
- participants could not apply for jobs such as delivery persons simply because they did not have enough money to pay driving lessons but they were otherwise capable of performing such a job;
- without a car driving license it provided difficult referring clients as factory workers employed on a shift basis – this because transport was not always made available and without any other kind of support, they were not in a position to get to work on time; and
- participants without a driving license were also limited in finding work in the catering field due to requirement of working late at night.

6. Semi-independent Living

Apart from the training delivery, some participants required a healthy and secure environment to live in; under the supervision of other professionals to help them learn to take their own decisions and plan their activities.
Osanna Pia Home and Fondazzjoni Suret il-Bniedem were contracted to offer such service. The ultimate aim of the semi-independent living contract was to enable the client to learn and/or unlearn behaviour that is prohibiting him/her from integrating into society and being self-sufficient.

7. Rent of Apartments

The projects provided independent living setups for project participants who needed assistance with housing issues, but were able to lead an independent life. Thus the project financed the rent of apartments for eight project participants for a fixed period of up to 12 months. The aim of this service was to give clients a chance to secure their job and to help understand their financial, personal and social responsibilities in living independently.

Contracts were made on a six-month basis where, meanwhile, participants were assisted in budgeting enough money for utilities, transportation, food, etc. Clients who were already settled in work were also encouraged to save up the rent, so that in a crisis situation (such as losing employment) the client has enough time to find an alternative, rather than ending up homeless. Upon verifying (through bank statements and receipts for goods) that the client had

Figure 29: One of the apartments rented to E4L beneficiaries
managed his/her money well, then they had the incentive of extension of contract.

8. Intervention of Professional Youth Support Workers

Professional Youth Support Workers were contracted to assist project participants in carrying out the plan of action which covered various areas of their life, including, personal development, skills development, social and other activities, job seeking and seeking independent living. There were a number of young people who, after leaving care and returned home, still needed assistance in independent living. In this case, the Professional Youth Social Worker helped to prepare them for semi-independent living (leading to independent living) when the family environment was not conducive to their development. In the case where there was more stability in the home, the Professional Youth Social Worker provided the intervention while the young person was still at home.
This project extended to other young people who live in the community but needed to spend time away from home because of various problems. The project reached out to young people who may still have been residing in their family dwellings which were not conducive to their physical and social well-being. These youths were assisted in various ways concurrently. Thus the project’s contracted staff members worked on a comprehensive action plan for the project beneficiaries and offered them assistance through the various actions of the project. The action plan was usually drawn up with the multidisciplinary team so to avoid replication of work and clear targets were set.

Once the client was settled into a safe and secure living arrangement, the Professional Youth Social Worker assisted the participant into finding a job and/or into pursuing training. Employment then offered other possibilities: to work for long-term independent living, career advancement, budgeting skills and other life skills needed for full social integration in the community.

The Professional Youth Social Workers were of great importance within the team, as they coordinated the interventions needed to be done with the participant; assessed their needs for training; explored work opportunities; engaged into skills matching; networked with prospective employers; and advocated for clients when needed. They also served to
encourage clients to engage in constructive leisure activities rather than join into deviant / criminal behaviour that would otherwise pose a risk on their social integration.

9. Aftercare

In order to ensure successful integration, the Professional Youth Support Workers followed up the persons whom they have assisted until the end of the project. Interventions with the client were less intense once the client finds a regular job. In the aftercare process, the Professional Youth Support Worker assisted the participant to recognise his/her potential in taking informed and calculated decisions independently of any help. Ideally, aftercare did not take more than six months, once the young person had been integrated well in the community.

10. Outreach Activities

Given that the targeted amount of participants had been exceeded in the early months of implementation, there was no need to carry out outreach activities in Malta. Having said that, all local entities were contacted by email and were also informed about such services through telephone calls.

On the other hand, there was only one referral from Gozo. Hence numerous outreach activities had to be carried out. NGOs, which included OASI and Dar Ġużeppa Debono were contacted and informed of such project. A meeting with the Social Work Unit was also held during which it transpired that there was a great demand for the Rent of Apartment Component of the project. The Professional Youth Support Worker had also held meetings at the Oratory of Don Bosco, whereby the E4L project was explained.
11. Workshops

13 workshops were held whereby participants were motivated in enhancing their social adaptability and readiness to assume responsibilities such as planning for their future. The workshops held addressed the following issues:

- An Introduction to the World of Work
- Employment & Training Corporation (ETC), My Rights & Obligations in the World of Work
- Financial Budgeting
- Self-Awareness and Development
- Deviance
- Relationships and Sexual Behaviour
- My Healthy Balance
- Team Building
- Look Good, Feel Good – Improving appearance to aid employment
- Communication Skills
- Retaining Employment
- Basic First Aid
- Cyber Crime – How to be careful when using the internet

12. One-to-one Job Seeking Assistance

Each Professional Youth Social Worker was allotted a number of project participants to assist individually and motivate intensely in adhering to the
aims and objectives of this project.

The quantitative results reflect a wide range of youth who came from institutional settings, as well as youth who were homeless due to various situations or who were in inappropriate housing arrangement. Usually these settings resulted in their dependency on social benefits, and thus this project needed to also target them and provide them with the necessary help and channel them to productive employment. The results of the achievement can be noted in Table 5.

<table>
<thead>
<tr>
<th>E4L Indicators</th>
<th>E4L Targets</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of vulnerable persons trained / supported</td>
<td>240</td>
<td>105</td>
<td>213</td>
<td>323</td>
<td>386</td>
</tr>
<tr>
<td>Number of vulnerable persons in employment or further study 6 months after receiving assistance</td>
<td>120</td>
<td>0</td>
<td>31</td>
<td>91</td>
<td>132</td>
</tr>
<tr>
<td></td>
<td>50%</td>
<td></td>
<td>16.3%</td>
<td>47.9%</td>
<td>69.48%</td>
</tr>
<tr>
<td>Number of participants gaining a qualification / certification</td>
<td>0.029%</td>
<td>0</td>
<td>0.016%</td>
<td>0.025%</td>
<td>0.040%</td>
</tr>
<tr>
<td></td>
<td>0.029%</td>
<td>53</td>
<td>81</td>
<td>110</td>
<td></td>
</tr>
<tr>
<td>Impact increase in the employment rate</td>
<td>0.037%</td>
<td>0</td>
<td>0.024%</td>
<td>0.06%</td>
<td>0.068%</td>
</tr>
<tr>
<td></td>
<td>0.037%</td>
<td>51</td>
<td>130</td>
<td>148</td>
<td></td>
</tr>
<tr>
<td>Impact increase in number of adult participation in life-long learning</td>
<td>40</td>
<td>0</td>
<td>0</td>
<td>39</td>
<td>48</td>
</tr>
<tr>
<td></td>
<td>0.029%</td>
<td></td>
<td>0.0286%</td>
<td>0.0352%</td>
<td></td>
</tr>
</tbody>
</table>

*Table 5: E4L project statistics*
ESF 3.62, Me2 - Integration of Persons with Disability into the Labour Market

People with disability are at a disadvantage on the open labour market when compared to other people. Thus this project targeted a particular group of people with disability, assessed their needs, strengths and abilities, evaluated their skills and competences, and placed 89 people, on 320 hour each, in a job exposure project scheme to enhance their chance to integrated into the labour market. The project focused specifically in rendering individually-planned interventions. This project thus offered innovative ways of addressing the problems that people with disability encounter in their bid to enter employment, by providing a variety of training, support and work opportunities that are tailored to suit the needs of the project beneficiaries and their significant persons in life.
This project centred round the following activities:

1. **Independent Living Skills**

   Participants were helped to become more independent and able to take care of themselves as much as possible. Skills such as basic personal money budgeting, basic cooking and nutritional needs, presentation of self and of arguments, and how to build and maintain professional relationships, were conveyed.

2. **Seminars**

   The participants together with their guardians or significant persons in their lives had the opportunity to discuss the day-to-day problems that persons with disability face with respect to employment with agencies such as ETC, unions and employers. Also, during these seminars, results from an ongoing study were presented together with results and progress reports for the project.

3. **Workshops**

   Skills imparted during these workshops included money management, independent living skills, job retention skills, boundaries and other subjects to enhance independent living skills.
4. Conferences

Four major conferences were held in the lifetime of the project, aimed at establishing and maintaining strong relationships between national agencies and employers to continue in their endeavour to act strategically and accommodate more persons with disability into the labour market. To this end, these Me2 conferences invited the participants and parents along with major organisations and government institutions working within the disability field.

5. Skills Audit and Job Matching

Every participant within the project was assessed and had one’s skills evaluated; this process helped in reaching the set target – that of focusing primarily on the individual skills to assist in developing further better quality of life. The participants that were ready to face a workplace were placed in job exposures initiatives through a matching process based on skills, abilities and preferences of same beneficiaries.

6. Vocational Learning

The participants were also assisted to target, apply and attend to a number of courses within the project according to their individual needs.
7. *Me2* Project Statistics

<table>
<thead>
<tr>
<th>Objectives</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of persons with disability receiving <em>Me2</em> services</td>
<td>105</td>
<td>356</td>
<td>430</td>
<td>436</td>
</tr>
<tr>
<td>Beneficiaries who found employment / continued their studies</td>
<td>0</td>
<td>48</td>
<td>66</td>
<td>72</td>
</tr>
<tr>
<td>Beneficiaries who found work and were directly assisted by <em>Me2</em></td>
<td>0</td>
<td>24</td>
<td>41</td>
<td>50</td>
</tr>
<tr>
<td>Beneficiaries entering into a life long learning initiative</td>
<td>0</td>
<td>200</td>
<td>215</td>
<td>280</td>
</tr>
<tr>
<td>Beneficiaries engaged in job exposure placements</td>
<td>0</td>
<td>15</td>
<td>45</td>
<td>89</td>
</tr>
<tr>
<td>Beneficiaries participating in UK job exposure placements</td>
<td>0</td>
<td>0</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>Persons attending <em>Me2</em> conferences / workshops</td>
<td>320</td>
<td>750</td>
<td>1,350</td>
<td>2,450</td>
</tr>
<tr>
<td>Persons who became members in the <em>Me2</em> Coop</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>52</td>
</tr>
</tbody>
</table>

*Table 6: Me2 Project statistics*

*Note: the figures in this table are accumulative per year*
Appoġġ Hotline Project

Other EU funds facilitated the continuation of the services rendered by the Appoġġ 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 protection to victims from this modern threat.

The project provided awareness, information and tips to children, educators and parents, about how to use the Internet safely. 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.

Way Forward

The Foundation for Social Welfare Services, by the same nature of services it renders, needs to be 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. 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

Human Resources

Throughout the two-year period between 2010 and 2011, the Human Resources, Training and Research Division underwent several changes. The full staff complement of this Division consists of a Senior Manager, Manager, Research Leader, two Research Executives, two Training Executives, a Recruitment Executive, and one Administrative Support Worker servicing the whole Division.

In 2010 there was some restructuring within the Human Resources Division. Additionally, at the end of 2010 the Senior Manager resigned. This post was vacant for a couple of months until a new Senior Manager was recruited in March 2011. Furthermore, one of the Training Executives was successfully selected for another internal position. A replacement was found. Later in June 2011, the newly recruited Training Executive resigned. The latter was replaced in September 2011.

By the end of 2011 the Human Resources, Training and Research was servicing 699 employees assigned to Aġenzija Appoġġ (239), Aġenzija Sapport (343, including Day Centres), Aġenzija Sedqa (82) and Foundation
for Social Welfare Services Head Office (35) including Senior management. The FSWS reached an agreement with PHRF (Physically Handicapped Rehabilitation Fund) at the end of February 2011 whereby following an interview, all Social Workers working with PHRF were transferred to FSWS, benefiting from the same working conditions as their counterparts within FSWS. This harmonisation helped in eliminating any tension that might have risen between Social Workers working under the same leadership and in the same premises, alas with different conditions.

1. **Collective Agreement**

Negotiations for a new FSWS Collective Agreement started in 2010. Amendments were made and discussions were held between FSWS management, the Ministry of Finance and the *Union Haddiema Magħqudin* (UĦM). Several meetings were held throughout 2011 whereby representatives of both FSWS and the Union presented their proposal and/or counterproposals.

2. **Policies and Procedures**

During the covering period, several policies were amended and/or updated to reflect changes within the exigencies of the services. These included the Motor Vehicle Policy, Personal Appearance / Dress Code, and Sexual Harassment policies. There were also other internal procedures which were introduced.
3. Employee Handbook

Work on the update of the Employee Handbook started in 2011 prior to being circulated among all employees within the Foundation. This is a very user-friendly, bi-lingual tool for staff members.

4. Staff Queries and Movements

The Human Resources function received a myriad of queries from staff, which usually were related to work conditions. In order to facilitate matters, the Human Resources Manager worked closely with the Administration Executives of all Agencies.

Within the setting of FSWS employees have the opportunity to forward their request for a lateral movement from one unit to another or even from one Agency to another. A good number of requests have been entertained on the basis of placement availability. This ascertained an opening prospect for employees who for some reason or another were no longer feeling comfortable working in a particular unit. Hence they remained within the FSWS but changed the role and/or team. Consequently, employees were retained within the Foundation whereby their experience was not lost but was shared within the new setting.

5. Performance management

Prior to 2010, an extensive and elaborative exercise was carried out pertaining to Performance management. With the resignation of the Senior Manager the Performance management System did not kick off as envisaged in 2010. One of the main tasks of the newly recruited Senior Manager was to take up this project and continue where it left. Although most of the groundwork had already been carried out, it was felt that a simpler format,
which could be adopted by all level of employees, had to be introduced. Hence, preparatory work and consultation with management commenced. By end of 2011, the forms for the Performance Appraisal were in their final stages. It is envisaged that during 2012 all employees would have conducted their respective performance appraisals.

6. Eligibility Reports and Interviewing Report

As a measure for an expeditious and more effective outcome, the interviewing format changed. More weight was given to case studies, rather than a considerable number of questions. This proved that whereas the majority of eligible candidates sitting for an interview did well in answering straightforward theoretical questions, when it came to more practical scenarios, the interviewees were predisposed to exert more effort in providing the correct reply. Therefore, with such modifications, members of the interviewing boards were in a better position to assess the interviewees. During this process it is imperative to select the best candidate for a particular vacancy, as the interviewing process is very time consuming.

7. Complaints Handling

One of the remits of the Quality Assurance and Systems Auditor was to handle clients’ complaints. However, in November of 2011, due to the restructuring within the Human Resources division, handling clients’ complaint became part of the Human Resources Manager’s remit. Throughout the recorded period there were one and four complaints by clients in 2010 and 2011 respectively. All complaints were concluded, as most of them addressed aspects of service delivery.

Conscious of the importance of handling complaints in a highly efficient and professional manner, the Foundation has committed itself to ensure that in
every Agency and in prominent places in the customer care areas, boards were put up in both Maltese and English with information to service users on their right to complain and the procedures that have to be followed when filing a complaint.

8. Code of Conduct

Work has been carried out on the draft version of the Code of Conduct. It is envisaged that once endorsed and finalised, a copy would be made available to all employees.

9. Equality Mark

The Foundation for Social Welfare Services has shown its commitment towards gender equality by applying for the Equality Mark Certificate in 2010. The FSWS prides itself in being among one of the first entities to be awarded with this Equality Mark. Obtaining this Certificate was possible after the FSWS went through a thorough process whereby officials from the National Commission for the Promotion of Equality (NCPE) scrutinised all documentation provided by FSWS as concrete evidence that policies promoting gender equality were in place and were being followed. These included the Equal Opportunity Policy, Sexual Harassment Policy as well as other policies. The FSWS Collective Agreement encompassed equal salary scales according to position not gender, adopted family-friendly measures to all employees.
employees irrelevant of gender, all notices / material were circulated amongst all employees, so on and so forth.

The FSWS had also set up an internal committee on equality. Each Agency within the FSWS had its representative on this committee in order to take all necessary action in case of any complaint. It is worth mentioning that to date, the FSWS has never received any complaint regarding gender inequality.

10. Freedom of Information (FOI)

The Human Resources Division was involved in providing all necessary information about the Freedom of Information Act. Both the former Senior Human Resources Manager and the Human Resources Manager as the FOI Officer and alternate respectively, attended several training and preparatory sessions. During the recording period all was geared up for the subsequent implementation of the Freedom of Information Act.

11. Recruitment

FSWS is considered as a large-sized entity as it employs almost 700 people. Due to the large number of employees, the recruitment function plays a key role within the Foundation. The process of recruitment is quite elaborate and time consuming. Between 2010 and 2011, a total of 196 employees were
selected for various posts as indicated in Table 7. These were mainly replacements, however there were also some new positions.

<table>
<thead>
<tr>
<th>Position</th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Workers</td>
<td>24</td>
<td>17</td>
</tr>
<tr>
<td>Support Workers</td>
<td>25</td>
<td>44</td>
</tr>
<tr>
<td>Administrative Support Workers</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>Executive III</td>
<td>11</td>
<td>11</td>
</tr>
<tr>
<td>Customer Care Clerk</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>Community Worker</td>
<td>5</td>
<td>1</td>
</tr>
<tr>
<td>Psychotherapist / Psychologist</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>AČČESS Manager</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Prevention Facilitator</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Family Therapy Worker</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Service Manager</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Accountant</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>EU Project Administrator</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Supervisor SAV</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Executive II</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Executive I</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td>Safer Internet Administrator</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Safer Internet Officer</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Senior Manager</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>EU Executive</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Nurses</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Legal Advisor</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Assistant Manager</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Coordinators</td>
<td>0</td>
<td>7</td>
</tr>
<tr>
<td>Leaders</td>
<td>0</td>
<td>6</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>82</strong></td>
<td><strong>114</strong></td>
</tr>
</tbody>
</table>

Table 7: Recruitment, 2010-2011
The Foundation’s core business is to provide social welfare services, and therefore is one of the main employers for Social Workers and Social Workers in Malta. Hence, it only stands to reason that as indicated in Table 7 above, a significant number of frontliners like Social Workers and Support Workers were recruited.

Apart from constantly liaising with different government departments and the Employment & Training Corporation, the Recruitment Executive together with the Human Resources Manager were involved in setting up of interviewing boards as well as informing prospective candidates whether they were eligible to sit for an interview or not. Following the selection process, all successful candidates were informed that they had been chosen. Once the selected candidates accepted the position, the Recruitment Executive met each new recruit and informed them about conditions of employment. This was followed by the drawing up of a contract of employment.
Training

Although – as already indicated earlier – the Training Department underwent several changes, nevertheless training remained a priority for the continuous development of employees. Thus, several training initiatives, most of them tailor-made, were organised in order to enhance the professional skills of employees.

1. Various Local Training Initiatives

As demonstrated in Figure 38 and Figure 39 below, throughout 2010 the number of hours in training delivered for FSWS employees totalled to 7,399 hours, whereas in 2011 the total number of hours in training increased to 9,064 hours. This shows that, on average, each employee attended nearly 10 hours of training in 2010 and approximately 13 hours of training in 2011. One has to take into consideration that there were other informal training sessions which were not recorded by the Training Department. These included those information sessions held by staff members who attended particular training sessions / conferences / courses and then disseminated information to their colleagues. The training delivered varied from First Aid courses to food handling, from drug updates to medication training. Other training included motivational interviewing, training on supervision, dual diagnosis, reflective practices, working with fear, media interventions, and much more.
Throughout the recorded period, the Human Resources Manager together with the Training Executive evaluated the outcome of the Crisis Prevention Intervention (CPI) training. In addition to this a training needs analysis was carried out among Social Workers. As a result, it was decided that instead of
the CPI, a newly tailor-made training should be designed as a substitute. Following several preparatory meetings, a suitable training programme was designed by several internal professionals who shared their expertise and designed the Mandatory Skills Training Programme for Support Workers. It is envisaged that this training shall start in 2012.

Another initiative was that following each training initiative, an evaluation form had to be filled in by participants. Then the Training Executive compiled data and subsequently produced a report. Such report depicted whether a particular training was relevant to those who attended and also whether the training delivered was up to the desired standard. This was considered as a very relevant measuring tool by the Training Department, whereby the Trainer was being monitored on the level of training provided. This assisted the Training Executive in being more selective on the choice of training as well as Trainers.

2. EU-Funding Training Opportunities

One of the main endeavours of the Training Department within the FSWS was to maintain its commitment to tap into related EU funded opportunities to offer training and expose staff to good practices in other European countries. During the recorded period there were three applications which were accepted.

i. FESAT – Best Practice Exchange Partnership

Through the FESAT (The European Foundation for Drug Helplines) Best Practice Exchange Partnership, a Leonardo Da Vinci Partnership Project, under the Lifelong Learning Programme, guidelines have been developed. Malta, through Supportline 179, gave its input during the compilation stage of the manual. The focus was then on the second pillar, namely support and supervision. A report was compiled by the Coordinators who worked within
Supportline 179 on the supervision and support which the workers and volunteers receive.

Since participants and staff were involved in the formulation of the guidelines, the outcome was very positive. Furthermore, due to their direct involvement professionals and volunteers were more willing to utilise these guidelines on a regular basis. It is worth mentioning that these guidelines are user-friendly and very easy to follow. The volunteers find it easy to refer to, as the guidelines offer quick and practical step by step support on the various matters which they may encounter when answering the helpline.

The beneficiaries of this project (which apart from employees included also a volunteer from Supportline 179), visited VAD – a drug and alcohol helpline where they had a good insight on addictions. Apart from this, participants also visited de Zelfmoordlijn which is a 24 hour suicide prevention helpline in Belgium. This service works jointly with government hospitals, media and other social networks to identify signs of suicide. A child and youth helpline manned by volunteers was also visited. This experience proved very fruitful among the participants particularly the guidelines and the shared experiences with other specialised entities in Europe. The organisation of this partnership played a major role in determining the success brought about with the issuing of the new guidelines.

ii. **Enhancing Awareness on Issues related to Employability of Persons with Disability**

A total of six employees from Aġenzija Sapport benefited from this opportunity. Three of them visited Sense in United Kingdom, which is a national charity that supports and campaigns for children and adults who are deaf-blind. The main aim of this placement was to get more information on how to deal and help the deaf-blind people in their everyday needs and helps the society to accept them more. The beneficiaries obtained more ideas and
how to improve their communication modes and aids, which included non-verbal communication, symbol system, sign and languages, speech-based methods, text-based methods and total communication, particularly touch and smell, which must be developed to the full.

Another three beneficiaries from Aġenzija Sapport visited DESSA in Ireland, a national organisation which develops and deliver social inclusion initiatives to people with disabilities and their families. Exposures to other European agencies specialising in disabilities which have been operating for decades undoubtedly provided a mine of information and practices which have been tried and tested.

iii. Safeguarding and Supporting Adults, Children and Families Living with Trauma

During this placement which took place between the 13th June and 26th June 2010, all six beneficiaries had the opportunity to visit 12 services which form part of the Barnardo’s Organisation around the United Kingdom. The Barnardo Organisation is an NGO which provides a myriad of services for more than 190,000 children, young people and their families every year. Our beneficiaries had the opportunity to experience different services presenting different cases and scenarios including severe cases of trauma, which our beneficiaries had never encountered during their line of work. In the future, should similar situations be presented, they are equipped to deal with them through first-hand experience acquired during this placement.
3. Commonwealth

The Commonwealth Fund for Technical Co-operation in partnership with the Governance and Institutional Development Division sponsored a project earmarked for training practitioners and management on *Promoting Effective Children Protection in Malta* and *Child Focused Court Proceedings in Parental Separation Cases*. The full project was spread over a year, starting in June 2010. During 2010, several preparatory meetings were held between Appoţţ’s representatives, Training Executives and the Commonwealth delegate Mr Adeyemi Ogunmefun.

The Project for January till June 2011 was earmarked for training on two different levels, mainly the Practitioners and management. The practitioner level training focused on improving skills level for frontline workers within the Appoţţ Child Protection Service as well as practitioners in the area of children and the courts and other collaborating Ministries, Departments and agencies. Specific areas tackled whereby room for improvement and development were necessary included:

i. interagency work on service provision;

ii. information sharing;

iii. assessment and case development; and

iv. case management.
The training for practitioners dealing with child protection spread over a period of five days, as was the duration of the training in the area of children and courts. All training was delivered by both foreign and local experts in the field. For the training in child protection the foreign experts were Mr James Blewett, who is the Research Director, Making Research Count, Social Care workforce Research Unit, King’s College, London. Assisting Mr Blewett, were several Maltese experts mainly Ms Stefania Sacco, Ms Veronica Ellul, Ms Luisa Eminyan and Ms Marita Galea (Psychologists) and Dr Rita Mifsud (Lawyer). The training pertaining to children and the courts was delivered by foreign trainers. These were Mr Phil King (Director), and Ms Anne Lowe and Ms Allison King (Associates) from the Independent Social Work Associates, United Kingdom.

The management level training focused on developing the management capacity of senior officials in Appoġġ as well as other relevant entities. Training content included:

i. information sharing and case management;
ii. management across boundaries and fostering networking;
iii. outcome-focused management; and
iv. leadership skills development and change management.
This training spread over a period of three days and focused on developing management’s capacity of senior officials within Aġenzija Appoġġ and other senior officials working for different relevant entities in the areas covered throughout this training that is child protection, and Children and the Courts. The aim was to enhance harmony between Managers within Appoġġ and other Managers from different entities. A resource pack with documents used during this training was created that professional could utilise during the course of their work. Local experts from ThinkTalent Limited Malta delivered this training.

Figure 41: FSWS management during a training session by ThinkTalent Limited Malta
Research

The FSWS values research as a tool to further scientific knowledge about current social issues and as a foundation upon which service provision and policies can be developed. The FSWS Research Office produces data reports regarding its services on a regular basis and conducts research studies independently or together with other national or international entities. It also collaborates with the FSWS Research Review Board in reviewing requests to conduct research within the FSWS and is involved in other activities, including the provision of statistical data and research-related information to requesting entities and individuals.

1. Collection, analysis and reporting of service-related data

   i. Production of reports
   The collection and collation of service-related data from the Foundation’s entities have continued throughout the period under review. Half-yearly and annual statistical reports, as well as a report highlighting trends over time, were produced for Sedqa, Appoḡġ and Sapport. A trends report for Sapport was produced for the first time in 2011. These reports provide information predominately to Government and Foundation-level decision makers.

   ii. Amendments to data collection systems
   In 2010 and 2011, regular meetings were held with Appoḡġ, Sedqa, and Sapport respectively to monitor data collection carried out within the Agencies, and to update and amend the data collection forms and databases as a result of changing needs and exigencies of services. Protocols for the use of new forms and manuals on the use of new databases were produced and training was provided. Data also had to be imported from old to new databases, and recoded where necessary. In 2011, particular emphasis was given to the data collection system within Sapport.
iii. **Drug treatment demand data**

Treatment demand data from Sedqa, which encompasses socio-demographic and drug-related information, is passed annually by the Research Department on to the National Focal Point for Drugs and Drug Addiction, where it contributes to providing a picture of the drug situation in Malta. This data together with data from other drug treatment centres across Europe, is utilised by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA). As part of the treatment demand indicator, this information contributes towards providing objective, reliable and comparable information at a European level on drugs, drug addiction and their consequences.

2. **Research Projects**

   *i. The European School Survey Project on Alcohol and other Drugs*

The ESPAD is conducted every four years among 15 to 16 year olds in many European countries. This school-based 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. In 2010, preparations for the large scale study were initiated and included meetings with local stakeholders and the organisation of an international meeting for ‘small countries’, which was held in Malta, with the aim of discussing and developing country project plans. In 2011, the fifth ESPAD study was conducted in Malta by the FSWS, in collaboration with the Directorate for Educational Services, the
Student Services Department, Education Psycho-Social Services, the Anti-Substance Abuse Service within the Education Psycho-Social Services, the Directorate for Education in Church Schools, and the Independent Schools Association. Valid questionnaires were returned from 3,377 Form 5 students across Malta and Gozo. On a European level, 39 countries participated in the ESPAD study, with the involvement of more than 100,000 students. Both the national and international ESPAD reports can be accessed through www.fsws.gov.mt.

**ii. FSWS services: evaluation report**

During 2011 the Research team conducted a qualitative study of the service provided by Sedqa’s Substance Misuse Outpatients Unit (SMOPU) which was intended to deepen the understanding of the processes involved in services delivery and elicit information about factors that help and hinder positive client outcomes. A similar exercise for other units that directly deal with service users within the Foundation’s Agencies had been carried out in 2009, and the resulting report finalised in 2010. The fieldwork for this study had been conducted with staff working with service users and the Managers and Operations Directors of such services.

**3. Review of Requests to Conduct Research within the FSWS**

During the period under review, the Research Department has received 95 requests to conduct research within the FSWS. Most of these requests came from students working on their dissertation in part fulfilment of their undergraduate degree at the University of Malta. Interestingly, between 2009 and 2010, the number of requests from postgraduate level students increased from nine (17%) to 22 (52%) - Figure 43. Once a Research Application Form, together with the necessary documentation, is received by the Research Department, the application undergoes a review to check whether the research adheres to the necessary ethical standards and to determine, *inter
alia, its impact on the provision of services and the availability of study participants. Information about research requests and Research Application Forms are available through www.fswn.gov.mt.

Figure 43: Percentage of research study applications received by course level, 2010-2011

4. Other Initiatives

i. Commission work
A member of the Research team participated in the Domestic Violence Commission’s Sub-committee on Research and Data Collation. Regular meetings have been held since 2007. In 2010 and 2011, the main focus of the sub-committee was the production of a study entitled “A nationwide research study on the prevalence of domestic violence against women in Malta and its impact on their employment prospects”. Another Research team member has sat on the National Commission on the Abuse of Drugs, Alcohol, and other Dependencies since 2011.
ii. **Attendance at international meetings and seminars**

In both 2010 and 2011, personnel from the Research Department have attended and conducted associated work for the following annual expert meetings held at the EMCDDA: Prevalence and Patterns of Drug Use among the General Population; Treatment Demand Indicator; and Problem Drug Use. One-off meetings have also been attended on substitution treatment among General Practitioners (in 2010) and on Data Collection, Indicators and Definitions, as an appendix to a Committee Meeting on National Alcohol Policy and Action (in 2011). International meetings have also been attended in relation to the Foundation’s work on the ESPAD study.

iii. **Data dissemination and completion of questionnaires**

The Research team is responsible for forwarding statistics and information as per request from ministries, management, media and other approved sources. To this end, the Research team was periodically asked to collate data which would for example answer parliamentary questions. The Research team was also asked to provide data which would help answer questionnaires developed by national and international bodies. In 2010 and 2011 these questionnaires included the *Global Survey on the Follow-up to the United Nations Study on Violence Against Children; WHO / UNICEF / UNAIDS: Monitoring and Reporting on the Health Sector Response to HIV / AIDS 2010-2011; DAPHNE Questionnaire on Policies, Practices and Key Stakeholders in Relation to Sexual Assault Across Europe, and the questionnaire on the Prevention of Child Maltreatment and Other Adverse Childhood Experiences.*
"Aġenzija Appoġġ as the National Agency for children, families and the community, safeguards and promotes the well-being of these persons through the development and provision of psycho-social welfare services."
Appoġġ is the National Child and Family Welfare Agency, offering a wide range of generic, community-based and specialised services to children and families in need, in particular those who are at risk of poverty and social exclusion, or those requiring protection. In line with its reviewed Mission Statement, the Agency focuses on safeguarding and promoting the well-being of children, families and communities through the development and provision of psycho-social welfare services.

The years 2010 and 2011 were yet another two years of service which again saw Appoġġ through various ups and downs, accomplishments and challenges; two years of direct work with our service users, around whom the Agency is centred, two years of networking with other entities, reviewing and improving on our ways of operating in order to ensure the best possible service to those requiring it.

This biennial report will give a detailed overview of all the work carried by the different services throughout the two years under review. However, it is worth noting that at the core of the services is the commitment to improve the quality of life of persons, whether they are minors or adults; those who are living in poverty or at risk of social exclusion, whose life circumstances make them more vulnerable; those needing protection from any form of abuse, violence or exploitation – these are the people who remain at the heart of the
Agency operations. It is for whom Appoġġ exists and for whom all its staff continues to strive daily to use all available resources to their utmost effect in order to offer a good quality service; for whom we strive constantly to improve on existent services.

This is all done through a team of dedicated and committed professionals, who despite various challenges and limitations, work very hard to ensure that is done with greatest responsibility, professionalism and dedication. We will continue to work to make best use of the resources available, to improve skills and enhance our capacity, in order to always respond better to the current and emerging needs.

Operational Review and Standards

One way of ensuring that the Agency’s services are of the best possible standard is to review our own operations regularly. This is given priority within the organisation.

However it is acknowledged that Appoġġ is not the only service provider in this area of work, and hence networking with other stakeholders remains a priority. Thus, over the past two years working relationships with various entities continued to be establish and developed. Amongst the most significant are the Residential Homes for adults and children, run by the Church and other Non-Government Organisations.

Various protocols and working agreements were put in place or revised, in order to ensure continuation in the service delivery between Appoġġ and other NGOs. Regular meetings were also held with the Children and Young
Persons’ Advisory Board and with the Commissioner for Children, in order to review and explore ways of better collaboration.

Amongst the policies and/or protocols under review, it is pertinent to refer to the review of the Child Protection Policy for Schools and the Protocol with the Department for Social Security relating to the child-in-care benefit, and other intra-Agency protocols, in particular, the Fostering and Looked After Children Protocol, and protocols with agencies in Gozo, in particular with Dar Ġużeppa Debono and the Gozo Social Work Service. Other operational procedures for Appoġġ services were finalised during this period – a measure which ensures that workers are guided by a set of procedures to ensure uniformity and standards in their interventions. This is an ongoing process. Manuals of Procedures need to be alive, to respond to new situations and to new practices introduced – thus the process of updating of manuals continues to be a regular exercise.

It has been mentioned several times that there is ‘duplication’ of work in the social welfare sector. Duplication of work brings along a waste of resources, and thus the Agency embarked on an exercise to assess whether services within the Agency and within other FSWS agencies were carrying out the same duties. It was concluded that although no two services were the same, some services were in fact similar in nature. Therefore, by joining them, we could ensure better use of our resources. As a result, the Teen Support Service of Aġenzija Sedqa and Adolescent Outreach of Appoġġ were amalgamated. Today they form the Youth in Focus team, under Appoġġ. This service now deals with young people with challenging behaviour, and also addresses experimentation with substances. This has brought about uniformity in service delivery and sharing of expertise, while also giving a more holistic service to young people.
Parallel to this, staff within the *Programm Uliled Darna* and Supportline 179 services were also brought together. Both services work with a pool of volunteers, and by bringing them together, recruitment campaigns, training programmes, activities and other initiatives were also shared, thus improving the services’ efficiency. Preparations were also well underway for the amalgamation of the Initial Response Service and the Generic Service of the Agency, as well as the Psychological Service and Family Therapy Service of Appoġġ and Sedqa. These are planned to be finalised during the year 2012.

Early in 2010 the Agency handed over the Smart Kids Child Care Centres to the Foundation for Educational Services, since the provision of child care was established by Government to form part of the education remit. An organisational re-structure was also undertaken during this period. Thus towards the end of 2011, the portfolios of the respective service Managers were changed, with the aim of diversifying roles and tasks, creating better synergy within the Agency and increasing opportunities for growth and development.

During this period, Aġenzija Appoġġ received accreditation to offer fostering services, and is therefore now recognised at law to provide such services. This brought about new challenges as the Agency was for the first time exposed to external assessments by the Central Authority that inspected the existing Appoġġ Fostering Service before issuing the accreditation certificate. Subsequent to this, the Agency also applied for accreditation for the Adoption Service, once such applications were issued by the Central Authority.

It is important to note that various challenges and difficulties were also encountered during this phase. Concerns over out-of-home placement for minors continued to be a major concern to the professionals within the Agency. The Agency continued to give this issue its due attention and worked hand in hand with the State to try and develop a plan to address this concern. The development and expansion of the Fostering Service was still being
given priority by the Agency, which continued to implement its policy of placing minors under the age of three years in foster care. Towards the end of 2011, the Out-of-Home Care Programme was launched. The programme focuses primarily on engaging, training and assessing prospective foster carers to provide care to children with specialised needs. It is hoped that through such initiatives and others elaborated upon in the Children’s Services write up of the report, the situation of availability of placements for minors needing out-of-home care will continue to be worked upon along with other stakeholders responsible for the well-being of these children.

In order to continue ensuring quality of service, the Agency started to promote the concept of reflective practice. All Leaders and Managers received training in this regard and reflective supervision was established for Leaders and Managers – thus creating the space for discussion and exploring opportunities for further development. Additionally, an exercise for change in practices was also carried out, whereby each service identified and prioritised areas of service delivery that could be changed and/or improved, and committed itself to implement the required changes. Such innovative ideas motivated workers since it involved them in decisions related to the service output thus ensuring better outcomes.

**Commonwealth Consultancy**

One significant initiative undertaken by the Agency during this period was the Commonwealth Consultancy Project. This was a development on a previous project that had focused on skills development of professionals as well an evaluation of the Looked After Children Service. The Agency put forward a new proposal for funding, and the Commonwealth approved this project, as a result of which the following initiatives were undertaken:
- A legal expert, Dr Ruth Farrugia, was commissioned to draw up a report on the *Assessment of Lacunae in Maltese Legislation on Children*. This exercise was completed in April 2010.

- A scoping study examining the needs and difficulties of Maltese children involved in Court procedures as a result of parental separation was carried out by Ms Diana Houlston, a UK Independent Social Worker. Various workshops and meetings were held and a report was finalised in May 2010.

- *Building on Strengths: Promoting Effective Child Protection in Malta* – various workshops were facilitated by a foreign consultant, Mr James Blewett from King’s College in London, and the report was finalised in May 2010.

- As a result of the latter two reports, a clear need for training was identified, and once again, the Commonwealth approved a training programme in the areas covered by the Reports. Three training programmes were delivered by various local and foreign consultants. The programmes covered:
  i. areas of child protection focusing mainly on skills to improve child protection by taking decisive action when children need to be protected, delivered by various local experts together with Mr James Blewett from King’s College, London;
  ii. *Children and the Courts* – programme aimed at exploring new and existing practices pertaining to cases where children have to witness in Court, and to enhance the skills of local professionals who work in the field. The training programme was organised in collaboration with Mr Phil King and Ms Ann Lowe from Independent Social Work Agency UK; and
  iii. a training session on management *Development*, targeting the management of the Foundation for Social Welfare Services and the management of entities working in the areas of child protection and children and the Courts, emphasising on
practical ways of improving frontline practice within and between various agencies in Malta. This training programme was organised by a local organisation, ThinkTalent Limited Malta. The training programme was delivered by Mr Patrick Psaila, Ms Beverly Cutajar and Mr Joe Dimech.

Professional development for workers continues to be a priority and various other training initiatives were undertaken during this period. There were a further two major initiatives where the Agency managed to obtain funds and foreign experts delivered two separate programmes – one addressing the issue of dealing with fear, and another as preparation for a training programme on child abuse over the internet, a relatively new area within the Agency’s remit of service delivery.

**Legal / Conventions**

Legal frameworks and guidelines continue to be an important tool used by professionals in delivering their services. The Law supports a number of interventions and promotes the rights of some of the most vulnerable of persons who utilise the Agency’s services. In view of this, Malta’s signature to the Council of Europe Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse (6th Sept 2010) was very welcome, just as was the introduction of the Guidelines of the Committee of Ministers of the Council of Europe on Child Friendly Justice (adopted by the Committee of Ministers on 17th November 2010 at the meeting of the Ministers’ Deputies).
The launch of the Draft National Children’s Policy in 2011 was also an important milestone, and the Agency provided feedback and participated fully in national discussions. There were also proposals by the Agency for amendments to the Adoption Act, the Domestic Violence Act and the Children and Young Persons’ (Care Orders) Act.

**Involvement in Committees, Working Groups & Conferences**

Appoġġ is committed to be a voice to the people it serves, to ensure that their needs are heard not only within the Agency and FSWS, but also amongst other entities that can be of influence in the promotion of their rights and well-being. For this reason, Appoġġ has remained committed in participating in various committees and working groups – to ensure the promotion and advocacy for the voice and rights of service users whenever possible. Over the years, the Agency has invested considerable time in this regard. Amongst the most significant are:

- participation in a focus group as part of the Research Project on Looked After Children carried out by the Commissioner for Children;
- participation in the implementation of this research project;
- participation in a working group developing Adoption Standards;
- participation in a Core Group formulated to conduct an evaluation of a residential facility for young girls;
- representation on the Sexual Assault Response team Task Force, which had the remit of drawing up a proposal for the setting up of a response team to deal with cases of sexual assault;
- representation on the Domestic Violence Commission; and
- representation on the Human Trafficking National Task Force.

The Agency’s commitment to the sector is also a major motivator to look out for opportunities in other countries, whereby Appoġġ was represented and staff participated in a number of initiatives in conferences or working groups. These allowed our professionals not only to contribute and share experiences with other countries but also to gain knowledge and experience from our counterparts. All of this was done by seeking and acquiring sponsorships.

Over the years under review, professionals from the Agency participated in the following:

- Appoġġ joined a FESAT initiative (which is a European organisation for entities providing a helpline for persons with substance abuse problems) in a project forming part of the Drug Prevention and Information Programme 2007-2013 Grant Scheme. The aim of the project was to improve the quality of service provided by European Drug Helplines. Two Appoġġ workers, along with other workers from Sedqa, participated in the project during which procedures and standards for helplines were developed. As part of the project, one worker and one Supportline volunteer also participated in an exchange visit to a Helpline in Belgium and participated in the final seminar, while representatives from Holland visited the Supportline of Aġenzija Appoġġ.
• Conference in Brussels held between the 5th and 7th December 2010 entitled *Children have their say* that was attended by two minors living in out-of-home care, accompanied by two Social Workers. The conference was organised by the European Union Agency for Fundamental Rights in collaboration with Eurochild, with the aim of promoting the rights of looked after children and unaccompanied, asylum seeking minors;

• Conference focusing on *Ensuring Justice and Protection for all Children* organised by the European Union Agency for Fundamental Rights in Brussels between the 7th and 8th of December 2010. The conference brought together professionals from different areas of child protection – from the judiciary, policy makers, police, social welfare personnel and lawyers. The focus of the conference was the challenges in providing access to protection of children, and on solutions in providing access to protection.

• Insafe meeting – December 2010, which brought together all helplines and awareness centres of the European Union. The meeting included workshops, presentations by experts on pertinent issues in relation to child abuse online, and sharing of resources.

• International conference on *Quality in Alternative Care* in Prague, 4-6th April 2011 organised by SOS children’s villages.

• Workshop by Eurochild’s *Thematic Working Group on children in Alternative Care* on the 7th April 2011 in Prague.

• International conference on *Effective ways to prevent and to combat violence against women and domestic violence* in Bratislava on the 29th of November 2011, organised by Norway Grants and the Ministry of Justice of the Slovak Republic.

• Council of Europe conference – November 2011: *Building a Child Friendly Europe – turning a vision into reality*.

• Home-Start Network Meeting in London in October 2011.
Way Forward

It is opportune to stop from time to time and look back at all the milestones that have been reached. The work undertaken by the Agency is vast and this report shows the extent of the Agency’s service delivery. Acknowledging the Agency’s achievements is essential – it motivates all staff members and encourages them to move ahead. At the same time, the exercise helps all to realise that further development is required. The social welfare sector is a sector that is ever evolving. People’s needs change, new trends and social issues emerge, and the Agency needs to remain abreast with these new social developments. It needs to remain relevant to the needs of those who require the services – after all, the Agency exists only to address these needs. In this light, we are committed to continue to ensure that we respond effectively and efficiently to the needs of the service users, to the needs of the most vulnerable in society, to promote their rights and to be their voice. This has been done in the past, and will continue to be done, through a committed, professional and dedicated workforce. I sincerely thank them for believing in our service users, for believing in their rights and for standing up for them. I am confident that in the coming years we will continue to work together to promote a better quality of life amongst the most vulnerable in our society.
Children Services

Introduction

During the period under review, the Appoġġ Children’s Services portfolio incorporated the following services:

- Child Protection Service (CPS)
- Looked After Children Service (LAC)
- Fostering Service
- Adoption
- High Support Service (HSS)
- Media

In February 2010, the Adoption Service was separated from the Looked After Children Service, after the two services had been amalgamated since 2007. This strategic decision was taken to free the Looked After Children Service from adoption cases and to focus on the increasingly complex situations of children and young persons in alternative care. Following the launch of the Out-of-Home Care Programme in November 2011, the Looked After Children Service saw a change of leadership as the Service Leader was appointed to manage the services under this new programme. By the end of this two-year period, the team had adapted well to the requirement of a changing situation and was responsive to the new leadership.
Service Overview and Objectives

The Appoġġ Children’s Services primarily aim 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;
- assessing vulnerable persons identified to participate in media programmes;
- raising awareness on children’s rights;
- ensuring staff are trained and supported to deliver a child-centred service; and
- gate-keeping resources within a financial framework that meets the needs of children, young people and their families.
Review and Analysis of Service

Figure 47: Cases activity over time, Children’s Services 2000-2011  
(this includes only Child Protection Service and Looked After Children Service)

This service cluster consists of the Child Protection Service, Looked After Children Service, Adoption Service and Fostering Service. It is important to note that only Child Protection Service and Looked After Children Service were included in Figure 47 since they report such case activity. This means that the overall increase and decrease observed may not reflect an accurate picture of the overall situation in the Appoġġ Children Services.

All case activity followed a trend of decline except for the closures which continued to increase by 3% over 2010. Since the majority of cases within this cluster are found within CPS, trends within the Children’s Services cluster tends to reflect changes in CPS.
1. Blue Ribbon Child Abuse Prevention Campaign

With 100 new cases of child abuse reported every month, and physical abuse being the most common type of child abuse, the Child Protection Service identified the importance of educating parents on the alternatives to violence. Practitioners recognised that a culture shift is required towards viewing parenting as a learned skill with a social aspect and importance. Telling parents not to hit their children was not enough; Social Workers needed to provide them with practical “how to” strategies.

Thus, the Foundation for Social Welfare Services adopted the Recommendation by the Committee of Ministers of the Council of Europe, designed to get states to recognise the importance of parental responsibilities and the need to provide parents with enough support to help them fulfil their responsibilities. Child protection depends on the knowledge, skills and confidence of those who work with children and families, and with this in mind, Aġenzija Appoġġ trained Social Workers in positive parenting to educate parents on how best to deal with their children’s behaviour. Put simply, positive parenting involves relaying parenting techniques that are based on love, encouragement, discipline, care and a positive environment.

Figure 48: Children during the launch of the Blue Ribbon Campaign, May 2010
directly with parents to inspire other methods of discipline that will have far more positive results than violence.

To create a culture shift, a national parenting campaign was launched in May 2010 and is subsequently being celebrated every year. The Blue Ribbon Campaign is an informative campaign of the children’s right to live in a safe environment where they can develop in a healthy way away from abuse.

The campaign focused on the responsibilities parents and carers have: how they can provide parenting with a positive approach based on love, encouragement, discipline, care and positive environment; instead of abuse and violence, which lead children to grow up insecure, undisciplined and lacking confidence and self-esteem.

Thanks to the blue ribbon, the Foundation symbolises its commitment in preventing child abuse. Several other countries mark Child Protection Day on different dates and the blue ribbon symbolises the colour of bruises that many children around the world bear because of the abuse they pass through. The idea of the blue ribbon originated in 1989 when an American grandmother tied a blue ribbon to her car in memory of her grandson, who had just died at the hands of his abusive father.

The campaign has been met with a very positive reaction especially by parents/carers who recognise that parenting is not to be taken for granted and that this campaign is not about telling parents what to do, but it is about providing key information in a practical way to enable parents to benefit their own children and make their job more rewarding and enjoyable without inflicting any type of abuse on their children.
2. Finding Alternative Care for Children in Vulnerable Situations

The benefits of family-based care over institutionalisation have long been established. It is the responsibility of the office of Children’s Services to work toward de-institutionalisation of children, especially newborns, which task is entrusted to and taken very seriously by the Fostering team. More children than ever require foster care placement and the Fostering team is always striving to reach this goal despite the huge challenges that the team faces to find suitable foster families. During this biennium, nine newborns were placed in foster care in 2010 and another 15 newborns in 2011. This accomplishment was a result of a range of efforts including an ongoing and intensive fostering campaign that raises awareness about the urgent needs of children and encourages citizens from every walk of life to get involved.

The Adoption Service’s contribution to find adoptive families for children in residential care who were adoptable but had a disability was fundamental to give a chance to these children to live in a family environment. It was nothing short of a miracle when the team managed to find two adoptive families for two siblings; one of whom had a corrective disability and for another child who was born with intellectual disability. It is interesting to note that both families were foreigners but live in Malta.

Nonetheless, regardless of the integrated and coordinated efforts of the office of Children’s Services to address the issue of alternative care during the past years, various workers have been facing various difficulties in identifying alternative placements for children and young adults who, for a temporary short-term or long-term period, need to live away from their biological families. With the availability of such placements – whether foster care or residential – being already extremely limited, a number of children already placed in residential care present difficult behaviour, which carers seem to be unable to address and thus face numerous difficulties to cope with such children.
Although some of these children have been offered the Agency’s High Support Service, in some situations primary care givers still point out that they have difficulties in coping with the children’s behaviour despite the one-to-one care that is being provided.

Moreover, although these minors are living in various placements at the moment, once they are requested to leave these placements they do not have the capabilities to live on their own. Some of these minors have psychological problems, and some of them psychiatric, which prevent them from coping independently. Others suffer from low IQ and related behavioural problems, but they cannot be categorised as having disability.

On a regular basis, the Looked After Children team is faced with multiple crises when a number of these children go through situations where the placement they are in breaks down. This has happened across the spectrum of residential services available, from fostering, through all the residential homes. Once this happens, on a number of occasions especially those concerning residential care, no alternatives are available and sometimes the children are forced to return to their family of origin, which is often the environment from where they were removed often by means of a Care Order. The interventions with many of these minors are virtually ineffective and create a feeling of hopelessness and helplessness in the Social Workers of the Looked After Children team. Many of the minors are extremely resistant to being removed from home and would have great difficulty to reside in alternative care.

Various attempts have been made to address specific cases, which have been brought to the attention of the management team, to deal with the difficulties in identifying appropriate placements for children and young adults at a moment of crisis. Despite the clear developments that have been made over the past years, practitioners who are involved in the service delivery to
vulnerable children are very concerned about the various gaps in the service delivery and at the lack of continuity in the services provided.

In an attempt to address the above issues, on the 15th of March 2009 the then Minister for Social Policy, set up a Core Group with the mandate to explore the possibility of sustainable integration and operation of Government / Church placements for minors and to make the necessary recommendations. The terms of reference of the Core Group were:

- to map and analyse the present situation of residential care for minors in Malta;
- to carry out a gap analysis of residential placements for minors in care over the next 10 years;
- to analyse and recommend a sustainable and feasible integrated service of residential placements for minors in Malta;
- to develop a 10-year feasible and sustainable strategic plan to provide and operate residential care for minors in Malta, including financial and resource implications of this plan; and
- to recommend a feasible, sustainable and phased-out implementation of the 10-year strategy.

Following the recommendations proposed in the 10-year Strategic Plan, the Salesians’ Don Bosco House Project in Balzan, which had been running for six months, was supported on a level of policy as a pilot-project within the Plan and was hence substantially financed by the Government. Don Bosco House aims to provide a high-quality community-based residential care environment for six youngsters living in a small house within a healthy neighbourhood.

In 2011, to continue to address the issue of lack of alternative care for minors, the new Minister for Education, Employment and Family launched the
Out-of-Home-Care Programme, details of which are given in another section of this report.

Needless to say, the above projects were the two mostly appreciated projects by the Appoġġ Children’s Services since they both attempt to address issues related to alternative care for children in need of care and protection that is necessary for their safety, welfare and well-being.

However, we have to wait for the Out-of-Home Care Programme to be well integrated before we can see an improvement in the provision of services to children who require alternative care.

Highlights and Operational Achievements

1. Child Protection Service
The Child Protection team has been struggling with high caseloads and waiting lists for a number of years, and in August 2011 the team put forward a proposal regarding the management of caseloads and prospective reduction of waiting list statistics. The rationale behind carrying a manageable caseload is that a lower caseload allows for higher efficiency which shall serve best in areas where workers are expected to conduct their action plans quickly. Such timely intervention has a higher probability of success in the family and more closure of cases take place thus reducing the waiting list. The proposed project was piloted for six months and a mid-term report was forwarded to management in November 2011. A focus group was held with five Social Workers (out of 18) with reduced caseloads after a period of three months. The Social Workers reported, amongst other observations, that the relationship with service users improved because of frequent contact and some service users passed on positive feedback regarding timely interventions.
Moreover, CPS Social Workers felt that they were less tense and this helped in their emotional well-being which yielded positive results as they felt they could manage their caseloads better and conducted more focused work which translated into more closure of cases. The pilot project was approved in 2012 however, due to the high turnover of staff, the project will be implemented effectively once the service reaches full complement.

2. Looked After Children Service
One of the highlights of the Looked After Children Service, which alleviated the team’s morale and was considered as an uplifting experience, occurred when two Social Workers accompanied two looked after young adults for a conference in Brussels in December 2010 entitled Children have their say!
The conference was a workshop for children organised by the Fundamental Rights Agency with the cooperation of Eurochild. The children’s workshop brought together children from Belgium, Cyprus, Sweden, UK and Malta, and representatives from the Children in Europe Programme. The focus on the workshop was to discuss the issue of ensuring justice and protection for separated and unaccompanied asylum-seeking children. The children who participated drew up a list of statements that were presented at the conference entitled Ensuring Justice and Protection for all Children in Brussels in December 2010. For this conference, Appoġġ was represented by the Service Area Leader (SAL) of the Looked After Children Service.

3. Fostering Service
One of the highlights of the Fostering team occurred in May 2010 when the Fostering Service was assessed and granted the accreditation by the Department for Social Welfare Standards to provide a fostering service as obliged by the Foster Care Act (2007) Act No XVII. The Accreditation Certificate for the Appoġġ Fostering Service is valid till 2012. The Welfare Assessment Unit will then once again review the accreditation accordingly. Another accomplishment for the Fostering Service was the Conference
entitled, Where I belong organised by the Power for Youth with the cooperation of Appoġġ in November 2010.

4. Adoption Service
During the period under review, a notable achievement for the Adoption Service was the finalization of the Manual of Procedure and subsequently the application by Appoġġ for the accreditation with the Department for Social Welfare Service to offer adoption services and carry out local and or inter-country adoptions as obliged by the Adoption Administration Act (Cap.495). The application form for accreditation was issued in March 2011 and submitted in April 2011. Accreditation was granted in January 2012.

5. High Support Service
A significant operational achievement of the High Support Service was the finalisation of the Manual of Procedure in 2010. The purpose of this Manual of Procedure is to guide High Support Service professionals how decisions are made and how the work is done to keep a high quality standard for the children in their care. The Manual also aims to increase organisational accountability and transparency. An abridged version of the manual was also designed to provide concise and easy-to-understand descriptions of the policies and procedure focusing on each key determinant of quality of the service.
Child Protection Service

Introduction

The Apoġġ Child Protection Service investigates cases of abuse and neglect of children, and is also involved when a child is at risk of significant harm. Social Workers within this service investigate referrals received from the general public, and from other professionals working with children and their family.

Service Overview and Objectives

As with previous reports, the objectives of the Child Protection Service remain largely unchanged. Child Protection Service aims to provide timely and effective interventions in order to ensure the protection and well-being of children who experience or are at risk of experiencing any form of abuse and/or neglect. The Child Protection Service works with children from birth until they reach the age of 18, while a number of interventions are also carried out with pregnant mothers due to current or potential risk to the unborn child. The service aims at identifying, investigating, assessing and monitoring the cases of children suffering such abuse whilst also working with their families in order to ensure a holistic approach in order to intervene and prevent child abuse and/or neglect effectively. The service liaises with various professionals to guarantee a multidisciplinary approach and also acts as a consultative service to agencies and organisations that encounter situations or suspicions of child abuse / neglect.

The service aims at providing a timely and effective service to all children suffering abuse or neglect, utilising social work skills and tools in order to ensure that each child is given priority as is due.
During the period under review, Child Protection Service’s staff composition was as follows:

- one full-time Service Area Leader;
- two full-time Coordinators;
- one part-time Coordinator and another one on reduced hours; and
- 14 full-time Social Workers (due to a high turnover rate, reaching full complement in the team was not always possible).

Review and Analysis of Service

In 2011, Child Protection Service saw a substantial decrease in cases referred when compared to previous years, with a total of 728 referred cases. In fact, this implies a decrease of roughly 27% of referred cases when compared to the year 2010 (during which 1,004 cases were referred to the service). This may be attributed to a number of measures Child Protection Service has adopted to ensure that only cases that fit the criteria of Child Protection Service are referred. A major point of emphasis is the link Child

Figure 49: Cases over time at CPS, 2001-2011
Protection Service has built with the Education Department, mainly the Child Safety Services, in connection with cases referred by schools.

Nevertheless, Child Protection Service experienced a decrease in the number of opened or re-activated cases in 2011 by around 47% (357 opened / re-activated cases) when compared to the year 2010 (676 opened / re-activated cases) and other previous years. This goes to indicate that child protection work is intensifying in nature, leading to less cases being allocated despite a steady rate of case closure (642 closed cases in 2010 and 663 closed cases in 2011 which seems to be at par with previous years). This claim is further substantiated by the fact that Child Protection Service worked on a total of 1,654 cases in 2011, the second highest amount of active cases in a year over the past 12 years of service.

In 2010, the primary form of abuse referred (from a total of 1,004 referrals) varied as in previous years, with physical abuse and at risk of abuse being the highest rated forms of abuse (29% and 27% respectively). Whilst the year 2011 also produced the same primary forms of abuse as the highest rated of the year, physical abuse saw a decrease of eight percentage points to 21%. This decrease in physical abuse as the primary form of abuse seems to be a trend that has been repeating itself since the year 2009, reaching the lowest it has ever been for the past five years. This may illustrate that while physical abuse remains a predominant form of child abuse (it is considered an important factor in 39% of all referrals received), one is no longer able to detach physical abuse from other forms of abuse as easily as may be expected. In fact, the amount of referred cases that include physical abuse as one of a multitude of issues (18%) practically equals the amount of cases referred for physical abuse alone (21%). The amount of referred cases with sexual abuse as the primary form of abuse remains largely unchanged (13% of referred cases in 2010 and 12.5% of referred cases in 2011), but shows a slight decrease from previous years.
The year 2011 marked a drastic increase in the amount of Interim Care Orders and Care Orders issued, with a total of 50 children being protected with a Care Order – a record high over the past seven years. In 2010, there was a total of 37 Interim Care Orders, out of which 36 were issued with a Care Order. Of particular importance is the fact that roughly 64% of the Care Orders issued in 2010 saw the presence and prevalence of drugs as one of the main reasons for the Care Order to be issued. In 2011, these figures decreased to 43%, and while substantially lower, drug use by the parents still remains one of the main contributing factors for the issuing of a Care Order.

Figure 50: Number of new cases at CPS by district, 2011
Figure 51: Percentage of new cases at CPS by age, 2010-2011

Figure 52: Number of cases referred to CPS by primary form of abuse reported, 2010-2011
New Tools & Procedures

1. Pilot project to reduce caseload
In August 2011, 10 CPS Social Workers participated in a pilot project to examine the possibility to reduce caseload. This project showed that there are benefits in working with a lower caseload, and apart from offering a more qualitative service, Social Workers’ well-being is taken care of as well. Social Workers working with a reduced caseload reported that they feel more in control of their workload, are able to do more in-depth work and keep recordings up to date. Furthermore, with a reduced caseload, Social Workers manage to assess the referrals received in a shorter period of time and determine whether a case should continue being followed by CPS or not. Throughout this period, the waiting list was kept constant as the majority of the new cases referred were allocated immediately. Therefore, the number of children on the waiting list did not increase due to this immediate allocation.

2. Regular school meetings to discuss cases
CPS developed a new way of working with professionals in the education sector by holding regular school meetings to discuss the referrals received. One has to mention that the majority of the cases received at CPS are sent by schools. This initiative was welcomed both by the CPS Social Workers and also by the Education staff, as a care plan for each case could be decided jointly by the professionals working closely with the child and the family.

3. Initial risk assessment form
Another initiative during these two years was the change in the way how new referrals are initially assessed. A new form was developed by the coordinating team at CPS, and gives a clear picture of the risk each child is in when filled in, thus assisting the Service Area Leader when allocating cases. The assessment form is filled in by the Intake Coordinator. When filling out the
form, each case gets prioritised as low, medium, high or very high and this determines the priority when allocating cases.

4. **Blitz days**
Throughout these two years, CPS held four blitz days. During these days, CPS Social Workers are allocated a number of cases from the waiting list and intervene on them. Usually interventions take place on those cases who have been on the waiting list for more than one year, and have prioritised low when the initial risk assessment form has been filled in. During the blitz days, Social Workers hold meetings in the schools to obtain updates about the cases, contact professionals involved with the children’s families, speak to the children referred and also to their parents. The outcome of such days is always positive because 50% of the cases that are investigated can be closed, as either there are no longer concerns on the concerned child, or the child does not disclose any abuse.

5. **Change in intake system**
CPS felt the need to change the way new intakes are taken. Whereas previously, five Social Workers from the team were indicated as intake Social Workers, with the new system, all Social Workers in the team took a share of the intake. Benefits were seen immediately both for the Social Workers and also for the service users. Previously, the intake Social Worker took the new report, and intervened in the immediate if there was the need. However, if it was deemed that the case needed long-term interventions, it was handed over to another Social Worker within the team that worked with long-term cases. The drawback in this system was that information was lost in the transition, service users had to get to know another new Social Worker only immediately after the case was allocated. With the new system, the same Social Worker who took the intake continues intervening with the child and the family after the initial interventions even if the case requires long-term involvement.
6. *Finding ways how to work with different services*

Throughout the years, this need was felt more profusely in order for CPS to be able to offer a more holistic service to the children they are working with. CPS has found a way on how to establish and maintain good working relations with different services which are extremely important in ensuring that children are protected from the risks they live in. It was seen that a change in mentality was needed, and more emphasis was made on the fact that child protection is every professional’s responsibility and not only the duty of child protection Social Workers. Regular informal meetings were held with different services to discuss both the common cases and also to explore new ways on how to intervene. As a result, services reported that a more cordial way of working together was found, which ultimately the service user benefited from.

**Way Forward**

The Child Protection Service will continue building strong ties with different services both internally and externally to enhance the already existing working relationships with the major stakeholders. Furthermore, the service will continue exploring different means through which the referral process can become more effective in the interest of the children the service seeks to protect.

To obtain this goal, the service will be working on filtering of cases so that only cases that merit a child protection investigation are referred to the Child Protection Service. The basic premise founded in this rationale is that this system will aid Social Workers to absorb those cases that need intensive investigative work more expediently. Due to the high turnover of Social Workers and the complexity of child protection cases, the service aims to continue strengthening the team through experience and ongoing training, while implementing concrete measures to ensure the retention of workers.
This measure would give the team the opportunity to develop a more in-depth knowledge and experience in this field and Social Workers will feel more equipped working in such complex situations.
Social Paediatrics Service

Introduction

The Paediatric Department at Mater Dei offers a service for the medical assessment and management of children in need. The aim of the service is to provide a comprehensive medical service for the following categories of children:

- children residing in residential care settings or in foster care; and
- children who are at risk of, or who are undergoing any form of maltreatment. Maltreatment is broadly classified into the following four categories: physical, sexual or emotional abuse, and neglect. Children living in situations where domestic violence is present are also included in this service since domestic violence is now also recognised as another form of maltreatment.

Providers of this service work in close collaboration with Social Workers to draw up care plans that ensure that all the children’s health needs are being met.

1. Local Setup

The service is run by a Consultant Paediatrician with the invaluable help of a Community Nurse, who provides invaluable help in the organisation and smooth running of the clinics. Two other Paediatricians also contribute a few hours to the service.
2. Remits of the Service

- Medical assessment and health care plans for children referred by Social Workers;
- management of children presenting to hospital with alleged abuse or identified to be at risk of abuse;
- medical assessment of children in residential care;
- collaboration with the children’s mental health service; and
- training for Doctors and Social Workers.

3. Clinic Held at Appoġġ Premises

An outreach clinic is held once weekly at Appoġġ premises. Children are accompanied by their parents / guardians and also by the Social Worker involved in the case. The aim of the visit is to carry out a comprehensive assessment of the child’s physical, emotional and developmental needs and also to assess parents’ parenting skills and attachments with the child. Following the visit feedback and discussion is carried out with the Social Worker and this is also followed up by attendance at case conferences.

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Visits Carried Out</td>
<td>264</td>
<td>276</td>
</tr>
<tr>
<td>Total Number of Children Seen</td>
<td>222</td>
<td>232</td>
</tr>
<tr>
<td>Total Number of New Cases</td>
<td>132</td>
<td>165</td>
</tr>
</tbody>
</table>

Table 8: Summary of weekly clinics held at Appoġġ, 2010-2011
## Category of Suspected Maltreatment

<table>
<thead>
<tr>
<th>Category of Suspected Maltreatment</th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Abuse – Signs Present</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>Physical Abuse – No Signs but Case Still Open</td>
<td>28</td>
<td>29</td>
</tr>
<tr>
<td>Neglect</td>
<td>51</td>
<td>51</td>
</tr>
<tr>
<td>At Risk</td>
<td>49</td>
<td>42</td>
</tr>
<tr>
<td>Sexual Abuse</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>Emotional Abuse</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Domestic Violence</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>Generic Needs</td>
<td>42</td>
<td>39</td>
</tr>
<tr>
<td>Foster Care</td>
<td>37</td>
<td>52</td>
</tr>
<tr>
<td><strong>Total Number of Cases</strong></td>
<td><strong>221</strong></td>
<td><strong>232</strong></td>
</tr>
</tbody>
</table>

*Table 9: Characteristics of cases seen at Appoġġ clinics, 2010-2011*

### 4. Hospital Referrals

Children presenting to hospital with suspected child maltreatment are referred to the Consultant Paediatrician in social paediatrics for expert assessment and further management of the case. The hospital Paediatric Social Worker is generally also involved and the excellent working relations between the Paediatrician and hospital Paediatric Social Workers ensure that these delicate cases are handled smoothly and efficiently.

In 2010 and 2011 the following cases of suspected child maltreatment were referred for assessment.
Table 10: Social paediatric cases referred, 2010-2011

5. Infants Born to Substance Abusing Mothers

In 2010, 16 infants were born to mothers known to have a history of substance abuse in pregnancy; in 2011, 22 infants in this category were born. These infants are monitored for neonatal abstinence syndrome (drug withdrawals) in hospital and treated with medication if necessary. Following discharge from hospital, all infants were followed up by the Paediatrician. The aim of the visits is to monitor general health with special emphasis being placed on the infants’ development. Parenting skills and carer-infant rapport and attachment are also assessed.
<table>
<thead>
<tr>
<th>Category of Suspected Maltreatment</th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Abuse – Signs Present</td>
<td>11</td>
<td>16</td>
</tr>
<tr>
<td>Physical Abuse – No Signs but Case Still Open</td>
<td>33</td>
<td>29</td>
</tr>
<tr>
<td>Neglect</td>
<td>59</td>
<td>60</td>
</tr>
<tr>
<td>At risk</td>
<td>54</td>
<td>51</td>
</tr>
<tr>
<td>Sexual Abuse</td>
<td>15</td>
<td>21</td>
</tr>
<tr>
<td>Emotional Abuse</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Domestic Violence</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>Total Number of Cases</td>
<td>174</td>
<td>182</td>
</tr>
</tbody>
</table>

Table 11: Summary of diagnosis of maltreatment for the total number of cases seen either at Appoġġ or in hospital, 2010-2011 (does not include generic cases or foster care)

6. Residential Homes Service

The main aim of the service is to provide a comprehensive medical and developmental assessment for children in care. Medical literature states that these children have complex health needs. They often would have missed the routine immunisations and physical health checks. There is an increased incidence of developmental and learning difficulties in this category of children, together with increased social, emotional and behavioural problems.

Developmental and learning difficulties are regularly encountered in this cohort of children. Such children are referred for assessment at the Child Development Assessment Unit and in fact 20 children have a learning support assistant at school to aid them in their education. The increased incidence of emotional and behavioural problems is reflected by the fact that 38 children
(20% of the children in care) attend the Child Guidance Clinic. In general, the children living in residential homes are physically healthy. A small number of children suffer from chronic medical conditions and these are followed up regularly by the hospital-based Paediatric Specialists in conjunction with the Paediatrician responsible for the Homes.

<table>
<thead>
<tr>
<th>Diagnosis</th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADHD</td>
<td>13</td>
<td>12</td>
</tr>
<tr>
<td>Conduct Disorder and Emotions</td>
<td>17</td>
<td>15</td>
</tr>
<tr>
<td>Oppositional Defiant Disorder</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Depression</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Other</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td><strong>Total Number of Children</strong></td>
<td><strong>40</strong></td>
<td><strong>38</strong></td>
</tr>
</tbody>
</table>

*Table 12: Diagnosis of the children attending Child Guidance Clinic, 2010-2011*

**Way Forward**

The strong collaboration between the medical staff and Social Workers must be sustained and encouraged. This can only be achieved if the individual sectors understand the roles and competencies of the various professionals involved in this field. To achieve this regular multi-disciplinary training to medical and social work personnel must be provided and funded. Investment in child maltreatment prevention is cost-effective. Neglect, which was the commonest category of maltreatment encountered in 2011, is often associated with poor parenting skills. Since the early years of a child’s life are crucial for healthy child development, it is suggested that expansion of the community health services to offer extended home visitation programmes to high risk families should be considered for the future. It is also heartening to
see that the proportion of children identified as at risk, that is identified before maltreatment has occurred, is increasing. This means that support and intervention is being offered at an earlier stage and this will help to prevent the very damaging and sometimes permanent adverse health effects associated with maltreatment.
Looked After Children Service

Introduction

The Looked After Children Service was separated from the Adoption Service in February 2010, after the two services had been amalgamated since 2007. This development took place because it was seen that, despite the advantages associated with the amalgamation, the Looked After Children Service needed more focus, particularly because of the increasingly complicated situations of children and young persons in out-of-home care. After that, all efforts were made to further develop casework to deal with the numerous crises which the Service had to deal with and to support the staff members in their efforts to cope with this challenging situation. Towards the middle of 2011, another development was the identification of a number of situations which could be followed by the Youth in Focus Service, to relieve the Looked After Children Service from the difficulty of following these cases, as well as to consolidate the Youth in Focus Service’s position of expertise with this client group. 2011 also saw a change of leadership within the Looked After Children Service and the end of this two-year period was a time of re-adjustment for the team.

Service Overview and Objectives

The Looked After Children Service works with children and young persons in out-of-home care from newborn to the age of 18. In particular cases, it continues to follow these minors beyond 18 years, especially if they have no significant support system. The service aims to:

- provide services to children and young persons in care by formulating care plans which put them as their focus;
assist in the re-integration of children into their families if it is in their best interest;

- prioritise and support family-based care where re-integration with the biological family is not possible;

- help prevent and/or reduce institutionalisation for those children and young persons who are in residential care by encouraging them to develop their daily living skills and to participate in activities outside the home; and

- work to ensure stability for the children and young persons in the way which is most suitable and legally possible for the individual child or young person.

**Review and Analysis of Service**

![Cases Over Time at LAC](image)

*Figure 53: Cases over time at LAC, 2002-2011*

The Looked After Children Service is one which networks with numerous entities, both within and outside of the Foundation for Social Welfare Services. This implies that its smooth running is also influenced by developments in the field of out-of-home care and in the support services to
children and families. The main issue which was present throughout the period under review was the lack of placements to meet the needs of children and young persons who need them. For the Looked After Children Service, this implied that a number of placement breakdowns were followed by a lack of feasible alternatives and that children and young people could not always be removed from environments which are not conducive to their development. For these reasons, the service deals with crises on a day-to-day basis, with considerable impact on the workers who, in addition, deal with high caseloads which do not allow interventions with the intensity that is required. The situation is further complicated by the ever-increasing issues faced by children and young people in out-of-home care, some of which result in prolonged crises, many of these with several Court appearances.

The work of the Looked After Children Service can be seen as three-fold:

- casework;
- supporting the workers to deal with their caseload; and
- networking with other entities.

The issues surrounding casework are dealt with in individual and group supervision, as well as being brought to the attention of management, on an Agency, Foundation and Ministerial level. The creation of this awareness, both through these fora as well as through media activities, was partially responsible for the establishment of the Out-of-Home Care Programme in October 2011, to provide services for children and young people who require specialised care and also to make adoption a more feasible option for those minors who would benefit from it. The complexity of the situations being dealt with is compounded by the fact that a number of children and young people being followed are protected by a Care Order, which entails meeting the legal requirements associated with this status and collaborating with the Children and Young Persons Advisory Board. The children and young people who are
voluntarily placed in care then face additional issues of lack of resources, since they still depend on their family members for resources, creating an anomaly when these families are not in a position to provide this support.

The workers are supported through these individual and group supervision sessions, through regular in-service and external training, and through Unit and Reflection Days during which team members have the opportunity to reflect on and discuss issues and plan the way forward. Members of the leadership team meet regularly to discuss caseloads and allocations and to try to allocate cases in a way which is appropriate for the team. The fact that there was a turnover of personnel in this period, particularly the change in leadership, as well as a pivotal member of the leadership team being out on maternity leave for a period of time, impacted the service as well as the workers. At the same time, the commitment to the children and young people by the team members is something which is very apparent and provides the rationale for working within this difficult service. Members of the team were also prepared to share the expertise they have developed through participation in talks and training sessions both within the Foundation and for other entities involved in the field. The fact that the service was also involved in a working group to discuss adolescents who abuse also helped to increase knowledge in this area and provide some expertise in dealing with this difficult section of the client group.

The networking aspect of the service is one which encourages contact both with other services within the Agency, as well as with other external stakeholders. Various meetings were held with these stakeholders to enhance collaboration and to arrive to a shared understanding of issues to be tackled. The success of the process differed according to the various entities involved, with some having perspectives which were in direct contrast to those held by the Looked After Children Service. The challenge then was to arrive at a way of working which encompasses these differences and
overcome them. In some cases, this required a considerable amount of energy and many hours spent in discussion. In all of this, what was important, and remains at the core of the Looked After Children Service, is the best interest of the individual child or young person, as well as advocating for the changes required in the sector.

Way Forward

The out-of-home care sector has been strengthened by the establishment of the Out-of-Home Care Programme and it is augured that this, together with other initiatives, will be able to create placements for children and young people whose needs cannot be met by the current service provision. This is an area which requires considerable development to prevent children and young people from suffering a number of transitions and rejections while they are within the care system. The possibility of adoption for those children and young people who could benefit from it is another area of development which, although it needs to be treated sensitively, can present alternatives to children and young people who, to date, are stuck in care. The Service has also handed over a number of complex situations to the Youth in Focus Service and this has lessened its burden. As the new leadership team establishes itself, it is hoped that it will be able to continue working on supporting the team members and on mentoring the new Social Workers who join the team as a result of staff turnover. At the same time, team members continue to gain expertise to cope with this challenging client group and to find more creative ways of intervening with it.
Fostering Service

Introduction

The Fostering Service provides an alternative family experience to children and young people who for different reasons cannot live with their birth parents.

Service Overview and Objectives

The foster carers together with the Fostering team aim to support children and young people within the foster care system to optimise their potential in all areas, including educational, social, psychological, emotional and physical development.

The main objectives of the Fostering Service are:

- to make the general public aware of the need to recruit families to foster children;
- to train and assess prospective foster carers;
- to supervise foster carers and monitor the placements;
- to provide foster carers with 24hr support and ongoing training; and
- to keep giving assistance to foster carers and young people after the age of 18 till 21 years.
Review and Analysis of Service

1. Awareness Campaigns

Awareness campaigns were coordinated throughout the two years under review. On the 21st January 2010 a business breakfast was held at the New Dolmen Hotel during which Hon. John Dalli, then Minister for Social Policy, made an official launch to start an intensive year of awareness about foster care. This initiative was coordinated with the support of the Office of the Permanent Secretary. That same month a conference with the title ‘Il-Familja libieraħ, illum u għada’ followed. During this two day conference, experiences of young people who lived with foster care families and foster carers were shared. Numerous television and radio programmes followed on all local stations. The participation of foster carers and young people on these programmes were the highlights of this campaign. Printed media was also used.
i. Radio & Television
Total number of interventions on TV / Radio programmes throughout 2010: 57
Total number of interventions on TV / Radio programmes throughout 2011: 30

ii. Print Media
2010
1 interview on The Malta Independent
1 media comment on The Sunday Times
1 media comment on The Malta Independent on Sunday
1 media comment on The Times
2 media comments on Kullhadd
1 media comment on Il-Ġens

2011
1 article on Flimkien magazine
1 article on I-Orizzont
1 article on Child magazine
1 article on Marsascala local council newsletter
1 media comment on Illum
1 media comment on I-Orizzont

Figure 55: Advert used in 2010 to create more awareness on Fostering
2. Inquiry Calls

Having an effective ongoing campaign meant getting more people interested to inquire about foster care. In 2010 and 2011 a constant flow of persons contacted the Agency by phone or emails and asking for more information about the subject. In contrast to previous years were the campaigns used to take place twice a year in a period of three weeks, results showed that by spreading the campaign along the whole year was more effective. Quoting prospective foster carers who attended the initial training and asked how they got to know about fostering replied that since they did not hear about foster care for a long time they thought that the problem of finding families to foster was solved.

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>January</td>
<td>27</td>
<td>14</td>
</tr>
<tr>
<td>February</td>
<td>19</td>
<td>9</td>
</tr>
<tr>
<td>March</td>
<td>5</td>
<td>15</td>
</tr>
<tr>
<td>April</td>
<td>9</td>
<td>5</td>
</tr>
<tr>
<td>May</td>
<td>11</td>
<td>8</td>
</tr>
<tr>
<td>June</td>
<td>11</td>
<td>14</td>
</tr>
<tr>
<td>July</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>August</td>
<td>7</td>
<td>7</td>
</tr>
<tr>
<td>September</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>October</td>
<td>8</td>
<td>10</td>
</tr>
<tr>
<td>November</td>
<td>13</td>
<td>19</td>
</tr>
<tr>
<td>December</td>
<td>10</td>
<td>11</td>
</tr>
<tr>
<td>Total</td>
<td>129</td>
<td>121</td>
</tr>
</tbody>
</table>

*Table 13: Fostering Service inquiry calls, 2010-2011*
3. Initial & Ongoing Training

During these two years under review, the Fostering team developed its initial training to meet the current needs and include new material which reflects evidence-based practice. During this six-session training programme prospective foster carers are given an explanation of the different aspects of the foster care experience. Foster carers and their birth children together with young people who were in care, share with the participants their insightful experiences and help them reflect on what it takes to become a foster carer. At the beginning of each training programme, prospective foster carers are given handouts and a set of 10 DVDs with material related to trauma, child development, bonding and attachment, marriage, emotional intelligence, and understanding challenging behaviours of children and young people in care.

During these two years the Fostering team also supported the National Foster Care Association Malta in organising two national conferences as part of the ongoing training to foster carers, which took place in November 2010 and November 2011. The theme for the first conference was looking after the foster care couple and how foster carers should respond to difficult behaviour. The title to this conference was ‘Home where I belong’. The second conference was about the importance of play. The title to this conference was ‘The Role of Play Towards Well-Being’. Below are some statistics about training delivered.

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Number of Participants</strong></td>
<td>80</td>
<td>93</td>
</tr>
<tr>
<td><strong>Number of Initial Training in Malta</strong></td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td><strong>Number of Initial Training in Gozo</strong></td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td><strong>Number of Ongoing Training</strong></td>
<td>1 national conference</td>
<td>1 national conference</td>
</tr>
</tbody>
</table>

*Table 14: Foster care training, 2010-2011*
4. Ongoing Support

A support group is held each month, except for August and December, throughout the year. Approximately, 25 foster carers attend each group.

5. Foster Care Placements

The demand to find placements for children and young people increases every year. In 2010 the request from Social Workers from other services within Appoġġ was on average around 70. In 2011, the number increased to 90. In 2010 the Fostering team managed to place 45 children, out of which nine were newborn babies. In 2011 the number increased to 49, out of which 15 were also newborns. In 2011, the Child in Care Benefit was extended to the age of 21. This meant that a number of young people whom we had stopped following at the age of 18, were reintegrated back and that is why the number increased. The number of foster carers also increased to meet the demand; in fact in 2010 the number was 198, while in 2011 this rose to 228.

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boys</td>
<td>106</td>
<td>127</td>
</tr>
<tr>
<td>Girls</td>
<td>106</td>
<td>132</td>
</tr>
<tr>
<td>Total</td>
<td>212</td>
<td>259</td>
</tr>
</tbody>
</table>

*Table 15: Number of children in foster care, 2010-2011*
<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children in Non-related Foster Care</td>
<td>144</td>
<td>178</td>
</tr>
<tr>
<td>Children in Kin Foster Care</td>
<td>68</td>
<td>81</td>
</tr>
<tr>
<td>Total Number of Children</td>
<td>212</td>
<td>259</td>
</tr>
</tbody>
</table>

*Table 16: Number of children in foster care by type, 2010-2011*

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-related Foster Carers</td>
<td>135</td>
<td>164</td>
</tr>
<tr>
<td>Kin Foster Carers</td>
<td>63</td>
<td>64</td>
</tr>
<tr>
<td>Total Number of Foster Carers</td>
<td>198</td>
<td>228</td>
</tr>
</tbody>
</table>

*Table 17: Number of foster carers by type, 2010-2011*

**Way Forward**

The Fostering Service is committed to meet the ever growing demand of children in need of a foster care placement, to intensify the fostering awareness campaign, recruit more staff and foster carers and to continue working on further training and support to existing foster carers.
Adoption Service

Introduction

The Adoption Service within Aġenzija Appoġġ offer 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 biological parents of adopted adults, is carried out with adopted persons. In assessing the applicants for suitability, the Adoption Service is advised by the Adoption Board. The Adoption Service 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 Adoption Service ensures that the biological family has access to support services.

Service Overview and Objectives

The objective of 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 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 and have been referred to the Adoption Service;
- help children develop their full potential;
- train prospective adoptive parents who apply for local or inter-country adoptions;
- assess and recommend Prospective Adoptive Parents (PAPs) in the adoption process;
- assist in the preparation of the necessary adoption documentation; and
- carry out post-adoption work.

But, above all this, one has to keep in mind that the whole process is targeted towards the best interest of the children who will be placed with prospective adopting parents. The children are the primary consideration throughout the adoption process.

**Review and Analysis of Service**

In February 2010, the Adoption Service and the Looked After Children Service were split up and the former became an autonomous service within Aġenzija Appoġġ. The structure was also changed resulting in having Social Workers focusing solely on each respective service.

In June 2010, the Adoption Service joined the Courts and Supervised Access Visits Services (SAVs). The Service Area Leader of these Services was given the Adoption Service as a new responsibility. Despite the instability that changes within Units bring about, the Adoption team took this challenge with a positive outlook since the complete autonomy of the service led to more focused work.
The Adoption Service is made up of:

- one Service Area Leader (the Service Area Leader dedicates 10 hours to the Adoption Service and 15 hours to the Court and Supervised Access Visits Services);
- one full-time Coordinator;
- three full-time Social Workers; and
- one Social Worker who works 30 hours per week.

In accordance with Section 113 (2) (h) of the Civil Code of Malta which refers to the Social Work Profession Act, all Social Workers working within the Adoption Service must be warranted, therefore this legal requirement was respected from the beginning of the setting up of the service.

Figure 56: Number of children adopted, 2010-2011
<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Albania</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Bulgaria</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Cambodia</td>
<td>7</td>
<td>11</td>
</tr>
<tr>
<td>Colombia</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Ethiopia</td>
<td>5</td>
<td>8</td>
</tr>
<tr>
<td>Malta</td>
<td>9</td>
<td>3</td>
</tr>
<tr>
<td>Russia</td>
<td>10</td>
<td>29</td>
</tr>
<tr>
<td><strong>Total Number of Children</strong></td>
<td><strong>31</strong></td>
<td><strong>55</strong></td>
</tr>
</tbody>
</table>

*Table 18: Number of adopted children by country of origin, 2010-2011*

In 2011, the Appoġġ Adoption Service received a total of 110 enquiries out of which 47 resulted in applications. Four preparatory courses for Prospective adoptive parents were held and 43 Home Study Reports were completed during the same period. One of the preparatory courses was held in English due to the fact that a good number of English-speaking families applied for the courses.

Throughout 2010, the Department for Social Welfare Standards started working on the accreditation criteria, procedures and standards. The application form for accreditation was issued in March 2011 and submitted in April 2011. Accreditation was given on January 2012.
1. Standards Working Group

A working group on Adoption Service Standards was also set up by the Department for Social Welfare Standards. Ms Ruth Sciberras (Appoġġ Children Services Manager) and Ms Elmer Stanmore (Appoġġ Adoption Service Coordinator) were appointed as two members within this working group. Ongoing meetings were being held during 2010 and 2011, and carried on in 2012.

2. Changes and Challenges

The Adoption Service went through a number of changes and challenges.

- Between 2008 and 2010 Bulgarian authorities were reluctant to provide the children’s medical report which is requested by Maltese health authorities. In 2010, however, a Bulgarian adoption case went though the whole procedure including the medical report thus proving that the medical report issue with Bulgaria has been solved.
- A number of hosted Russian children who were sent back to Russia after a number of years living in Malta, have successfully been adopted by the Maltese families who used to host them.
- In the year 2009, Cambodia put on hold inter-country adoptions as a result of a change in Cambodian laws. Cambodia re-started adoptions for Maltese families in 2010.
- The three-year marriage period requirement for couples to adopt was removed from the law after a couple challenged the three-year marriage legal requirement through a Constitutional Court.
- The change in adoption laws in 2008 which split up adoption cases in two categories – namely old law and new law cases – was still affecting the system. This system was still 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 to the system. Throughout 2011 the Adoption Board started taking a stand on these cases. On receiving an old law case, the Adoption Board started recommending closure of case and reopening under the new law.

- Following a change within the Adoption Board and its systems in 2008 when the Board was first set up instead of the Adoption Panel, its term was terminated by April 2010.
- Ethiopia and Cambodia were still opting out single applicants.
- Prospective adoptive parents waiting for years to be matched with a child from Albania remained the same.
- There were exceptional cases whereby PAPs opted for private adoption arrangements. In such instances, the Adoption Service is concerned about the fact that children were being placed by individuals and/or entities by finding PAPs themselves rather than referring the case to the Agency. As a result, there was also a case where a newborn was placed with a couple who was not eligible to adopt the minor. The Malta Central Authority was kept informed about such situations.
- On seeing that Bulgaria and Albania adoptions normally take longer than adoptions through the Russian Federation, PAPs kept opting out these two countries.
- An American agency working on Russian adoptions showed interest in assisting Maltese families wishing to adopt from the Russian Federation. The authorisation process had already started off in 2009. However the Central Authority had not given the formal go-ahead to Aġenzija Appoġġ yet to work in partnership with this agency. More discussions in this regard are taking place.
- The Appoġġ Adoption Service had 2 workers on maternity leave during the same year and the caseload of the missing workers had to be shared by the team thus creating a caseload over and above
the already existing caseload of the team. In view of this, the Adoption Service held a total of four adoption courses instead of five.

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

- Placing two children with disability.
- Unit Day 2010 focused on issues of infertility and service mission statement amongst other team building activities.
- Unit Day 2011 had the aim of creating awareness amongst Adoption staff on the needs of conspicuous families.
- In summer 2011 an Italian student joined the service for an Erasmus internship. She covered a good number of Ethiopia post-adoption reports which would have been carried out by the Social Worker who was on maternity leave. On returning to Italy, the student informed the Adoption Service that she was offered a post on a project with children coming from different racial backgrounds based on her experience in Malta.
The Adoption team revised the content of the preparatory sessions and brought together new material including a video clip and reflective exercise on adoption. The video clip has been put together with the help of the Marketing team.

The outcome of most of the evaluations of the preparatory sessions has been constructive positive feedback. The same feedback has very often been given to the Adoption Service also verbally but above all, adoptive parents encourage new applicants to take the preparatory sessions seriously because it would ultimately help them in raising an adopted child. This indicates that the aims of these sessions are being reached.

New leaflets on the service have been issued by the Marketing team on behalf of the Adoption Service.

Way Forward

The Appoġġ Adoption Service is currently participating in regular meetings with the Central Authority with the aim of establishing adoption standards across the Maltese Islands, with which the Adoption Service will abide by once launched. This will include constant reviews and evaluations of waiting lists and training programmes. The Service’s Manual of Procedures will also be amended regularly.
In view of the recent established accredited agencies in Malta, the Adoption Service will continue to work at establishing and maintaining a positive working relationship for the best interest of the prospective adoptive parents and the children concerned.

The Adoption Service will also work hard at establishing new foreign contacts and maintaining the current contacts from which countries prospective adoptive parents can adopt whilst maintaining a positive relationship with the Malta Central Authority, which regulates such contacts.
High Support Service

Introduction

The High Support Service (HSS) was set up in June 2002. The service offers individual support work to children who are under a Care Order, living out-of-home, and who present challenging behaviour or special needs, and is part of the care plan for the said children. The main purpose of the service is to foster the child’s independence and to nurture the child physically, emotionally and spiritually, as well as coaching him/her to develop social and educational skills. Since 2005, this service has been extended to provide respite for foster carers who have children with challenging behaviour.

The HSS offers the service of an additional Support Worker to give attention to children aged from 1-17 years whose behaviour and level of competence needs more intensive care and attention. It provides one-to-one support to children who require more thorough intervention due to the challenging behaviour which they present. The service helps by sustaining the children through an Intensive Support Programme and assists them to integrate within the residential home or an alternative place of residence.

The presence of a Support Worker in the life of a child allows him/her to participate in the activities that take place within and out of the residential setting, helping the child to form fruitful relationships with peers and other adults. The Support Worker’s role is also to engage the child in a positive adult-child relationship, where the child can form a healthy attachment with the hope of increasing a sense of confidence in self, increase his/her resilience and thus develop the level of competence that they are able to attain. Support Workers will also foster independence in the children and encourage them to learn how to look after themselves, or help them to attain the best level of self-sufficiency they can achieve.
The Support Worker’s responsibility will be that of ensuring that the children’s rights to dignity and worth are being respected. Thus, each child will not be merely a case, but an individual who is loved and cared for. The children will have the opportunity of expressing their feelings as authentically as they wish to, without the fear of being judged or resented for what they feel. Through the presence of the Support Worker, the child will feel accepted as a person of worth.

The service is provided to children upon a recommendation by the Children and Young Person’s Advisory Board, which recommendation is approved by the Minister. However there are exceptional circumstances when this procedure is bypassed in the best interest of the child. Such occurrences include situations whereby the concerned child needs immediate attention due to the severe disability, other health conditions, as well as extreme challenging behaviour. These instances merit that the HSS is still provided to the residential homes as soon as the child is placed in care under an Interim Care Order. In such situations, the HSS Service Area Leader must seek the approval of the Service Manager and Operations Director before providing the residential home with the HSS. Should the approval be granted, the HSS is provided on the child’s admission to support the Housemother. As soon as the Care Order is confirmed, the HSS Leader, in liaison with the Child Protection Social Worker, must ensure that the HSS service is included in the child’s care plan as one of the recommendations presented to the Children and Young Persons’ Advisory Board.
Service Overview and Objectives

The High Support Service is made up of a team, including:

- Service Area Leader — who supervises the work carried out by all members of staff and oversees the overall management of the service.
- Coordinator — who assists the Service Area Leader in the coordination of the service and in the supervision of the staff, including the day-to-day case consultation.
- Support Workers — who provide one-to-one support to individual children. Most of their work is closely monitored by the staff of the church homes and coordinated and supervised by Appoġġ.

In September 2010 a new Service Area Leader was appointed as full-time worker and this was followed by a change in Coordinator in October 2010.

The main objectives of the service are:

- to offer a needs-led service for specific children and young adolescents who are under a Care Order and are service users of the Looked After Children Service of Appoġġ;
- to provide individual care and support to the children within the setting of the residential home, or foster care, so as to enable them to integrate better in their setting;
- 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 / group setting;
- to work hand-in-hand with the 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 child’s individual needs, interests and abilities, while at the same time support the children in tasks within the home setting in keeping with the timetable and expectations of the residential setting / home;

- to assist and support the children in developing competence and independence, by learning general lifeskills, appropriate to the age and ability of the children; and

- to support residential workers or care providers in caring for the children concerned with the ultimate aim of enabling these children to settle and integrate in their alternative place of residence.

**Review and Analysis of Service**

In the period 2010-2011, the HSS Service Manager, Service Area Leader and Coordinator worked on a number of targets which were reached by the end of 2011. These were:

- The presence of suitable and skilled Support Workers working with the children who meet the required standards and qualifications set by the local Department for Social Welfare Standards.

- Good management of Support Workers.

- Ongoing training for staff. Throughout these two years the staff attended the following training courses:

  - First Aid Course
  - Working with Fear
  - Autistic Spectrum Disorders
  - Dual Diagnosis Training
  - Supervision Training
  - Interviewing Children with Disabilities
  - Dealing with Diabetic Clients
- Commonwealth Training in Child Protection
- Commonwealth Training for Professionals Who Work with Children Whose Parents are Going Through Legal Procedures in Court
- Training in Supervision
- Psychological Overview of Child Abuse and Developmentally Appropriate Behaviours
- Interviewing Techniques
- Reflective Training for Service Area Leaders
- Coordinator attended a two week training opportunity with the Leonardo da Vinci Mobility Project titled ‘Safeguarding and Supporting Adults, Children and Families Living with Trauma’ in UK and Wales. This was a shadowing experience, mainly related to Looked After Children and Fostering Services.

- Individual supervision is held monthly in order to ensure that all Support Workers receive regular supervision, which is an important function due to the stress-generating nature of the work and to ensure a high quality service to those who utilise this service.
- Group sessions continued to be organised on a regular basis with the aim of providing the space to share their difficulties with other Care Workers and reflect on the impact which the work has on them. The creation of open relationships to encourage communication with staff about anything was always given great importance.
- Regular monitoring in the residential homes was held in order to enhance more communication between the two entities, though at times it is very difficult to carry out if the administrative demands remain so high on the HSS team.
- At the end of 2011, there was a change in Manager of the service and the service was incorporated within the Out-of-Home Care Programme.
Various educational talks were given on television and other media about parenting skills during the yearly FSWS Positive Parenting Campaigns.

By the end of 2010, HSS was delivering its service to 19 children while there were 23 full-time HSS Support Workers and eight part-timers. By the end of 2011, the number of children benefiting from HSS increased to 23 children, during which period the service incorporated 25 full-time Support Workers and nine part-timers (Table 19).

The total number of HSS hours that were delivered in the year 2010 was 40,440 whilst in the 2011 the number increased to 49,525.
<table>
<thead>
<tr>
<th>Residential Homes</th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>St Rita Home</td>
<td>4</td>
<td>7</td>
</tr>
<tr>
<td>Young People’s Unit</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Angela House</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>St Joseph, Żabbar</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>St Joseph, Santa Venera</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Fra Diegu Home</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Jean Antide Home</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Dar tal-Providenza</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Dar Sagra Familja</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Fostering</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Total</td>
<td>19</td>
<td>23</td>
</tr>
</tbody>
</table>

Table 19: Number of children benefiting from HSS, 2010-2011
Way Forward

- Introduction of group supervision, with the housemothers of the residential homes. In this way, the housemothers will be more involved in those matters which are related to the Support Workers and the children who are benefiting from HSS.
- Evaluation of the role of HSS workers and exploration of the possibility of their allocation to a wider spectrum of children instead of the current arrangement of allocation to individual children.
- Exploration of the possibility of the role of the HSS workers changing according to the requirements of co-management as it seeks to support the congregations which are currently providing residential services for children and young persons.
- Continuation of building positive working relationships with the residential homes to which HSS provide the service.
- In the coming year it is envisaged that training in ways of dealing with children with challenging behaviour and parental skills courses will be delivered to all Support Workers and as well as training in mandatory skills in the helping professions.
- The continuation of keeping contact with the residential homes through residential visits.
- Support to staff through individual and group supervisions.
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 committee 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 Ħġenzija Appoġġ to manage and distribute to vulnerable children.

Performance Review and Analysis

The Children’s Fund Committee is made up of a Chairperson, two representatives of the Fundraising Committee, and another representative from Appoġġ staff. The undersigned is the Chairperson of this Committee.

Figure 58: Children from St Francis School Sliema presenting a donation for the Children’s Fund, 2011
The said committee convened 23 meetings throughout the period 2010-2011. A total of 367 requests were made in the 2010-2011 period; from these, 340 were approved. A total of 537 children benefited from a total of €24,363.40 (Table 20). Their needs varied from education to food provisions, baby needs, medical assistance, transportation, uniforms, and regular clothing, amongst others.

<table>
<thead>
<tr>
<th>Year</th>
<th>Meetings</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>
<tr>
<td>2010</td>
<td>11</td>
<td>201</td>
<td>9,834.01</td>
<td>159</td>
</tr>
<tr>
<td>2011</td>
<td>12</td>
<td>336</td>
<td>14,529.39</td>
<td>208</td>
</tr>
</tbody>
</table>

Table 20: Requests received by Children’s Fund Committee and distribution of funds, 2010-2011
<table>
<thead>
<tr>
<th>Services Year 2010</th>
<th>Requests</th>
<th>Services Year 2011</th>
<th>Requests</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial Response Service</td>
<td>4</td>
<td>Initial Response Service</td>
<td>12</td>
</tr>
<tr>
<td>Domestic Violence Unit</td>
<td>5</td>
<td>Domestic Violence Unit</td>
<td>4</td>
</tr>
<tr>
<td>Generic Service</td>
<td>35</td>
<td>Generic Service</td>
<td>29</td>
</tr>
<tr>
<td>Child Protection Service</td>
<td>41</td>
<td>Child Protection Service</td>
<td>45</td>
</tr>
<tr>
<td>Looked After Children Service</td>
<td>25</td>
<td>Looked After Children Service</td>
<td>56</td>
</tr>
<tr>
<td>Youth In Focus</td>
<td>10</td>
<td>Youth In Focus</td>
<td>18</td>
</tr>
<tr>
<td>Qormi Health Centre – Social Work Unit</td>
<td>1</td>
<td>Qormi Health Centre – Social Work Unit</td>
<td>2</td>
</tr>
<tr>
<td>Birkirkara Community Service</td>
<td>2</td>
<td>Birkirkara Community Service</td>
<td>7</td>
</tr>
<tr>
<td>Qawra Community Service</td>
<td>4</td>
<td>Qawra Community Service</td>
<td>6</td>
</tr>
<tr>
<td>Valletta Community Service</td>
<td>6</td>
<td>Valletta Community Service</td>
<td>5</td>
</tr>
<tr>
<td>Cottonera Community Service</td>
<td>7</td>
<td>Cottonera Community Service</td>
<td>9</td>
</tr>
<tr>
<td>Aġenzija Sedqa</td>
<td>1</td>
<td>Aġenzija Sapport</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Fostering Service</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ghabex</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Paolo Freire Institute</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>141</strong></td>
<td><strong>Total</strong></td>
<td><strong>199</strong></td>
</tr>
</tbody>
</table>

*Table 21: Breakdown of the amount of approved requests to Children’s Fund and from which service the requests were received, 2010-2011*
<table>
<thead>
<tr>
<th>Item Requested 2010</th>
<th>Number of Children</th>
<th>Amount in €</th>
<th>Item Requested 2011</th>
<th>Number of Children</th>
<th>Amount in €</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baby Needs</td>
<td>37</td>
<td>974</td>
<td>Baby Needs</td>
<td>41</td>
<td>1,350.00</td>
</tr>
<tr>
<td>Clothing</td>
<td>14</td>
<td>648.82</td>
<td>Clothing</td>
<td>30</td>
<td>1,388.21</td>
</tr>
<tr>
<td>Consumables</td>
<td>82</td>
<td>2483.75</td>
<td>Consumables</td>
<td>127</td>
<td>2,923.77</td>
</tr>
<tr>
<td>Educational</td>
<td>31</td>
<td>2397.25</td>
<td>Educational</td>
<td>28</td>
<td>1,706.10</td>
</tr>
<tr>
<td>Equipment</td>
<td>2</td>
<td>132.06</td>
<td>Equipment</td>
<td>2</td>
<td>170.00</td>
</tr>
<tr>
<td>Medical</td>
<td>5</td>
<td>366.55</td>
<td>Medical</td>
<td>25</td>
<td>1,864.21</td>
</tr>
<tr>
<td>Membership fees</td>
<td>12</td>
<td>630</td>
<td>Membership fees</td>
<td>9</td>
<td>845.00</td>
</tr>
<tr>
<td>Professional fees</td>
<td>1</td>
<td>50</td>
<td>Professional fees</td>
<td>3</td>
<td>351.20</td>
</tr>
<tr>
<td>Subsistence</td>
<td>4</td>
<td>410</td>
<td>Subsistence</td>
<td>16</td>
<td>1,109.50</td>
</tr>
<tr>
<td>Transportation</td>
<td>9</td>
<td>845</td>
<td>Transportation</td>
<td>16</td>
<td>1,177.00</td>
</tr>
<tr>
<td>Travel</td>
<td>2</td>
<td>166.58</td>
<td>Travel</td>
<td>9</td>
<td>370.00</td>
</tr>
<tr>
<td>Rent</td>
<td>2</td>
<td>730</td>
<td>Others</td>
<td>30</td>
<td>1,274.40</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>201</strong></td>
<td><strong>9,834.01</strong></td>
<td><strong>Total</strong></td>
<td><strong>336</strong></td>
<td><strong>14,529.39</strong></td>
</tr>
</tbody>
</table>

Table 22: Breakdown of funds, items requested and the total number of children benefiting from requests to Children’s Fund, 2010-2011
In order for the Appoġġ Children’s Fund to keep meeting the current incoming demands, an average amount of €14,000 is needed every year. In view of this, the Fundraising Committee has the task to organise a number of activities. Throughout these past two years, the Committee has organised several activities. The two activities that generated the most income were the Christmas Logs and the sale of *figolli*. Collectively, these activities raised €3,842.57.

The Committee also organises smaller activities namely: *Ftira* Day, Baguette Day and *Boroż ta’ San Martin*, that also aid to raise funds. These initiatives, apart from raising funds, also serve as team building activities within the Agency.

Other important sources that keep the Fund resourceful, are the various donations effected by different entities, private companies and persons throughout the year. In the period 2010-2011, the Appoġġ Children’s Fund received a total of €8,467.89 in such donations.

Throughout the period 2010-2011, the Children’s Fund Fundraising Committee organised the activity *Enchanted Tales* in collaboration with Once Upon a Time (a private company), held at San Anton Gardens in Attard and
at Serenity Gardens in Santa LuċiJa respectively. These activities generated an amount of €14,355.21 in donations.

An activity that took place for the first time in 2011 in collaboration with Say It (a private company) was the sale of Christmas Cards.

**Way Forward**

On behalf of the children that benefited from the Appoġġ Children’s Fund, we would like to express our heartfelt gratitude to all sponsors, benefactors, Fundraising Committee members, and all the staff and volunteers for their noble gestures to keep the Fund active. We hope that in the coming years we continue to find the necessary support and financial backing to keep the Fund going since the demands to assist the most vulnerable is always on the increase. We thank everyone for their altruism.

*Figure 60: Step into Wonderland 2010, in aid of the Children’s Fund*
Adult & Family Services

Introduction

In the period under review, 2010 and 2011, the Adult and Family Services continued to consolidate its services as is reflected in the workload that was dealt with.

The services under this portfolio comprised of:

- the three Domestic Violence Services (DVS) – Domestic Violence Unit (DVU), Ghabex and Perpetrators’ Service;
- the five social work Health Services – Mater Dei Hospital, Boffa Hospital, Qormi Health Centre, Saint Vincent De Paul Residence (SVPR), and Mount Carmel Hospital Outreach;
- Psychological and Family Therapy Service; and
- Human Trafficking.

In addition, there was the increase of the Employee Support Programme (ESP), to this portfolio in 2011. This is a service offered by Public Administration Human Resources Office (PAHRO) and Aġenzija Appoġġ offers initial social work input to the public service personnel referred for ESP.
Objectives of the Services

The Appoġġ Adult and Family Services also continued to strive to promote their profile both within and outside the Agency. 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; and
- 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

Case activity increased incrementally during this period since 2009, and this was mainly due to an increase in case activity in the Health Social Work Sector. However, there was a decrease in case activity in the domestic violence and therapeutic services. Overall, in 2011 referrals increased by 9%, service openings by 7%, new cases by 5% and case closures by 56%. The large percentage increase in case closures was a result of services focusing on allocating periods of time to focus on working to close cases.
Figure 61: Case activity over time, Adult & Family Services, 2000-2011

With regard to operational issues, the Adult and Family Services faced quite a number of challenges, some of which were dealt with and concluded with success whilst others required continued work beyond the period being covered by this report.

One of the main challenges was the review of the Perpetrators Service’s exclusion / inclusion criteria for the eligibility or otherwise of perpetrators to enter the Programme; and of the process of movement from the Programme to the Support Group. The reasons behind the need for this review were mainly:

- the concerns raised that being the only such Programme in Malta, there was the tendency to be more accepting with the inclusion criteria – unlike other Programmes abroad – especially after a very risky incident involving a perpetrator and member of staff;
- to have all the assessment tools necessary for in-depth assessments; and
to assess why there is a low number of participants in the Support Group.

This review involved a great investment of time with several intense meetings involving the Service Area Leader and Coordinator, as well as consultations with the external supervisor of Perpetrators’ Service, as well as the Leader of the Appoġġ Psychological Service.

The highlights in this process were that an agreement was reached for the SAL and Coordinator to be able to have more support via consultation with the external supervisor; in cases of serious doubts about the acceptance of a service user into the Programme upon referral for priority, a psychological assessment will be carried out; and seek funding for the assessment tools required. There was also the change in the process of the point of entry into the Programme to make it more flexible for the perpetrators to enter the Support Group and receive additional support whilst waiting to enter the Programme. This was also a way of addressing the small numbers attending the Group. This change also required meetings with the facilitators running the Programme / Support Groups to explain the rationale and get them on board. This was necessary since it was going to require a rotation of current facilitators and the issuing of a call for the recruitment of a new pool of facilitators. This process was undergone with success.

Another challenge and highlight was the support and contribution given by the Domestic Violence Services staff to the Domestic Violence Commission’s year-long ESF project. This involved quite an investment of time in contributing to the content of the awareness campaign, organising a training session for the perpetrators attending the Appoġġ Perpetrators’ Service, identifying victims of domestic violence for the training seminar held for them, as well as for media interviews, and providing regular Supportline and Domestic Violence Unit statistics about the impact of the campaign on the
services concerned, to the Commission as well as for the Planning and Priorities Coordination Division, Office of the Prime Minister. All this helped in contributing to the success of the project.

The amalgamation of the Appoġġ Psychological and Family Therapy Service with that of Ħażenija Sedqa was another major challenge and highlight. This was in line with the direction to avoid duplication of services through amalgamation. The process involved a significant amount of time supporting staff in helping them deal with this change, and to the credit of all concerned, the amalgamation was achieved.

In the area of Health Social Work Services, the major issue of dealing with the pressures on and expectations of the social work service regarding dealing with social cases of elderly persons at Mater Dei Hospital (MDH) again posed a challenge, and meeting this challenge was an achievement. Meetings were held between hospital authorities and FSWS / Appoġġ management, where the latter were able to explain further the roles and limitations of Social Workers in dealing with such cases, to describe the complex issues surrounding such cases, as well as demonstrate the amount of elderly persons that the MDH social work team was able to return home. In addition, the other highlight was that as an outcome of these discussions, the hospital authorities approved of additional human resources with the aim of targeting such cases at the outset, from the point of admission in order for early intervention and more preventative work to be carried out.

With the Boffa Hospital social work service, the ongoing preparation for the move to a new hospital continued to be a challenge, and the success of achieving the opportunity of a three-day Oncology Training by a foreign expert, was a highlight.
The Service Manager of this services’ cluster is also the liaison Person on the Human Trafficking Task Force. Being a member of this Committee required contribution on various levels. This included providing feedback for the formulation and amendments to the National Action Plan on Human Trafficking; attending conferences in Brussels and Catania, Sicily, on the subject; as well as undertaking training delivered by the U.S. International Organisation of Migration, organised through the U.S. Embassy in Malta in conjunction with the Maltese Ministry for Home Affairs. Furthermore, this role entailed carrying out social work intervention with suspected victims of human trafficking, and liaise with the police, Social Workers from Aġenzija Appoġġ, and other entities on such cases.
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 through the emergency shelter for as many service users as possible who are at risk;
- advocating with other 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; and
- 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 nature of the work in this unit continued to be characterised by short-term crisis intervention in addition to long-term work, in the main. The team also continued to work in a steady, determined and committed way in the face of challenges such as gaps in staff replacements, the domestic violence legislation not being implemented in full vis-à-vis protection and treatment orders, and the impact in phases of the Domestic Violence (DV) Commission’s awareness campaign, among others.

The number of referrals to the Domestic Violence Unit (DVU) increased from 454 in 2009 to 595 in 2010, one of the highest level of referrals since the service was set up in 1994. Cases opened also increased to 469 in 2010 from 407 during the previous year. This increase in cases opened may have been due to the fact that two vacant posts in the team were filled and thus more cases could be dealt with.

However, in 2011 the number of cases referred declined to 557, and cases opened were reduced by 24%; the latter also may have been affected by staff absences due to maternity and marriage leave. The numbers of new cases also saw a reduction by 20% in 2011 when compared to 2010. These figures are surprising given the impact felt especially during some months of 2011, as a result of the DV Commission’s ESF project’s awareness campaign. Cases closed were the only activity to register an increase, increasing by 10% in 2011 over 2010. This was probably due to the team carrying out blitz days to close cases in order for new cases to be allocated. On such days, the team focuses solely on the work involved to close cases, such as case closure summaries, and ensuring that all material in the file, including recordings, is in place, among others.
A total of 803 cases were worked with in 2011, out of which 56% were known cases. This reflects the cyclical nature of domestic violence – where individuals can return for help many times – as over half the cases were re-referrals.

Figure 62: Cases over time, Domestic Violence Unit, 2001-2011

The following is a list of highlights and achievements for the DVU during the period under review:
The Service Area Leader won a competition in her own right for a placement at the Wolverhampton Women’s Shelter in UK. This was a T-shirt competition which involved the submission of a slogan to combat domestic violence, and the SAL submitted the most successful one, leading to her winning the above-mentioned placement for the duration of two weeks in August 2010.

A result of the above-mentioned placement, the risk assessment tool of the Appoġġ DVU was reviewed and adapted on the UK assessment tool, the D.A.S.H. (domestic abuse, stalking and harassment) checklist.

Members from this team were also involved in meetings with the FSWS Training Executive to draw up a tailor-made training programme for the other two services in the Appoġġ Domestic Violence Service, based on the Council of Europe’s minimal standards for staff working in the area of combating violence, including domestic violence. Training commenced in 2011, and was to be continued in 2012.

During the period under review, the Sapport – Domestic Violence Services Protocol was finalised, and an Initial Response Service (IRS) – Domestic Violence Services Protocol was also drafted, pending management review and approval. These protocols were aimed to standardise referral procedures and co-working between the respective units.
The DVU team initiated and took the opportunity to observe hearings of domestic violence cases in the Family Court, upon the invitation of one of the Family Court Magistrates. This led to a closer working relationship and understanding of the work between the two stakeholders – Courts and Aġenzija Appoġġ.

Leaflets about the Appoġġ Domestic Violence Services and the DV Act were reviewed and re-printed in collaboration with the FSWS Marketing team.

The Agency also contributed towards and supported the DV Commission’s ESF Project’s awareness campaign. This included the collation of statistics; attending meetings; contributing to the promotion aspect of the campaign through participation on radio and TV programmes, newspaper features and media interviews; attending a business breakfast for employers to heighten their awareness of domestic violence in respect of current and potential employees who may be experiencing this difficulty; as well as assisting in organising and attending a training seminar for victims, which was highly successful.

Consultations also took place with the FSWS EU Project Executive about possible project application on Sexual Violence between Youths. However due to human resource constraints, it was decided not to submit this application.

Appoġġ was also represented during the DV Commission’s national yearly seminar.

Appoġġ was also represented on the DV Commission and the Commission’s sub-committee on service development.
Way Forward

The Domestic Violence Unit will continue to strive to deliver and improve its quality of service to its clients by regularly reviewing its operations, advocating for the appropriate amount of resources to maintain quality service delivery, as well as advocating with other entities for changes and/or implementation in legislation, procedures and policies. This is necessary in order to ensure that victims’ rights and needs are met. These include protection, and the prevention and combating against violence. To achieve this, the following need to be followed:

- continue to advocate for the Appoġġ Domestic Violence Services to re-continue delivery of training on domestic violence to the Malta Police Force;
- realise the delivery of the DVS training;
- continue attending the Family Court observations in order to create opportunities for feedback to the Magistrate concerned and heighten awareness about domestic violence, especially vis-à-vis the implementation of the aspect of the legislation which gives Magistrates / Judges the faculty to decide to carry on hearing the case in spite of the victim forgiving the perpetrator, rather than taking the latter at face value;
- finalise the IRS / DVS Protocol;
- review and monitor the timeframe for the delivery of legal aid;
- review the need of completing the Protocols with Dar Merhba Bik and the Department of the Elderly and Community Care; and
- review the Manual of Procedures in the light of changes to the risk assessment tool and establishment of a waiting list.
Għabex Emergency Shelter

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; and
- 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

During this period, the Għabex shelter continued to aim at providing quality emergency shelter and support for its residents, in co-working with the Social Workers from the DVU. This was in face of the challenges of a deteriorating physical environment which was affecting the morale of residents and staff, and the policy / directive to accept teenagers with highly behavioural difficulties, which made the mix of client groups extremely difficult to ensure the smooth running of the shelter.

It needs to be pointed out that the statistics presented here only represent the adult victims of domestic violence, but often these are also accompanied by their children.
The movement of cases at Għabex remained relatively stable since 2007, but they declined slightly in 2011 when compared to 2010, reason being that for a period of months during 2011, the shelter hosted a minor with very challenging behaviour, which effected occupancy during this period.

New cases opened declined from 36 cases in 2010 to 29 cases in 2011; these made up 73% of all service openings in 2010 and 76% in 2011.

A total of 46 cases were worked with in 2011. 63% of these cases were new cases, 20% were re-contacts and 17% were known cases.

![Cases Over Time at Għabex Shelter](image.png)

*Figure 65: Cases over time, Għabex shelter, 2001-2011*
The following is a list of highlights and achievements for Għabex during the period under review:

- The initiative of approaching the Rotary Club, La Valette Malta about a Corporate Social Responsibility project of refurbishment, resulted in the Club investing over €20,000 in a major overhaul of the shelter. The entire place was newly plastered and painted, and new flooring was laid. A new kitchen, lounge suite and soft furnishings were also donated. The project uplifted the morale of both residents and staff.

- The Lion’s Club of St Paul’s Bay also carried out Social Corporate Responsibility for Għabex through several donations of goods.

- Appoġġ was also involved in meetings with the FSWS Training Executive to draw up a tailor-made training programme titled Working with Children for Għabex staff, based on the Council of Europe’s minimal standards for staff working in the area of combating violence, including domestic violence. The aim was to enhance the staff's knowledge and skills in working with children, to better support and empower the mothers of these children who are victims of domestic violence to cope with and relate more appropriately with their children; and to be able to work with the new client group of teenagers with behavioural challenges.
A Staff Support Group was set up in order to deal with staff dynamics, as well as the impact that the nature of the work and the new client group was having on staff.

Contributed towards the DV Commission’s ESF Project.

Way Forward

- The shelter was ‘adopted’ by Rotary Club La Valette Malta for yearly projects, therefore the need to identify and prioritise the needs to be met by these projects;
- to review the Ghabex procedures, especially in the light of having three different client groups to cater for in the shelter, including victims of human trafficking;
- implementation of the training programme; and
- continue to explore the idea of a pool of relievers in order to meet the gaps when staff is not available.
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; and
- to provide feedback to the Appoġġ Domestic Violence Unit, if the perpetrator’s partner is being followed by a Social Worker from this unit.

Performance Review and Analysis

This service continued in its aim to provide quality service to its clients in the face of the challenges of a long-term staff member leaving the service and the gap in the replacement of the post; a turnover of staff in filling in this post; but also having the opportunities to experience changes in the structure of the Perpetrators’ Programme and attending in a European conference abroad.
The number of referrals, opened cases and new cases of the Appoġġ Perpetrators’ Service, all saw a decline in 2011 in comparison to 2010, whereas case closures increased by 63%. The number of new service users declined from 40 in 2010 to 26 in 2011, accounting for 89% and 87% of opened cases respectively.

A total of 103 cases were worked with in 2011, out of which 25% were new cases, 2% were re-contacts, whilst 73% were known cases.

Figure 67: Cases over time, Perpetrators’ Service, 2001-2011

The following is a list of highlights and achievements for the Perpetrators’ Service during the period under review:

- A Call for Service issued to recruit a number of facilitators for the Perpetrators’ Programme & Support Group, in order to be able to rotate the facilitators between the Programme and Support Group and have a back-fall position in the event of staff leaving. The recruitment process took place and several new facilitators were chosen.
The Service was represented in meetings with the FSWS Training Executive to draw up a tailor-made training programme for the new facilitators, as well as a refresher for the longer-term facilitators, based on the Council of Europe’s minimal standards for staff working in this area.

Several meetings were held involving consultations with the external supervisor of the Perpetrators’ Services as well as the Leader of the Agency’s Psychological Service to review the exclusion / inclusion criteria of the Perpetrators’ Programme. This was necessary to discuss and decide whether to continue to allow perpetrators with criminal records, borderline mental health difficulties and generalised aggressors attend the Programme, in the light of the potential risks these posed to the other clients and staff. Literature and research into services offered in other countries was conducted but the outcome was not conclusive due to the dilemma of not having alternative settings to refer the above-mentioned perpetrators, unlike our overseas counterparts. However, it was agreed that if the Coordinator risks at the outset of the assessment, with the external supervisor and/or refer to Psychological Service for a psychological assessment.

A review of the structure of the Perpetrators’ Programme also took place, in the view of fewer service users attending the Support Group. It was decided that perpetrators who are assessed after an intake and would need to wait for the next Programme, in the interim could enter the Support Group, which would serve as an induction and at the same time retain them.

The Service was also represented at the final European Conference of the STARR (Strengthening Transnational Approaches to Reducing Re-offending) Project Findings on What Works in Reducing Re-Offending, in Sofia, Bulgaria. As a result of the attendance at this conference, Malta was invited to participate in the second phase of the
Project with the possibility of the final conference being held in Malta, after the Agency’s contribution during the first phase.

**Way Forward**

- Settle in, induct, support and monitor the new part-time member of the team who had replaced a previous worker;
- implement the training programme for facilitators;
- ensure and monitor the rotation of facilitators between the Programme and Support Group;
- continue to evaluate the inclusion / exclusion criteria; and
- liaise with UK partners about the second phase of the STARR Project, on the work required to be done.
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; and
- to liaise with entities for community services if required, to ensure the service user’s smoothest return and adjustment back home or in an alternative setting.

This service based at 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

During the two years under review, the team worked hard to continue raising its profile, in spite of the challenges of a steady turnover of staff, and succeeded in earning the respect of the hospital authorities, medical and paramedical staff for the quality of work that is delivered as reflected in the increasing number of referrals. Referrals, service openings and closures all increased in number in comparison to 2010, reaching an all-time high in 2011. The majority of service openings involved new cases, with 93% of all cases opened in 2011 being new cases. These statistics show a high number of
referrals and turnover of cases, reflect the higher profile that the MDH Social Work team has attained within the hospital, as well as the short-term nature of the service delivery. The latter also means that a larger number of cases can be opened and closed within the year.

A total of 1,667 cases were worked with in 2011, out of which 72% were new cases, 6% were re-contacts and 22% were known cases.

During the same period, the Paediatrics Service continued to mainly deal with cases of suspected child abuse – neglect, physical, psychological / emotional and sexual. Each case was assessed and referred to the Appoġġ Child Protection Service or the Agency’s Generic and Initial Response Services, as required. There were also some cases where Care Orders had to be issued. The monitoring of cases of infants born to substance misusing mothers was also carried out.

![Figure 68: Cases over time, Mater Dei Hospital Social Work Service, 2001-2011](image)

*Figure 68: Cases over time, Mater Dei Hospital Social Work Service, 2001-2011*
The following is a list of highlights and achievements for the Service during the period under review:

- Meetings were held between the CEO of MDH, Head of Consultants, CEO of the FSWS, Appoġġ management and Service Area Leader about the challenges that were being posed by social cases. The outcome was positive in that there was an agreement to engage two extra Social Workers for the Admission and Emergency ward and for a presentation to be given to the Consultants explaining the role and work of the Social Workers within this setting.

- Meetings held with staff of the Community Care Assessment Unit (ex-MMDNA) and Aġenzija Appoġġ to discuss future ways of working together.

- Meetings were also attended with Director of the Department for the Elderly and Community Care, MDH financial authorities, and Karen Grech Hospital staff about social security payments in social cases.

- The SAL was nominated as a representative on Allied Health Professionals Group, which comprises of the non-medical professions within the hospital setting.

- The team also collaborated with the FSWS Marketing team on website information updates, revision of the service leaflet, and also in various media interventions.

- The Manual of
Procedures of MDH Social Work Service was also worked on and was near completion at the end of this period under review.

Way Forward

- Work towards establishing the new social work service in Emergency at MDH with the engagement of two new workers there;
- to repeat the round of meetings with the Head of Consultants and the Consultants themselves, to update them on the Health Social Work Service; as well as give a presentation to them collectively re the role of social work in the health setting, and the work of the service;
- in conjunction with the MDH authorities and Head of Consultants among others, work towards setting up a more consolidated structure to deal with social cases;
- continue exercise to establish feasibility or otherwise of establishing exclusion / inclusion criteria re referrals;
- completion of MDH Manual of Procedures;
- carry out reviews of social cases with aim of slightly increasing the number of elderly persons returned to their homes by 10-20;
- consult with MDH management for the approval of the implementation of Appoġġ consent forms in the Health Social Work Service;
- set meeting/s with the British High Commission with the aim of establishing Protocol / Agreement / Guidelines re collaboration in intervening with foreign patients;
- set meeting with Director, Department for Elderly and Community Care, to commence work on protocol between MDH Social Work Service and the Department.
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; and
- to assess the state of the mother and develop a care plan to ensure security and protection for the mother and/or baby.

Performance Review and Analysis

After having shown considerable decline over the years, case movements increased both in 2010 and in 2011. A total of 268 cases were worked with in 2011, out of which 65% were new cases, 3% were re-contacts and a further 32% were known cases. New cases made up the bulk of service openings, with 96% of all cases opened in 2011 being new.
During the period under review, work by this service was mostly carried out with mothers who were minors, substance misusing mothers, and also other expectant mothers who had social and mental health problems. There were also 24 immigrant mothers who received a service from Benniena during this period. In the latter cases, interventions were carried out both with mothers and the children.

**Way Forward**

It is aimed to establish a support group for mothers who are over 16 years old and/or for cases involving multiple births. The priority needs as to who would stand to benefit most, still need to be established.
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; and
- to provide social work intervention during periods of acute stress through the provision of services to improve the quality of the service users’ 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

The Social Work team in this service continued to consolidate their positive profile with the health authorities and medical staff in this hospital. During the same period, they worked on the preparations for the move to the new Oncology hospital via contributing to capacity building reports, and conducting a training needs analysis in this area.

The number of referrals, service openings and new cases all decreased slightly in 2011 in comparison to 2010. Prior to 2007, the service closures had been quite constant but after a spurt in 2008, which was due to a data cleaning exercise that was carried out, there was a decrease in service
closures which then increased slightly in 2011 compared to 2010. The number of new clients remained fairly stable, with 146 new cases in 2010 and 139 in 2011. 96% of all service openings in 2011 were new cases. In 2011, a total of 503 cases were worked with, out of which 28% consisted on new cases, 1% were re-contacts and 71% were known cases.

![Cases Over Time at Boffa Hospital Social Work Service](image)

*Figure 71: Cases over time, Boffa Hospital Social Work Service, 2001-2011*

The following is a list of highlights and achievements for the Service during the period under review:

- contributed to report on capacity building in the light of the move to the new hospital;
- contributed to the planning of the move to the new Oncology hospital vis-à-vis the social work service; and
- conducted an extensive training needs analysis exercise for the team and also about what opportunities of Grundtvig programmes, among others, were available.
Way Forward

- Establish clear guidelines and time-frames for the migration from Boffa Hospital to MDH;
- coordinate a training session on bereavement;
- coordinate a training session on data protection issues with the Centre for Development, Research and Training; and
- implement training programmes subject to the availability of funding.
Qormi Health Centre & Community Outreach

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; and
- to provide support to the service user, their families and/or their carers.

Performance Review and Analysis

This is another of the Appoġġ Health Social Work teams that continued to consolidate its work, and enjoy the respect of the other professionals in the interdisciplinary team for the quality service that it delivers. The Social Work Team at the Qormi Health Centre is part of a larger system which incorporates various inter-disciplinary professionals, such as Nurses, Psychiatrists, and Psychologists. Referrals in the main come from the Psychiatrists at the clinic.

The number of referrals, case openings, new cases and case closures for the Qormi Health Centre service all steadily declined since 2005 but then they increased in 2010 and in 2011. The capacity to handle an increased workload may have been due to the return of the Coordinator who had been absent due to maternal and parental leave. A total of 219 cases were worked with in 2011, the majority of which with consisted of known clients, accounting for 71% of cases. A further 20% of cases worked with in 2011 were new cases and 9% were re-contacts.
The following is a list of highlights and achievements for the Service during the period under review:

- Adjusting to the setting up of new clinics by two new Psychiatrists, and supporting the closure of a clinic by a long-standing Psychiatrist at the centre. This involved the taking and giving of handovers of patient situations to the respective consultants.
- Tackled issues the team was facing due to dynamics with external factors. This included the coordination by the Service Manager of support sessions for the team provided by an Appoġġ Family Therapist.
- Orientation and integration of three service users in the Mount Carmel Hospital Supported Housing Scheme in Mġarr (a new scheme consisting of community flats catering for three service users each, launched in 2010).
Empowering services users to access employment through vocational assessments and rehabilitation. With the help of work schemes offered by ETC and ongoing support from key workers, four of the patients were able to find gainful employment.

Introduction of weekly work schedule to study and evaluate performance. This enabled the team to catalogue the wide range of interventions carried out ranging from assertive treatment and care, to rehabilitation work, support and education.

Way Forward

Various initiatives are being planned, which would continue to build on the successful performance of the two years under review. These plans include:

- Setting an initial three meetings with the two new Psychiatrists to familiarise with their way of working and impact on the social work service. Additionally, meetings will be conducted with the long-standing Psychiatrist to address some problematic issues, and ensure that the service is in line with new practices emerging in legislation.
- Coordinate a half-day training day focusing on dealing with conflict situations at work.
- Set up self-run support group for the team with the aim to focus on what is considered best social work practice.
- Introducing psycho-educational groups for the MCH Community Outreach team.
- Evaluating and amending the Outreach Operational Procedures for the MCH team to consolidate the teams’ identity and specific role within the Mental Health Services.
St Vincent de Paule Residence

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; and
- to motivate and enable elderly service users to live an active and independent a life as much as possible.

Performance Review and Analysis

The number of new cases dealt with increased from 134 in 2010 to 216 in 2011. A total of 349 cases were worked with in 2011. The majority of cases worked with in 2011 – 62% – were new clients, 22% were re-contacts and 16% were known clients. Females accounted for 59% of new cases in 2010, which increased to 65% of new cases in 2011.
Figure 73: Cases over time at St Vincent de Paule Social Work Service, 2001-2011

The following is a list of highlights and achievements for the Service during the period under review:

- staff representation on the National Committee against Elder Abuse;
- staff representation on the Volunteers Ameliorate Life of Users through Empowerment;
- staff representation on the Working Group against Elder Abuse; and
- staff representation on the Vulnerable Residents Fund.

The above-mentioned are committees within SVPR.
Way Forward

- To set up the new part of the social work service with the new worker working on community services and referrals to long-term care;
- to issue guidelines for Social Workers at SVPR on interventions in elder abuse cases within SVPR; and
- to set up a support group for volunteers, and provide them with training sessions, as well as link up with Apoqg training for volunteers.
Psychological & Family Therapy Service

Objectives of the Services

The Appoġġ Family Therapy Service provides family members of service users with the opportunity to meet together in the therapeutic context to work on their relationships with one another, in the presence of a Therapist.

The Appoġġ Psychological Service offers a therapeutic service in the form of sessions or assessments, to clients that are referred to this unit for psychological intervention; such as children, adolescents and adults who are referred from Social Workers within Appoġġ.

Performance Review and Analysis

Both services continued to play a central role in providing a continuum of service to the other services within the Agency, via their focus on delivering therapeutic interventions to child and adult victims of abuse and trauma and complementary to social work intervention. This was mainly addressed to re-constituted families and adults in distress and crisis. The work done by 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.
Family Therapy Service

The number of referrals, service openings and new cases for the Family Therapy Service leveled off in 2011 and remained quite stable in comparison to 2010. On the other hand, case closures increased considerably in 2011. The total number of cases worked with in 2011 was 196 cases.

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2011</th>
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</thead>
<tbody>
<tr>
<td>New Cases</td>
<td>25</td>
<td>25</td>
</tr>
<tr>
<td>Re-contacts</td>
<td>3</td>
<td>5</td>
</tr>
<tr>
<td>Known Clients</td>
<td>146</td>
<td>166</td>
</tr>
<tr>
<td>Total Number of Cases</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Worked With</td>
<td>174</td>
<td>196</td>
</tr>
</tbody>
</table>

*Table 23: Case summary for Family Therapy Service, 2010-2011*

*Figure 74: Cases over time, Family Therapy Service, 2011-2011*
Psychological Service

The number of referrals has been in decline since 2009, decreasing to 100 cases in 2010 and to 74 in 2011, the lowest level ever since 2001. The service openings and new cases opened also continued a trend of decline whilst the number of case closures has increased from 31 in 2010 to 49 in 2011.

A total of 267 cases were worked with in 2011, out of which 78% were known cases, 19% were new and 3% were re-contacts. On the other hand, 85% of service openings in 2011 consisted of new cases, which was less than that in 2010 where 94% of cases opened were new.

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2011</th>
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</thead>
<tbody>
<tr>
<td>New Cases</td>
<td>67</td>
<td>50</td>
</tr>
<tr>
<td>Re-contacts</td>
<td>4</td>
<td>9</td>
</tr>
<tr>
<td>Known Clients</td>
<td>164</td>
<td>208</td>
</tr>
<tr>
<td>Total Number of Cases Worked With</td>
<td>235</td>
<td>267</td>
</tr>
</tbody>
</table>

Table 24: Case summary for the Psychological Service, 2010-2011
Figure 75: Cases over time, Psychological Service, 2001-2011

The following is a list of highlights and achievements for the Family Therapy and Psychological Service during the period under review:

- extensive work was carried out on a proposal to review the whole operations of the two teams from referral to closure of cases;
- worked on prioritisation criteria of cases;
- facilitated group for the Appoġġ Looked After Children Service;
- facilitated support groups for the teams of the Initial Response and Generic Services;
- contributed to the assessment of potential foster carers;
- facilitated the Għabex support group;
- provided sessions for Qormi Health Social Work team about dealing with external issues;
- provided supervision to the Cottonera AĊĊESS Community team on their work with teenagers; and

1 In Figure 75, numbers of new cases are not reported before 2009 because they were not collected before this year
participated in consultation meetings with Social Workers referring to the two services.

Way Forward

The Psychology and Family Therapy Service team will be undergoing a major change, in that both services will be involved in the extensive process of merging with the Psychology and Family Therapy Service team of Ħerren Sedqa.
Human Trafficking

Objectives of the Service

- To ensure the provision of social support services for victims and potential victims of human trafficking;
- to be a point of contact in order to facilitate communication and exchange of information;
- to act as the contact for the provision of social support for cases of trafficking identified by the Malta Police Force;
- to ensure the provision of social work intervention including assessment, and any other forms of counselling and support as required;
- to contribute to marketing campaigns carried out to raise awareness on human trafficking; and
- to contribute to reports and statistics for data collection as required.

Performance Review and Analysis

During 2010-2011 the Appoġġ liaison person on human trafficking worked on suspected cases of victims of human trafficking with the police, in terms of social work intervention and ensuring provision of social welfare services; consulted with non-government organisations regarding assessments of alleged victims of human trafficking; and contributed to the National Task Force to Combat Human Trafficking, which has as its remit to work on national indicators and profile of victims, national referral mechanisms, standards of procedures, and awareness raising, among others.

Over these two years under review, six cases were worked on with the police for whom sheltered accommodation, as well as other social services as required, were provided. The liaison person is involved in the initial
assessments of all such cases involving this client group, which can be intense and time-consuming.

The following is a list of highlights and achievements for the Service during the period under review:

- In November 2010, Appoġġ was represented at a symposium on human trafficking in Brussels entitled *New Approaches in Preventing Human Trafficking: Integrating the European Knowledge*.
- In May 2011, the liaison person attended a four-day conference by the International Catholic Migration Commission, Europe – *Responding to boat arrivals and mixed migration flows in the Mediterranean* – in Catania.
- In June 2011, the liaison person and other Appoġġ staff attended a three-day training programme provided in partnership by the Ministry for Justice and Home Affairs, the U.S. Embassy in Malta, and the US International Organisation of Migration, entitled *The Introduction to Human Trafficking: Victim Identification and Interviewing techniques*.
- In meetings with the U.S. State Department staff and representatives of the U.S. Embassy, the Appoġġ liaison person on human trafficking took the initiative of accepting the offer of video-conferencing training being offered to staff of the Appoġġ Supportline 179 service, linked with a helpline in the U.S. This took place in November 2011 at the U.S. Embassy in Malta, from which approximately 40 Supportline 179 volunteers and supervisors benefited.
Way Forward

- Draw up Referral Procedure and Manual of Procedures;
- Liaison person to continue contributing as a member on the National Task Force to set up a national action plan on human trafficking, a national referral mechanism, national indicators of human trafficking, and review the Memorandum of Understanding between the Police and the then Ministry for Social Policy. This together with contributing to any future training courses with the National Training team and attend training as required;
- update current informative material, such as the leaflet on human trafficking, subject to funding;
- participate in activities if an application for an EU project by Integra Foundation – an NGO – is approved; and
- continue co-operating with the police and NGOs on case intervention.
Employee Support Programme

Objectives of the Service

- To provide support for public employees on a range of difficulties both personal and work related; and
- to enable employees to be healthier, more productive, and able to better contribute to their place of work.

Performance Review and Analysis

This service, set up at the beginning of 2011, was the latest addition to the portfolio of the Appoġġ Adult and Family Services. The Programme is coordinated by the Management and Personnel Office within PAHRO, in collaboration with Aġenzija Appoġġ to meet the referrals of employees in the public service who are facing difficulties; carry out social work assessment over three sessions, and then refer accordingly if deemed necessary to the partners on the project. These include the Agencies within the FSWS, the Malta Hospice Movement, the National Commission for Persons with Disability, Richmond Foundation, Cana Movement and OASI, for more in-depth intervention and support.

The difficulties that are dealt with range from addictions; bereavement; terminal illness; disability issues; mental / emotional health difficulties; marital, family and relationship issues; other areas of concern affecting the employees’ work performance; to work-related stress. Most referrals from the Employee Support Programme Unit in 2011 were made to Richmond Foundation, as the most common problems presented by service users were related to mental health difficulties and work-related problems.
The Employee Support Programme Unit has the equivalent of two full-time Social Workers, who worked on 82 cases in 2011. Aġenzija Appoġġ monitors and supervises these Social Workers through one of the Agency’s Service Area Leaders. The input of the Social Workers with individual clients only reflects the part of the project that Aġenzija Appoġġ is involved with.

The following is a list of highlights and achievements for the Service during the period under review:

- a Manual of Procedures and a number of forms were developed, including a consent form, initial assessment form, evaluation and satisfaction forms, and a confidentiality form, which were sent to the respective partners. Forms for report writing were also compiled;
- a database and service user / client register were set up, together with a filing system for case files;
- the Social Workers were involved in the observation of the mapping process of six Ministries;
- Social Workers were also involved with the service Psychologists during the group sessions as part of the mapping process, and observed the sessions and wrote reports on their observations for the Psychologists. Feedback was also given to the Social Workers by the Psychologists as part of the former’s training;
- Social Workers carried out awareness sessions to top management of government entities and conducted training sessions for two Ministries; and
- meetings with the ESP Unit management and Aġenzija Appoġġ staff were held on a regular basis to discuss, review, and monitor operational procedure and the co-working between the two entities. One agreed upon outcome was that in certain cases if deemed necessary, the Social Workers could conduct more than three sessions.
and also initially accompany the service user to their first appointment with the respective project partner that they are referred to.

**Way Forward**

- Continue to monitor the impact of the mapping exercise on the amount of referrals;
- review the Manual of Procedures with the Coordinator of the Unit and the superior, to ascertain whether any amendments to procedures need to be implemented, and complete amendments as required;
- liaise with the Coordinator and the superior on the extension of the Programme; and
- act as a link between FSWS and ESP Unit regarding the project's management.
Community & Generic Services

Introduction

With the plans in 2009 to start three new community-based teams, the services previously pertaining to the Community and Generic Services were restructured. The new area of services now includes the Cottonera Community Services (also incorporating Home-Start Malta, Paulo Freire Institute and the Housing Community Service), the B’Kara, Qawra and Valletta Community Services, and the Generic Service. The Manager in charge was also involved in the development of the AĊĊESS Centres, both as the representative of the Foundation for Social Welfare Services on the AĊĊESS Board of Directors, as well as assisting in the recruitment and training of the AĊĊESS Managers, helping out in administrative issues and providing support to the AĊĊESS Managers on a regular basis.

Having had the experience in the previous project (2006-2008), the Manager was given the responsibility of setting up the new hotline service within the Besmartonline! project, which is funded by the European Commission and led locally by the Malta Communications Authority.

Another responsibility given to the Service Manager is to liaise with the Housing Authority on housing issues faced by service users of the Agency.

Both the Community Services and the Generic Service offer generic social work. The issues that the Social Workers address vary from relationship problems and family issues, financial problems, unemployment, physical and mental health problems, substance abuse and lack of adequate social support systems that lead to isolation, and difficulties in parenting that can lead to neglect.
Because they deal with similar issues, the staff within the Generic and Community Services have joint training. Each year, the Cottonera Community Services and the Generic Service shared training on common issues the workers encounter. Once the new community services started to operate and after they had their own induction training, they too joined in the annual training with the other services. The aim of the training is to improve and streamline practices, as well as to build good links between the teams and to share ideas and experiences.

![Figure 76: Number of referrals to the Community and Generic Services, 2000-2011](image-url)
Figure 77: Services opened by the Community and Generic Services, 2000-2011

Figure 76 and

Figure 77\(^2\) show the number of referrals and cases along the years. There has been a slight decrease from 2009 to 2010. It is most likely due to the fact that a number of cases previously followed by the Generic Service were passed on to the new community services which had not yet been included in this cluster.

\(^2\) Data in Figure 76 and Figure 77 refer to the Generic Service and the Cottonera Community Services
Community Services

Being in the community offers its advantages – the service is more reachable by service users and potential service users; it allows the Social Worker to see the families within the context of their environment; and to get to know what resources and difficulties exist within that community. It also helps the Social Workers interact with the community on a different level – so that they become familiar faces, to be seen less threatening, and more as a ‘friend’ within the community, a support in their daily lives, for those who are going through crises or other difficult situations that need daily support.

Another advantage of being in the community is maximising joint work with other services, especially the specialised services. Having built a trusting relationship with the service users, the Social Workers in the community facilitate their relationship with other service providers.

The disadvantage of being in the community is that one needs to be careful with boundaries, especially when people get too familiar, and when people tend to rely too much on the Social Workers. While being in the community, workers need to help the service users build their own support networks to allow their intervention to phase out when this is necessary. The community projects and activities help this process.

Within the community, there are two levels of intervention:

- social work intervention with families and individuals needing such support and intervention; and
- work on a community level – working with residents, local entities and other service providers on projects that strengthen resources and support within the community.
Work within the community is based on community development principles – that is, supporting the local community to facilitate a process of change through local 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 and community leaders; skills training; as well as through project work targeting various aspects of the residents’ lives, such as literacy and education, employment, parenting and interpersonal relationships.

Such projects not only give the residents skills for a better quality of life, but also give people a better value of self, and encourages local participation and action towards a more independent life. Some difficulties faced while working in the community include residents or local entities who do not share the commitment to work for the common good and those who create difficult dynamics and challenge the fundamental values of community development.

One final element to draw upon is the importance of volunteers which are a prominent part of the work carried out in all the community services. There are various projects which would not operate without the help of volunteers. Therefore, investing in them is essential for the success of the work as well as for the formation of people who are concerned about the well-being of others.

**Service Overview and Objectives**

- Providing initial first contact, preliminary assessments and short-term social work interventions within a community based setting;
- assisting people in accessing appropriate services and resources;
- supporting and strengthening families so that children can continue to live safely in their own home environment;
- providing services that are suitable to the needs of individuals and communities – such services include social work intervention and community projects and activities;
building on strengths of children, families, carers and communities, so as to develop capacity in individuals and to build sustainable communities;

- assisting in parenting by providing support in the various stages of children’s development; and

- focusing on prevention and early intervention to reduce crises situations within the families.

1. Cottonera Community Services

The Cottonera Community Services (CCS), the first such service to be operating, targets Cospicua, Vittoriosa, Senglea and Kalkara.

During the years under review, the Cottonera Community Services went through a change in leadership. The Service Area Leader who had been managing the service for six years, resigned and was replaced by a new Leader. The Manager supported the transition and the new Leader was welcomed by the team. She settled well in her new role and worked on developing the work that had been carried out by the previous leader.

The Cottonera Community Services continued to strengthen its links with other local entities. One of the main areas of focus was mental health: new developments in the Mental Health team at the Cospicua Health Centre allowed the Cottonera Community Services to work more closely with the Mental Health team on certain issues as well as refer a few situations where it was felt that the service users would benefit from the more specialised service offered there.
The trend was showing a constant increase in the need to work with young people. Therefore, the Cottonera Community Services responded to this by increasing its work with young people, mostly on a group level – through the pre-adolescents group, *Colours of Life* which is co-run with the Sedqa Prevention Services. Group session address themes like self esteem, caring for our community, sports activities and other similar activities.

![Figure 78: An activity organised for the participants of the Colours of Life group](image)

i. *Girls 15+*

This programme was sponsored by Soroptomists International (Malta) and increased contact with the Youth Worker at St Margaret College. In fact, there were several communications and meetings with the Soroptomists International (Malta), including a visit to *Dar Bina*, where the project was to take place.

A group of eight young girls met on a weekly basis and participated in various sessions. The girls were helped to find employment throughout the scholastic year 2011-2012.
ii. Mentorship

Since there was a number of children who, because of various issues, were unable to integrate in one of the groups that the CCS was organising, the team started to provide mentoring to these children. Therefore, they were given individual attention through craft sessions, which provided an informal platform for social skills development aimed to help them reintegrate into the group.

There was also increased communication with the Youth Worker, with several discussions taking place on possible action to be taken for the benefit of young people in the Cottonera area, as well as joint work with a number of young people who are service users and also attend the youth group organised by the Youth Worker.

iii. ‘Proġett Tagħlim’

This is a homework club which is operated in collaboration with the Foundation for Educational Services (FES) and the Senglea Primary School. The project has been running for a number of years and has developed in a way that divides the sessions in two different parts; the first part focuses on the academic development of the children (FES), while the second part targets social skills development.
iv. ‘KlabbSajf’

This is another long-standing project and also runs in collaboration with FES and St Margaret College. This summer school provides recreational and educational activities for about 60-70 children during 10 weeks in summer. The programme ends with a talent show where children have the opportunity to perform in front of the parents, and receive a token from the organisers.

There were other joint initiatives, such as the mental health awareness seminar carried out in the Girls’ Secondary School, with the help of the Mental Health team at the Cospicua Health Centre. The seminar highlighted eating disorders and the mental health stigma.

The Cottonera Community Services also partnered an application for the President’s Creativity Award, which was led by St Margaret College. The project is meant to focus on drama and art for a group of young people attending the College.

There was also a noted change in operations when the Social Workers started to get more involved in projects. This helped give them a broader view on other types of interventions that can be carried with people participating in community projects. It also helped Community Workers to understand certain social issues better thanks to the more direct input from the Social Workers.
v. **Housing Community Worker**

Over the years of operation within the Cottonera community, the Housing Authority has employed a part-time Community Worker through Appoġġ. The main aim of this was to see to the housing needs of the residents. The Community Worker receives requests for alternative accommodation and inquiries about the schemes and other services provided by the Housing Authority. Home visits are carried out, after which a social report is compiled, when this is required. The Community Worker also follows up the applications, particularly in situations where the applicants need support. The Housing Community Worker has become an integral part of the team in Cottonera.

![Cottonera Community Services Referrals](image)

*Figure 81: Referrals to CCS, 2001-2011*
Figure 82: CCS service openings, 2001-2011

vi. Home-Start Malta

In 2010, Vodafone Malta Foundation and HSBC Malta Foundation renewed the contract with Aġenzija Appoġġ for another two years of financial support. Funds, however, are always needed and Home-Start Malta received a number of donations and contributions through a number of benefactors, as well as fundraising initiatives.

Figure 83: Celebrating Home-Start Malta’s 5th anniversary
In 2011, Home-Start Malta reached an important milestone, celebrating its 5th anniversary.

The number of families receiving the service increased from 15 to 25, which had been one of the targets determined by the management Committee.

Reaching out to more families meant that:

- we needed to strengthen the marketing strategy to attract and recruit more volunteers; and
- referrals from families who live outside the main communities of service provision were also received and assessed to see if Home-Start Malta could offer the service to them. The Home-Start Malta biennial report is available for download from the Appoġġ official website – www.appogg.gov.mt.

vii. Paulo Freire Institute

Paulo Freire Institute is run by the Jesuits in Żejtun. The service started over 15 years ago. The main focus had been literacy, and throughout the years, there were several projects and initiatives related to literacy, informal and non-formal education. Paulo Freire Institute broadened its service provision to provide social work intervention. Ħażenzija Appoġġ has been supporting the social work service at Paulo Freire Institute for over 10 years.

The relationship that the Jesuits enjoy within the Żejtun community, together with the new initiatives embarked on within the community resulted in an increase in the demand for the social work service, with persons coming from the surrounding communities as well.

All the other services provided within Paulo Freire Institute are on a voluntary basis. This includes other professionals who offer their services, such as
2. B’Kara Community Services

In its second year of service, the B’Kara team, which had originally started operating from the Qawra ĦESS Centre, moved to an office in B’Kara. This was a positive move, in the sense of being closer to the community. However, the situation of the office posed a number of problems. Because of its particular location, the staff was unable to disclose the whereabouts of their office. This placed the Social Workers in an uncomfortable position. It also caused a number of impracticalities because there was no possibility for people to drop in for assistance. The Social Workers would have to arrange appointments for them at the Appoġġ premises. Furthermore, tackling crisis situations was also very challenging without having a proper premises.

Notwithstanding this, the team worked very hard on establishing the service and providing a quality service. The service started to grow. More people were requesting the service, while the team started to build networks within the community, particularly with the parishes and the local schools.

The B’Kara team, which has the same Service Area Leader as the Qawra team, had joint regular team meetings with them, as well as the Unit days which served to strengthen the teams. They also enjoyed the possibility of having joint group supervision.

Although there were various attempts at higher levels to address the issue of the premises, and although there were efforts to support the team, an adequate solution was not forthcoming. Thus, the problem persisted throughout 2011. The problems increased because of the increase in demand.
on the service and because of the negative impact it was having on the team and the team dynamics.

During 2011, there was a change in staff. One of the Social Workers moved to another service and was replaced. In the meantime, more work was carried out at a community level with initiatives targeting parents, and the unemployed in particular.

There was a review of the waiting list. The situations were reassessed to see whether the service was still requested and whether the priority had increased or not.

Once the Community Worker settled into the team, she started to work on new initiatives, mostly targeting adults through the following programmes:

i. ‘Tliet Kwarti Spazju Ġhalija’
   This project took advantage of the time parents spent while waiting for their children attending doctrine classes. During this time, the parents would discuss topics and issues that they were interested in and found beneficial on a personal level as well as in their role as parents. Following the success of the first group, parents of another group were invited to participate. Parents of the first group were able to coordinate the second group. The aim is to replicate this project in the other parishes.
ii. *Women at Work*
This project was run in collaboration with the ETC and targeted women who were seeking employment. The project was run in the form of a seminar and tackled various topics related to social development and job seeking skills, with the aim to enhance the participants’ possibility of finding suitable employment.

iii. *Contact building*
The Community Worker invested in building contacts with both local entities and other stakeholders that could be partners in future projects.

iv. *Community survey*
There was an effort to carry out a survey in the community to see what the residents feel is needed in their community. This was meant to be done in partnership with the local council. However, unfortunately, due to a number of difficulties, this project was not finalised.
3. Qawra Community Services

The Qawra Community Services target the communities of St Paul's Bay, Qawra, Buġibba, Burmarrad and Xemxija. As in the case of the B'Kara Community Services, the Qawra Community Services started its second year of operation within the Qawra AĊĊESS Centre. For part of 2010, the team hosted the B'Kara team. This was possible because of the shared Leader and the availability of space. Thus, the staff at the Qawra Community Services too enjoyed the joint team meetings, group supervision and also Unit Days with the B'Kara team.

The demand for the social work service increased as more people got to know about the service. The team also started to build a network with local entities, the school, the parishes and the local council, with which there is an agreement for the services of a part-time Community Worker.

With the introduction of the Community Worker, there was an increase in the community-based initiatives, mostly related to work with children and young adolescents. Some of these projects were conducted jointly with the parish and with the Foundation for Educational Services.
i. *Pre-adolescents’ group*

This was held at the ATTIK – premises provided by the Qawra parish. The project targeted young boys and girls, offering a space for healthy socialisation and educational activities.

ii. *Qawra Parish summer school*

The Qawra Community Services participated in the summer school by providing sessions on life skills to the participants. These sessions were held once a week.

The recruitment of the AĊĊESS Manager increased resources and opportunities for community interventions and activities. The Qawra Community Services worked closely with the AĊĊESS Manager, sharing responsibilities in the planning and implementation of the projects for a greater outcome from the services.

iii. *‘Klabb Nahla’*

The project targeted children who are at risk of social exclusion, offering them space for individualised academic development as well as an environment for healthy recreation. The sessions were held at the ATTIK.

The project was run by FES, while the Qawra Community Services supported the project by focusing on the social skills of the children and linking with the parents and the school. The project was also supported by the St Paul's Bay local council.

iv. *Focus on Our Concerns*

This project was made possible with the funds obtained through the President’s Creativity Award. This was a joint effort between the Qawra AĊĊESS Centre, the Qawra Community Services and St Paul's Bay local council. The participating young people had the opportunity to learn hands-on
photography, then using the skills gained to show their concerns on their community. The project will run through to 2012.

v. *Parents’ meetings*
These meetings were held with parents waiting for their children while they attended doctrine classes. During the meetings various relevant topics were discussed which were identified by the parents themselves. These discussions were beneficial for parents both on a personal level as well as in their role as parents.

vi. *Outreach activity*
This activity was organised with AĊĊESS Qawra, Sedqa and LOGOS at the Buġibba square to promote healthy lifestyle free from substances. The staff from the various entities had the opportunity to talk to passers-by and to distribute printed material.

vii. *Employers’ fair*
The Fair was held in collaboration with ETC and AĊĊESS Qawra. The Qawra Community Services team was invited to give an overview of the services to employers in the surrounding localities.

viii. *Spring Festival*
Once the AĊĊESS Manager settled in his post, he organised a *Spring Festival* with the participation of all the entities at the AĊĊESS Centre, as well as other local organisations. The Qawra Community Services helped in the organisation of the event as well as held a stand with information on the work carried out by the team.
ix. **Planting activity**

This activity was organised by the AĊĊESS Centre, the Qawra Community Services and the local council. During the activity, residents were invited to plant flowers in the square outside the AĊĊESS Centre, thus embellishing the area.

x. **Educational Water Fun Day**

The Qawra Community Services were partners in an activity held by the local Scouts, consisting of water games.

Unfortunately, there was little consistency in the presence of the Community Worker. During the period under review, there were two changes in the Community Worker at the Qawra Community Services. Meanwhile there were also difficulties to find a Community Worker for the local council. This was a setback for the continuity of the community work that was planned, and caused difficulties to maintain the projects.

There was also need to invest in rebuilding the team and the contacts within the community. Nonetheless, there have been encouraging results, and the community initiatives continued to grow thanks to the efforts of all involved.
4. Valletta Community Services

The Valletta Community Services (VCS), which target the communities of Valletta and Floriana, is the third community service to have been set up towards the end of 2009. Therefore, 2010 was the first full year of operation. The Valletta Community Services operate within the Valletta AĊĊESS Centre.

As in the other community services around Malta, the VCS works on two levels – that is, it offers social work intervention to the residents, and works on a community level through community-based projects and activities. The Valletta local council enjoys a similar relationship with Aġenzija Appoġġ as the St Paul's Bay local council. Through the agreement, the Valletta local council is providing the service of a part-time Community Worker. The Community Worker works within the VCS team, although more specifically on projects and tasks requested by the local council.

There are two full-time Social Workers at the moment, working in the community for Valletta and Floriana. They work with individuals and their families. The types of intervention include intake and initial assessment of the presenting problem, short and long-term intervention according to the need, addressing drop-ins, and networking with other entities within the community. The Social Workers deal with situations of a generic nature. The main pressing problems involve those regarding relationships, mental and physical
health issues, adolescents with emotional and behavioural difficulties, difficulties associated with ageing, financial problems, housing issues and problems in child rearing. There were periods during the two years under review when there was only one Social Worker available.

The Community Worker is involved in contact-building and networking with various local entities in Valletta and Floriana, including the local councils, the parish priests and volunteers, the ETC Job Centre, and other groups such as the 3rd World Group. In fact, the Valletta Community Network was set up over three years ago, by the Community Worker with the support of the local council and Appoġġ, to create a formal network of local entities that would help identify difficulties local residents face and to pool in resources and ideas that could be used within the community to address these needs.

The Community Worker initially met with the residents of Valletta to ask what projects / courses they need. Suggestions included a very basic computer course for the adults, as well as flower arranging and other crafts. These were necessary not only to provide the people with an opportunity to learn something new, but it helped the participants gain self-worth and interest to learn more. It also helped the team start the process of getting to know the residents.

The focus of the two years under review, which were the first two full years of operation, was Valletta. However, there are plans to start focusing on Floriana as well in the near future.
i. *Homework Club*

Another initiative focused on academic help to children aged between five and 11 years. Children were encouraged to think their way through their homework. Other values, such as sharing, were taught informally. The children were very keen to attend. This project, organised with the help of young volunteers, served to build the trust of the service amongst the parents who then found it easier to approach the Social Workers about the difficulties they had to support their children, or to ask for help. The parents also wished to involve themselves more in their children’s education.

In Valletta too, the Social Workers started to get more involved in the projects. This has its benefits, both for the outcome of the project, as well as the opportunity for the Social Workers to see the children or other participants interacting in a context that is outside the home visits and office visits where they normally meet.

ii. ‘*Sajf Flimkien*’

In its first summer of operation, the Valletta Community team co-organised the summer school, which is run by the local council. During the six-week programme, various recreational and educational activities are organised for 70 children. The project was repeated in its second year. The team and local council are assisted by a group of 40 volunteers.

*Figure 88: Children attending ‘Sajf Flimkien’ summer school*
iii. **The elderly**

During the past few years, the local council, through the work of the Community Worker and the parish volunteers, organised a number of monthly meetings for the elderly. The Valletta team, upon starting its work there, met the participants to introduce the team and to listen to the difficulties encountered by the elderly participants.

iv. **Others**

There were a number of other activities, including participation in ‘*Nghajtu kontra l-faqar*’, the talent show that closed the *Sajf Flimkien* project, and contact building with other entities within the Valletta area including St Albert’s College, the Mental Health team, Local Parishes, St Francis College, Youth Employment Programme, a number of post-secondary schools, and many others.

*Figure 89: A discussion held as part of the activity ‘Nghajtu kontra l-Faqar’*
Generic Service

The Generic Service offers generic social work intervention to people living outside the communities targeted by the Appoġġ Community Services. The Generic Service provides social work intervention that is, in fact, similar to that provided by the Community Services. However, they are provided from a centralised office, rather than being community-based.

Service Overview and Objectives

- To provide a relevant, accessible, professional service to all those requiring it;
- together with the service users, draw up a plan of action that would improve their quality of life and ensure a healthier and safer home environment for children;
- to offer a service that addresses various issues within a family, to avoid crisis situations or the need for a more specialised service;
- to help the service users access other resources and create effective and supportive networks within their own community;
- to work jointly with specialised services, when necessary and appropriate, to give a broader and more holistic service to the services users; and
- to ensure staff professional support and development for quality service delivery.

There are many situations where early social work intervention would reduce the risk of crisis or the need for having the intervention of a more specialised service. In other situations, families or individuals who receive specialised intervention need support on issues other than that which is being addressed by the specialists. Building a good relationship with the service users is of utmost importance, especially when some service users, although consenting
to the intervention, are resistant. However, professional work and support would help build trust, which is the basis for all interventions.

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 Generic Service is based within the central offices of the Agency, and therefore community-based interventions are not possible. However, through evaluation of the situations faced by their service users, the team started to discuss and plan another method of intervention which they hoped would be beneficial for a number of families, while introducing a different component to service delivery.

![Generic Service Referrals](image)

*Figure 90: Referrals to the Generic Service, 2003-2011*
Figure 91: Generic Service Openings, 2003-2011

i. Family Workshops
The team started to plan the Family Workshops which target families going through various precarious situations related to parenting, relationships, finance and other difficulties.

During 2010, much of the planning for the Family Workshops was done, including obtaining suitable premises through an agreement with Dar Sagra Familja (in Santa Venera). The premises were refurbished through the contributions and support of various local entities and also thanks to the efforts of the Generic team that worked hard on making it welcoming and comfortable. The first group started in 2011. Although there was a fluctuation in the attendance, the group felt that it was a very beneficial experience. One of the benefits included the fact that the service users got used to all the Social Workers in the team and felt comfortable with them. They saw them more in a caring role, and would feel supported even in the absence of their own Social Worker. On their part, the team felt that such work within the group helped them understand the families’ situations better. It also helped to see the service users in an environment other than a home or office visit, and
observe various aspects and characteristics of the person that may not be necessarily be visible in the usual situations when they meet.

Since the main aim of the Family Workshops is to empower the caregivers in the family, the process starts by focusing on the person. In this way, the parents start to see themselves firstly as persons with their own abilities and needs. This is aimed to increase self awareness and self appreciation. The Generic team also organised pampering sessions, which were informal sessions during which the participants were given space for relaxation or self-care. These sessions were organised throughout the whole programme.

Once the participants go through the journey of increased self value, they would be able to focus on the development of skills needed to manage the family and the household better. These sessions would be discussed previously with the group. Such topics of discussions would include parenting, child care, safety at home, preparing nutritious meals, budgeting and such.

As the programme winds down, the participants are encouraged to seek work or an activity that may help them maintain a better sense of fulfilment and keep them active.

During the period under review, there was just one group with six participants that was held. Being the very first group implied that the workers had to learn how best to deal with certain situations, such as engaging with the parents and keeping their motivation, helping the group bond, raising points that are not only relevant to the daily lives of the participants, but also communicated in creative ways.

The participants were asked to evaluate the workshops and the feedback was very positive. They expressed the benefits of attending the group and some participants also exchanged contact details to keep in touch even beyond the
programme. This outcome encouraged the team to set about to organise another group. However, as is often the problem, the participation from new service users was not forthcoming and during a period of time after the closure of the first group, there was a pause in the service.


ii. Waiting list
The Generic team also worked on the review of the waiting list, which meant contacting people and assessing the situation to determine whether the service is still requested or needed, and to prioritise the situation. This is an annual exercise. Although generally this exercise helps in decreasing the waiting list, in 2010, there was an increase in the waiting list, mostly because of the time it took for the Social Worker to be replaced. Following this, there was a slight reduction in the waiting list in 2011.


iii. Children’s Christmas party
In 2010, as in the previous year, the team organised a Christmas party for the children of the service users. For many children, this was the only opportunity to celebrate Christmas and to receive a present. There were around 45 children attending and they were entertained by a number of games and a magician. Each child received a gift from Father Christmas. In 2011, it was not possible to repeat this event. However, the children of the Appoġġ service users were invited to a party organised by the Order of St John.


iv. Change in Leader’s workload
2010 brought about a number of changes to the team. One Social Worker was transferred to another service. For a period of time, the team was working with a Social Worker less until the replacement was effected. Towards the end of the year, a decision was taken to transfer the Initial Response Service (IRS) to the responsibility of the Service Area Leader of the Generic Service. This decision came about following the resignation of the Leader of IRS and plan to have more continuity between the intake and
short-term generic intervention (IRS) and the long-term generic interventions. The change meant that the workload on the Leader increased substantially, in terms of supervision of the staff and the case discussions and administration of the IRS.

The Service Area Leader also had to get used to the nature and pace of the service as well as the fact that she was accountable to two Managers since both services remained within the same area of service for the first months. However, this move also allowed the Leader to understand better the influx of new situations and the movement from the immediate and short-term intervention to specialised services and long-term intervention. Thus, she was in a position to examine any shortcomings in the process and positives to build on.

v. Training opportunity
The Service Area Leader had the opportunity to attend a one-week seminar (Grundtvig) in Lithuania. The seminar regarded ways of supporting families, such as through the Home-Start Malta service, and through art and music therapy.

v. AĊĊESS Centres
The opening of two new AĊĊESS Centres in Valletta and Qawra in September 2009, brought the number to three. Appoġġ was involved in the preliminary preparations, and once they were up and running with the services in place, it got also involved in their management. The first AĊĊESS Manager was recruited in the beginning of 2010, and was in charge
of the three Centres. However, later that year, she was joined by another Manager, thus having the tasks shared. During the process of recruiting the third and final Manager, one of them resigned. So there was the need to start the recruitment process again for the third and final Manager. The recruitment of all the AĊĊESS Managers was finalised in April 2011.

In the meantime, in March 2011, the Minister set up a Board of Directors, made up of the various entities that provide their service within the AĊĊESS Centres, such as the Employment and Training Corporation, Aġenzija Appoġġ, the Foundation for Educational Services, and the Department for Social Security. Other agencies, such as the Directorate for Educational Services, Aġenzija Żgħażagħ and the Housing Authority were also invited to join the Board. The formation of the Board and the appointment of a Chairperson gave more structure to the AĊĊESS Centres, making way for more development.

vi. Besmartonline!

The Malta Communications Authority (MCA) approached the Foundation for Social Welfare Services to see whether the latter was willing to join a partnership and apply for funds for a new project on internet safety. The project, which is funded by the European Commission, has three actions: raising awareness on internet safety, manning a helpline to deal with queries and issues related to internet safety and abuse, and operating a hotline to receive reports on online abuse of children.
Since Aġenzija Appoġġ operates the national helpline and since it already has experience in operating a hotline, the partnership was formed, along with another two partners, to apply for the Besmartonline! project. The MCA are the lead partners, with the responsibility of the awareness centre. Appoġġ took on the helpline and hotline.

The successful application was submitted after joint work carried out with MCA. The project started in October 2010, however, there was a difficulty to get suitable staff to work in the project. In fact, it was only in mid-January 2011 that the hotline team was in place. However, there was a representation from both the Awareness Centre and the helpline / hotline (the Service Manager) in the Insafe meeting in Berlin in December 2010. The attendance was particularly important to start building contacts with other helplines and with INHOPE (an international association of hotlines which receive and process reports on child online abuse), since an application for membership had to be submitted immediately.

The project was launched on the 16th February 2011, around the time when Europe was celebrating Internet Safety Day. Other partners in the projects were the Office of the Children’s Commissioner, and the Directorate for Educational Services (from the e-Learning Department as well as from the Student Support Services). There was also participation from the Cyber Crime Unit (Malta Police) and the Secretariat for Church Schools.
The team set out to work by training the volunteers of Supportline 179, which was to take the role of the helpline in the project. The training covered issues on online risks and child abuse.

Aġenzija Appoġġ submitted an application for the provisional membership of INHOPE which led to a visit from a Board member of INHOPE. Mr Frank Ackermann visited the hotline in March to assess the service and make his recommendations.

In May 2011, two representatives of the hotline attended a day of training (tracing and the use of the new INHOPE database, the Integrated Hotline Reporting management System – IHRMS) in Vilnius, Lithuania. During the INHOPE General Assembly, held during the following days, the Maltese hotline was presented to the INHOPE members, and was granted provisional membership. Thanks to the provisional membership, the hotline was able to pass on reports to the rest of the INHOPE community through the IHRMS, as well as benefit from support and other contributions from other countries.

Immediately after the approval of the provisional membership, the hotline team started to work to fulfil its obligations as a member as well as prepare for the application for full membership the following year.

i. Contribution to the Maltese network
Aġenzija Appoġġ was involved in the Steering Committee, which was represented by the partners and which was responsible for overseeing the project. The team members were also involved in the Advisory Board, which was chaired by the Commissioner for Children and made up of various stakeholders in the field of child well-being and internet.
The helpline / hotline team also participated in national awareness activities, such as the information days, and other activities such as the *Spring Festival* in Qawra.

ii. *Contribution to the international network*

The team participated in a number of international meetings, including the Internet Safety Forum and benefited from a bursary with the helpline in Luxembourg, meetings with Insafe and the INHOPE General Assembly and International Conference with the Internet Industry and the Law Enforcement Agencies in Rome, Italy, in November 2011.

iii. *Training and awareness sessions*

The person responsible for the awareness in schools, started to work with other people from the e-Learning Department to deliver information sessions to all the schools, targeting the late primary and early secondary classes.

In the meantime, the other hotline team members were involved in various sessions on internet safety, particularly with Scouts, and other youth groups. Other sessions were held when requested by schools or other children’s and young people’s groups. More training was provided for the new Supportline volunteers in September 2011.

iv. *Other achievements*

With the help of the Information management Unit (IMU) of the Ministry, the hotline refined the online reporting system. During the period under review, 162 online reports were received, 70 of which were forwarded to the Police Cyber Crime Unit for further analysis and the necessary intervention.

The helpline received 108 calls related to online risks and abuse. 52 of the calls needed further intervention from the helpline / hotline team.
Another achievement was the Memorandum of Understanding (MOU) signed between the Malta Police and Aġenzija Appoġġ. Along with the MOU, which is a requirement to operate the hotline, there were also Standard Operating Procedures between the Cyber Crime Unit and the hotline team, to facilitate work and communication on the issues encountered. The Cyber Crime Unit offered training to the team with which it worked very closely.

v. *Change in the management of the Hotline*

During the changes that were planned through the Agency, there was the decision that the hotline would move back with the Supportline 179, where it had been during the previous project (2006-2008). The complete move was to take place at the end of the project, that is, in May 2012. Once the new portfolio was settled, the Service Manager was involved in the tasks pertaining to the Hotline service, including participation in an INHOPE members meeting in Rome.

vii. *Liaison with the Housing Authority*

For several years, the Services Manager had been responsible for advocating for service users of Appoġġ with the Housing Authority. Service users needing particular consideration from the Housing Authority due to their circumstances would have their case presented through a social report prepared by the respective Social Worker. The Service Manager would follow up on the issue with the Housing Authority, to help prioritise.

Thanks to the healthy relationship between the two entities, 11 service users have had the opportunity to have alternative accommodation and 16 were given other solutions. Situations that are not so genuine or not so urgent are identified quicker, thus increasing the efficiency in the work.
Way Forward

In the light of restructuring plans, the Community and Generic Services, as from 2012 will only incorporate and focus on the Agency’s community services, since the Generic Service and the Hotline will be moved under the remit of the Children, Young Persons and Support Services section.

Besides this, there are plans for a new community service in Msida, which will be incorporated in the new AĊĊESS Centre in this locality, and therefore, work on refurbishment, supplies and recruitment of staff would be completed by 2012.

Therefore, the main target is to consolidate all the community services. This would include:

- supporting the new Service Area Leader and the new community team;
- streamlining service provision, taking into consideration the various contexts that the teams work in, the difficulties presented by the respective communities as well as the community resources available;
- reviewing the procedures manual for community social work services and finalising the one for the community development workers;
- providing joint training for the community teams, possibly including the Generic Service (the new Intake and Family Support Services) since there are many similarities in practice issues;
- strengthening the Home-Start Malta service and supporting the new Home-Start Gozo service;
- supporting the community projects and the development of new community initiatives which are socially inclusive and are aimed at enhancing employment opportunities of the local residents; and
- participating actively in the AĊĊESS Board of Directors and contributing to AĊĊESS activities where appropriate.
Thus, the Appoġġ Community Services will be strengthened so as to reach and support more vulnerable individuals and families within their own communities, and prevent crises that would lead to referrals to specialised services.
Intake and Socio-Legal Services

Introduction

During the period under review, the Intake and Socio-Legal Services continued to build on the previous year from when this new portfolio was introduced (end of 2008). The Intake and Socio-Legal Services during 2010 and 2011 incorporated the following services:

- Supportline 179
- *Programm Ulied Darna* (PUD)
- Adolescent Outreach Service
- Court Services
- Supervised Access Services (SAVs) & Court Monitoring
- Initial Response Service

The Intake and Socio-Legal section of Aġenzija Appoġġ provides a range of services to those individuals and families who seek the help of the Agency either for the first time or who had acquired help in the past and need assistance once again. Assistance is also provided in cases of legal nature as well as support to young people with emotional and behavioural difficulties.
2010 saw an increase in the total number of new/re-contact cases when compared to previous years. In 2011 the number of service openings when compared to the previous years decreased and another decrease was also seen in the number of service closures. This implies that the cases remained opened for longer than in previous years. This is a general observation as the different units experience different scenarios during the year.

A major highlight for the Intake and Socio-Legal Services was the two amalgamations that took place between 2010-2011. The Teen Support Service of Sedqa and Youth Outreach Service of Appo SG became one service under the remit of Appo SG – the Youth in Focus Service. This brought about workers changing Agency, change in leadership, role change of team’s Coordinator, different styles of operating, and overall a new challenge for workers.

Another amalgamation was that between Supportline 179 and Programm Ulied Darna. Although the overall operations remained the same, the workers had to adapt to some changes such as the introduction of individual
supervision sessions for volunteers, knowledge of both services such as the use of the database, joint campaigns and a more holistic approach to the idea of volunteering.

A change in leadership was also another highlight for this period – this due to these changes that took place. Following the amalgamation of PUD and Supportline 179, the Initial Response Service – which had a shared leadership with PUD and Supportline 179 – moved under another Leader.

During this period, another project which Appoġġ joined in as partner, namely Kellimni.com, was incorporated within this portfolio since it is a service directly linked to Supportline 179. This was a new joint initiative taken up by SOS Malta, Salesians and Appoġġ, making it the first partnership between an NGO, Church entity and a government agency. The aim behind Kellimni.com is to reach out to children and young people through new modern technologies. Online counselling was a new concept in Malta but which was highly practiced in other countries. The role of Aġenzija Appoġġ is to help out in the recruitment, training and support to volunteers whilst being the Agency responsible to guide in situations of crisis, mainly due to its expertise in running Supportline 179.

The material that follows is a general observation of the individual services under this portfolio.
Youth in Focus

Introduction

The Youth Infocus Service provides assistance to adolescents between 13 and 18 years of age, who exhibit severe emotional and behavioural problems and/or have an addiction problem. The aim is to improve the overall well-being of these young people, while maintaining close collaboration with their parents, carers and their social network.

Service Overview and Objectives

The service was previously known as Youth Outreach Service and was changed in 2010 because the said service and Sedqa’s Teen Support Service were amalgamated to offer a more holistic service to young people. This need was felt first and foremost to have one specialised service targeted for young people. There were cases that had a worker from Teen Support Service and another from Youth Outreach. Thus in order to make better use of the resources available and since there were instances when there was an overlap of work between the two services, discussions led to the decision to join the two teams. Both teams were accustomed to the work of the respective team especially since in previous years they were jointly involved in the programme Budz.

Budz was a day programme targeting vulnerable young people with the aim of addressing their deviant and challenging behaviour, help rehabilitate first-time offenders, address issues such as prostitution, arrest habits such as using drugs and alcohol before they become habit forming, and intervene in acute crisis by involving their families, school and other support networks of these young people aged between 13-18 years.
The programme’s main objectives were to bring structure and stability in the lives of these vulnerable young people, help them develop and maintain healthy relationships, and also help them become aware by reflecting and taking responsibility of their actions through the teaching of particular life skills appropriate to their needs.

The Youth in Focus Service provides social work intervention to these adolescents, with the scope of assisting them throughout their adolescence, by addressing their needs and empowering them to reach their full potential. Whilst the focus is on the adolescent, the Social Worker still involves the parents / carers as much as possible.

![Percentage of New Cases at YIF in 2010](image)

*Figure 97: Presenting difficulties of adolescents followed by Youth in Focus Service, 2010*
Figure 98: Presenting difficulties of adolescents followed by Youth in Focus Service, 2011

There is a wide range of presenting difficulties that adolescents present (Figure 97 and Figure 98). These may include anger management; involving oneself in vandalism; turbulent relationships with parents, partners and others; promiscuity; coming out; self-identity crisis; addictive behaviour; time management; bereavement; employment; petty crime; emotional abuse on parents; past traumas; difficult past health traumas; problems with self-esteem; poverty & homelessness; alcohol / drug addiction; and money management.

The team’s objective is to deliver a specialised service to these adolescents whilst supporting them within their own environment and community by strengthening their social support network. Working in partnership with other professionals and linking service users to other resources is one of the main targets of the Youth in Focus Service in order to help these adolescents lead a healthy lifestyle.
**Review and Analysis of Service**

![Cases Over Time at YIF](chart)

*Figure 99: Cases over time, Youth in Focus, 2010-2011*

In 2010, the service received a total of 117 referrals, and another 134 cases were referred in 2011.

The team had a waiting list of 31 cases as at end December 2010 and 50 cases as at end of 2011. This reflects that the majority of cases required long-term intervention and thus the service could not close cases in order to take on new cases from the waiting list. Referrals indicate that the need for such service kept on increasing especially after the team managed to settle down after the amalgamation.

In 2010, joint work with Frate Jacoba – a community home run by priests – led to some admissions of minors in this community home. This was very beneficial for the team due to the lack of residential placements for adolescents.
In 2011, the team had another change in Leader, who was appointed in March 2011. Since the number of staff members increased, another Coordinator was also added to the team in September 2011. During this year, the team conducted two blitz days where they reviewed the waiting lists by re-assessing and prioritising the cases accordingly.

Through these blitz days, the team engages in an activity throughout a day or amount of hours, whereby cases on waiting lists are reviewed and assessed in order to identify whether service users still require the service, whether the case can be referred to other services and also to prioritise cases as situations might change and cases might require urgent intervention then it was required when case was initially referred. This will involve all team members working on these cases which are beyond their own caseloads.

Another highlight for the Youth in Focus team was in August 2011 whereby it was decided that some cases of adolescents with challenging behaviour or addiction problems who were currently being followed by the Agency’s Looked After Children Service, were transferred to the Youth in Focus Service so to have cases of juvenile delinquency, addictions and behaviour difficulties handled by one service. This was a great challenge for the team as they had to adapt to different ways of working and procedures especially since most of the cases transferred where cases of young people under a Care / Court Order. Due to this, a new worker was added to the team and in October 2011 another worker joined the service on a ten-hour weekly basis.

Meetings with the Sedqa Drugs Community team were held whereby it was established how these two services can work better together in cases of drug / alcohol / gambling addictions. Since Sedqa has the expertise in this area of work, it was felt that it is highly beneficial for the Youth in Focus team to maintain close contact so to stay updated on trends and issues that take place in the addiction field.
The team was also directly involved with the EU project led by the FSWS – Embark for Life. Youth Workers from the project worked jointly with the team’s Social Workers and managed to support a good number of adolescents through employment, skills training and residential placement / housing.

Way Forward

The Youth in Focus Service will continue specialising in direct outreach work with adolescents. Reaching out should be the priority for the workers to engage more with adolescents, support them and help them integrate into healthy sustainable relationships.

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, Sedqa, Juvenile Court and Probation Services.
- Continuing to provide a professional service to the young service users and to their families.
- Continuing to advocate for a residential facility and other services targeted at adolescents which will better cater for our service users’ needs. Other services might include a day programme to support the current residential facilities and to engage more with adolescents who are regularly absent from school and/or are unemployed.
- An analysis of the team’s training needs will be one of the top priorities in order to support and invest in the workers’ skills to be able to work with adolescents who exhibit different challenges. Training would include, counselling skills to support drug / alcohol abuse clients, prevention measures and skills in engaging with adolescents.
Initial Response Service

Introduction

The Initial Response Service (IRS) is the first contact for service users who seek help from Aġenzija Appoġġ. Social Workers within the Initial Response Service, whose role is to conduct the initial assessment of these service users, refer to other specialised services where necessary and carry out crisis interventions.

Service Overview and Objectives

The service receives referrals through the general public who contact Aġenzija Appoġġ by phone, dropping in at the premises, through referrals, emails and through Supportline 179, or other services. The IRS focuses on the initial assessment of the situation being presented. With the information gathered, the team would decide whether to:

- refer immediately to a specialised service, within or outside Appoġġ;
- conduct a further assessment to have a clearer picture of the presenting situation and how best to address it;
- carry out the necessary short-term interventions to address the situation; or
- intervene immediately if a crisis situation presented, such as suicidal threats, homelessness and emergency placements for children.

Ideally cases at IRS are closed or referred to other services within three months however this is not always possible. Reasons are various but this is mainly due to other waiting lists in other services thus service users keep referring to Social Workers at IRS. This has led to various discussions on
whether it would be more effective if IRS deals with both long and short-term cases.

**Review and Analysis of Service**

![Graph of Cases Over Time at IRS](image)

*Figure 100: Cases over time, Initial Response Service, 2001-2011*

The number of referrals, new cases and service closures registered, have steadily increased between 2005 and 2010 but they declined in 2011 in comparison to 2010. A total of 2,427 cases were worked with in 2011, out of which 69% were a new / re-contact cases and 31% were known cases.

Waiting list as at December 2010 was of 95 cases. The waiting list as at end of January 2011 was of 81 cases which by December 2011, this had went down to 49 cases. During 2011 there was a constant allocation of cases from the waiting list although drop-ins and phone-ins kept increasing as well.

Comparing the nature of referrals in 2010 to those in 2011 shows that there was an increase in child abuse cases which increased by 8% in 2011 from the overall referrals that the Initial Response Service received in 2010. There
was a drop of 5% in cases of problems in family relations, however relationship problems in general increased by 5% from 7% to 12%. In 2011, the team dealt with a number of cases of families and individuals encountering financial difficulties. These amounted to 5% of all the referrals that the team received in that same year.

It was noticed that the service also had an increase in separation cases during 2010 and an increase in cases of asylum seekers in 2011. Asylum seekers constantly sought interventions from IRS either due to homelessness issues (following their termination from other shelters who catered for asylum seekers) or for day care facilities for their children in order for them to seek employment. The team tried to support these service users through referrals to child care centres, respite fostering and also referrals to other shelters, as well as intervened in trying to help them find employment. The Agency also referred for support from other entities in order to find interpreters to improve communication between client and service provider. This is a new phenomenon for the service, thus new ways of working are constantly being discussed and introduced in order to address this new social issue.

A slight increase was also reported in cases related to behavioural problems from 10% in 2010 to 12% in 2011. Discussions with the Youth in Focus Service took place in 2011 whereby such cases were dealt with jointly by the two teams.

In 2010, the team started working on its manual of procedures. Towards the end of the same year the team had a new Service Area Leader and a new procedure was soon put in place. In 2011, the team helped in the organisation of closed cases.

Due to the increase in cases of child neglect that IRS were dealing with, the Agency’s Child Protection Service and IRS conducted joint talks on child
abuse issues in schools. These talks were held in collaboration with the Heads of schools and colleges. During 2011 almost all colleges were covered.

Following internal discussions and due to the long-felt need to have IRS and Generic Service working more closely together, it was decided that these two services are merged into one team. Thus workers from both services could work on both long-term and short-term cases as opposed to the existent practice that IRS deals with short-term cases (although this was not always possible) and Generic Service working with long-term cases.

**Way Forward**

The way forward for IRS will remain that of being the first initial contact for service users who seek support from the Agency. A new challenge will be the amalgamation of the Initial Response Service and the Generic Service. The team will eventually work on establishing new ways of working with both long-term and short-term service users.
Programm Ulied Darna

Introduction

Programm Ulied Darna (PUD) is a service offered by professionally-trained volunteers, who, with the support and supervision of professional staff, provide assistance to parents needing support in the upbringing of their children. This involves helping them enhance their parenting skills, budgeting skills, house-keeping skills as well as providing them with emotional support. According to the needs of the families, volunteers provide practical help to parents such as child-minding, child respite, as well as accompanying the parents to medical appointments. Support is also provided to children within these families such as helping them with homework, accompanying clients to appointments and other needs that the individual and/or family require. Proġett Tereżja is another service provided by volunteers within Programm Ulied Darna. Volunteers receive material donations such as furniture and other household necessities from the general public and distribute them to families experiencing financial difficulties, after being referred by their Social Workers, aiming to improve their quality of life.

Service Overview and Objectives

The main aim of Programm Ulied Darna is to build on the parent as the sustaining agent in the child’s life and to consider the home as the sustaining background. This is done with the help of volunteers offering their service in various programmes of support suiting the particular needs of families.
Review and Analysis of Service

- In 2010 the process of amalgamation between Supportline 179 and Programm Ulied Darna initiated and continued throughout 2011. In 2010 one training course was also coordinated, after which 14 volunteers joined the pool of volunteers within Programm Ulied Darna and a further 29 opted to join Supportline 179. Whereas in 2010 two different campaigns were done for PUD and 179, in 2011 the two services, under new leadership held a joint recruitment campaign for volunteers. 33 new volunteers were consequently recruited and completed the 12-week training course successfully.

- In 2010, Programm Ulied Darna received 47 new referrals. That same year closed with a waiting list of 48 cases. Support was offered to 27 families, a figure which increased to 47 families in 2011. Support to these families is a long-term intervention offered by our committed volunteers.

- In 2011, referrals of families who have at least one child under the age of five years and who needed the support of a volunteer to help them out with parenting skills, budgeting issues and other forms of support, were referred to Home-Start Malta – another Appoġġ service that by
then had extended its catchment area from the Cottonera region to the rest of Malta. Through this exercise, the waiting list was decreased by 27% between 2010 to 2011.

- Moreover, during the two years under review, **Programm Ulied Darna** decided to focus more on building on the parent or carer as the sustaining agent within the family. Due to initiatives held by the government, such as the setting up of **Klabb Nahla** – a service that helps children with their homework, **Programm Ulied Darna** could shift its focus from helping children with homework to helping both children and parents/carers in creating a more stable environment at home by promoting communication between family members, positive parenting, supporting both children and parents/carers in their daily tasks, etc. Cases on the PUD waiting list for assistance in homework were referred immediately to the Foundation for Educational Services, which took hold of the situations presented and offered the necessary support to these families.

- In 2011, the Agency nominated one of the PUD volunteers, namely Mr John Debono, for the Elderly of the Year award. Such nomination was taken by surprise by Mr Debono, who for the past years showed great responsibility and dedication in his voluntary work within **Proġett Tereża** and who was the person who managed this project since its beginning. Much to our delight this was also appreciated by the organising committee who actually confirmed Mr John Debono as the Elderly of the Year for 2011.

- In May 2011, a volunteer from PUD had the opportunity to attend a training workshop in Lithuania together with a Social Worker from the Agency. The Agency felt the need to nominate this volunteer first and foremost for his continuous dedication and commitment but also
because the workshop entitled *New Inputs for Social Inclusion* under the Lifelong Learning Programme – Grundtvig. This workshop focused on soft skills development, which aimed to improve one’s competency for social work with families. Such training was not only beneficial for this volunteer in his work with the families he was supporting but also served as a learning experience to other volunteers with whom he shared his experience.

**Way Forward**

*Programm Ulied Darna* will continue to engage new volunteers to support families in need. Discussions are being held as to how the service can be enhanced so that more families receive the necessary support in their own community and environment. It is planned that contact with the Church Diocese Commission is established whereby volunteers from particular communities can be trained and supported by PUD staff thus they can support families in their own community.
Supportline 179

Introduction

Supportline 179 is a 24-hour telephone service run by a team of professionally trained volunteers. It provides immediate, confidential support to callers of any age, who require assistance both in day-to-day and crisis situations. It also provides information on social welfare services and referral systems to those callers who require further assistance. Supportline 179 receives calls on situations of child abuse, domestic violence, and drug / alcohol / gambling problems, amongst others.

Service Overview and Objectives

Supportline 179 is run by trained volunteers under the supervision of professional staff. The main aim of the service is:

- to offer a listening and emphatic ear in a confidential and anonymous environment;
- to provide information and empower the general public in recognising social problems and making use of the appropriate services;
- to provide help to callers by means of referrals; and
- to intervene in crisis situations mainly: domestic violence, child abuse, homelessness, suicide attempts and rape.
Over the past two years Supportline 179 has seen an increase in calls received by the service. During 2010, the service dealt with 16,446 calls out of which 10,868 calls were genuine calls for help.

In 2011 Supportline volunteers received 17,354 calls out of which 11,761 calls were genuine calls for help. Thus the amount of genuine calls increased by 4% (893 calls) over one year.

Over these two years under review, there was an increase in calls related to child abuse over the internet, which increased by 80% in 2011 (this is most probably the effect of the Hotline Service within the same Agency which is part of the *Besmartonline!* Project, officially launched in February 2011); calls related to bullying in 2011 increased by 25% over 2010; calls related to fostering increased by 25% in 2011.

Recruitment of new staff members led to the team of professionals being able to offer more individual support and monitoring to the team of existing
volunteers. Another important milestone for Supportline 179 was the celebration of its 15th Anniversary in 2011.

**Figure 103: Top 15 presenting problems reported on Supportline 179, 2010**

**Figure 104: Top 15 presenting problems reported on Supportline 179, 2011**
Review and Analysis of Service

After steadily declining since 2003, the total number of calls has been slowly increasing since 2009. In 2010 a total of 16,446 calls were made to Supportline 179 and this increased by 1,093 to a total of 17,539 calls in 2011.

A decline in the calls received by children was noticed as in 2010 the service had 443 calls made by children whilst in 2011 it had 133 calls – a decrease of 54% in 2011.

During this period the project Kellimni.com was launched. Appoġġ are partners in this project together with SOS Malta and Salesians. This project offers online counselling to children and young people. Although the project was still at its initial stages during the period covered by this report, marketing of this project was taking place. The decrease in the calls made by children on Supportline 179 could have been influenced by this project although there could be other reasons for this decline in calls.

The role of Appoġġ in Kellimni.com is to support the project in the recruitment process and training of volunteers, as well as to be a source of support in crisis situations that Kellimni.com volunteers encounter in their work. Appoġġ is also involved in the development of policies and procedures that the project has to set up.

In May 2011, Supportline 179 had the pleasure to welcome Mr Thomas Mueller – secretary for Child Helpline International – who was in Malta for the launch of Kellimni.com and who also found the time to visit the Appoġġ premises. He had very positive comments regarding the operations and the running of Supportline 179. The Agency is a paid member of Child Helpline International.
Since the integration of previous Sedqa service Helpline 151 – a helpline which dealt solely with drug and alcohol abuse issue – with Supportline 179, Appoġġ became a member of The European Foundation for Drug Helplines (FESAT) which is a network currently joining together around 50 European drug helpline services. Between 2010 and 2011, Supportline 179 participated in a FESAT EU project whereby countries worked together to set up best practice guidelines for drug helplines. Members of staff and one volunteer had the opportunity to visit other drug helplines whilst Appoġġ welcomed two people from the Netherlands’ drugs helplines who could observe how we operate and share their own experience with Supportline 179 staff and volunteers. They also had the opportunity to visit drug related services in Malta which are offered by Aġenzija Sedqa.

The Agency was also allocated the EU helpline 116 123, an Emotional Support Helpline which operates in all EU countries. Statistics and experience show that Supportline 179 was already offering this kind of support, thus this EU helpline was integrated within the system of Supportline 179 in order to offer support for other EU citizens visiting our country.

Supportline 179 volunteers were also given the opportunity to attend various training programmes that were being held. These included training on boundaries, empathy and ADHD, as well as training on human trafficking in October 2011 which was delivered through video conferencing from the Polaris Agency based in Washington DC at the American Embassy in Malta. This social issue is a new phenomenon to the Maltese islands and Supportline 179 already faced calls related to this issue. Thus the Agency felt the need to train its staff and volunteers to be better equipped to deal with such situations.
Way Forward

The aim behind Supportline 179 is to continue being the national helpline in Malta that offers support and a listening ear to people in need. One of the top priorities will continue to be the sustainability of the service, the continuous marketing and recruitment of volunteers, as well as the increase in the number of genuine calls.

Volunteers' training will also remain a priority of the service. Since social issues are continuously developing and evolving, it is important that volunteers are continuously trained and are in line with the current practices and interventions required to support people in need.
Supervised Access Visits

Introduction

The service users of the Supervised Access Visits (SAVs) are considered to be the children, as well as the parents, both custodial and non-custodial.

Service Overview and Objectives

Supervised Access Visits involve supervised contact between children and non-custodial parents and other members of their family. This helps to provide a safe, beneficial and child-focused contact, where the child can maintain a relationship with his/her family members. Supervised Access Visits are offered to children who are under a Care Order, to children whose parents are undergoing separation (and when Court, during this process and after, orders supervised access visits), and also cases on a voluntary basis.

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.
Review and Analysis of Service

![Cases Over Time at SAV](image)

Figure 105: Cases over time, Supervised Access Visits, 2001-2011

The number of service openings and new cases has been steadily increasing since 2008 – one of the reasons could be the increase in Care Orders, thus resulting in an increase of cases referred to the services for supervised access with biological parents. In 2010, 96% of service openings consisted of new cases whilst in 2011 new cases amounted to 98% of service openings. The number of service closures fluctuated slightly but followed a general trend of decline observed since 2006. A total of 203 cases were worked with in 2010, out of which 25% were new, 1% was re-contacts and 74% were known clients. In 2011, the total number of cases worked with was 163 cases out of which 37% were new, 1% were re-contacts and 62% were known clients.

The SAVs service is run by a team of professionals whose cases consist of both Care Orders and Court Orders. The SAV sessions are conducted by supervisors who are continuously supervised by the professionals within the said team. Individual supervision is also provided to these supervisors and ad hoc sessions, spot checks and confrontations are conducted by the
professionals working within the Courts and SAV teams whenever this is required. This provides good monitoring, and support to supervisors, children and their contacts, as well as accountability.

The service faces continuous changes in supervisors. Due to the fact that supervisors are not employed but contractees, and most of the supervisors are students, changes in the pool of supervisors are frequent occurrences. Hence, this is a major challenge that the service faces since after gaining considerable experience, supervisors tend to move on.

During 2011 the number of supervisors dropped. Yet the introduction of two part-time Social Workers during the month of December has helped to relieve the workload. In addition, one needs to mention that during 2011 the team was led by two temporary Coordinators in order to replace the Leader who was out on maternity leave. This has led to an increase in the workload of these two Coordinators. Thus the introduction of two workers who were temporary placed with Courts / SAV helped relieve the backlog that was accumulating.

Throughout the last years we have seen an increase in cases of children placed in foster care with families residing in Gozo. This was mainly due to the fact that there was more intense campaigning for foster carers from Gozo, resulting in more foster carers from Gozo attending training and ultimately being approved to start offering placements to children. This has led to more logistic planning for access visits to take place, thus more pressure on the existent resources. Continuous monitoring and evaluation of the current procedures had to take place in order to address such issues.

The service also entails a lot of administrative work and liaising with a substantial amount of parties both from within the Foundation for Social Welfare Services and also from outside services and professionals. Since the
service believes that minors are entitled to spending time with both parents whenever possible, replacements for cancelled sessions are provided whenever this is possible.

**Way Forward**

The main aim of the service is to be in a position to be able to allocate referred cases as quickly as possible, as it is important for children to have good quality time with their biological parents / families whenever this is in their best interest. The service continuously strives to adhere to not put cases on a waiting list, emphasising on the principle that children should not be made to wait to meet with their parents in a safe environment.

The way the service operates is continuously evaluated in order to identify possible ways of improving the service delivery and also to accommodate more service users, thus being able to deal with the demand for the service.
Courts

Introduction

Since its inception in 2001, the Appoġġ Court Services, through a team of professionals appointed by the Agency, assisted the Family Court in the assessments, recommendations and monitoring mainly in cases of separation. In addition, the Agency supports the Family Court through the Supervised Access Visits Service which was established in 1995. The latter provides supervision by trained supervisors for child access visits by non-custodial parents and parents with visitation disputes.

Service Overview and Objectives

The Family Court was set up in the Maltese Legal System with the main aim of treating family matters in the most sensitive ways. The work of Appoġġ professionals is pivotal in providing a service that targets these vulnerable situations that children and families experience through separation proceedings.

Without a doubt, the innocent victims of separation are the minors involved. 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 often feel guilty that they brought upon their parents’ separation. The task of the Agency’s professionals is to present the minor’s interest at the Family Court, whilst providing the children with a safe environment where to disclose their emotions.
Review and Analysis of Service

During these last years the service established a better rapport with the Magistrate of the Criminal Family Court as well as with Judges from the Family Court. This way the Judges / Magistrate are more aware of the role of the Social Workers.

The scoping exercise carried out in 2010 and which was followed by training on *Children and the Courts* had a major impact on the relationship between the Agency’s Social Workers and other professionals such as private Social Workers, Magistrates and even Judges. These were all involved in the scoping exercise and discussions about various issues and the way forward for this area of work has led to a better rapport between the different professionals.

As mentioned above, between 2010 and 2011 the team benefited from intense training on various issues pertaining the role of professionals within the Family Court. The training was delivered by Mr Philip King and Ms Ann Lowe from Independent Social Work Associates, UK. Topics covered were writing skills within the Court context, interviewing children, assisting and preparing children for access visits, risk assessment and decision making in complex cases, and use of standardised tests and questionnaires.
Figure 106: Cases over time, Court Services, 2001-2011

The number of referrals to the Court Services declined from 49 in 2009 to 47 in 2010, which then increased to 52 in 2011. Since 2008, there has been some stability in the number of service openings whilst service closures continued a trend of decline. A total of 216 cases were worked with in 2011 out of which 24% were new / re-contact cases and 76% were known cases.

**Way Forward**

The service will continue working jointly with the Family Court Judges by conducting assessments, making recommendations and supports families undergoing separation proceedings. The service will remain the focal point within the Agency whereby all issues related to Court, including Court decrees and consultations, are channelled through the Appoġġ Court Services.

Meetings with the Judiciary as well as meetings with the Agency lawyers will remain top priority for the service, whilst ongoing evaluation and better service provision will continue to take place in the coming years.
Out-of-Home Care Programme

Introduction

The Out-of-Home Care Programme was launched in October 2011 in response to the awareness of the need to enhance services already being provided for children and young persons requiring out-of-home care. In preparation for the launch, and to make sure that the outlook of the programme was compatible with its remit, an initial and an official presentation was made to the then Ministry for Education, Employment and the Family.

The mission statement of the programme is:

“to ensure that the best interests of all children and young people who cannot live with their birth families are appropriately safeguarded through the provision of a continuum of out-of-home care options which prioritise a family-like environment.”
To implement its mission statement, the Out-of-Home Care Programme coordinates three types of service provision:

i. Specialised home-based care

ii. Freeing children for adoption

iii. Co-management of residential homes

*Figure 108: Services offered by the Out-of-Home Care Programme*
Service Overview and Objectives

The aims of the programme are:

i. to identify those children and young persons who cannot live with their birth families and whose needs cannot be met within the current out-of-home care provision;

ii. to encourage, recruit, train, assess and support individuals and families who are willing to accommodate and care for these children and young persons within their homes;

iii. to match children and young persons who need specialised care with individuals or families who are able to provide it;

iv. to support those individuals and families who are providing this type of service in order to ensure that the needs of the children and young persons continue to be met;

v. to identify those children and young persons whose best interests would be more appropriately safeguarded had they to be adopted;

vi. to ensure that the possibility of adoption is available to these children and young persons;

Figure 109: Promotional flyer used by the Out-of-Home Care Programme
vii. to implement all procedures necessary to attain adoption for these children and young persons, together with all persons involved in their lives;

viii. to continue to support adoptive parents who care for children and young persons who are eligible for specialised care;

ix. to collaborate with organisations involved in the current provision of residential out-of-home care to make this provision better able to deal with children and young persons with particular needs;

x. to implement a policy whereby children and young persons being cared for within residential facilities receive more individualised services;

xi. to encourage and support providers of residential out-of-home care services to move their services into the community, thus working to minimise the stigma associated with being cared for within residential facilities;

xii. to regularly evaluate all the services being provided by the Out-of-Home Care Programme to ensure that they continue to meet their objectives and to safeguard the best interests of those children needing the Programme’s services.

Figure 110: Promotional flyer used by the Out-of-Home Care Programme
Review and Analysis of Service

The service started with the recruitment of the Service Manager in July 2011. Three Social Workers started working with the service full-time in September. Various unsuccessful attempts were made to recruit a legal officer, until the recruitment process was successful and a legal officer was employed in December 2011 to start work in January 2012. One of the first tasks within the programme was the establishment of a budget which was done in August, with the budget being revised in December. It was also important to provide information about the programme to the other services within the Agency and to discuss developments with those services which were directly involved in working with children and young persons. The former was done through a presentation during the Service Area Leaders’ meeting on the 13th September, while information was passed on to the teams involved individually between August and October. As preparation for service delivery, two members of staff attended a two-day training session on Being Mindfully Trauma Informed in Wales in September. Other local training was attended by all members of the team.

Various meetings were held to provide information about the services to the stakeholders in the out-of-home care provision and to other entities for awareness and marketing purposes and also to encourage collaboration. The meeting with the Central Authority also served to discuss the accreditation process required by Fostering and Adoption Boards. One member of the team was a member of the Working Group on Standards for Adoption.
In preparation for the delivery of the Specialised Home-Based Care Service specifically, it was decided that training to care providers would be delivered in two modules:

i. Module A: An introduction to caring for other people’s children; and

ii. Module B: Caring for children and young persons with particular needs.

The Module A training pack was compiled and material prepared for the Module B training pack. The Programme also compiled the Care Providers’ Assessment Form, a handout called *Introduction to the Service* and a draft Manual of Procedures. Work was done on a number of other policies and procedures.

A number of discussion meetings were also held both intra-organisational and with potential participants in the co-management project.

Regarding referrals to the services during the period under review (October – December 2011):

i. 74 children and young persons were referred for specialised home-based care;

ii. 38 couples or individuals were referred as prospective specialised home-based care providers; and

iii. five children were referred to be freed for adoption.

2011 was a period in which the work within the programme was mainly preparatory. It was a challenge to start creating a niche within the context of out-of-home services, respecting the work being done by other stakeholders and advocating for the required changes in the system. At the same time,
setting the context for collaboration was essential to facilitate the development of the services within the programme.

**Way Forward**

Collaboration, change and challenge are the three key words associated with the way forward. It is only through collaboration that the programme can make a difference; change is the outcome of making a difference, which is what the programme aims to do; and challenge is inherent in the delivery of this programme as it aims to provide services for those children and young persons whose needs are not being currently met.
“Aġenzija Sapport is committed to enhance the quality of life of persons with disability through innovative personalised support, expertise, and advocacy.”
The 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 10 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:

i. equality, choices and opportunities;
ii. inclusion of persons with disability in all aspects of society;
iii. a holistic, person-centred approach rooted in the principles of shared power and self-determination; and
iv. 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 an 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

Aġenzija Sapport is committed to address the needs of persons with disability through its main services:

i. Social Work Services
ii. Day Services
iii. Community Services
iv. Residential Services
v. 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 elder 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 adequate housing and support alternatives, 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.
Human Resources within Aġenzija Sapport

At the end of December 2011, Aġenzija Sapport had a staff complement of 338 members. Table 25 indicates the different categories:

<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>10</td>
<td>-</td>
<td>-</td>
<td>10</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>11</td>
<td>1</td>
<td>1</td>
<td>13</td>
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<tr>
<td>Professional Support Workers</td>
<td>12</td>
<td>-</td>
<td>-</td>
<td>12</td>
</tr>
<tr>
<td>Support Workers</td>
<td>192</td>
<td>6</td>
<td>44</td>
<td>242</td>
</tr>
<tr>
<td>Maintenance / Drivers / General Hands / others</td>
<td>18</td>
<td>1</td>
<td>2</td>
<td>21</td>
</tr>
<tr>
<td>Nurses</td>
<td>1</td>
<td>1</td>
<td>-</td>
<td>2</td>
</tr>
<tr>
<td>Staff on maternity / parental leave</td>
<td>8</td>
<td>1</td>
<td>-</td>
<td>9</td>
</tr>
<tr>
<td>Total</td>
<td>281</td>
<td>10</td>
<td>47</td>
<td>338</td>
</tr>
</tbody>
</table>

*Table 25: Staff complement as at end 2011*
Training within Aġenzija Sapport

In order to guarantee the highest level of service to its clients, Aġenzija Sapport gives importance to staff training on both formal and informal hands-on level. Staff members benefit from training that is provided by the Agency or Foundation for Social Welfare Services directly, as well as through their participation in training organised by entities locally and internationally.

Staff training provided by the Agency and/or FSWS 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 crisis 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; and
- comprehend FSWS and Sapport policies and procedures such that all employees abide by such directions and reach Agency expectations.

As mentioned above, employees 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.
Staff training throughout 2010-2011 included:

- Post Traumatic Stress Disorder Training
- FSWS Strategy Day
- Staff Development Days
- Fire Fighting Course
- Smart Use of Energy
- Non-Violent Crisis Prevention and Intervention Training & Refreshers
- Manual Lift Handling Course
- Legal Rights in Mental Health Course
- Interviewing Training
- Group Facilitation Training
- Support Strategy Day
- Training for Generic Social Workers
- Media Training
- Tactile Mapping Training
- Keyword Signing Workshop
- Induction Training
- Train the Trainers – Providing an Independent Living Service to Persons with Disability
- Training on Court System
- Working with Fear
- PSD Training Seminar: Should I say that? Sexual Health Related Issues
- Training for Equality Committee
- Seminars for Employers and Employer’s Unions
- Food Handling Courses
- Autism Open Window Seminar – The Autism team
- First Aid Courses
- Training on Epilepsy
- Commonwealth Training in Child Protection
Training in Medication
Training in Supervision
Crises Resolution Conference
Commonwealth Training on Children and the Courts
Training in Interviewing Children with Disability
Course in Risk Evaluation at the Place of Work
Action Learning Workshops: Professional Assertiveness for Middle Managers
LGBT Training
Post Traumatic Stress Disorder Conference
Performance Appraisal Training
team Building Sessions for Residences and Day Centres
Course in Health and Safety
Sexual Health Training
*Inrawmu ’l Uliedna Ahjar* - Sedqa National Conference
Seminar on Domestic Violence Victims – Any Business Return for Employees?
Foundation for Information Technology Accessibility (FITA) Information Session: Information & Communication Technology Accessibility
Training in Avoiding Stress and Burnout
Introduction to Autism Spectrum Disorder

Sapport, with the assistance of the Human Resource and Training Offices within the FSWS, works to identify any international programme opportunities for training abroad that staff may benefit from through direct experience of similar and diverse services. During the period under review, seven employees have received such exposure through European Union Programmes such as Leonardo.
Service Allocation Committee

Introduction

Back in 2003, the Agency had set up a semi-independent body, namely the Service Allocation Committee (SAC), 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.

Service Overview and Objectives

SAC is responsible to examine all requests for services, specifically the Agency’s Community and Residential Services. The members of the Committee scrutinise each and every application which is presented to them by the person requesting service or his/her carer/s, together with the Agency 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 SAC is composed of:

- one professional in a related field;
- two representatives of persons with disability from the community;
- one parent representing those persons with disability from the community who cannot speak for themselves (nominated by KNPD); and
- one representative from Sapport, who is a Services Manager or his/her delegate (nominated by Sapport).
One member of staff from the Social Work Services, who would have carried out the initial assessment, will represent the individual with disability when s/he appears in front of the SAC. The Social Worker carries no vote.

**Review and Analysis of Service**

Throughout the period 2010-2011, SAC convened 16 times. In the said meetings, the Committee examined 95 situations as seen in Table 26. As mentioned above, persons are presented in front of SAC for Residential or Community Services. However, there are situations where a request is presented for both Services usually because the person would necessitate Community Services until Residential Services are made available.

<table>
<thead>
<tr>
<th></th>
<th>Residential Service</th>
<th>Community Service</th>
<th>Residential &amp; Community Services</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>New Presentations / Reviews</strong></td>
<td>36</td>
<td>55</td>
<td>4</td>
<td>95</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>36</td>
<td>55</td>
<td>4</td>
<td>95</td>
</tr>
</tbody>
</table>

*Table 26: Presentations to SAC, 2010-2011*
Table 27 below shows that 91 of these were all considered deserving and were therefore approved with service, while four situations were refused service.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Number of meetings held by SAC</strong></td>
<td>16</td>
</tr>
<tr>
<td><strong>Number of presentations to SAC</strong></td>
<td>95</td>
</tr>
<tr>
<td><strong>Number of presentations not approved with service</strong></td>
<td>4</td>
</tr>
<tr>
<td><strong>Number of presentations approved with service</strong></td>
<td>91</td>
</tr>
</tbody>
</table>

*Table 27: Allocation of services by SAC, 2010-2011*

**Way Forward**

In order to further meet the demands / needs of the clients and their families, the SAC will also be assessing and deciding which service users are eligible to benefit from the Independent Living Vote. This vote, aimed to be set up in 2012, will financially support persons with disability and their families with the intent of allowing them to live a fruitful life in the community and avoid institutionalisation. As of 2012 the responsibilities of the SAC will be reviewed in order to incorporate this new change.
Social Work Services

Introduction

The Social Work Services for persons with disability had been transferred from Aġenzija Appoġġ to Aġenzija Sapport back in January 2003. This Service has the principal role to act as the first point of reference for any person with disability, and/or his/her family / carer, in need of service. In fact, the Agency’s Social Work Services coordinate services through assessment, short-term and long-term interventions to meet the desired objectives of the service user and his/her family / carer. Following the initial contact, the Social Worker acts, among others, as the person with disability’s advocate in rights-based issues as well as their broker for both services provided by the Agency and by other entities.

Service Overview and Objectives

The efforts of the Social Work Services 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 and more complete through the participation and contribution of its members with disability, and the Social Work Services work at guaranteeing 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 person 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 support and assist persons in the process of referral for services;

- to work with the person’s significant others when such work would imply an improvement in the person with disability’s quality of life;

- through the input of the Residential Social Worker, to ensure that the needs and wishes of persons in receipt of Sapport’s Residential Services are being reached;

- through the input of the Community Services Social Worker, to ensure that the needs and wishes of the persons receiving Sapport’s Community Services are being reached;

- through the input of Day Services Social Worker, to ensure that the needs and wishes of the persons receiving Sapport’s Day Services are being reached; and

- through annual reviews of the individual service user and their situational needs.

It is also the responsibility of the Social Work Services 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 SAC when these are related to Community and/or Residential Services;

- the implementation of SAC’s decisions and recommendations; and
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.

Review and Analysis of Service

Since it was originally set up back in 1996, the Social Work Services established contact with 2,421 persons with disability and their families / carers. 200 of these were actively receiving assistance through the input of a Social Worker at the end of 2010, whereas by the end of 2011 the number of active situations increased to 269. The number of new referrals in 2010 was 93 whereas in 2011, it was 79. A total of 160 situations were reopened in 2010, and 148 in 2011. The number of closed situations was 305 in 2010, and 236 in 2011. The year 2011 closed with nine persons on the waiting list for service. Table 28 summarises the work of the Social Work Services throughout the years 2010-2011.

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of new referrals during 2010</td>
<td>93</td>
<td>79</td>
</tr>
<tr>
<td>Number of reopened situations during 2010</td>
<td>160</td>
<td>148</td>
</tr>
<tr>
<td>Number of persons actively receiving service at the end of 2010</td>
<td>200</td>
<td>269</td>
</tr>
<tr>
<td>Number of closed situations during 2010</td>
<td>305</td>
<td>236</td>
</tr>
<tr>
<td>Number of persons on the waiting list at the end of 2011</td>
<td>-</td>
<td>9</td>
</tr>
</tbody>
</table>

Table 28: Provision of Social Work Services, 2010-2011
Way Forward

The Social Work Services plan to develop service provision through the consolidation of the Generic, Residential, Community and Day Services social work, as well as the involvement of persons with disability in the evaluation of the Social Work Services being offered.
Community Services

Introduction

Support runs different types of 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, rather than having to consider institutionalised or residential, more restrictive settings.

Service Overview and Objectives

At the end of 2011, the Agency was providing this service to 108 persons with disability through a total of 573 hours of service a week. Such service is provided through the input of Social Workers or Professional Support Workers. 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, undressing, and feeding, as well as those whose quality of life is significantly improved when they are provided with such support. Such service is provided in the community, and could also include assistance for medical appointments. 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 in the community;
- ensuring that assistance is targeted to enable service users to live as independently as possible; and
- building support based on the person’s abilities, needs and wishes, which assistance guarantees their right to an ordinary life.

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 the person 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, 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 skill-acquisition process.
Hence, in more specific terms, Intervention aims at:

- ensuring more active participation of persons with disability in the community;
- facilitating the acquirement of necessary social and community skills to allow for more functional involvement in society; and
- enhancing learning of basic daily living skills to develop independence as much as possible.

3. Combined Personal Assistance & Intervention

This refers to the service provided to persons whose hours of Community Services comprise both 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 clients that it would prove more beneficial for them.

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 programmes 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 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 the 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.
Review and Analysis of Service

Table 29 shows that at the end of 2011, Sapport was providing services of Personal Assistance to 43 persons, services of Intervention to 62 persons, and a service combination of Personal Assistance and Intervention to another three persons.

It is important to note that out of the 341 hours of Personal Assistance provided per week, 65 hours of service are provided by Agency employees but are financed by other entities. A private company finances 40 hours to one client, whereas Home Help Services finance 10 and 15 hours of service to two clients respectively.

<table>
<thead>
<tr>
<th></th>
<th>Number of Clients</th>
<th>Hours per Week</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal Assistance</td>
<td>43</td>
<td>341</td>
</tr>
<tr>
<td>Intervention</td>
<td>62</td>
<td>210.5</td>
</tr>
<tr>
<td>Personal Assistance &amp; Intervention (combined)</td>
<td>3</td>
<td>21.5</td>
</tr>
<tr>
<td>Total</td>
<td>108</td>
<td>573</td>
</tr>
</tbody>
</table>

*Table 29: Provision of Community Services as at end 2011*
Way Forward

Within the coming years, the Community Services will endeavour to:

- ensure that the service agreements are signed by every Community Services client and/or their carers to establish expectations of both clients and the Agency in relation to the service being provided;
- 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;
- strengthen the service back-up system whereby clients who are only assisted by one Social Worker / Professional 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 to come together for a common scope, such as practicing a shared hobby, can do so with the necessary support;
- address the needs of clients on waiting-list for Community Services, should the resources permit so; and
- together with the clients and their families / carers, develop the Individual Support Plan (ISP) stipulating goals to be reached based on the individual’s wishes, hopes and dreams.
Residential Services

Introduction

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 regard 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 family of origin, 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 fit enough to continue providing such support. In other situations, the main caregivers did not have the opportunity to keep on offering such support to their relative with disability 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.
Service Overview and Objectives

The Residential Services of Aġenzija Sapport 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.

The main objective of the Residential Services is to support clients with services to address their right to independent and community living. 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.

Review and Analysis of Service

Sapport provides Residential Services to a number of persons with disability through six residences based in the community, namely:

i.  *Fgura Apartment (Housing Authority)*

The Fgura Residence opened in November 2002 whereby it received three persons who previously lived with their families. The same residents are still receiving service within this apartment. As at the end of December 2011, the support level of all three clients was considered to be *intensive*.

ii.  *Kirkop Apartment (Housing Authority)*

The Residence in Kirkop opened in February 2003 to house four persons with disability. The residents living in it have changed throughout the years; two had, in fact, passed away. At the end of December 2011, four persons were residing at the apartment. One of the clients came to reside at Kirkop from
Mount Carmel Hospital, two clients previously lived with their families, while another one moved from Villa Chelsea. The support they require is as follow: two necessitate an *intermediate* level of support while the other two need *basic* support.

iii. ‘Villino Maria’ in Mtarfa
July 2003 marked the opening of this residence. Seven persons were in receipt of service within this house at the end of December 2011, while another client is benefiting from a particular arrangement whereby he is receiving Community Services at Mount Carmel Hospital from the same staff of the residence. From the total of seven clients, five previously lived in Mount Carmel Hospital while another two resided with their families in the community. The residents in Villino Maria generally require a high level of support with two on an *intensive* level and five on *intermediate plus* level.

*Figure 113: Villino Maria, Mtarfa*
iv. ‘Vajrita Residence’ in Marsascala

This building comprises two separate residences, with 12 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 throughout the years is that of 15; following a restructuring exercise, it can now take up to 14 residents in all. At the end of December 2011, there were 14 persons living in this residence. Of the 14 clients, seven were previously institutionalised in Mount Carmel Hospital, one formerly resided in a home for the elderly, while six lived with their families before moving to Vajrita. With regard to support levels as at end December 2011, two persons required intensive support, four intermediate plus, seven necessitated an intermediate level, while another one 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. The residence can take up to 12 persons; at the end of December 2011, 10 clients were receiving service in this residence. In order to fill this vacancy, two persons will be identified when resources permit. When evaluating where the 10 resided before moving to Vajrita (2nd floor), it emerges that four lived at Mount Carmel Hospital, one had been institutionalised at Saint Vincent de Paule Residence, two came from Villa Chelsea, one had been on long respite at Dar il-Kaptan, while another two 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 2011, assessment indicated that one required intensive support, four intermediate, another four necessitated basic plus support, while one needed just basic levels of assistance.
v. ‘Dar Andrew’ in Cospicua (Housing Authority)

The most recent of the residences of Sapport, this building can take up to seven residents. By the end of December 2011, there were seven persons residing in the residence. Four of these lived with their families in the community, two moved from another Sapport residence, while another one was transferred from Mount Carmel Hospital. As at end of 2011, the residents were receiving the following level of support; one needs intensive support, one intermediate plus, four intermediate, while another one necessitates basic assistance.

Sapport has also been given the responsibility by government to administer another 20 residential placements within Dar Arka, Dar Pirolta and Dar il-Wens. Details of the service offered by these three organisations follow:

vi. ‘Dar Arka’ in Ghajnsielem

Since 2003, Sapport administered the provision of Residential Services to six persons within this complex, two of whom would require intensive support, two intermediate support and another two basic assistance. At the end of 2011, there were six permanent residents. These clients came from different dwellings: in fact, two moved from Mount Carmel Hospital / Gozo General Hospital, and the other four 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. Therefore, at the end of December 2011, there were seven clients benefiting from a residential placement at *Dar Arka*.

vii. *‘Dar Pirotta’ in Birkirkara*

![Figure 115: Dar Pirotta, B’Kara](image)

The year 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 a procedure for utilisation of such programme. Seven beneficiaries were identified, which clients moved into *Dar Pirotta* throughout the same year. One of these residents passed away in 2008; hence, another person was identified to fill in this vacancy. Thus, at the end of December 2011, there were seven placements available due to changes in the levels of support. Clients came mainly from the community; however, there was one person who moved from *Dar il-Kaptan* and another one who previously resided at St Jeanne Antide.
Home for minors. Clients are funded depending on the level of support that they require. Two of the residents at *Dar Pirotta* need *intensive* levels of support, another three require *intermediate plus* and the other two *intermediate*.

viii. ‘*Dar il-Wens’ in Kalkara and Ghajn Dwieli*

The year 2011 witnessed the finalisation of yet another agreement, this time with *Dar il-Wens*. The conditions set in the contract are similar to those stipulated in the agreement with both *Dar Arka* and *Dar Pirotta*. The six clients to benefit from such agreement were already residing at *Dar il-Wens*. Clients are funded depending on the level of support that they require: one of the residents needs *intermediate* support whereas the other five require a *basic* level of support.

When looking at the day-time activities of residential clients living in Sapport residences, one notes that:

- one client has a full-time job with a local private company;
- 24 persons receive Day Services through Sapport in one of its Day Centres: six at Hal Far Centre, three at Mtarfa Centre, one at Mtarfa Resource Centre, six at Cottonera Resource Centre, six at Marsascala Centre, one in Swatar Resource Centre and one in Paola Centre; and
- one client attends a Special School.

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. To this effect, the year 2010 has seen the formalisation and implementation of the person-centred Individual Support Plans. 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 Social Workers to clients according to their individual programmes which are based on their unique needs and wishes.

However, given the resources, Sapport is only managing to address a small percentage when considering the demand there is for residential placements. In fact, as outlined in Table 30, at the end of 2011 Sapport had 51 persons with disability waiting to receive Residential Services whereas another 95 have made their request but were still waiting to be presented to SAC.

| Number of persons awaiting service (approved by SAC) | 51 |
| Number of persons awaiting presentation to SAC       | 95 |
| Total                                               | 146 |

*Table 30: Residential Services waiting list as at end 2011*
Way Forward

Plans related to Residential Services for the coming years include:

- 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 ISPs for clients which would ascertain that service provision is more in line with its mission, that of being needs-led;
- the strengthening of professional input, resources permitting, both quantitatively and qualitatively;
- the initiation of Residential / Therapeutic Services for children with disability at risk within the Birżebbugia Apartments allocated to Sapport by the Housing Authority; and
- the provision of Residential Services, resources permitting, to the persons on the waiting list.
Day Services

**Introduction**

The Day Services for persons with disability have been going through a period of change during the period under review. There has been a consolidation of the services, with more focus on the service users’ needs and wishes whilst taking into account the wishes and needs of significant others so as to deliver a holistic service to the service users. Furthermore, with the introduction of the Individual Support Plans, more emphasis was made on programmes based in the community and the enhancement of employability competences.

**Service Overview and Objectives**

The Day Services are based mainly in nine Day Centres, spread in different localities.

At the end of 2010, the population of service users within the Day Services was of 409 whereas at the end of 2011, the population went down to 404 persons with disability in receipt of Day Services (Table 31).
Table 31: Day Services client population as at end 2010 and 2011

<table>
<thead>
<tr>
<th>Centre</th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cottonera Resource Centre</td>
<td>17</td>
<td>19</td>
</tr>
<tr>
<td>Fleur de Lys Day Centre</td>
<td>69</td>
<td>68</td>
</tr>
<tr>
<td>Hal Far Day Centre</td>
<td>85</td>
<td>86</td>
</tr>
<tr>
<td>Marsascala Day Centre</td>
<td>63</td>
<td>59</td>
</tr>
<tr>
<td>Mtarfa Day Centre</td>
<td>90</td>
<td>88</td>
</tr>
<tr>
<td>Mtarfa Resource Centre</td>
<td>20</td>
<td>21</td>
</tr>
<tr>
<td>Paola Day Centre</td>
<td>25</td>
<td>24</td>
</tr>
<tr>
<td>Santa Venera Centre</td>
<td>21</td>
<td>20</td>
</tr>
<tr>
<td>Swatar Resource Centre</td>
<td>19</td>
<td>19</td>
</tr>
<tr>
<td>Total</td>
<td>409</td>
<td>404</td>
</tr>
</tbody>
</table>

The Day Centres function around a number of core programmes which aim to target the service users’ long-term and short-term goals. There have been several changes with regard to the structuring and composition of the programmes. This was done so as to determine the best techniques for delivering an individual programme according to each service user’s needs whilst remaining within the usual parameters.
The Day Services aim to support the service users by:

- maintaining and enhancing their independent living skills;
- assisting them with their involvement in the community whilst educating the community with regards to the benefits of diversity;
- enhancing their employability competences;
- providing support in regards to their social and psychological needs;
- promoting their participation in educational, social and recreational activities; and
- providing them and their significant others with respite.

Each Day Centre is supported through the services of a Social Worker who caters for the social work aspects of the service users attending that particular Day Centre. This service is also in aid to the relatives of the service users; apart from the yearly reviews, it helps in applying and gaining new services and assists in tackling difficult issues when necessary. The Social Workers also monitor the current services being offered and draw attention when and where needed.

The Professional Support Workers assigned in the Centres have also contributed towards the consolidation of the programmes that are being carried out. Their professional knowledge and assessments has been of great assistance to the Leaders and Coordinators of the Day Centres. The
multidisciplinary team has shown that the combination of the specialised knowledge of the Professional Support Workers coupled with the experience of the Leaders and Coordinators has created an excellent synergy which results in the overall benefit of the service users.

One of the challenges encountered by the Day Services is the ever-growing waiting list. At the end of 2010 the waiting list featured 157 persons with disability awaiting to benefit from the Day Services, and by the end of 2011 the number increased to 187 (Table 32).

<table>
<thead>
<tr>
<th>Persons with disability awaiting allocation to a Day Centre</th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>157</td>
<td>187</td>
</tr>
<tr>
<td>Total</td>
<td>157</td>
<td>187</td>
</tr>
</tbody>
</table>

Table 32: Day Services waiting list as at end 2010 and 2011
Review and Analysis of Service

Throughout the two years under review, the Day Services have succeeded in a number of projections:

- consolidation of the core programmes;
- initiation of auxiliary and innovative programmes;
- move towards heightening awareness and initiating community interest with regard to persons with disabilities;
- exhibition and promotion of products handcrafted by service users with the aim of raising community awareness about abilities rather than disabilities;
- consolidation of the practice of a yearly case review for all service users focusing on long-term and short-term needs; and
- consolidation of the updating of the Individual Support Plans on yearly basis.
Way Forward

In order for the Day Services to meet the challenges that are being previewed and seize opportunities to improve and modernise its service provision, the following goals are being set:

- secure enough resources to permit the increase of professional input within the Services;
- secure the necessary resources to open a new centre Day Centre to address the current waiting list;
- consolidate the Community Integration Programme;
- continue with the promotion of the abilities of persons with disability;
- provide training with regard to sexuality issues and adult protection issues in the awareness that both areas are relatively unexplored in the Maltese context and normally avoided when discussed in relation to persons with disability.

Figure 118: During the yearly Carnival event organised by Day Services
Resource Services

Introduction

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.

Service Overview and Objectives

The responsibilities of this team are several and include the following:

- leading and/or assisting in the Residential, Community and Day Services while ensuring that the mission and vision of the Agency are being achieved and that clients’ aspirations are reached;
- drawing up individualised programmes for clients; and
- providing 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.

An important aspect of Sapport’s vision is that of having a person-centred ISP 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 the way that they wish. Client ISPs 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 ISPs address the person holistically in their totality.

**Review and Analysis of Service**

The following are some examples of programmes that have been devised and implemented with Agency clients:

- **Independent Living Skills:** clients are taught skills to become more independent in their Activities of Daily Living such as 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 such as the *Me2* project. Moreover, if they become gainfully employed, they are given the necessary support to retain employment and ameliorate their skills as workers.

- **Health & Physical Activity:** clients are encouraged to be active and participate in physical exercise such as walking and swimming, or attend a gym, always in accordance with their skills and abilities.

- **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 & 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.

**Way Forward**

The Resource team recognises its responsibility to continue developing its services and visualises continued efforts on the following levels:

- consolidate its client programme review system whereby persons in receipt of service have their personalised ISP reviewed yearly, or whenever requested by the client;
- initiate group sessions for clients who wish to entertain a common interest. Such idea 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 where they learn what the typical work of a Support Worker is; and
- consolidate the training programme for Support Workers of different teams as well as plan for timely performance appraisals of all Support Workers.
“to provide service in health promotion, prevention, treatment and rehabilitation to persons with drug and/or alcohol problems and other similar conditions, and to their families, so as to help them live a stable life and to integrate better in the society”.
During this period under review in this report, Aġenzija Sedqa has continued to serve its mission as it has done during the previous 16 years of its existence.

Whilst we continued to pursue the implementation of the Agency’s mission statement, we seek to do this in such a way that it is relevant to today’s society. The needs of the potential beneficiaries of our services today and the way how to communicate our message to them, are fundamentally different from those of 16 years ago when the Agency was founded. This is valid for both Prevention and Care Services.

With regards to Sedqa’s Prevention Services, we have started to shift from the traditional medium of papers, handouts and books, to one relying more on technological media such as interactive CDs, internet-based programmes and social network sites such as Facebook. Aware of both the digital and the economic divide in our society, such transition however needs to be done gradually in such a way that those who might not yet have access to these media would still be able to access our services. Furthermore, we are giving particular attention to interventions to assure that the information provided is backed with the coaching of the corresponding skills. Scientific evidence strongly indicates that the effectiveness of a message lasts longer when it is
accompanied by the skills needed to translate such a message from a cognitive concept into concrete behaviour.

Furthermore, with regards to Sedqa’s Care Services, practitioners are reporting interesting shifts in both the type of substances being abused and the pattern of abuse. Evidence is consistently indicating that more people are experimenting new substances which were not known before, the so-called “legal highs” mainly for leisure purposes. The nature of these substances, together with higher cocaine consumption, is presenting us with new challenges which workers are actively seeking to address in the best way possible. Notwithstanding this, alcohol remains the primary substance of abuse and consequently the substance which is mostly creating problems within our society. In view of this, Agency professionals have attended and participated actively in various fora, both locally and on a European level, regarding alcohol policy issues. We sincerely hope that the long-awaited National Alcohol Policy would see the light in the very near future.

Although the number of persons who approach the Agency with problem gambling is not as substantial as that of persons abusing some kind of substance, we still believe that gambling poses a very serious threat to our social fibre, and therefore, we use any opportunity available to us to explain the dangers that are hidden behind such a seemingly attractive activity. With different technological gadgets mushrooming all over the place and all the time, we are also witnessing persons, especially young ones, who are
spending longer periods of time engaged in gaming to the expense of developing their socialising skills. This to the detriment of their mental health and to attending to their commitments. This emergent addictive behaviour is also within our scope of interventions together with other service providers in this field.

Finally, a word of thanks goes to all Sedqa workers who assiduously provide their input in the most professional way possible. I would also like to thank all the other staff at the Foundation for Social Welfare Services who through their collaboration and support were instrumental for Sedqa to remain faithful to its mission for the benefit of the whole Maltese society.
Prevention Services

Introduction

Throughout the years, Sedqa’s Primary Prevention Services’ mission has evolved in such a way as to cater for the ever emerging challenges that are presented by society. These services have widened preventive interventions from targeting drugs and alcohol, to addressing a wider umbrella of addictions, thus including gambling and technological addictions. In this regard, Prevention Services have been networking more closely with other stakeholders to improve the health and quality of life for individuals, families, and communities at large by moving society from a focus on sickness and disease to one based on wellness and prevention.

This is being carried out by a highly motivated and dedicated team of professionals in the three main pillars that Prevention is involved in – educational system, community and workplace. Interventions are based on research and experience. The aim is being achieved by educating and providing accurate information so as to avert the incidence of addictive behaviour. Prevention Services aim at promoting constructive lifestyles and norms that discourage unwanted behaviour by applying multiple strategies and is an ongoing process that relates to each emerging generation.
Service Overview and Objectives

Throughout the period under review, Prevention Services achieved the following targets in its area of operations, which shall be dealt with in more detail in the coming sections.

- During 2011, the Education Division assigned another peripatetic teacher to complement the existing two teachers. Thus, Prevention Services implemented T.F.A.L. 5 (Tfal Favur Ambjent Liberu) programme in six schools between September and December of 2011, when the teacher was assigned to the Prevention Service.
- T.F.A.L. 6 gained momentum in schools but during 2011 the need was felt to revamp both contents and presentations of the programme by presenting fresh ideas and concepts to Year 6 students.
- In Secondary schools, efforts were concentrated in giving sessions regarding topics that schools demand information about. Another highlight within this period was an art competition entitled Different Facets of Alcohol, with the successful participation of 180 students from Form 2. An exhibition of all the entries was set up in the foyer of the Directorate of Education premises in Floriana, which was followed by a prize-giving ceremony.

Figure 121: ‘Different Facets of Alcohol’, art competition held for Form 2 students, 2011
Within the community, efforts and resources have been highly invested so that in collaboration with professionals from Appoġġ, a tailor-made programme was created for adolescents at AĊĊESS Community Resource Centre in Cottonera. This proved to be successful since adolescents who attended the sessions benefited from the activities that professionals prepared and they also learnt various skills.

Through the continuous marketing carried out with regard to the Substance Abuse Free Employees (S.A.F.E.) programme, several companies made a commitment to organise exhibitions and/or sessions for employees and/or management. A new initiative taken during this period was the organisation of workshops following the sessions. These workshops gave participants the possibility of discussing further with Sedqa professionals areas of concern and exploring various alternatives as possible solutions.
**Review and Analysis of Service**

The following sections shall address in more detail all the accomplishments achieved by Sedqa Prevention Services according to the respective area of intervention.

1. **Primary School Level**

    i. **T.F.A.L.**

    This programme namely consists of workbooks used by Sedqa facilitators or PSD teachers with students in Year 3, Year 5 and Year 6 (7-10 year olds) to accompany the prevention programmes delivered to students in primary schools. The workbooks include activities which make the sessions interactive and child-friendly. These workbooks are also meant to be taken home where the parents / guardians could review what the students had learnt and thus could encourage and follow up the subjects and skills discussed with their children the subjects and skills discussed. Each workbook is designed to incorporate an attractive certificate that the students receive once the prevention programme with Sedqa is completed. In Year 3 the students are also given an accompanying notebook to write down their feelings during the session, together with a bookmark. A total of 7,177 workbooks were delivered to students in 2010 and 2011. Following experience and feedback received, TFAL 6 workbook was also completely revamped by the end of 2011 to include a more appealing design and...
content, including more games, stories and activities related to the themes covered.

ii. **B.A.B.E.S. Programme**
This six-session programme is intended for Year 3 pupils (7-8 year olds) and contains sessions on life skills originally conceived in the United States and adapted for the Maltese culture. The purpose of B.A.B.E.S. is to empower children with personal life skills including, but not exclusive, the following topics: decision-making skills, peer pressure, bullying, coping skills, proper use of medicinals, alcohol, and substance abuse. A parents’ meeting is organised in parallel with each programme where the facilitator explains the purpose and the topics of the programme. The medium of seven hand-held puppets is used to help students identify and understand more the subjects being presented.

During 2010, B.A.B.E.S programmes were delivered to 2,693 students in 54 schools. 53 corresponding parents meetings were organised with an attendance of about 965 parents. In 2011, the B.A.B.E.S programme was delivered to 4,199 students in 111 schools. 107 parents meetings were held, with an attendance of 1,305 parents whose children were following this programme during the current scholastic year.

iii. **T.F.A.L. 5 Programme (B.A.B.E.S. Follow-up)**
It is believed that follow-up work is essential, so as to increase the probability of getting the message across the targeted population. This is also vital in increasing the possibility of knowledge retention and skills transference. This aspect is highlighted in point 11 of the document – *Evidence-Based Principles for Substance Abuse Prevention* issued by the Office of National Drug Control Policy, which states:
In this regard, T.F.A.L. 5 is a continuation of B.A.B.E.S programme. The main objective of this programme is to reinforce basic education and information about alcohol, tobacco, legal and illegal drugs, gambling, misuse of Internet, and computer addiction. It is also intended to encourage children to be assertive and able to say NO when they encounter situations related to any of the abuses mentioned. It also aims to enhance certain skills which are necessary for children to protect themselves from any kind of addiction. A child-friendly workbook, notebook and bookmark are distributed to all the students who receive the programme.

During the two years under review, no peripatetic teacher was allocated to deliver the said programme as normally happens. Nevertheless, a contingency plan was identified in order to ensure that the programme is implemented. This plan consisted of meetings with heads of schools and teachers to engage them in implementing the programme through their lessons by using the available workbooks and material whilst consulting with Prevention Services. 12 schools benefited of this plan, with 44 class teachers disseminating 800 workbooks to their students.

iv. T.F.A.L. 6 ‘Qed Nikber’ Programme
This prevention educational programme is aimed at reaching Year 6 students by enhancing their decision-making skills, their assertiveness and empowering them with refusal skills when facing peer pressure. The Sedqa
Prevention team, through a contracted facilitator, visited 54 schools in scholastic year 2009-2010, reaching 2,933 students, and 63 schools in scholastic year 2010-2011, reaching 2,856 students. This programme was supported also by six talks to parents in 2010 with 245 parents attending, and 14 talks to parents in 2011 with 295 parents attending. These talks were for parents of the students receiving the programme. Other talks to parents related to this programme included drama workshops listed below.

v. SkolaSajf Programme

During the summer months, the Primary Prevention team was actively involved in SkolaSajf. Aġenzija Sedqa was invited by the Directorate for Educational Services to hold its preventive six-week programme during this summer activity. This programme was run by the B.A.B.E.S facilitators and the topics discussed were family, friends, legal and illegal drugs, gambling, misuse of Internet, computer addiction, and alternative leisure. The four facilitators assigned for this programme visited 16 state summer schools involving the participation of around 1,200 students. The feedback from both teachers and pupils was highly encouraging. The programme terminated with a collective activity called Festa Tfal in 2010, and in 2011 children participated in fun games. A T-shirt with a positive message was given to every child from the participating schools.

Figure 125: Children participating in Festa Tfal 2010
vi. *Interactive CDs*

This is another medium used by the Sedqa Prevention team which is aimed at reaching children. CDs T.F.A.L. 1, T.F.A.L. 2 and *L-Avventura ta’ Max u Amy* had been launched earlier. However during 2010 and 2011, the Prevention team sought more opportunities to include these CDs in activities and initiatives. Although they continued to be distributed to parents / guardians who were encouraged to use it with their child to enhance their personality skills and values, it was also introduced as part of the summer school lesson plans and during other group activities. In all, 346 CDs were distributed to the general public and in schools during the years under review. However, children and parents were directed to access these interactive tools from the Agency’s website, which encouraged wider access by the general public.

vii. *Drama Programme*

Drama is yet another effective Prevention tool that is used widely amongst both children and adults. This programme was delivered with the intervention of a small group of volunteers who through drama enable a discussion which is then processed by qualified staff within Sedqa Prevention team. The drama programme prompted in-depth learning discussions with parents who would identify themselves with the stories presented. The drama episodes offered to children in schools or in other NGO settings gave the opportunity to the children to practise skills and were given the opportunity to role-play parts of the drama themselves. The processing of the drama programme proved very effective with adults and children alike. A total of seven drama programmes...
were offered to 220 parents and 13 programmes to 541 children during the period under review. Topics included bullying and substance abuse.

2. Secondary School Level

   i. Talks for parents in secondary schools
   This is an ongoing project and talks are delivered throughout the year. These talks are designed to complement the programme of Sedqa sessions in Secondary Schools and focused mainly on technological addiction, substance misuse and good communication between parents and teens. A total of 53 talks for parents were delivered during the two years under review, reaching 2,815 parents.

   ii. Other interventions
   Interventions in secondary schools also included a number of training sessions and ad hoc talks as part of the programme for secondary schools or as part of the Community and Workplace initiatives. Such interventions included training sessions for Guidance teachers and Youth Workers at St Clare’s College, guest lectures with the 4th year Home Economics students at the University of Malta, and participation in the Marsaxlokk Youth Programme.

   iii. Testimonials
   A number of clients undergoing residential rehabilitation at Sedqa’s residential rehabilitation unit at Komunità Santa Marija volunteered to carry out testimonials in secondary schools. These clients shared their experiences with students and consequently, very interesting and intense discussions ensued. A total of 18 sessions were held, reaching 670 students, as depicted in Table 33.
<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of students</td>
<td>495</td>
<td>175</td>
</tr>
<tr>
<td>Number of schools</td>
<td>8</td>
<td>4</td>
</tr>
<tr>
<td>Number of sessions</td>
<td>9</td>
<td>9</td>
</tr>
</tbody>
</table>

Table 33: Testimonials held in 2010-2011

iv. Art competition
An art competition was held in November / December 2011 in collaboration with the Curriculum management and eLearning Department. The competition, which was open to all Form 2 students, was themed *Different Facets of Alcohol*. There were three categories namely: painting 2D, creations in 3D and computer generated pictures. A total of 180 students from 13 schools participated. The judging panel, consisting of Mr Jesmond Schembri, Sedqa Operations Director and Mr Joe Micallef, Head of the Art Department and the School of Arts, met on the 20th December. The winners were presented with a certificate and vouchers. An award ceremony and exhibition took place in January 2012.

v. Seminar for secondary schools
A seminar for secondary schools was held on the 27th May 2010 at the National Curriculum Centre in Ħamrun. The aim of this seminar was to meet with representatives from each school in order to discuss Sedqa sessions for the following scholastic year. The seminar also included...
interventions by Dr George Grech, Sedqa Clinical Director and Prof. Carmel Cefai, Associate Professor of Psychology and Head of Department of the Faculty for Social Wellbeing at the University of Malta.

vi. Sedqa Sessions in Secondary Schools

The sessions were delivered by two peripatetic teachers on secondment from the Directorate of Educational Services. Preparations for the sessions, such as revision of material and teacher training were held at the beginning of each scholastic year. The sessions are both knowledge and skills-based since teachers use several visual aids as well as activities during their sessions. The duration of each session is three hours long and the five topics offered during the two scholastic years under review were: technological addiction (including smoking and IT addiction), alcohol, drugs and medicinals, juvenile delinquency and a revision session. The schools were free to choose the topic most relevant to their need and the classes where to be delivered. Due to limited resources, the programme is offered to the schools on a first-come first-served basis.

Between January and December 2010, the programme was held in 55 schools, reaching 4,635 students. The most requested topic was IT Addiction (Figure 128).
During 2011, the programme was held in 63 schools, reaching 2,971 students. During this particular scholastic year the most requested topic was Drugs (Figure 129).

Thus, during the period under review, a total of 7,606 students were reached.
vii. **Peer leadership courses**

The peer leadership course is intended for students in secondary schools who are prefects or in influential roles, to equip them with skills for better decision-making and assertiveness to positively influence their peers. During the period under review, eight peer leadership courses were held, reaching a total of 154 students.

3. **Post-Secondary School Level**

   **i. MCAST sessions and ITS exhibition**

A milestone that Prevention Services achieved with regard to post-secondary schools was a session at MCAST reaching 1,800 students who were reading a Foundation course. This session focused on Substance Abuse and Misuse where Sedqa acted as a reference point at MCAST and managed to build a good rapport with staff and students. Students were referred to services about their concerning needs emerging from the sessions.

   **ii. Meetings with student organisations**

Collaboration and networking was established with Għaqda Studenti tal-Kriminologija, Malta University Sports Club, Kunsill Nazzjonali taż-Żgħażagħ and Kunsill Studenti Junior College. Sedqa participated twice during Freshers’ Week at the University of Malta and also participated during a couple of debates at the main campus. Furthermore, Sedqa gave input during a debate on drugs and substance abuse at Junior College. Such
positive networking helped the Agency to be in a better position to reach out to young people. Sedqa also participated in Freshers' Week at the Institute of Tourism Studies with an exhibition and distribution of preventive material.

4. 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. Collaboration with Appoġġ to create pre-adolescent group

During the period under review, this programme was created and strengthened. Referrals were received from Social Workers and there were also self-referrals from the community. A profiling exercise was carried out with each member and also his/her parent or legal guardian. This project was not just a one-off activity but an ongoing project that requires focus and continuous work. Evaluation exercises are carried out from one week to another by the two leaders of the group. The period under review included activities with persons with disability from the Cottonera Day Centre, alcohol and drugs awareness, self-awareness, personal skills, communication skills, teamwork, internet safety, and alternative leisure activities.
ii. Outreaches

Sedqa participated twice in the Voluntary and Information Giving Exhibition organised by the Iklin parish. Educational and prevention material was distributed and handed to people as soon as they were leaving the Church’s services. The officer responsible for Sedqa’s interventions in the community participated also in the Qawra AĊĊESS Spring Festival by providing information about services, handing out published material and also entertaining children. There was also participation in seminars specifically targeted for youth as part of Foundation for Educational Services. In addition, the Prevention team participated in the Education Expo outreach. Another outreach was organised in Gudja as part of the Y-Challenge weekend. Y-Challenge were a series of events organised by youth groups in Gudja. The events took place during November 2011. Sedqa’s participation was spread on a weekend and consisted of manning of a stand and liaising with the general public to attend to queries. The activities occurred in different spots around Gudja. Sedqa’s stand, including preventive material and banners bearing preventive messages, was stationed near the primary school.
iii. Local councils

Various efforts were made to work and liaise with local councils. Meetings were held with representatives from various councils to encourage them to engage in prevention initiatives. This was particularly successful with the Tarxien, Dingli, Cospicua and Vittoriosa councils. The Tarxien and Dingli local councils organised a series of talks to the general public with a special interest for youths. Cospicua local council organised a seminar in collaboration with Sedqa offering a public debate. Sedqa’s Prevention team has also collaborated with the Cospicua and Vittoriosa local councils regarding activities related to Pre-Adolescent Group.

iv. Talks with the elderly

One has to keep in mind that the elderly could also be a vulnerable group with respect to substance abuse and other addictive behaviours. In fact, alcohol use / abuse among aging adults has been consistently reported to be a major issue of concern (Bucholz, Sheline, & Helzer, 1995; Closser & Blow, 1993; Schonfeld & Dupree, 1994). One study concluded that among the elderly, alcohol-related hospitalisations are as common as hospitalisations related to heart attacks (Adams et al., 1993). A study of approximately 140 older adults in a psychiatric out-patient clinic found that 20% of patients have a substance abuse disorder (Holroyd & Duryee, 1997).

For those living alone, feelings of loneliness and low self-esteem are very common experiences. Such feelings can give rise to alcohol abuse. The National Evaluation Data Services report on Substance Abuse among aging adults: A Literature Review Sept 2002 clearly states that “the antecedents to substance abuse may also be different for older adults than for their younger counterparts. For example, in their comparison of 156 older and younger drinkers, Schonfeld, Dupree and Rohrer (1995) found that, unlike younger drinkers, older drinkers were more likely to drink in response to depression or loneliness due to such events as retirement, and the death of friends and
spouses”. Misuse of medicine is another occurrence amongst this segment of our population, together with lack of self-appreciation as another contributing factor. In fact, the National Institute on Drug Abuse (NIDA)’s report 2001 on the abuse of prescription drugs clearly highlights that older adults use prescription medications nearly three times as often as the general population. Gomberg (1992) notes that non-narcotic analgesics are the most commonly reported drug of purchase by older persons. Within this context, during 2010, members of the Sedqa Prevention team visited all the elderly day centres and also met other senior citizens who took part in events organised by parishes. These interventions involved informative sessions about healthy lifestyle, use of medicinals, alcohol misuse, and gambling. This programme reached around 650 elderly persons. The reason for targeting interventions with elderly persons attending day centres was that this setting offered the possibility of a captive audience in one physical place.

v. Facebook profile

In an attempt to reach out to young people, the Prevention team launched a Facebook profile. The aim of such profile was to pass on informative messages. By means of such medium, young people and other internet users receive information on different activities that the Prevention team embarks on from time to time. This Facebook profile provided a number of referrals to services and also to other entities within FSWS.

vi. Other initiatives in the community

A series of prevention sessions with the National Commission for Persons with Disability, Grufan Group (Siġġiewi) and Żejtun Corinthians Nursery Football Club were organised. Other initiatives included participation during the Youth Day organised by the Employment and Training Corporation, as
well as during an Open Day at AĊĊESS Cottonera, and during a seminar organised by Mellieħa Football Nursery.

5. Prevention Interventions at the Workplace

i. S.A.F.E. Programme

The S.A.F.E. programme is Sedqa’s main preventive programme at the workplace. Since 1996, this programme has achieved considerable credibility with the employers who ask to have such programme at their workplace. S.A.F.E. is a comprehensive programme regarding substance abuse and other addictions and it is divided into four phases. Ideally, each workplace goes through all four phases.

Phase One consists of the setting up of an exhibition stand that displays a preventive message in a prominent place within the company’s premises. The aim of this phase is to raise awareness regarding the issue of possible substance abuse amongst employees.

Phase Two consists of training for management, frontline supervisors, and foremen, the aim being to equip them with the necessary skills to identify and deal constructively with employees who have a substance abuse problem at their workplace. Topics discussed in a four-session programme are: 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 are mainly alcohol and its effects, and drugs and their effects. However, lately, other topics have been added to the S.A.F.E. programme due to demand for follow-up sessions from companies and entities that had already implemented Phases Two and Three of the programme. The topics are: gambling, binge drinking, health and safety aspects of drug abuse, stress
management workshop, bullying at the workplace and technological addictions. A resource pack is distributed during the S.A.F.E. programme sessions and a certificate of participation is given to all participants.

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 and how best this is dealt with. 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.

**ii. Statistical data**

As part of Phase One, 49 exhibitions were held in different workplaces during 2010 and 2011. In Phase Two, 27 courses were held with the participation of 414 Managers and frontline supervisors. In Phase Three, 50 courses were held, reaching 1,266 employees. Regarding the final phase, it must be noted that although a draft copy of the Substance Abuse Policy is always presented and preliminary 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 appears to be the issue of drug testing.

During 2010 and 2011, the S.A.F.E. programme sessions were also implemented and adapted for the following special audiences: Institute for Tourism Studies students (14 sessions reaching 112 students); Transport Malta’s Special Licence course participants (43 sessions reaching 649 participants), and asylum seekers (four sessions reaching 64 asylum seekers) in collaboration with Médecines Sans Frontières.
iii. 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 was held. This event serves to provide positive reinforcement to those companies which choose to have the S.A.F.E. programme and also as a marketing exercise. 22 companies were awarded certificates of appreciation in 2010 during an Awards Ceremony held every two years.

Figure 133: Company representative receiving a certificate of appreciation for participating in the S.A.F.E. programme
6. Interventions with Parents

   i. Reaching out to parents
   The need to find alternative ways to reach the parents was felt since the attendance of parents to talks started to decrease, presumably primarily due to society’s ever-growing busy lifestyle. Therefore Prevention Services started exploring alternative ways to make it easier for parents to attend such meetings. One particular initiative coordinated in collaboration with AĊĊESS services, was that of meeting the parents as they waited for their children during catechism sessions. Media interventions both on TV and radio delivered by the Prevention team also were exploited to reach the parents in their home with messages of parental skills and values, healthy lifestyles, dealing with stress, and technological addiction amongst others. Meanwhile, talks to parents continued to be delivered in schools as well as in NGO settings and other organisations that requested our presence. Topics included internet safety, effective communication, addictions, the importance of quality time and effective parenting. Sedqa Prevention Services also collaborated with schools to be present with exhibitions and a variety of printed material during school open days and other school activities on request.

   ii. Parental skills courses – ‘Inrabbu ’l Uliedna Ahjar’
   This programme consisted of a six week-long programme of 90-minute sessions. Sessions included discussions on case examples presented on DVD, which adopted a modern approach to the issues involved and reflected the current situation of families. Two corresponding booklets were produced, including a manual and an exercise book. During the period under review, a total of 37 Parental Skills courses were offered with the participation of over 671 parents.
iii. Blue Ribbon Campaign

Prevention Services in collaboration with other professionals within FSWS participated in the Blue Ribbon Campaign against child abuse. This Blue Ribbon Campaign took place during April and May 2010. The first phase required the compilation of material on positive parenting and the development of an interesting and resourceful presentation. The second phase included meetings with staff and volunteers and participation in media initiatives. The third phase was targeted to give intensive training on parenting skills to staff and volunteers. Around 200 employees and carers participated in this training.

iv. E-handbook for parents

Another initiative to reach parents involved the publication of an E-handbook with articles for parents to read about a variety of topics including child development, addictions, the challenges of single parenting, aggressive behaviour in adolescence and seeking professional assistance amongst others. The content of this CD was also uploaded on the Agency’s website for parents to retrieve the articles online. Copies of this E-handbook were also handed to the general public during talks and parent-related interventions.

Figure 134: E-handbook for parents
viii. **Printed material and innovative resources**

Informative material has been distributed to many entities including schools, health centres, pharmacies, hospitals, the Courts of Malta, parishes, NGOs, local councils, workplaces, etc. These were updated on a regular basis with over 140,000 leaflets, booklets, stickers, posters and other material distributed over this period under review. Below is a list of distributed material per section:

<table>
<thead>
<tr>
<th></th>
<th>Primary School</th>
<th>Secondary School</th>
<th>Work</th>
<th>Community</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010</td>
<td>23,343</td>
<td>15,777</td>
<td>22,651</td>
<td>16,585</td>
<td>78,356</td>
</tr>
<tr>
<td>2011</td>
<td>22,274</td>
<td>12,475</td>
<td>8,843</td>
<td>15,225</td>
<td>58,817</td>
</tr>
</tbody>
</table>

*Table 34: Material distributed, 2010-2011*

Leaflets published in 2010-2011 included:

- Interactive CD aimed at youths with detailed information about alcohol and drugs. This CD was provided in Maltese and English.
- A5 posters for foreign students with a positive message against binge drinking.
- Two leaflets, one about the effects of alcohol during pregnancy and another about alcohol in general.
- Leaflet about cannabis in Maltese.
- Leaflet about Mephedrone in both Maltese and English languages.
- Pull up Banners with prevention messages about Computer Addiction, Stress, Healthy Lifestyle, Gambling, Supportline 179 and Positive Parenting.
- Stickers and postcards and inserts with prevention messages about drink driving, gambling, alcohol, drugs, stress, bullying and healthy lifestyles.
- Booklet with information and recipes about non-alcoholic cocktails.
- Booklet about signs and symptoms of substance abuse in Somali and Tigrinya language for asylum seekers in collaboration with Médecines Sans Frontières.
- Leaflet about inhalants in both Maltese and English.

7. Media Interventions

i. TV and radio

The Prevention team participated in regular media interventions in collaboration with the FSWS Marketing team. These TV and radio programmes served to promote Sedqa services and initiatives organised by the Prevention team, to promote a healthy lifestyle and to create awareness in relation to substance misuse issues as well as to encourage positive parenting and skills. Topics included substance misuse, peer pressure, effective communication between parents and children, stress management during exams, internet safety, child abuse, alcohol and illegal drugs, amongst others.
ii. Articles
Another initiative worth mentioning was the collaboration with the FSWS Marketing team for the publication of articles in local newspapers, magazines and newsletters published by companies, on issues related to alcohol and drug abuse, drink driving, and other addictions such as gambling.

8. Other initiatives

i. Prevention national conference

In 2011, Prevention services embarked on organizing a national conference for parents called Inrawmu ‘l Uliedna Ahjar. Parents and professionals working with parents were invited for this conference which was enhanced by a keynote speech about resilience in children and various workshops that addressed different parent-related issues. 250 participants attended for this well-received half-day conference. These included professionals, volunteers working with families, parents from PTAs / Schools and other parents’ associations.
ii. Residential homes and other institutions

In collaboration with Sedqa Prevention Services, the Canadian group Life Force International visited Malta early in 2010 and visited various residential homes for children and for adults, domestic violence shelters, prison groups and youth groups. 11 interventions were conducted with drama workshops and sharing of live testimonies giving hope to the participants and portraying values and healthy relationships and lifestyles away from addictive behaviour. During this period, Life Force also held 71 performances in 30 Secondary schools, reaching a total of 5,579 students. Life Force is an international organisation consisting of a group of young people who visit schools and other youth entities in various parts of the world with effective drama skits with powerful influential messages to promote values and healthy lifestyle amongst other young people.

*Figure 137: Life Force group member performing for students*
Way Forward

- During the coming months, the Prevention Services will continue to consolidate the current programmes and be on the lookout for emerging challenges so that strategies would be crafted in line with innovative and more inclusive concepts. In this regard, this also merits the draft of a holistic Prevention Strategy Framework which shall include a wider preventive remit.

- Experience has shown that Prevention programmes are more effective if they are skills-based. Research shows that this is one of the approaches that proved to be mostly effective. In fact, the Office of National Drug Control Policy has outlined this aspect in point six: “Strengthen life skills and drug refusal techniques, teach life skills and drug refusal skills, using interactive techniques that focus on critical thinking, communication, and social competency” as one of the evidence-based principles for substance abuse prevention.

- Although this element is already ingrained in most of our programmes, in the coming period efforts shall be concentrated more so as to ensure that not only the audience’s knowledge base is enhanced but that this is also accompanied by skills transference.

- Prevention Services shall be entrusted with a wider remit to include the various responsibilities of FSWS and will, inter alia, focus on aspects of child protection, domestic violence and disability.

- Prevention Services shall also strengthen its efforts and networking so that interventions in post-secondary schools are possible. In this regard, it is envisaged that the Agency shall embark on recruiting a pool of professional contractees so as to assist in preventive interventions.

- Prevention Services shall also be committed to continue its work in liaison with the Youth and Community Studies at University Of Malta, Aġenzija Żgħażagh, Kummissjoni Djoċesana Żgħażagh, Kunsill...
Nazzjonali taż-Żgħażagħ, parishes, local councils and NGOs, to organise activities and interventions within the community. Another project that is taking place within the community involves the monitoring and distribution of Prevention leaflets in Health Centres, which shall continue to take place as the need arises. Furthermore, it is top priority on the agenda to continue strengthening the skills-based sessions organised with Appoġġ with regards to the Cottonera’s AĊĊESS pre-adolescent group Colours of Life.
Care Services

Introduction

In 1994 Sedqa was set up to ensure the provision of professional help to alcohol and drug misusers – and later, also to problem gamblers – and to their most significant relatives. People who have problems find it easier to seek help if they know that they can receive treatment in the community without having to drastically change their way of life. Most of the clients who seek the Agency’s help are offered services at community level, thus ensuring that no substantial modification to lifestyle is required. The Alcohol and Drugs Community team and the Substance Misuse Out-Patients Unit are two examples of these Community Services.

However, some problems are so complex and deeply-ingrained that community services are not sufficient to enable real change to take place. For these reasons, residential rehabilitation services have been set up. Making use of these services must necessarily entertain an interruption of life as one normally lives it. Dar iż-Żemiq, Sedqa’s residential rehabilitation facility is a case in point; its aims are to provide a long-term structured programme which addresses deficiencies in values, attitudes and living-skills of severely-depentant alcoholics.

Dar l-Impenn is another residential facility which offers medically-supervised short-term stays designed mainly to help clients detoxify themselves from alcohol and drugs, and undergo other medical tests designed to shed light on their current health status. In some cases, it helps drug addicts who are leading chaotic lifestyles to achieve a measure of stability and perhaps reflect on their lifestyle.
The above-mentioned services comprise some 25 full-time workers and about 10 part-timers and contractees. Clients accessing these services amount to more than 1,500 each year; as regards the Alcohol and Gambling Community Service and Dar iż-Żerniq quite frequently, over and above this number, their family members are also given a service.

Frequently interventions by these services necessitate formal collaboration with other entities involved in welfare work, especially social work teams from Aġenzija Appoġġ, the Probation Services, Mount Carmel Hospital (notably the Dual Diagnosis Unit) and Psychiatric Out-Patients. Besides these government entities, Sedqa teams work closely with NGO’s like Alcoholics Anonymous, Al Anon, Gamblers Anonymous, Gam Anon and a number of charities.

The landscape of operation is shifting at a pretty fast pace. New drug-using patterns, novel opportunities to gamble, changing contexts – both social and legal – where drinking takes place, all make it incumbent on the Agency to revise and adapt its operations continuously. This calls for constant awareness of what is happening on the ground. The monitoring of all aspects of the Agency’s operations, of clients’ experiences, workers’ observations, even of public perceptions, has to be a continuous feature of its work. Internal discussion about these developments must be ceaseless; the timely generation of proposals to adapt to new realities must characterise the Agency’s communications with those in authority.

Training has always been considered by Sedqa as crucial, and the Agency has always accorded it maximum importance. However, it may be no longer enough to design training which imparts skills and knowledge that enable employees to simply respond to realities which will very soon change. Training has to focus mostly on attitudes and on skills which are eclectic and adaptable to various situations.
The biggest challenge will remain the need to respond to clients’ needs in the context of a situation where resources are far from limitless. In recent years budget cuts have often influenced plans negatively, and economic realities being what they are, it is, at the very least, likely that the situation will persist for years to come. Yet respond we must, if we are to fulfill our mission of helping those who suffer from the effects of substance abuse and gambling. The rational use of resources in such a way as to maximise return for effort must be foremost while planning operations. In this context, activities like group work, which does permit the possibility of giving a psychotherapeutic or counselling service to several clients at once, may have to be favoured over more traditional approaches.
Alcohol & Gambling Community Services

Service Overview and Objectives

The Alcohol and Gambling Community team’s (AGCT) objectives seeks to extend professional help to those who request assistance with drinking and gambling problems, and their significant others. Individuals who are referred for help are offered a wide-ranging assessment and are then given the services they require either by the AGCT itself (e.g. counselling, social work) or by other specialised professionals. The AGCT also gives support – in the form of aftercare – to those who have completed a residential rehabilitation programme.

The team is made up of five full-time and one part-time Social Worker, many of whom have been working in the field of treatment for alcohol and gambling problems for many years. Given the often complex nature of alcohol and gambling problems, the team puts great store by close collaboration with other professionals from Sedqa (Psychologists, Doctors, Psychiatrists) and from other agencies (Probation Officers, Social Workers, GPs, etc). Liaison with other professionals is therefore an essential and indispensable feature of the work of this team.

While the focus of this team’s efforts is the treatment of alcohol and gambling problems, the expertise accumulated over the years is quite often put to use also in the Agency’s prevention efforts. Members of the Alcohol and Gambling Community team are often asked to participate in TV and radio events, and to contribute with articles about alcohol and gambling for online publications or in the print media in collaboration with the FSWS Marketing team. There are occasions when members of this community team were also asked to deliver talks to various groups about the nature of alcohol and gambling problems,
how these may be avoided and the kind of help that is available for those who experience these difficulties.

1. Alcohol

Review and Analysis of Service

<table>
<thead>
<tr>
<th>Year</th>
<th>Referrals</th>
<th>Individual Sessions</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010</td>
<td>224</td>
<td>2,604</td>
</tr>
<tr>
<td>2011</td>
<td>161</td>
<td>2,472</td>
</tr>
</tbody>
</table>

Table 35: Number of individuals referred to the AGCT due to drinking problems and number of individual sessions offered to clients (including significant others), 2010-2011

Over the two years under review, there was fairly significant reduction in referrals from one year to the other. This might be deemed to reflect negatively on aspects of the functioning of the Alcohol Community team during such period, which – although it experienced some staff turnover and continued to operate on full staff complement for most of the period under review, is a model of stability, cohesion and commitment to its client group. However, it should be pointed out that referrals are not really a function of team stability (or the lack of it), but depend mostly on external factors.

In fact, the team’s stability and consistency probably account for the fact that waiting lists were kept to a minimum; most of the time the period from date of referral to allocation to key workers for assessment did not exceed 15 working days. This measure contributed towards a better retention rate, with fewer clients than otherwise might have been the case dropping out while waiting to
be allocated a Social Worker. In turn, the higher retention rate is almost certainly partially responsible for the satisfactorily high number of appointments offered to these clients.

**Way Forward**

The experience accumulated over the years since the Service’s inception has shown time and time again that the rapidity of response to requests for help is a crucial factor in the success of the intervention made. Therefore, the team will continue to strive to keep waiting time to the barest minimum possible – provided that the human resources necessary for services to be given to clients continue to be provided. Although present levels of resource provision do not permit truly rapid intervention, it is still possible to respond to requests in a reasonable amount of time, if current human resources levels are maintained.

Secondly, the patterns of close collaboration with other Sedqa services and with services external to the Agency, which ensure a more holistic, and thus more effective, service to our clients, need to be maintained and strengthened. While collaborative networking is already a prominent feature of this team’s philosophy and functioning, it is believed that there are situations where one must strive to exploit and build up one’s strengths even further.

Thirdly, all aspects of the experience garnered over the years in numerous day-to-day encounters with alcoholics and their relatives, should be reflected in the policies designed to regulate the use of alcohol, nip the development of drinking problems in the bud, and alleviate the lot of those who are suffering due to their own, or someone else’s, drinking. The communication channels between practitioners and policy makers must remain continuously open and active.
2. Gambling

Review and Analysis of Service

<table>
<thead>
<tr>
<th>Year</th>
<th>Referrals</th>
<th>Individual Sessions</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010</td>
<td>24</td>
<td>185</td>
</tr>
<tr>
<td>2011</td>
<td>24</td>
<td>152</td>
</tr>
</tbody>
</table>

Table 36: Number of individuals referred to the AGCT due to gambling problems and number of individual sessions offered to clients (including significant others), 2010-2011

The number of gambling clients referred over the last two years dropped slightly, compared to previous years. Almost certainly, this decline in referrals is partly attributable to the decision to close down the gambling machine shops which had sprouted all over the island in a short time. These regulations meant that gambling opportunities decreased – and requests for help went down as a result, for the simple reason that there were fewer clients who became hooked to gambling. The number of sessions offered to such clients remained relatively high. This could be the result of mostly qualitative factors: well-supervised, experienced and highly-motivated workers, who over the last two years, received considerable training about gambling, thus enhancing the effectiveness of service delivery.
Way Forward

The way forward will certainly be influenced by developments in the legislative and administrative fields. In the last weeks of 2011, regulations permitting the opening of gambling machine parlours were published and it was expected that several will open during the next few months. Although it is still early days yet, many operators in the field feel that the availability of greater gambling opportunities will result in a bigger number of people becoming addicted, and an increase in the rates of requests for help, although the exact extent to which this will have an impact on service provision cannot, at this stage, be anticipated.

As in the case of alcohol, on the level of policy development, through its contact with such client population, the team needs to provide further evidence of the effectiveness, or lack of, this legislation and related regulations and policies. In this regard, the Alcohol and Gambling Community team is eagerly waiting for a National Gambling Policy to be drawn up and regulate the practice of gambling.
Alcohol Residential Programme

Service Overview and Objectives

Dar iż-Żerniq offers a residential and a day programme, both of the duration of one year. The aim of these programmes is to provide a personalised service to individuals and significant others who are experiencing serious alcohol related difficulties. Offering counselling, therapy, and social support offered a context of a therapeutic community living, Dar iż-Żerniq aims to empower the service users to lead a healthy, totally abstinent, independent lifestyle. Counselling and, where indicated, more in-depth psychotherapy, are offered within group and individual contexts to clients and to significant others. Clients and their relatives grappling with family problems are referred to Family Therapists.

The team is composed of a full-time Unit Leader (a Social Worker by profession), and four Care Workers, working on a 12-hour shift roster, all of whom have been working in the field of addiction for at least a decade. They are aided by a highly-experienced Senior Clinical Psychologist and an Occupational Therapist who render services to clients twice a week. In addition, the staff can count on the input of Social Workers from the Alcohol and Gambling Community team, a Doctor and, at times, a Psychiatrist.

Clients are encouraged to go back to work or to seek employment after an average of six weeks in the programme. Clients' families are as far as possible involved in the treatment, both because they can be taught how to relate appropriately to the relative with the drinking problem, and because they often require help in their own right. In order to reach out to significant others who are unable to physically visit Dar iż-Żerniq, home visits are sometimes carried out.
Review and Analysis of Service

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Admissions (Day / Residential)</td>
<td>19</td>
<td>19</td>
</tr>
<tr>
<td>Sessions with clients and significant others</td>
<td>733</td>
<td>786</td>
</tr>
<tr>
<td>Group attendances</td>
<td>208 groups (3,237 attendances)</td>
<td>194 groups (2,722 attendances)</td>
</tr>
</tbody>
</table>

Table 37: Number of admissions to the Day and Residential programmes at Dar iż-Żerniq, number of sessions with clients and number of group attendances, 2010-2011

Note: Group attendances include also Community clients and significant others.

As can be seen, there was no change in total admissions between the two years under review. If one had to see the numbers of admission according to the different programmes, however, there is a 50% decrease in admissions in the day programme in 2011 when compared to 2010. The more complex and chaotic cases would benefit from a contained framework of treatment which only the residential setting offers. As has been remarked before, the number of clients who actually complete a day programme is low – and key workers would be more likely point drinkers towards a residential programme.

There was a very slight decrease in sessions held in 2011 which might be the impact of students on placement, who also make demands on the team Leaders’ time; their number was greater than in 2010. There has also been a slight decrease in group attendances: the average attendance per group decreased from 15.56 members in 2010 to 14.03 members in 2011.

Group meetings are held four times a week, with two of them being held at Dar iż-Żerniq. These groups are a fundamental part of both the day and the
residential programmes and also provide a forum where community services clients and residents grow together, support each other and learn from each other’s experiences. Significant others are also welcome for three of these meetings. One group meeting is kept strictly for clients with alcohol-related difficulties.

Way Forward

The future of this service can only be properly envisioned in the context of general service provision within Sedqa, which has to take into account developments within the drug field as well. There are strong indications that important changes may be taking place within the local drug scene which may require novel responses from Sedqa's Treatment Services, which – given the restricted resources the Agency can draw upon – in turn could influence also residential service provision in the alcohol field.

However, no Alcohol Treatment Service could be complete without an autonomous Residential Alcohol Treatment Programme. So while changes could take place, it is not likely that they will affect the fundamentally self-contained nature of these services.
Sedqa’s Substance Misuse Out-Patients Unit (SMOPU, or as it is commonly referred to, Detox Out-Patients) provides services to around 750 clients every day which translate into more than 1,150 users every year. Some 97% of these clients depend on heroin and are treated through substitute medication for opiates. A relatively small number of clients are treated for the symptoms of cocaine use. The more chaotic of these clients who abuse cocaine are encouraged to seek a period of rest in a calm environment where they can also be medically observed.

Since the services dispensed from Detox Out-Patients are predominantly of a medical nature, the greater part of the staff complement is made up of Doctors and Nurses, all of whom have acquired a great deal of expertise in the field. Clients are routinely screened for a number of infectious conditions (such as HIV, Hepatitis B and Hepatitis C) and are also offered immunisation for Hepatitis B. This Unit also provides a psychiatric service to a considerable number of drug and alcohol users and pathological gamblers who suffer from dual diagnosis (i.e. addiction and psychiatric conditions).
Detox Out-Patients Unit also provides a motivational counselling service and social work support to a considerable number of drug users who attend this service but who are deemed to require encouragement to seek further, in-depth help (such as in-patient detoxification or a residential programme) or who would be going through psycho-social difficulties in addition to the medical problems.

Sedqa Doctors’ contribution, while consisting mostly of sessions with clients at their base at St Luke’s Hospital, also comprises service to Sedqa clients in other units and other, non-medical forms of service. One Doctor runs a weekly clinic for alcohol and gambling clients at the Community offices in Santa Venera and another weekly clinic at Komunità Santa Marija. A Client Management System was also devised, which is of great help to Detox Out-Patients employees in the organisation and delivery of treatment.

**Review and Analysis of Service**

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total number of clients seen</strong></td>
<td>1,162</td>
<td>1,160</td>
</tr>
<tr>
<td><strong>New clients seen</strong></td>
<td>77</td>
<td>69</td>
</tr>
<tr>
<td><strong>Virology tests (Hep B, Hep C, HIV)</strong></td>
<td>598</td>
<td>517</td>
</tr>
</tbody>
</table>

*Table 38: Data pertaining to Detox Out-Patients Services, 2010-2011*

During the period under review, the total number of clients seen at this Unit remained constant, but was higher than the number in the previous two years (Table 38), when 1,085 (2008) and 1,112 (2009) clients accessed the services. The increase in clients brought with it a rise in other indicators. The
number of staff remained more or less the same, which, once again, meant a further intensification of the workload. In fact, one of the main problems this Unit is facing is the dearth of Nurses available.

The two Psychiatrists who give a service to Sedqa’s dually-diagnosed clients hold clinics weekly and monthly respectively. 420 sessions were held in 2011, a slight increase on the number seen the year before. However, waiting time has increased, as it was presumed it inevitably would, given that the steady stream of referrals from Sedqa’s Doctors flows with no interruption. In fact, with some studies claiming that as many as 70% of addicts have concomitant psychiatric problems, the future for this service looks to be fraught with waiting time problems, unless Sedqa secures further psychiatric resources.

In the last (Triennial) report, it had been remarked that the drop-in facility had had to be done away with due to the very high volume of work generated by the increased number of clients. Initially, this did cause some difficulties especially because drug clients had got used to the fact that they could just drop in on particular days of the week and be seen by a Doctor. During the biennium under review, a system was devised which combined appointments with drop-ins, thus addressing the need for order and rationality on the one hand, and the duty to respond in timely manner to particular exigencies on the other.

During 2010 and 2011, there were no innovations with regard to the use of medications designed to ease the complications of addiction, except that Suboxone was used more frequently than it had been previously. The most important medication-related development during these two years was the growth of the take-home Methadone service. A number of clients who are deemed by their Doctor to possess sufficient levels of motivation are allowed to take Methadone at home under the supervision of a relative, provided they supply clean urines on a regular basis. The eligibility to this service is
suspended in the event of a relapse. Besides the obvious advantage of savings on precious resources like time, this scheme also enables stable clients to stay away for days from the Detox Out-Patients environs, which for recovering addicts, are not very salubrious. Around 60 clients were making use of this service at the end of 2011.

A multi-disciplinary team that offered very comprehensive help to all drug using mothers referred to it during pregnancy and after birth held regular meetings during the two years under review. This team was chaired by a Sedqa Medical Doctor and comprised 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 number of service users discussed in this multi-disciplinary team was 17 for 2010 and 21 for 2011. Moreover, at the end of 2011, a protocol which will regulate the multi-disciplinary team’s operations was drafted.

During these two years, a relatively small number of incidents involving aggression occurred. Following one such incident in July 2011, which led to the arraignment in court of a client who had used violence on member of staff, the presence of a uniformed security officer was reintroduced. This measure, which obviously came at considerable financial cost, produced a very positive effect with staff reporting a calmer atmosphere and fewer incidents, despite the large concentration of service users who number around 750 per day.
Way Forward

During the last six months of 2011, there were some signs that the volume of client usage might be experiencing a decline. This situation has to be monitored very closely because the implications of such a trend – were it to be unequivocally established – would be many and varied. Coupled with other developments within Sedqa, this trend may be signalling a shift in the pattern of drug use on the national level which would necessarily bring about corresponding modifications within the thrust of Sedqa's operations, including SMOPU.

Whatever the developments regarding the patterns of drug usage on the national level, it is envisaged that Detox Out-Patients will retain a position of central importance within the Agency's structured efforts to help drug-users over the next few years. One cannot rule out a further widening of the harm reduction approach introduced within the Agency and in this particular Unit more than a decade ago, especially if drug use patterns change in the direction of the greater uptake of less addictive substances.

The social work presence within SMOPU needs to be intensified as the work being carried out becomes reflective of a wider vision of what constitute clients' needs – and the way the Agency must act to respond to them. Most importantly, mechanisms ensuring strong networking between the various professionals – Doctors, Psychiatrists, Nurses, Social Workers and Motivators – working at Sedqa's Out-Patients' services need to be constantly enhanced.
Substance Misuse In-Patients Unit

Service Overview and Objectives

The Substance Abuse In-Patients Unit – or Dar l-Impenn as is it more commonly known – provides detoxification to drug dependant and alcohol dependant clients. Given the medical nature of services provided, only individuals who have been referred by Sedqa’s Medical Doctors may be admitted to this facility. Prior to admission, these individuals will also have normally been assessed also by Sedqa or Caritas Community Workers, and – except for urgently admitted cases – a care plan outlining a long-term treatment and support arrangements will be drawn up before admission. Dar l-Impenn is staffed by four Nurses and four Care Workers.

Detoxification is but one stage of the treatment process, which may or may not comprise residential rehabilitation as the next phase. While it is the major procedure carried out at Dar l-Impenn, the Unit also offers stabilisation programmes for some clients on Suboxone, a drug introduced worldwide in treatment contexts over the past decade or so which can help detoxify heroin-using clients, without some of the side-effects other detoxifying agents cause. Dar l-Impenn also offers a crisis intervention service of a short-term nature and stabilisation programmes for some clients who would be deemed by their Doctors to be leading chaotic lives and would thus benefit from a period of sheltered calm.

In June 2010, Dar l-Impenn moved to newer, bigger and more comfortable premises, which are more conducive to effective treatment than the ones previously occupied. Of the many positive effects this move brought about, one of the more welcome ones was the drastic cutting down on waiting time for admission to the facility.
## Review and Analysis of Service

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clients admitted</td>
<td>327</td>
<td>287</td>
</tr>
<tr>
<td>Care days</td>
<td>1,997</td>
<td>2,881</td>
</tr>
<tr>
<td>Completed detoxification programme</td>
<td>256</td>
<td>225</td>
</tr>
<tr>
<td>Went on to rehabilitation</td>
<td>48</td>
<td>47</td>
</tr>
</tbody>
</table>

*Table 39: Number of clients admitted to Dar l-Impenn, total number of care days provided, number of clients who completed the detoxification programme and clients who went to rehabilitation 2010-2011*

As can be seen in Table 39, the number of clients making use of detoxification (and other) services suffered a considerable drop in 2011 when compared to 2010. It is believed that this decline may reflect an important change in the characteristics of the drug addict population; although by far the majority of clients making use Sedqa’s Detox Out-Patients services (the major source of referrals to Detox in-Patients) are heroin-addicts, their overall proportion to other drug users has fallen. In other words, there are fewer heroin abusers accessing our services than there used to be a few years ago, as the use of cocaine spreads and, to a degree, supersedes that of heroin. Therefore, fewer people than before need to enter residential detoxification programmes. Moreover, the profile of the addicted heroin user is to some extent changing; with professional help a number of such clients manage to hold down jobs and live a pretty ‘normal’ life thus obviating the need to enter *Dar l-Impenn.*
Dar l-Impenn has also suffered from the dearth of Nurses available locally. It was only due to the readiness of the Nurses at Dar l-Impenn to operate with extreme flexibility that adequate nursing care was ensured throughout the two-year period under review.

**Way Forward**

Dar l-Impenn caters for a large number of clients and provides an indispensable service. No agency which purports to offer holistic assistance to substance abusers can envisage a future set-up without residential detoxification services. However, there is, literally, a price to pay as: medical and nursing services come at a high cost. The Agency will be looking at ways of reducing the rather astronomic costs of these services without compromising quality.

The recurrent problems with finding adequate nursing cover have to be tackled, if services given are to remain effective and if operations are to run smoothly. Indeed there is now a full complement of Nurses at Dar l-Impenn, but the problems being faced with finding substitutes when Nurses are on leave and sick leave are costing the Agency a great deal of time and energy month in month out. Given that it is almost impossible to find more local Nurses to fill in, the Agency may have to look to recruiting foreign Nurses who already work in Malta to form part of its substitute pool.
Drugs and Court Community Services

Service Overview and Objectives

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 work interventions;
- referral to other services (within / outside of the Agency) as necessary; and
- 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 10 workers, one of whom works 30 hours per week. During the last years under review, there was considerable staff turnover. 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. In order to enhance collaboration with other professionals, one worker is attending SMOPU once weekly. The role of this worker is to facilitate contact with pregnant female drugs users who attend Sedqa services.
Review and Analysis of Service

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Referrals</td>
<td>279</td>
<td>261</td>
</tr>
<tr>
<td>Individual scheduled sessions</td>
<td>6,098</td>
<td>5,492</td>
</tr>
<tr>
<td>Total clients seen</td>
<td>609</td>
<td>481</td>
</tr>
</tbody>
</table>

Table 40: Number of scheduled sessions and clients seen by DCT, 2010-2011

In 2010, one can note a sharp increase in the number of individuals as well as number of sessions held at DCT, most probably due to changes in the reporting systems as well as the introduction of the database.

In 2011, one DCT worker left in March only to be replaced five months later. That means that for nearly six months, DCT was working with one worker less. It is also important to note that throughout 2011, two Social Workers used to attend two mornings at SMOPU to support clients requesting social work interventions. These two factors definitely contributed to a reduction in the number of sessions held and the number of clients seen at DCT in 2011. However the extent of this difference cannot be noted since the changes observed between 2010 and 2011 were most probably due to the cleaning of data which occurred as a result of the database introduction.

With regards to heroin use, there is a pattern of less clients reporting heroin as their primary drug of choice. Only 61.7% of clients reported heroin as their primary problem in 2011. One can then note an increase in the number of clients reporting cannabis as their drug of choice with 10.4% in 2011 (a slight
increase of 3.4% from 2010). Cocaine and other drug use in 2010 and 2011 have remained relatively stable.

<table>
<thead>
<tr>
<th>Primary Drug Reported Per Year</th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heroin</td>
<td>413</td>
<td>297</td>
</tr>
<tr>
<td>Cocaine</td>
<td>80</td>
<td>68</td>
</tr>
<tr>
<td>Cannabis</td>
<td>43</td>
<td>50</td>
</tr>
<tr>
<td>Other drugs</td>
<td>14</td>
<td>12</td>
</tr>
</tbody>
</table>

*Table 41: Primary drug reported per year*

**Way Forward**

In order to enhance collaboration with other professionals and agencies, apart from attendance at SMOPU, there is the plan to increase involvement of DCT in psychiatric settings especially in the field of dual-diagnosis. However, one also needs to acknowledge that a number of service users attend only Sedqa services for psycho-social support. Thus, whilst introducing new roles, one still needs to focus on trying to keep the waiting list at a manageable level so that clients receive an efficient and effective service which meets their needs. To maintain and improve the current efficacy levels of this service, the unit composition must remain stable, and current members should be encouraged to remain in the team and keep on developing their skills to remain effective in their work. Apposite training in the latest developments in substance abuse and counselling techniques is also essential to enhance this team’s effectiveness even further.
Psychological Service

Service Overview and Objectives

The objectives of this team are:

- to provide individual and group psychotherapy to substance-abusing clients and/or to other family members and significant others;
- to conduct psychological assessments; and
- to provide individual and team supervision to Sedqa staff.

This team has been functioning since 2001. It currently has five members of staff, three of whom work on a part-time basis. The two Gestalt Psychotherapists who joined the team during these two years under review offer individual and group psychotherapy to clients in Sedqa’s residential drug rehabilitation programme, as well as psychotherapy to community services clients. In 2010 the team went through substantial changes following the resignation of two full-time Clinical Psychologists who were offering support to clients in residential rehabilitation at Komunità Santa Marija. Another part-timer who was primarily devoted to offering support to staff within the Agency also terminated her employment. This change in the team’s capacity brought about a shift in the service delivery which mainly consisted of a full-time Psychologist and two part-time Psychologists, one of whom worked with community services clients and another who primarily provided psychotherapeutic assistance to children at risk.
Table 42: Data pertaining to Sedqa Psychological Service, 2010-2011

These substantial changes created a degree of instability within the team and although attempts were made for replacements, recruitment of adequate professionals proved to be very challenging. Although a Psychotherapist was employed towards the end of 2010, the number of team members was patently insufficient in proportion to the cases referred.

As the team honed its skills and blended in the experience acquired, its work rate slowly started to increase although it was still less than that of the previous year since the number of psychotherapeutic hours was significantly less with only two full-time and two part-time Psychotherapists. In an attempt to deal with the waiting lists and shortage of staff, the team dedicated a lot of energy at supporting other staff members who in turn could offer a more holistic and therapeutic service to their clients.

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 and Psychotherapists 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 staff turnover over the past years. Psychologists themselves are also in receipt of supervision, which is provided by other experienced Psychologists, external to the Agency.

Way Forward

One of the major goals for the coming year is the merging of the Apoġġ and Sedqa psychotherapeutic services. This will entail both a structural and philosophical shift whereby the amalgamation of expertise and knowledge will be exchanged. The lengthy waiting lists (inevitable given that the demand is always much higher than the supply), is the biggest challenge the Agency will have to face with regard to this service once the amalgamation occurs. Every effort will be made for more effective case management strategies and periodic reviews and processing of the waiting list to ensure that clients are seen in a timely manner. Furthermore, new policies and procedures will be set up in view of the merged psychotherapeutic service. The highly valuable work with supervision of Sedqa staff will continue to 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

Service Overview and Objectives

At the end of 2011, the Sedqa Family Therapy team was composed of one part-timer who possessed a post-graduate diploma in Family Therapy and Systemic Practice. Another worker who is also a Clinical Psychologist and possesses a post-graduate diploma in Family Therapy was on parental leave. Throughout these two years under review, the team went through significant changes and staff turnover. In 2010, a full-time Family Therapy Worker went out on maternity leave and a part-time Family Therapy Worker joined the team. However, in 2011 there was a significant staff turnover whereby all team members, except for one part-timer, resigned from the team. All workers, both individually and as a team, were supervised by two highly qualified therapists and for most of 2011, a Clinical Focal Person was also recruited to support the team by offering on-site supervision.

This team aims at:

- providing systemic family therapy services to clients and to their significant others; and
- providing couple therapy where appropriate and necessary.
Review and Analysis of Service

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Referrals</td>
<td>22</td>
<td>21</td>
</tr>
<tr>
<td>Families seen (monthly average)</td>
<td>37</td>
<td>26</td>
</tr>
<tr>
<td>Sessions with clients</td>
<td>583</td>
<td>350</td>
</tr>
</tbody>
</table>

Table 43: Data pertaining to Sedqa Family Therapy Service, 2010-2011

As can be seen from the statistics presented in Table 43 above, the amount of referrals remained stable throughout 2010 and 2011. The staff changes which occurred in 2011 can clearly be depicted by the statistics above whereby there was a 30% decrease in the number of families seen in 2011 when compared to 2010. The reasons for this decline are obviously intimately related to the fact that this team was short of its full complement and towards the end of 2011 relied solely on 15 hours of service delivery per week. As expected, this staff turnover led to a rather long waiting list for this service, made up of families of individuals undergoing residential rehabilitation and community clients. As in all other contexts, a long period of waiting sometimes results in a loss of interest and motivation by clients.

Family interventions of this type require an intensive input of resources; suffice it to say that almost all sessions require a team of professionals whereby one is responsible for conducting the session and the others to observe and to provide live feedback. The lack of human resources within the team inevitably led to substantial changes in service delivery and efficacy.
Way Forward

Undoubtedly, a major goal for the Family Therapy Service will be the amalgamation with the Appoġġ Family Therapy Service, planned for 2012. Just as with the Psychological Service, this will entail both a structural and philosophical change that reinforces the need for cross training and merging of practices. 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 primarily related to the difficulty of finding suitably qualified therapists capable of working with this particular client group. 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 and also provided with the necessary tools to carry out their work. Moreover, it must also provide specialised training on systemic practice within the addiction field.
Komunità Santa Marija

Service Overview and Objectives

The main objective of this service is to help adult clients to change their attitudes and behaviour, which have been influenced negatively by their drug use, with the aim of leading a healthy lifestyle. The programme offers a rigorous structure aiming at enriching responsibility, honesty, commitment and consistency. This is achieved through constructive feedback by peers and staff and the encouragement for self-reflection and the principle of self-help. Individual psychotherapy and counselling, family therapy sessions, support sessions with the residents and family or significant others and group work are also indispensable components of this programme. Educational and spiritual sessions are also offered at Komunità Santa Marija (KSM) so as to provide holistic treatment and rehabilitation.

During the 2010-2011 period, several changes occurred at KSM. In September 2010, the role of residential Social Worker was introduced. This role was introduced because it was felt that new demands posed by the changing needs of the residents could only be met by someone with social work expertise. The residential Social Worker also supported the Unit Leader. In 2011, this role evolved from that of Social Worker to that of a Coordinator.
Till September 2011 the programme offered at Komunità Santa Marija was divided into five phases (Merħba, Formazzjoni, Responsabilità, Sfida and Aftercare), all phases building on each other with the ultimate aim of the residents’ successful re-integration into society. The first four phases (i.e. the residential phases) took together around one year to complete. Following a lengthy and thorough consultation with all stakeholders, in June 2011 it was decided that a change in the format of the programme was required to ensure that it continues to meet the needs of current service-users. The new phases were Phase 1 (Orientation), Phase 2 (Personal Development), Phase 3 (Integration – residential), and Phase 4 (Integration – non-residential). The initial two phases together normally last six months. Phase 3 is no longer than two months while Phase 4 is around seven months long. Transition from one phase to another is not automatic and depends on the progress and motivation of the individual resident.

The programme activities also count on the very important input of a number of workers from within the Agency (including Drugs Community team workers, Family Therapists and Psychologists) and volunteers who contribute their skills for the benefit of the clients. Among the latter there are Teachers, who amongst others provide basic literacy lessons to the residents and priests who celebrate mass and who offer spiritual counsel to the residents.

**Review and Analysis of Service**

The number of persons who availed themselves of the services offered by KSM decreased in 2010 and 2011 from the 2007-2009 period. This could be the result of many factors, including the availability of significantly shorter residential programmes offered by other agencies which were more attractive to prospective service-users than the one offered at KSM.
Another factor that affected the number of residents at KSM was that due to changes in the prison referral system there was a decrease in the number of Corradino Correctional Facility (CCF) prisoners who were referred to follow the KSM programme.

In 2010, 46 persons started the residential programme at KSM. In 2011, the number of residents was 51 persons. In 2010 and 2011, four persons and 13 persons respectively finished the residential phases of the programme. Thus, although significant changes occurred in the 2010-2011 period, 17 persons still managed to successfully complete their residential programme.

Way Forward

Although the 2010-2011 period was very tumultuous for KSM, a more positive trend seems to be emerging where there is a slow but gradual increase in the number of persons using the service and also in the number of persons who manage to complete the residential programme successfully.

KSM is trying to adapt the service it provides to the ever-changing social situations. The changes in the trends of drug use imply that well established therapeutic community practices which were successful till a few years ago, might need to be revised and re-adapted to be still valid in today’s day and age. This will be an ongoing (and to an extent never-ending) challenge especially due to the emergence of new illicit drugs and changing demographics amongst drug users.

KSM intends to evaluate its service provision on a regular basis and to adopt evidence based interventions at all the different phases of the programme. The current approach of making use of a therapeutic community framework whilst also supporting the service users with individualised services (such as
psychological support, family therapy, etc.) will be further integrated (to ensure a seamless service provision) and consolidated.

KSM also needs to review the quality of its interventions with regards to increasing the employability of service users. Although the absolute majority of service users who complete KSM find employment, nonetheless due to a number of extraneous factors, this might not always be the case in the near future. Thus, KSM will adapt to this situation and collaborate with other entities, such as ETC, the Department of Education and other training organisations, to help service users increase their employability.

Of note is the fact that the programme will be especially evaluated with regards to how it can further meet the needs of female service users. Statistics show that female drug users are on the increase, and that they are making use of several services (especially community based services and SMOPU). On the other hand, there seems to be little or no increase in the number of females who wish to make use of residential services. This may imply that the current residential service provision fails to provide adequately for the particular needs of female service users. In the coming years, KSM will study this situation further and adopt measures to make its services more accessible to this cohort.
Financial Report
Budgets

Over the years, the demand for the services given by the three 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.

To be able to cope with these changes, the Agencies required further funding by the government, which increased over the years as shown in Table 44.

<table>
<thead>
<tr>
<th>Agency</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appoğġ</td>
<td>2,850,000</td>
<td>3,250,000</td>
<td>3,450,000</td>
</tr>
<tr>
<td>Sedqa</td>
<td>2,300,000</td>
<td>2,450,000</td>
<td>2,550,000</td>
</tr>
<tr>
<td>Sapport</td>
<td>5,750,000</td>
<td>6,250,000</td>
<td>6,590,000</td>
</tr>
<tr>
<td>Total</td>
<td>10,900,000</td>
<td>11,950,000</td>
<td>12,590,000</td>
</tr>
</tbody>
</table>

*Table 44: Government subventions per Agency, 2009-2011*

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 Figure 142 and Figure 143 below, where one can immediately notice that payroll cost is on average four times as much as the cost of recurrent expenditure for all the three Agencies.

Figure 142: Recurrent expenditure and payroll cost per Agency, 2011

Whilst Figure 142 illustrates the split between the recurrent expenditure and the payroll cost by Agency in 2011, Figure 143 depicts the costs percentage when the three Agencies are combined for the same year.
Figure 143: Percentages of consolidated expenditure per Agency, 2011

Figure 143 clearly highlights the fact that payroll cost is by far the major recurrent cost for all three Agencies.

In terms of cases, we note that Aġenzija Sedqa had dealt with 2,425 individual cases in 2011 which is approximately same as that of 2010.

Aġenzija Appoġġ caseloads are significantly on the increase. The Children’s Services experienced a 518 increase in cases representing a 23% rise compared to 2010. The Adult and Family Services registered a 326 increase in cases or 7.96% increase over that of 2010. There was a 264 increase in cases rendered by the Community and Generic Services, or expressed in percentage terms, 34%. The Intake and Socio-Legal Services had dealt with the same number of cases as that compared to Year 2010. Supportline services registered a 6.6% increase over that of 2010.

Aġenzija Sapport increased by 9% its services over that of 2010, where the main increase can be primarily attributable to services rendered by the Social Work unit.
# Glossary of Terms

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Cases</td>
<td>A new case which was opened or activated for the first time ever within the reporting year and which was never previously worked with.</td>
</tr>
<tr>
<td>Re-contact</td>
<td>A case which was worked with and closed in the past and it has been re-activated or re-opened within the current reporting year.</td>
</tr>
<tr>
<td>Known Cases</td>
<td>Cases which were activated or opened in the previous reporting years and they are still active in the current reporting year. This may also be referred to as cases carried over from previous years.</td>
</tr>
<tr>
<td>Year of Referral</td>
<td>The year when a case was referred to the unit. A case may be referred more than once in a year. Some cases may be referred but placed on a waiting list or not taken up because the service was not appropriate for the case’s needs.</td>
</tr>
<tr>
<td><strong>Year Service Opening</strong> / <strong>Case Service Opening</strong> / <strong>Service Opened</strong></td>
<td>Within graphs it is also referred to as Service Opened. The year in which a case was opened or allocated. This includes new cases and re-opened cases and so the same case may be seen more than once in a year.</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td><strong>Year Service Closing</strong></td>
<td>The year in which the case was closed or terminated. The same case may be closed more than once in a year if the case was re-opened.</td>
</tr>
<tr>
<td><strong>Year of Opening</strong> / <strong>Case Opening</strong> / <strong>New Cases</strong></td>
<td>Within graphs it is also referred to as New Cases. This only refers to the year when a case was new to the unit. Cases can only be termed a new case once. If the case is re-opened then it will not be recorded here.</td>
</tr>
</tbody>
</table>

Table 45: Statistical terms
## Maltese Districts

<table>
<thead>
<tr>
<th>District</th>
<th>Towns</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Northern Harbour District</strong></td>
<td>Birkirkara, Gżira, Ħamrun, Msida, Pembroke, Pietà, Ħal Qormi, San Ġiljan, San Ġwann, Santa Venera, Tas-Sliema, Swieqi, Ta’ Xbiex.</td>
</tr>
<tr>
<td><strong>Southern Harbour District</strong></td>
<td>Vittoriosa, Cospicua, Fgura, Floriana, Senglea, Kalkara, Luqa, Marsa, Paola, Santa Luċija, Ħal Tarxien, Valletta, Xaghjra, Ħaż-Żabbar.</td>
</tr>
<tr>
<td><strong>South Eastern District</strong></td>
<td>Birżebbugia, Ħal Għaxaq, Gudja, Kirkop, Marsascala, Marsaxlokk, Mqabba, Qrendi, Safi, Żejtun, Żurrieq.</td>
</tr>
<tr>
<td><strong>Western District</strong></td>
<td>Ħ’Attard, Ħal Balzan, Ħad-Dingli, Iklin, Ħal Lija, Mdina, Mtarfa, Rabat, Siġġiewi, Ħaż-Żebbuġ.</td>
</tr>
<tr>
<td><strong>Northern District</strong></td>
<td>Ġħargħur, Mellieħa, Mgarr, Mosta, Naxxar, San Pawl il-Baħar.</td>
</tr>
<tr>
<td><strong>Gozo &amp; Comino</strong></td>
<td>Rabat, Fontana, Ġhajnsielem, Gharb, Ġhasri, Kerċem, Munxar, Nadur, Qala, San Lawrenz, Sannat, Xagħra, Xewkija, Żebbuġ, Comino.</td>
</tr>
<tr>
<td>-------------------</td>
<td>---------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td><strong>Homeless</strong></td>
<td>Not residing within any residence.</td>
</tr>
<tr>
<td><strong>Institution / Home</strong></td>
<td>Resides in a residential home, shelter e.g. Ġhabex or YMCA, in prison or Hospital e.g. Mount Carmel Hospital.</td>
</tr>
<tr>
<td><strong>Not residing in Malta</strong></td>
<td>Resides in a foreign country and is in Malta for a short stay.</td>
</tr>
<tr>
<td><strong>NS</strong></td>
<td>Not specified or not known.</td>
</tr>
</tbody>
</table>

*Table 46: Maltese districts*
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