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The United Nations Convention on the Rights of the Child is the world’s most widely ratified human rights treaty and calls for a paradigm shift in the way a society considers and treats children. Since its adoption in 1989 it has been complemented by three important protocols which consider critical areas of concern for the realization of children’s rights. Along with other international human rights instruments, the Convention and its Optional Protocols provide a firm normative foundation to prevent and address violence against children in all its forms.

The Convention introduced a new vision of childhood, one where children are not passive recipients of charity or welfare services. They are subjects of rights and agents of change who should grow up in a family environment characterised by an atmosphere of happiness, love and understanding. They are individuals who are entitled to the respect for their views; and to benefit from support, guidance and advice to gain evolving skills and abilities to exercise their fundamental rights with growing autonomy.

The Convention recognizes the crucial role of the family in children’s development and well-being and in the safeguard of their rights, including the right to protection from violence, abuse, neglect and exploitation. While States have to respect parents’ primary responsibility for providing care and guidance to their children, they are also requested to support parents in their child caring responsibilities, including providing material assistance and support programmes, including good parenting and early childhood initiatives. This is crucial to prevent children’s separation from their families, unless such a decision is needed in the child’s best interests.

According to recent research, more than 1 billion children are victims of violence every year around the world. The figure is so daunting that we may feel overwhelmed and tempted to look at violence as a fate. But we should not. As the UN Study on Violence against Children highlighted 10 years ago, “Violence is never justified and can always be prevented”.

Although many incidents of violence happen within the family, the family is also the ideal environment to foster a culture of peace and non-violence, for children to appropriately learn to prevent and respond to violence, to develop resilience and acquire coping and conflict resolution skills, to become self-confident and even stand up for those who may need help.

Unfortunately, life can be tough for many families and stress levels may make it difficult for parents to cope and create the best possible environment for their children to reach their full potential. Some forms of violence, such as corporal and humiliating punishment of children within the family, are still tolerated and even condoned by many in society. Yet, research proves that both children and society pay a high social and economic price when boys and girls experience such violence in childhood.

The government of Malta’s courageous step to scale up and support positive parenting stems from the country’s genuine commitment to upholding children’s rights and to strengthen families. The National Strategic Policy for Positive Parenting has all the ingredients of an integrated, inclusive, thorough and sustainable strategy to support families’ evolving needs to care for and protect their children. The participation of children in the policy development and implementation will no doubt ensure a clear focus on the issues that matter most in their lives. This policy is also an important step in Malta’s efforts to reach many of the targets in the 2030 Agenda for Sustainable Development, especially the violence-related targets with the ultimate goal of investing in the nation’s children and ensuring every child grows up free from violence.

It is indeed High Time to end violence against children, everywhere and at all times. We have to strengthen and support families to become safe places and “circles of non-violence”. As we implement the sustainable development agenda we must strive for a world of dignity for all, let us stand united for children’s rights in families and societies at large. The sum of all our forces will be zero. Zero violence against children. I am confident this new and important National Strategic Policy for Positive Parenting will help make ZERO everyone’s favourite number.

Marta Santos Pais | United Nations Special Representative of the Secretary General on Violence against Children
FOREWORD: MINISTER FOR THE FAMILY AND SOCIAL SOLIDARITY

We believe that policies should always be family centred. Services should always be directed for the needs of the families. With this foresight and forward thinking we are launching the Positive Parenting Policy. A number of services focusing on the family already exist, but there are some lacunae in the system. The main objective of this policy is to fill the void that exists, ease synergy and coordination between the whole spectrums of services.

Our diversified services, strive to advocate the importance of a positive relationship between the children and parents as early as possible. Importance will be given to parents with children with difficult behaviour, disability or educational problems. This National Strategic Policy for Positive Parenting is only one in a series of policies and laws that will focus on the families with a special emphasis on the children.

Emphasis is being made on the need that new and existing services in Social Welfare, Health Department and Education Departments continue to be fine-tuned. Coordination between all stakeholders is imperative so as positive parenting will be instilled in parents as early as possible. A task force will be appointed with representation of all stakeholders to ease the transition from one service to another without any unnecessary bureaucracy.

Having policies that are well researched and vastly consulted upon is good start, but it is of utmost importance to have evidence based programmes. Therefore in the coming weeks my Ministry will be introducing two programmes in Malta two programmes that has been already been used successfully in foreign countries. A number of our employees will be trained by foreign professional trainers in Positive Parenting.

The main aim of the Positive Parenting Policy is to keep strengthening Maltese and Gozitan families. A positive relationship between the children and their parents is the key for success of our future generations. This policy is one in a string of initiatives and measures intended by the Government to motivate our families and children out of poverty of every sort or form.

Michael Farrugia
Minister for the Family and Social Solidarity
A National Strategic Policy for Positive Parenting 2016-2024 is based upon the premise that a positive approach to parenting is considered an investment in the future of Maltese society. The adoption of such an approach is considered to be both cost-effective as well as a major support for parents as they face today's challenges. Positive parenting refers to parents' behaviour (or that of individuals designated to this role) which prioritises children’s best interests in order to help them grow in an environment that is free from violence and conducive to their healthy development, while at the same time providing all the necessary guidance and support. The Strategic Policy on positive parenting specifically aims at building and sustaining a positive culture and infrastructure for parents and their children, where parents are supported in various ways to fulfil their role to the best of their abilities.

The development and implementation of this Strategic Policy is embedded in a cultural context where work-family balance is prioritised through family friendly measures. This in turn empowers and enables parents to participate in the upbringing of their children and provides the necessary support such that new parents can have their desired number of children.

Throughout this Strategic Policy, a number of universal interventions that build on current services are proposed such that the importance of preventive work with both parents and children is highlighted. A number of evidence-based preventive and interventive parenting programmes at different stages of the family life cycle are also proposed. Such proposed programmes encompass various Ministries and Departments, hence creating a greater synergy to help deliver a seamless and continuous service provision. With respect to parents who are deemed to be hard to reach or mostly at risk, specialised and targeted interventions will also be provided.
1.1 Introduction

This Strategic Policy provides an important contribution to the wellbeing of society at large. Warm and caring relationships among family members have a substantial impact on children’s development and their future outcomes. Children brought up in secure and stable family backgrounds tend to exhibit the characteristics of good citizens, have self-confidence, are good leaders and are socially competent in problem-solving. The present Government is committed to helping our children to flourish, a commitment which is intended to be upheld by the provision of targeted support to parents through the implementation of this Policy.

1.2 Indicators of the Need for a Positive Parenting Policy

There are a number of indicators that point towards the pressing need for a National Strategic Policy for Positive Parenting:

- The Health Behaviour in School-Aged Children survey conducted in 2009 among 40 participating countries presented a number of alarming findings. Results from this survey showed that Maltese children between the ages of 11 and 15 ranked 37th in terms of their relative ease in confiding in their mother and ranked last with regard to confiding in their father for all considered age brackets.

- Qualitative research carried out in 2013 which explored the above findings at national level in more depth revealed that children yearn for a meaningful connection with their parents and value confiding in them. However, they wished that their parents were calmer, more understanding and better able to listen to them.

- The number of children in out-of-home care has increased rapidly, from 350 in the year 2000 to 592 in 2014 (C. Farrugia Bennett, personal communication, August 8, 2014).

- In 2013, 235 unaccompanied minors arrived in Malta (A. M. Pisani, personal communication, September 4, 2014). This substantial addition of children in care calls for more supportive services that specifically cater for these children.

- In 2014, nearly a third (32%) of children were at risk of poverty or social exclusion (National Statistics Office [NSO], 2015, June). Hence, by the adoption of the National Strategic Policy for Positive Parenting, one would be investing in children, especially in their early years. This is even more important for children originating from disadvantaged families, whose average cognitive scores before starting kindergarten were estimated to be lower than those living in families of a higher socio-economic status (Lee & Burkam, 2002).

- In a European survey, it was reported that 15% of Maltese women reported physical or sexual violence from their current and/or previous partner whilst 37% of women revealed that they experienced psychological violence (European Union Agency for Fundamental Rights, 2014)
1.3 Definition

The term “parenting” in this Strategic Policy refers to all the roles falling upon parents in order to care for and bring up children entrusted in their care. Nowadays a much greater shift has occurred towards positive parenting (Daly, 2007) and supporting measures for those families deemed to be at risk (Daly, 2013). Although parents are normally the primary caregivers, this Strategic Policy also recognizes that parenting behaviour can be taken up by any other individual who assumes a similar role in a child’s life. This is also supported by the formal definition of positive parenting (Daly, 2007, p.144):

“parental behaviour based on the best interests of the child that is nurturing, empowering, non-violent and provides recognition and guidance which involves setting of boundaries to enable the full development of the child”

It is essential to note that the Policy does not distinguish between a male and a female parent and also recognizes that each parent must be equally responsible for children’s upbringing.

1.4 The Philosophy

The Council of Europe Strategy for the Rights of the Child 2012–2015 (2012) and the Convention on the Rights of the Child (1990) are important sources of inspiration and reference. In addition to the importance of parenting support, the Policy framework also considers the participation of children as active contributors to communication and decisions. By consulting children and listening to their opinion and ideas, parents will in turn be supported to increase their understanding of their children.

By empowering mothers, fathers and other significant caregivers to have a voice and share their views on parenting, this Strategic Policy enables them to mobilize their resources and use their own skills to buffer and protect themselves against potential risks. Encouraging the discussion of parenting in a positive and open manner helps parents and society at large to become more receptive to parenting information and education. People with childcare responsibilities are motivated to grow as parents and come to accept the possibility and necessity of learning about best parenting practices.

The Strategic Policy’s development process evolves in a bottom-up approach. Social welfare services operating within the community will be the basis for positive parenting provision and necessary intervention. Therefore the consolidation and accessibility of universal services across Malta and Gozo need to be ensured. This Strategic Policy is also in line with the European Commission’s Recommendation Investing in Children: Breaking the Cycle of Disadvantage (2013), in particular with respect to the focus on service provision relating to early intervention, prevention, treatment and follow-up. Furthermore, this Policy also follows the main recommendations of nine Member States that have attended a peer review by the European Commission which focused on the building of a coordinated strategy for parenting support (Daly, 2011).

A systemic theoretical framework is imperative in order to take into account a relationship perspective. First and foremost, a systemic approach will help to evaluate family situations from a non-blaming stance and allow us to be able to understand the impact of outer systems, including those of the socio-cultural context in which parenting is embedded. Moreover, the adoption of this Strategic Policy would signify a shift towards
enhancing relationships on a family level as one unit, rather than simply focusing on parental skills of a single individual, thus having a greater positive impact on the children in consideration (Carlson & McLanahan, 2006). An illustrative example of the effects of positive parenting skills, and of co-parenting skills, upon child outcomes can be highlighted below.

Attachment theory is a widely used rich theoretical framework that is drawn upon when conceptualizing the notion of positive parenting. Whenever children form a secure attachment with their parents, they feel loved and safe. In turn the children will cooperate with their parents and feel free to explore new things. Hence, a virtuous circle of positive behaviour is created within the family. Parents who are able to provide a secure attachment for their children have the capacity to understand that their behaviour and that of their children are linked in particularly meaningful ways to their underlying mental states and are high in reflective function (Steele & Steele, 2008).

By promoting resilience, this Strategic Policy supports parent/s to help their children thrive. Resilience must be fostered not only amongst the parents and the family, but also by Governmental and private institutions, as well as independent agencies and the community as a whole.
‘Each day of our lives we make deposits in the memory banks of our children’

Charles R. Swindoll
2.1 The Changing Context

The National Strategic Policy for Positive Parenting must be mindful of the cultural context in which it is to be implemented, in this case the rapidly evolving Maltese landscape. The increase in globalization, the accession into the European Union in 2004, the introduction of the Divorce Law in 2011, the IVF Bill in 2012 and the Civil Unions Act in 2014, amongst many others, are examples of the rapid social changes that are taking place. Furthermore dual-earner families are on the increase, especially amongst younger couples. The female employment rate has risen by 17% between 2001 and 2014, standing at 49.3% of all working age women in 2014 (NSO, 2001, March; NSO, 2015, July).

The total fertility rate for Malta in 2014 stood at 1.4 (European Commission, 2016, March), amongst the lowest fertility rates in Europe. Demographers such as Kohler, Billari, and Ortega (2001) stressed that with a total fertility rate of 1.3, the population of a country would be expected to decline by half in forty-five years’ time.

Whilst the provision of good quality childcare is helpful, long working hours discourage childbearing. In addition, with the increase of female participation in the labour market, the importance and demand for childcare services have been on the increase. However, Maltese parents still tend to prefer relying upon relatives for the care of their children, such as grandparents. According to 2012 childcare figures (NSO, 2014, May), it was indicated that childcare by grandparents, other relatives, friends or neighbours averaged around 17 hours on a weekly basis.

According to national figures based on 2010, 25.2% of births happened outside marriage, reflecting an increase in non-traditional family households (NSO, 2011). The highest at-risk-of-poverty rate according to household type, is attributed to single parent households, of which 47.6% were found to be at risk of poverty (NSO, 2014, May). In view of all these changes and trends, the need to provide parenting support to Maltese families is now becoming crucial.

According to the latest census of 2011 (NSO, 2014), 8.12% of the total married population had separated; another 1.01% had divorced. With respect to parenting, marital separation is but one major event that family members go through which raises distress and conflict amongst family members. Moreover, a number of these families go on to live in a reconstituted family arrangement. Research shows that “the post-divorce adjustment of parents and children over time, as marital transitions and family reorganizations unfold, is a stressful time for families and the experience doubles the risk of serious problems in children” (Greene, Anderson, Forgatch, DeGarmo, & Hetherington, 2012, p. 103) although there are families where the experience is a positive one overall (see Farrugia, 2014, for a qualitative study of couples in remarried relationships following divorce in Malta).
In 2014, 232 children were in foster care, 33 children in specialised foster care, 242 children in residential care and 85 children had other arrangements (C. Farrugia Bennett, personal communication, August 8, 2014). In 2013, 235 unaccompanied minors arrived in Malta (A. M. Pisani, personal communication, September 4, 2014). At present, the supply of foster carers does not meet the demand for so many children. In a series of three studies on children in out-of-home care in Malta commissioned by the Office of the Commissioner for Children (Abela, Abdilla, et al., 2012), it was highlighted that in the majority of cases, the main reason for children’s entry into care was directly related to parenting, indicating that a number of parents face extensive and intense challenges and need to be supported.

In 2010, the total number of adoptions by Maltese couples reached 74 (NSO, 2011). Moreover, according to the latest census in 2011, 6.99% of children aged between 0 and 18 reported having some long-standing illness/health condition. Parental support is essential to be provided in order for these families to adapt and overcome any difficulties and/or challenges resulting from these circumstances.

The introduction of the Malta Civil Union Bill in April 2014 brought forth the issue of parenting by same-sex couples. While 41% of the Maltese population was in favour of the passing of this Bill (Vella, 2012, June 5), the legalization of adoption by same-sex parents was criticized. This highlights the need for an educational campaign, in order for this stigma towards parenting by same-sex couples to be addressed (Zammit, 2014, February 18).

The increase of intercultural marriages and the number of multicultural families living in Malta call for a more culturally sensitive approach towards positive parenting. In 2011, 4.9% of the population in Malta was non-Maltese (NSO, 2014) and incorporated a broad array of cultures from different continents.

This changing context warrants more local research given that there is a lack of available statistics particularly on reconstituted families, same-sex families with children, and remarriages.

2.2 Current Services and Challenges Faced

A number of initiatives have been set up which reflect the move towards the introduction of positive parenting in our society. An important change in the Criminal Code has been the recent abolition of what was previously considered acceptable moderate corporal punishment: “Corporal punishment of any kind shall always be deemed to exceed the bounds of moderation” (Article 339(h) of the Criminal Code, Chapter 9 of the Laws of Malta). This change undoubtedly creates a shift in parents’ limits in disciplining their children, irrespective of age.

Increased support towards parents who participate in the labour market is also an important means of protecting children and ensuring their well-being. This includes the introduction and increase in the number of childcare centres, a measure which gives an opportunity to parents who do not have adequate support to earn a living, thus increasing their quality of life and reducing the possibility of being at risk of poverty.

As from 2014, childcare centres have been made available to working parents free of charge according to a new Government scheme. The free service operates according to the number of hours that the parents work. These initiatives aim at enticing parents to become gainfully occupied individuals while still caring for their child’s wellbeing. The introduction of Breakfast Club during school days, summer school (Skolasajf) and after-school service (Klabb 3-16) for school-age children which are free of charge is yet another way of supporting parents and indirectly encouraging them to work.
Over the years, various family friendly measures have also been set up by the Maltese Government to give parents more time to care for their family. These include marriage leave, maternity leave, paternity leave, parental leave, adoption leave, leave to foster children, responsibility leave, reduced working hours, flexi-time, job-sharing and tele-working. However, family friendly services are still largely lacking in the private sector.

The National Strategic Policy for Poverty Reduction and for Social Inclusion 2014-2024 (Ministry for the Family and Social Solidarity, 2014) is also an important step in the right direction. With its emphases on adequate income, inclusive labour markets and access to quality services, it sets the scene to nip the problem of child poverty in the bud by supporting families with children.

With respect to health and care services for children and families, the country enjoys a sound basic infrastructure which has developed over the past years. Some of these services include frequent check-ups for expectant parents, post-natal check-up visits, the Well Baby Clinics operating at community level and other services provided when children are at school by the School Health Services. Schools also offer a wide array of services through the Psycho-Social Services Centre. The Neonatal Paediatric Intensive Care Unit (NPICU) and the Child Development Assessment Unit (CDAU) offer support for children with disability and/or health issues whereas the Child Guidance Clinic (CGC) helps children who are going through psychological difficulties. The Foundation for Social Welfare Services (FSWS) also offers support to children and families who face difficulties of a psycho-social nature.

The National Strategic Policy for Positive Parenting aims to continue building on this already existing infrastructure so as to facilitate and organize the operation of services in the country.
‘At the end of the day, the most overwhelming key to a child’s success is the positive involvement of parents’

Jane D Hull
3.1 Building on Existing Services

3.1.1 Creating Better Synergy Between Services

The infrastructure to coordinate, facilitate and oversee the operation of the diverse services offered in Malta needs to be strengthened. Under the current structure, the majority of services work independently from each other, hence creating fragmentation (Government of Malta, 2002; National Family Commission, 2002). In view of this, the way forward calls for better synergy between the Government Ministries, experts in the field and any other entities involved. Such coordination helps to avoid duplication of efforts and service provision, as well as make the best use of existing services and resources. Gozo in particular lacks important services and does not have enough professionals available for these services to operate optimally. As a result, Gozitan residents either have to travel to Malta or to do away with the support they need and deserve. For instance Gozo only has one childcare centre to date, which is located in Għarb. Parentcraft Services are not as extensive as the ones that are on offer in Malta and parents of children with a disability are expected to take their children to the CDAU at Mater Dei Hospital for assessment.

In order to increase awareness and knowledge in relation to positive parenting, an increase in continuous professional training needs to be offered to different professionals at different levels of care and service provision. The aforementioned training needs to take into consideration systemic ways to incorporate and address the new work culture, the new reality of migration and the importance of training in cultural diversity.

Policy Actions

The setting up of a Task Force led by the Ministry for the Family and Social Solidarity (MFSS) in coordination with key representatives from other relevant Government Ministries who are responsible for working with children and their parents as well as academics who specialise in this area. The Task Force should take responsibility for the rolling out of this Strategic Policy.

A computerized system that includes basic information about clients’ access to the various services would avoid fragmentation and foster better coordination of services between professionals. Such a system needs to be set up in conformity with regulations stipulated by the Data Protection Authority.

This Strategic Policy proposes outreach services for parents living on the margins of society, and who may not come forward to make use of the available services, by the LEAP programme as well as by services falling under the remit of the Ministry for Health, the Elderly and Community Care. These should include, where necessary, home visits by trained professionals in the field.
This Strategic Policy proposes more services for children and families in Gozo. Indeed, the newly-launched Social Development Centre (SDC) and the Family Resource Centres (FRCs) that will soon be launched together with the health and education sectors will provide a more comprehensive service to Gozitan families.

The Task Force should develop training programmes together with an implementation schedule. Furthermore, partnership agreements with reputable foreign bodies in the area of positive parenting are to be reached and “train the trainer” courses are to be implemented.

3.2 Positive Parenting in the Health Sector

The health sector plays a vital role in the implementation of the National Strategic Policy for Positive Parenting.

3.2.1. Antenatal Outpatient Services

Mothers are officially registered during an intake meeting with the midwife and an examination by the obstetrician at the Antenatal Outpatient Services. This initial visit can take place at any time during the duration of the pregnancy prior to delivery. Routine screening related to the general wellbeing of the expectant mother is to be carried out. Relational wellbeing of the parents-to-be is to be highlighted. Parents in need of specialised support are to be referred to the appropriate service.

**Policy Action**

Routine screening related to the mental health of the expectant mother and of any adverse situations in the home should be carried out systematically and form part of the first assessment carried out by midwives when expectant mothers register for their first appointment at the Antenatal Outpatient Services and those in need of specialised support are to be referred to the appropriate service.

3.2.2. Parentcraft Services

Currently parents can make use of Parentcraft Services offered as part of the antenatal service at Mater Dei Hospital. Courses are usually held at the same hospital. In spite of the fact that there are four or five concurrent courses, they are quite large, each with groups of up to 16 to 20 couples. These classes primarily aim at educating and informing parents-to-be about what to expect in early pregnancy, as well as to offer childbirth classes to prepare for safe labour and birth, breastfeeding and baby care. New services also include sessions for grandparents who may need to be offered on weekends or in the evening to cater for grandparents who are employed. Postnatal groups aiming to educate parents on a number of issues related to a new born infant are also being offered. According to statistics relating to Parentcraft courses, it is indicated that approximately 96% of parents who give birth for the first time attend such courses willingly (Borg Xuereb, 2008).

In line with the importance given to outreach services in this Strategy, every effort should be made to reach out to those parents giving birth for the first time at Mater Dei Hospital who do not turn up for the courses on offer by Parentcraft Services and who upon being contacted would reveal that they would not have followed any other course on offer by a private entity.
Policy Actions

Every effort should be made to reach out to those parents giving birth for the first time, who do not turn up for courses on offer by Parent Craft Services.

3.2.3. Services for Parents of Children With a Disability.

It can be quite challenging for a parent to welcome a child with a disability. Such new parents might need immediate psychological support in order to help them accept and successfully raise a child with disability. Reviews over time will also provide opportunities to support these parents in any difficulties they might have in this lifelong task. Professionals need to be trained in breaking the news and on ways of how to empower and support parents raising a child with a disability.

The NPICU and the CDAU offer a service for parents whose children have a disability. The NPICU cares for babies and children aged 3 and under who require very demanding treatment. According to the latest census of 2011, it was self-reported by parents that 6.99% of children aged between 0 and 18 had a long-standing illness/health condition. CDAU offers its services to such parents and their children through a multi-disciplinary team.

Policy Action

Professionals working at NPICU and CDAU will receive training on how to break the news to parents of children with a disability as part of their continuous professional development. Training on ways in which they can empower and support parents raising children with a disability will also be offered. The National Commission for Persons with Disability (KNPD) will provide the training.

Every effort should be made to reach out to those parents giving birth for the first time who do not turn up for the courses on offer by Parentcraft Services

The Perinatal Clinic offers psycho-social assessment and interventions as well as psychiatric and psychological treatment for women during pregnancy and the postpartum period.

Policy Actions

The Perinatal Clinic needs to employ a psychologist specialised in parent-infant psychotherapy whose role will involve supporting the parents, helping them in their parenting and enhancing the parent-infant relationship.

The Perinatal Clinic will offer its services within the community in order to provide easier access for parents and families.

Screening for postnatal depression is to take place during the first visit at the Well Baby Clinics (at six weeks postpartum). Those with mental health issues are to be referred to the Perinatal Mental Health Service for specialised help and support.

This service should start at Mosta and work in tandem with the Well Baby Clinic Service, Parentcraft Services and the Social Development Centre at Qawra.
3.2.5. The Well Baby Clinics

A high percentage of infants are taken to postnatal Well Baby Clinics at Mater Dei Hospital, or at community clinics. The attendance is in the region of 83%, which is relatively high. The focus of these clinics is that of “monitoring and recording of children’s development and advice on immunization and feeding” (refer to https://ehealth.gov.mt).

**Policy Actions**

The Well Baby Clinics will start offering a more coordinated service in tandem with the Parentcraft Services, the Perinatal Clinic in the community and the FRCs.

Outreach is recommended in the case of those parents who do not visit the Well Baby Clinic or visit a paediatrician privately. In situations where babies are living in adverse circumstances, families are to be referred to Childcare Centres.

During the parents’ first visit with the baby when the baby is six weeks old, mothers are to be screened for postnatal depression. The Edinburgh Postnatal Depression Scale could be adopted by the nurse for this purpose. Mothers who are going through mental health difficulties are to be referred to the Perinatal Clinic.

Psychologists are to monitor the wellbeing of both parents during their second visit when the baby is eight months old and when the level of stress between the parents is expected to be soaring (Borg Xuereb, 2008). The Parental Stress Index is to be administered to the parents. Parents who are stressed will be referred to one of the parenting programmes in the community. Such programmes will be run by MFSS.

It is being recommended that this project be evaluated after the first 12 months and if considered beneficial, similar services will be set up in the other health centres.

3.2.6. Children With Challenging Behaviour

There is so far no early intervention work with children who have challenging behaviour or come from families in difficult situations. Due to this, a number of these children end up within the Kids in Development Programme (KIDs) or Young People’s Unit (YPU) at Mount Carmel Hospital or else in a children’s home. Once these children are placed in such institutions, there are very few other programmes which would help them to reintegrate with their families.

**Policy Actions**

This Strategic Policy recommends that the treatment of adolescents with challenging behaviour take place in a therapeutic community away from a psychiatric setting.

A structured therapeutic programme with a preset finite duration which places the focus on young persons, and their reintegration at school and within their family, will be set up.
3.3 Positive Parenting Within Childcare Services and Schools

3.3.1. Positive Parenting Within Childcare Services

Childcare centres have become an important setting, having a crucial role in offering relevant support and outreach to families with children. Parents participating in the labour market and/or full-time education are eligible under the Free Childcare Scheme up to a given number of hours. Childcare services for children referred by professionals are also given priority, and in this case, the fee payment is reduced, depending upon the family's means.

This Strategic Policy aims to give priority to children living at risk of poverty and/or in adverse circumstances. Early intervention is key in this regard. The latest research in neuroscience regarding brain development shows that an impoverished environment, as well as parental stress and mental health issues due to lack of means, tend to have adverse effects on the cognitive and emotional development of a child. By 18 months, the child's performance at school can already be predicted (Abela & Renoux, 2014).

Another important aspect that needs attention in the context of childcare services is the nurturing of the relationship between the primary caregiver/s and the infant. This bond is even more important for the child's development when children are living in disadvantaged circumstances, given that such children are more at risk of disengaging from school at an early stage (Moullin, Waldfogel, & Washbrook, 2014). So far childcare services in Malta do not prioritise such relationships and activities with parents are few and far between. The provision of early childhood interventions should be designed to take place in the childcare centre but also in the home setting, since home visits have the potential of reaching parents who are on the margins of society.

Policy Actions

Parents with young infants, who live in vulnerable conditions, including those who are suffering from mental health problems, will be given priority when applying to place their children in childcare and are to be followed at the Perinatal Clinic or FRCs.

Furthermore all parents whose children are in childcare need to be actively involved in the care of their children even if this necessitates home visits. Such involvement is especially called for in contexts where families are living in adversity and the emotional bonding with the infant is lacking, or where there are signs of infant neglect or abuse.

3.3.2. Positive Parenting Within Schools

When it comes to issues relating to children and parents, schools are a gold mine that can be exploited to provide a wealth of opportunities and services to both. Potential services can address parents whose relationship is in distress and who need support to be able to parent their children more effectively. Support may also be needed as children grow older, especially in their teen years and in situations where children exhibit challenging behaviour. In all these situations, there is a need for greater focus on the co-parenting relationship and the quality of the parent’s relationship.
A whole school approach is indispensable to empower parents. School support staff and senior management teams must work collaboratively with parents by fostering a genuine relationship with them and getting to know them on a more personal basis. Such support needs to be of a systemic nature and be directed not only towards the school staff who may need a space where they can reflect and discuss their interventions, but also towards parents and their children.

### Policy Actions

**A whole school approach is indispensable in bringing parents on board as important partners in their children’s education.**

**All personnel must build genuine and collaborative relationships with parents especially with those who are facing adverse circumstances and who are experiencing great difficulties in prioritising their children’s needs.**

#### 3.3.3. The Need for Parental Programmes

Parenting skills are offered in schools but are often attended by motivated parents, mostly mothers, and are not evidence-based. MFSS is proposing investing in parental programmes that are evidence-based as part of the National Strategic Policy for Positive Parenting. Specific parental programmes will be offered to specific populations such as the Family Foundations Programme for families expecting a child or the Focus on Kids Programme for parents undergoing a separation. Another parenting programme on offer for parents with dependent children is the Parents as Partners Programme (PasP) which is more preventive in nature and focuses on the importance of the co-parenting relationship. The Multi-Systemic Therapy Programme (MST) is a home-based interventive model which liaises with schools, the family and the larger community and focuses on serious behavioural challenges. The latter two programmes are to be offered in the various FRCs set up by MFSS and at the Psychological Services Unit forming part of the Family Welfare Services. Extension of such a service can later be offered in schools should research and additional recruitment indicate that this is more appropriate and effective. The Incredible Years Programme will also be on offer. This programme places emphasis on helping parents’ interactions with their children become more positive and on changing parents’ responses to specific child behaviours.

Furthermore parents would greatly benefit from having the opportunity to attend self-help groups, thus being able to meet and speak with other parents (Abela, Farrugia, Casha, Galea, & Schembri, 2013). Grandparents are often taking responsibility for school children after school and during holidays. Therefore, schools need to reach out to grandparents more, especially those taking an active role in the care of their grandchildren, by organizing courses especially for them. Should it be the case that grandparents are also taking on the role of a co-parent, they should then be invited to attend parental programmes.

### Policy Actions

**Where appropriate, parents are to be actively recruited to attend positive parenting courses at schools or FRCs.**

**Grandparents in a near-parenting role may also accompany single parents on the parental programme.**

**Self-help groups for parents are to be set up when the need arises.**
Groups are to be offered to grandparents who take responsibility of their grandchildren for some of the hours of the day.

3.3.4. Introducing Parenting as Part of the School Curriculum

Personal Social and Career Development (PSCD) in schools already stresses the importance of relationships and prosocial behaviour. It could go a step further by introducing parenting as part of the school curriculum alongside other taught subjects.

Policy Actions

Sensitising children about parenting including preparation for parenthood is to be taught as part of PSCD and considered as a vital component that would enhance the quality and value of relationship education.

3.4 Family Court

Abela et al. (2013), Abela, Farrugia, Galea, and Schembri (2012), and Casha (2014) addressed the difficulties faced by families with experiences of court proceedings including the length of the proceedings, the hefty legal expenses incurred as well as the professional fees for child psychologists.

Policy Actions

A team of in-house helping professionals will be set up at the Family Court.

Professionals rendering service at the Family Court will be undergoing continuous professional training.

Parents who are undergoing separation proceedings will be expected to attend a relationship education programme entitled Focus on Kids (Schramm & Calix, 2011). The aim of this programme is that of sensitising parents to the importance of prioritising the needs of their children and positive co-parenting during a time when the family is going through considerable distress. This programme will be evaluated by the helping professionals working at the Family Court.

3.5 The Role of MFSS in the National Strategic Policy for Positive Parenting

MFSS will oversee the implementation of the National Strategic Policy for Positive Parenting by leading the Task Force and by supervising the infrastructural projects that are necessary to ensure the smooth running of the services that will be on offer.

3.5.1 Supporting Parenting in the Context of the Reorganization of Services at FSWS

FSWS will soon be going through a number of structural and services reorganizations. A main change will be that of turning FSWS from a Foundation into a fully-fledged Agency. Following the introduction of the Child Protection Bill, Child Protection Services (CPS) will move from under Appoġġ’s remit and will fall directly under the responsibility of the Courts and the Ministry for Justice, Culture and Local Government (MJCL). Due to this move, care orders will no longer fall under the responsibility of the Minister for the Family and Social Solidarity, but will be issued directly from a Magistrate supported by a multi-disciplinary team.
3.5.2. Supporting Positive Parenting in the Context of Looked-After Children

One of the goals of this Strategic Policy is to reduce where possible the amount of children in out-of-home care through its preventive policy and early intervention. The Children’s Services within FSWS will cater for children who are facing extreme challenges and who require out-of-home care at least temporarily. Children’s Services aims to provide a better opportunity for the synergy and consolidation of resources in this specialised area of work, thus supporting parents and other carers who may play a significant role in children’s lives.

As established in the Electoral Manifesto of 2013, proposal 07.017 states that:

“A Centre for Adoption and Fostering will be set up to serve as a focal point and be of service in this area to provide support to interested couples.”

Services relating to fostering and adoptions currently fall under the remit of FSWS. In order to implement the above-mentioned manifesto proposal, it is being proposed that an Agency taking care of fostering and adoption be established and all existing services be restructured in order to fall under the new Agency’s remit. New services in the areas of fostering and adoption will also fall under the responsibility of this Agency. The aim is for this Agency to be designed in order to provide efficient and effective specialised care services for prospective adoptive parents, foster carers and children in out-of-home care. An important element in this restructuring is the autonomy of such an agency.

Given the lack of evidence-based courses provided to adoptive parents and foster carers (The Tavistock Centre for Couple Relationships [TCCR], 2015, April), it is proposed that such courses be administered along the same lines of other courses of good reputation abroad such as the relationship support programme for adoptive parents by TCCR, run in collaboration with the British Association for Adoption and Fostering. Similarly, training offered to foster carers as part of the Circle Program in Victoria, Australia has been highly recommended in the past (Frederico et al., 2012). The increase in children and parents coming from diverse cultural backgrounds calls for more culturally sensitive courses and trainers. It is also essential to carry out a pre-post evaluation study of all these types of training which are to be offered.

Every effort should be made to provide support to adoptive parents, even after the adoption is successful. Similarly, ongoing support for foster carers is considered one of the key variables leading to the successful outcome of a therapeutic approach to foster care. Other related variables include: the training of foster carers (with a focus on child development, trauma and attachment); therapeutic support for, and active engagement with, the biological parents; and therapeutic support for the child, including active support at school (Frederico et al., 2012). Such an approach necessitates more resources. Children’s Services needs to be supported by a multi-disciplinary team to be able to offer a timely and specialised service.

**Policy Actions**

Children’s Services aims to provide a better opportunity for the synergy and consolidation of resources for this group of children and their families.

Screening of prospective adoptive parents and foster carers will be carried out by a psychologist and a social worker who possess specialised training in the assessment of attachment and the ability to evaluate the potential of a positive parenting environment.
In the absence of evidence-based courses for prospective adoptive parents and foster carers, courses which are gaining a good reputation abroad will be adopted for training purposes. The increase of children and parents coming from diverse cultural backgrounds calls for culturally sensitive courses and trainers. A pre-post evaluation study will be carried out.

Ongoing support for adoptive parents, even post-adoption, is to be made more available.

Ongoing support for foster carers, the training of foster carers, therapeutic support for and active engagement with biological parents, and therapeutic support for the child including active support at school should be combined to provide children in foster care every opportunity to succeed.

Children’s Services needs to be supported by a trans-disciplinary team to be able to offer a timely and specialised service.

Children’s Services is to step up its efforts to attract more foster carers who are interested in taking care of children who cannot be raised by their biological parents.

Eligible next-of-kin foster carers are to be actively considered.

Children under the age of five who need out-of-home care are to be placed with foster carers and should not be placed within a residential setting.

3.5.3. Community Services and Support for Parents in the Context of a National Strategy Against Poverty and Social Exclusion

During the past couple of years, Community Services have developed quite extensively. Former Aċċess Centres were further strengthened under the Leap Project, with 10 FRCs being opened in a number of locations, as part of the implementation of the National Strategy Against Poverty and Social Exclusion. Furthermore, proposal 07.058 of the Electoral Manifesto of 2013 stipulates that:

“Utmost importance will be given to fight and eradicate poverty among children once and for all.”

In view of this, MFSS designed and implemented an Anti-Poverty Strategy, which will span over the next 9 years. This Strategy will ensure that each year, approximately 370 families will be supported out of risk of poverty through various schemes, programmes and benefits. The main scheme to alleviate these families from the risk of poverty is through the engagement in the labour market. The annual target set is for around 570 individuals to be assisted in finding gainful employment. This will in turn positively impact around 870 dependent children. Therefore, over the 9 year period, a total of 3,330 families will be supported to get out of poverty through the introduction of a total of 5,130 persons into employment, in turn affecting the lives of 7,830 children.

3.5.4. Supporting Positive Parenting at Aġenzija Sapport

Aġenzija Sapport works with persons with disability and their families, providing them with opportunities that enable them to fully participate in community life. Besides supporting parents whose children have a disability, the agency also supports parents who have a disability themselves.
According to the latest census held in 2011, 3% of parents with dependent children self-reported a disability and may need extra support. Contrary to public perception, people with a disability are capable of being good parents and tend to show remarkable resilience in finding ways of overcoming impairment-related barriers. Nevertheless, the families of these parents may need extra support. This is often provided by the extended family but State support is also available through Aġenzija Sapport.

In this respect parents who have a disability and/or those parents who have young children with disability are given priority by Sapport. The work force at Sapport is mainly made up of social workers, psychology graduates and support workers. The continuous professional development of the staff based on a strengths-based approach (Margalit & Kleitman, 2006) and the social model of disability (Oliver, 2004) are therefore very important. This model is based on constant consultation with parents and children with a disability and would help professionals empower parents in the upbringing of their children.

This Strategic Policy encourages NGOs to work more collaboratively with Aġenzija Sapport. This cross fertilisation, rich in expertise and experiences, will provide staff and families with the opportunity to build networks of support and to learn about each others' stories of success.

**Policy Actions**

The continuous professional development of the staff based on a strengths-based approach and the social model of disability based on constant consultation with parents and children having a disability would help professionals empower parents in the upbringing of their children.

Parents with a disability and/or parents whose child has a disability and their families need to be provided with timely psychological and family therapy support.

### 3.5.5 Supporting Parenting Through Family Welfare Services

Appoġġ offers a wide range of services for children and their families who find themselves in adverse circumstances. These services are mostly specialised and include the Domestic Violence Services, supervised access visits, Psychological Services and Family Therapy Services.

**3.5.5.1. Domestic Violence Services**

Domestic Violence Services provides support to adults and their children suffering from abuse in the family and in intimate relationships. The service also provides shelter for women and children who need to leave home because of issues related to safety. Managing aggressive behaviour helps perpetrators to take responsibility for their behaviour. Although Domestic Violence Services offers its services to both women and men, at present there is no specific service for men who are victims of violence. Moreover, children who witness domestic violence are referred to a psychologist. However, given the demands for such a service, these children are usually put on a waiting list. When the violence stops, some families are referred to Family Therapy Services whereas individual members needing psychotherapy are referred to Psychological Services.

It is being recommended that Domestic Violence Services focus more on parenting in the context of domestic violence, both for the mothers and fathers separately and together where safety is no longer an issue (Featherstone, White, & Morris, 2014; Sammut Scerri, 2015). Family
Therapy Services and Domestic Violence Services need to develop their expertise in this systemic way of working. Routine checks for domestic violence in the antenatal visits at Mater Dei and referrals emanating from such screening will give priority to early intervention in line with the guiding principles of this Policy.

Professionals also need to be able to make a distinction between situational violence (Johnson, 2008) where arguments escalate but “there is no significant difference in the frequency and severity of violent behaviour perpetrated by men or women” (van Lawick, 2014, p. 76) and intimate terrorism where one person, usually a man, terrorises the other. A service for men who are victims of violence also needs to be made available.

**Policy Actions**

Specialised training is encouraged to be provided to professionals working in the area of domestic violence so that fathers are engaged not only in terms of their abusive behaviour but also in their role as fathers.

Mothers too need to be offered a service whereby their parenting is supported in the context of violence.

Where appropriate and where safety is no longer an issue, parents and children can be offered family therapy rather than individual therapy.

**3.5.5.2. Supervised Access Visits**

Appoġġ offers safe and child friendly spaces where supervised access visits can take place. Supervisors monitoring such visits have an important role to play in helping parents and children connect during the visit. In this respect, it is believed that supervisors need to be trained in helping parents enhance their relationship with their children. Supervisors also need regular supervision to be able to discuss the challenges and dilemmas that they face when carrying out such delicate work.

**Policy Actions**

Supervisors monitoring supervised access visits have an important role to play in helping parents and children connect during visits.

Supervisors need to receive continuous professional development on how to help children and parents enhance their relationship.

They also need regular supervision to be able to discuss the challenges and dilemmas they face in their work.
3.5.5.3. Services for Substance and Gambling Abuse

Positive parenting is also crucial for families facing addiction difficulties. Aġenzija Sedqa offers services including a number of detoxification and residential services for clients with alcohol, drug and gambling abuse problems and their families. Community services need to be delivered both through office and home-based interventions, aimed at providing personalized services to clients and their significant others. A team of professionals offering psychological therapy and family therapy also caters for this particular client population.

Apart from current programmes, the 2014 National Report on the Drug Situation in Malta mentions a number of community-based programmes which include parenting skills programmes and other forms of teaching and learning held in schools and at Aġenzija Sedqa. No mention of family therapy intervention is made in this report in spite of the fact that such a therapy is considered a treatment of choice for persons suffering from substance abuse (Rowe, 2012) and gambling abuse (Kourgiantakis, Saint-Jacques, & Tremblay, 2013).

Furthermore, the evidence based MST (Rowe, 2012), is proposed to be introduced. This family-based treatment aims at helping families in the community where there are chronic, violent or substance-abusing young offenders who are at risk of out-of-home placement. This intervention should be of help in getting youngsters off drugs and in reducing the number of young drug offenders who often end up incarcerated at the Young Offenders Unit Rehabilitation Service (YOURS).

Policy Actions

Family Therapy Services needs to be considered as a treatment of choice for persons suffering from substance and gambling abuse.

MST will be considered as a treatment of choice aimed at helping families in the community where there are chronic, violent or substance-abusing young offenders who are at risk of out-of-home placement.

3.5.6. The Setting Up of FRCs in the Community

The FRCs introduced by the Ministry for the Family and Social Solidarity in the community in various localities in Malta and Gozo, are excellent focal points that have been considered as ideal to cater for the needs of families with dependent children by providing advice, support, links with other services and therapy (Abela, Casha, et al., 2012). Their introduction will fill an important gap in services for families at community level by offering information, support and advice in the early stages of a difficulty, thus helping families to stay well. Besides broadening the services offered, they can serve as the link between services in the community, thus avoiding duplication. Other helping professionals such as psychologists, counsellors or family therapy teams may also intervene when families or couples are in need of therapy.

FRCs also have a community development professional as part of their trans-disciplinary team. The cultural and social aspect of FRCs provides families in that particular neighbourhoo d the opportunity to gather together and form important networks of support. FRCs also work hand-in-hand with supporting NGOs willing to give or already giving a valuable contribution to families.
Policy Actions

The introduction of FRCs in the community, in various localities in Malta and Gozo, are excellent focal points that cater for the needs of families with dependent children by providing advice, support and therapy.

Their introduction will fill an important gap in services for families at community level by offering information, support and advice in the early stages of a difficulty, thus helping families to stay well.

FRCs will also serve as an important meeting point for the community at large by organising a number of cultural and social activities.

Besides broadening the services offered, FRCs will serve as the link between services in the community, thus avoiding duplication.

3.6. The Delivery of Parenting Programmes in the Community

3.6.1. The Parents as Partners Programme

Given the importance of positive parenting, a number of related programmes have been developed over the years, and the outcome of these have brought about a recognized improvement in the way parents communicate with children (Sanders, 2008). Most of these programmes have focused directly on parental skills. In Malta, this is still the case and the focus still remains on the traditional teaching of parenting skills attended mostly by mothers. However Cowan, Cowan, Pruett, Pruett, and Wong (2009, p. 676) reported that when involving the father in co-parenting groups, it was possible that “the parents’ experience of the groups themselves, the discussions of children’s development, and the relatively greater couple satisfaction and couple communication combined to protect the children against the rise in aggression, hyperactivity, depression, and shy or withdrawn behaviors”.

3.6.2. The Incredible Years Programme

The Incredible Years Programme caters for children from low income, low education, highly stressed or isolated families, single-parent families, and families where there is considerable discord, maternal depression, or drug abuse in which children are at particularly high risk for developing conduct disorder (CD) (refer to http://incredibleyears.com). Children whose parents’ discipline approaches are inconsistent, physically abusive, or critical are also at high risk for CD (Ogbru, as cited in Foley, 2004) as are children whose parents are disengaged and uninvolved in their children’s school experiences.

The course is based on well-established behavioural/social learning principles that describe how behaviours are learned and how they can be changed. At the core of this approach is the simple idea that people change as a result of the interactions they have on a daily basis with one another. The emphasis is placed on helping parents’ interactions with their children become more positive and on changing parents’ responses to specific child behaviours.
3.6.3. Making Use of Different Modes of Media to Deliver Parenting Courses

Anglo-American literature connected to parenting programmes has in recent years focused on how positive parenting may be made accessible to a bigger number of families through different modes of media which include programmes offered on television and on the internet (Sanders et al., 2008). These programmes have been found to have far-reaching positive effects on diverse parenting situations in different cultural contexts (Morawska et al., 2011). Given that many parents may find it difficult to timetable such courses in their busy schedules, the successful outcomes of such programmes offered through the media elsewhere should augur well for running these courses through the media in our country (Morawska et al., 2011; Sanders et al., 2008).

3.6.3. Making Use of Different Modes of Media to Deliver Parenting Courses

<table>
<thead>
<tr>
<th>Policy Actions</th>
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<tbody>
<tr>
<td>The Parents as Partners Programme and the Incredible Years Programme are to be offered in the FRCs.</td>
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<tr>
<td>A media-based parenting programme which introduces awareness about positive parenting to the general public will be offered.</td>
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3.7. Home-Based Therapy Services

Apart from the presence of multi-disciplinary teams in every FRC, community services will also benefit from home-based therapy offered in the community. The first type of home-based therapy is a form of systemic family therapy. Besides therapy it also incorporates family support and intervention and caters for families who would not engage with services in spite of their high level of need. This type of home-based therapy has been on offer in other countries such as the Netherlands (van Lawick & Bom, 2008) and the UK (Sammut, 2010). Research has shown that this kind of therapy can reach families who are living on the margin of society and who are at risk of having their children taken away.

<table>
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<th>Policy Action</th>
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<tr>
<td>Home-based therapy catering for families who would not otherwise engage with services but who have a high level of need and whose children are at risk of being put into care will be on offer. This will happen should the current pilot project at the Qawra LEAP Centre yield positive results.</td>
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3.8. Training in Multi-Systemic Therapy

MFSS is also offering training in MST to professionals such as social workers, psychologists, family therapists and counsellors, to help families where there are chronic, violent or substance-abusing young offenders who are at risk of out-of-home placement. The training is being offered by the Norwegian Centre for Child Behavioural Development. MST is also a family home-based treatment.

**Policy Actions**

MST training will be on offer to practitioners.

Once trained, therapists will be able to help families where there are chronic, violent or substance-abusing young offenders who are at risk of out-of-home placement.
A baby is born with a need to be loved and never outgrows it’

Frank A. Clark
In line with the United Nations Convention for the Rights of the Child, the Council for Children within the Office of the Commissioner for Children will serve as a forum for discussion where children will have the opportunity to air their views on their family and on society in general. Children’s views should be analyzed and utilized for policy development. The Children’s Forum should ensure that children from minority groups are represented and can take an active part in the discussion. Regular meetings for discussions are to be held by the Forum for Children. The Task Force in charge of the Strategic Policy will convene a meeting with the Forum for Children on an annual basis to listen to what children have to say with regard to parenting. Every effort should be made to include children’s views on the Strategic Policy in the implementation exercise.

**Policy Actions**

A Forum for Children will be set up within the Office of the Commissioner for Children where children will hold regular meetings to discuss their views on parenting.

The Task Force in charge of the Strategic Policy will convene a meeting with the Forum for Children on an annual basis.

Every effort should be made to include children’s views on the Strategic Policy in the implementation exercise.
'Don’t worry that children never listen to you; worry that they are always watching you'

Robert Fulghum
The Task Force appointed by the Minister for the Family and Social Solidarity will take responsibility for the rolling out of this Strategic Policy. The Task Force will also be responsible for reviewing the Policy in the first quarters of 2019 and 2022.

5.1. Commitments With Timelines for Delivery

Setting up of the Task Force: November 2016
Media campaign: November 2016 to May 2017
Setting up of a computerised system: November 2016 to May 2017
Policy Actions in the Health setting: November 2016 to November 2017
Policy Actions in the Childcare setting: November 2016 to November 2017
Policy Actions in the Education setting: November 2016 to December 2017
Policy Actions in the Justice setting: November 2016 to November 2017
Policy Actions in the Family and Social Solidarity setting: November 2016 to November 2017
REFERENCES


