

CITY OF HELSINKI

Helsinki City Welfare Plan for Children and Youth 2009–2012

Summary

TABLE OF CONTENTS

SUMMARY	3
FOREWORD	4
1. INTRODUCTION.....	5
2. SUMMARY ON THE STATUS OF WELFARE OF CHILDREN AND YOUNG PEOPLE AND THE FUNCTIONALITY OF SERVICES IN 2008.....	7
2.1 THE WELFARE OF CHILDREN AND YOUNG PEOPLE.....	7
2.2 THE FUNCTIONALITY OF SERVICES FOR CHILDREN AND YOUNG PEOPLE	9
3. WELFARE SCHEME FOR CHILDREN AND YOUNG PEOPLE – OBJECTIVES AND LEADING PROJECTS.....	13
3.1 BACKGROUND.....	13
3.2 OBJECTIVES AND OPERATIONS	14
3.3. WELFARE OBJECTIVES.....	15
3.4 LEADING PROJECTS RELATED TO THE WELFARE OBJECTIVES	18
3.5 PROCESS AND RESOURCE OBJECTIVES	22
3.6 PERSONNEL OBJECTIVE	24
4. SCHEME MANAGEMENT, FOLLOW-UP AND EVALUATION	24
5. SUMMARY ON THE CURRENT STATUS OF CHILD AND FAMILY-SPECIFIC CHILD WELFARE AND DEVELOPMENT POLICIES	26

Summary

The reformed Child Welfare Act (L417/2007, Art. 12) obligates the municipality to compile a plan on organising and developing child welfare every council term in order to promote the welfare of children and young people in the municipality. The objective of the Act is to shift the focus of child welfare into prevention, early support and non-institutional care. Child welfare is perceived to be an activity concerning all authorities. The Child Welfare Act (LSL) Art. 12 includes instructions on what information the plan is to include. The purpose of the plan is to be a part of the annual rhythm of operational planning, actualisation and evaluation.

In Helsinki, the plan is named as the Welfare Plan for Children and Youth. According to LSL Art. 12, child welfare is widely perceived to include all branches of administration and services concerning children and young people. The operation suggestions have been drafted with this in mind. The focus of the welfare plan is to develop basic services and early support crossing the borders of the branches of administration in such a manner that the welfare of children and young people will increase, and especially the necessity for placements outside the home will decrease. The Welfare Plan for Children and Youth is linked to the Strategy Programme of Helsinki for 2009 - 2012 that is in preparation, and to the Children's Voice development plan of Southern Finland's Kaste Programme

The Welfare Plan for Children and Youth concerns all Finnish, Swedish and other mother tongue speaking children and young people of Helsinki. The Welfare Plan for Children and Youth includes an operating environment analysis consisting of a) a welfare report on children and young people and b) service descriptions for children and young people and their functionality. In addition, c) child- and family-specific service resources and strategy has been reviewed in the Welfare Plan in accordance with the law. Based on these, the objectives for the Welfare Plan, success factors and leading projects supporting them have been compiled.

The objectives have been divided into a) *welfare objectives*, which refer to the changes expected to occur in the wellbeing of children, young people and parents. To support these, b) *process and resource objectives*, i.e. how we develop our processes in the cooperation between different branches of administration and direct our resources in such a manner that we can achieve the welfare changes in question, have been selected. The third objective entity is c) *personnel objectives*, i.e. how to support the shared competence and work welfare in such a manner that it supports the development of processes in its part.

The welfare objectives for children, young people and families are:

1. The possibilities for the healthy and safe growth of children and young people are improved
2. Parenting and parent participation become stronger
3. The participation and communality of children and young people become stronger
4. An educational and employment path have been secured for children and young people

The process and resource objectives for the operation are:

- Good cooperation and leadership between branches of administration are actualised in the services of children, young people and families
- Children, young people and families have equal opportunities for welfare, independent of the residential area
- Good support for children, young people and families with a multicultural and immigrant background is actualised
- The possibilities of the Internet are utilised more widely in services, and media-critical knowledge is increased

The personnel objective is:

- The competence and work welfare of personnel are improved with the help of shared basic information and forms of cooperation agreed upon: "no one is left alone".

The progress and actualisation of the objectives of the Welfare Plan for Children and Youth are regularly administered and evaluated with the political decision-makers and the branches of administration, in the manner recorded in the plan.

Foreword

The Child Welfare Act (L417/2007, Art. 12) that came in to force in 2008 requires that the municipalities compile a plan, which promotes the welfare of children and young people, and includes operation suggestions for developing and organising child welfare. The Social Director, Paavo Voutilainen, appointed control and preparation groups for the planning work on 20th March, 2008. Representatives of Education, Youth, Health and Social Departments, City of Helsinki Urban Facts and Helsinki University Hospital have participated in the control and preparation groups. In addition representatives of Sports, Culture and Library Departments, the City Museum, Adult Education Centre and Administration and Personnel Centre have participated in the process. Three workshops have been included in the process, where the aforementioned representatives have taken part.

The Welfare Plan for Children and Youth has been worked on since spring 2008 with the help of several different operators. Field workers and also children, young people and families themselves have been widely heard during the work. Public health nurses, playground and day-care centre workers, schools' pupil welfare groups, child welfare and social station workers, child guidance and family counselling centres, issues pertaining to family law and youth station workers and several multi-professional networks (for example Klaari) have produced information on the welfare of children and young people and on the functionality of our services. Children and young people have been heard with the help of different participation channels, questionnaires and surveys (The Voice of the Young in Helsinki, Survey on the Free-time of Children between 3rd and 6th years of school, School Health Questionnaire 2008, Questionnaire Related to the Media Usage of Children and Young People (Second Life Project) and a questionnaire implemented for young people in child welfare). In addition, a questionnaire targeted at parents has been available on the wellsinki.fi pages of the Welfare Plan.

During the preparations of the Welfare Plan for Children and Youth, two night schools have been held, of which the first one (19th March, 2008) was participated by members of the boards of Education, Youth, Social and Health and the last one (28th February, 2008) also by the Sports board.

Control Group:

Metsälä Raili, Family Service Director, Chairperson
(until 2nd February, 2009)
Lounatvuori Sisko, Manager of Family Centre Activities
(from 2nd February, 2009)
Siurala Lauri, Youth Department Director, Vice-chairperson
Substitute, Naalisvaara Kari, Department Manager
Hulkkonen Helinä, Adult Service Director
Iivanainen Antti, Director of Health Stations
Substitute, Viitala Hanna, Manager of School and Student Healthcare
Järvenkallas Satu, Day-care Director
Substitute, Lakkavaara Hannele, Early Education Manager
Salo Outi, Line Manager
Substitute, Grönholm Niclas, Education Manager
Ylitalo Veli, Assistant Director of the Income Unit, Helsinki University Hospital
Hussi Taina, Secretary

Preparation Work Group:

Lounatvuori Sisko, Manager of Family Centre Activities, Chairperson
Hallantie Merja, Pupil Welfare Manager
Substitute, Grönholm Niclas, Education Manager
Kalmari Hanne, Child Guidance and Family Counselling Centre Director, temporary office-holder
Lavinto Ritva, Day-care Area Manager
Maikkula Irma, Leading Development Consultant
Palviainen Leila, Social and Economic Support Manager,
Substitute Kuusisto Tuula, Western Social Station Manager
Poteri Martti, Office Manager
Substitute, Taponen Harri, Special Designer
Repokari Leena, Chief Physician, Helsinki University Hospital,
Substitute, Lappi Kari, Assistant Chief Physician
Rissanen Pirjo, Foster Care Manager
Stenvall Elina, Researcher
Ylikahri Kati, Head Nurse,
Substitute, Ahlblad-Mäkinen Nina, Head Nurse
Hussi Taina, Secretary

The service descriptions of children and young people have largely been worked upon in each branch of administration. A warm thank you to all the parties that took part in the cooperation!

The persons involved in the preparation of the Welfare Plan for Children and Youth especially wish to thank the deceased Family Service Director Raili Metsälä. Her contribution to the completion of the Welfare Plan for Children and Youth was significant.

1. Introduction

The reformed Child Welfare Act (L417/2007, Art. 12) that came in to force in 2008 requires that the municipality or municipalities compile a plan together on how the welfare of children and young people will be promoted, and how child welfare services are organised and developed. The objective of the reformed Act is to transfer the focus of child welfare into prevention, early support and non-institutional care. The mission concerns the entire field of services for children and young people, which requires the creation of a novel kind of cooperation.

In the Act in question, child welfare is defined widely, as an operation concerning all authorities. Child welfare is

- 1 promoting the wellbeing of children by developing the growth environments, and by supporting children and parents in basic services and community planning.
- 2 developing preventive services in order to support parenting. Preventive services are the special support given in basic services, which is already targeted and tailored for special needs.
- 3 child and family-specific child protection, which includes the analysis for the need of child protection measures, support activities for non-institutional care, taking into custody, urgent placement, foster care and after-care.

In the plan, the municipality is to show how the services are organised and resourced. According to the Child Welfare Act, the plan is to include information on:

- the growth conditions and status of wellbeing of children and young people
- the operations and services to promote the welfare of children and young people and to prevent problems
- the necessity of child protection in the municipality
- the resources to be reserved for child welfare
- the child welfare service system to be used in order to accomplish the missions pursuant to the Child Welfare Act
- organising cooperation between different authorities and communities producing services for children and young people, and
- the implementation and monitoring of the plan

The plan has several different functions. Its objective is to give a better overall conception than before on the growth conditions of children and young people, and the usable and necessary resources in Helsinki, to the municipality's decision-makers, the actual service providers and the people of the municipality. In addition, it is a shared agreement between the branches of administration on which direction the services of children and young people are to be developed in the cooperation between the multiple branches of administration. The shared objectives of the branches of administration have been recorded in the plan, as well as the operations with which the objectives in question are striven to be obtained.

The plan is a strategic document of the municipality; it is to be taken into consideration when compiling the budget and economic plan of the municipality. A child welfare plan is to be compiled for every council period, and it is to be inspected at least once per council period. A management and evaluation plan is to be compiled for the plan. In Helsinki, the document is named as the

Welfare Plan for Children and Youth. Securing the welfare of children and young people from the perspectives of basic, preventive and reconstructive services is discussed within. In addition, the resources and service strategy of child and family-specific child welfare are considered in more detail in the Welfare Plan. This volume is a summary of the actual Welfare Plan for Children and Youth.

2. Summary on the Status of Welfare of Children and Young People and the Functionality of Services in 2008

Summaries from chapters 2 and 3.

2.1 The Welfare of Children and Young People

The welfare of children and young people has been considered by utilising several different sources of information. These are for example: The population and living condition information produced by the City of Helsinki Urban Facts, information from the branches of administration, mostly concerning the usage of services, several different studies and surveys. Children, young people and parents have also produced subjective information from the wellbeing that they experience. In addition, several parties working with children and young people have discussed the welfare of children and young people that they can perceive through their work. The following factors have been summarised below, based on the welfare report on children and young people, which describe the status of welfare in 2008:

Strengths

Compared on an international level, Helsinki has a relatively balanced city structure, even though when examining with positive discrimination (PD) meters, differences between areas can be found. In the last few years, the moving of families with children has been centred inside the city limits, instead of moving into neighbouring municipalities. A new positive phenomenon is the increase in the amount of children in the central city area.

The employment of families with children has improved, and the employment rate of young people is good as well. The income level of families with children has partially improved. However, from 2009, the situation is likely to weaken.

Compared on an international level, babies are born very healthy. Children and childhood are valued increasingly in families. From the perspective of field workers the role of fathers in families has strengthened as an increasingly equal care-giver and guardian. More and more parents talk about their worries openly, and can seek help when needed. The mutual peer support of parents has increased in the area.

The majority of primary school aged children mentioned that their own parents are safe immediate adults, and they are easy to reach. They feel that their everyday life is mainly meaningful and they say to be doing well. The majority of primary school aged children actively take part in hobbies as well, and they have friends.

The health behaviour of young people has also improved: increasingly more are sober or consume only a little alcohol, get enough exercise and are healthy. Drug experimentation by young people has also decreased. Sixth formers especially say to be feeling rather well. On average, crimes committed by young people have decreased.

Problematic areas

The amount of children in Helsinki will decrease, as the population ages. The high living costs and tightness of living also influence the number of children. The challenge is to maintain Helsinki as attractive to families with children.

Based on the feedback from different operators, the concern is the exiguity of shared time between children and parents, which is influenced by, for example, the difficulty of combining work and family and the time that children spend doing hobbies. The welfare of families with children appears to become differentiated. The increase of poverty (low income) in families with children, and especially the poverty of single parents and families with immigrant backgrounds is connected to it. In addition, the amount of substance abuse problems will increase, as well as their reflection on children and young people. The increase in mental health problems and the insufficiency of treatment is also a significant phenomenon of ill-being. The amount of difficult and lengthy custody disputes, which in extreme cases are harmful to the child, has increased in the past few years. The experiences of violence have increased in the city environment as well.

The necessity for child welfare and the necessity for mental health treatment have increased throughout the entire 2000s. Based on the Sextet¹ information, in 2007, 7 % of those under 18 were within child welfare, which is equivalent to the average level of the Sextet cities (7 %). Based on the information from the National Institute for Health and Welfare, the largest percentage of children placed outside home was in Helsinki (2.3 %), whereas in Vantaa there was a significantly smaller percentage of them (1.5 %), and in Espoo (1 %) even below the national level (1.2 %). The figures for Kauniainen are so small, that for confidentiality reasons they are not published.

Figure 1. 0-17-year-olds placed outside the home, % of the population of equivalent age in the metropolitan area in 2007 (Source National Institute for Health and Welfare SOTKANet's indicator information bank)



¹ In the comparisons of the Sextet municipalities, the customer definitions differ from the definitions used in the internal compilation of statistics of Helsinki. For example, the children and young people placed in shelter homes are missing from the figure.

The amount of children and young people with immigrant backgrounds is increasing considerably. What new needs and factors to be taken into consideration are born from this, and how do we prepare ourselves for them? How do we support development in such a manner that it will be a positive resource? How do we ensure that multicultural families will begin to feel integrated better than before?

The “invisible risk children” are the concern for the field workers: an increasing number of pregnant mothers smoke, and approximately 6 % of pregnant mothers are serious drug abusers. Only a limited amount of health information has been compiled from small children, the general status of welfare is hard to monitor. We know that obesity in children is increasing. In the metropolitan area, the thinness of social networks and the loneliness of families is a problem for several families. Not everyone has resources to create networks with other families. The mental health and substance abuse problems of parents have increased, but treatment is disproportionately available.

The spending of free time of primary school aged preadolescents seems to transfer increasingly to, for example, shopping centres. Some of the children have a highly scheduled and performing lifestyle, and in relation there is a lot of experience of tiredness and haste. Some of the children seem to be experiencing rather severe performance pressure. Family form and income level influence, for example, the possibilities for hobbies that a child has. For instance, the children of single parents mention having to quit a hobby for financial reasons more often than others. Drug experimentation has started earlier than before, and girls especially begin to smoke early. The problems related to new media (for example facing detrimental material, bullying) become apparent for increasingly more children.

The welfare of young people appears to become differentiated. The health and health behaviour of vocational school students is considerably weaker than for sixth formers. Dropping out of school is a serious risk of social exclusion. Approximately 300 young people are left without a secondary education placement to study after comprehensive school every year. Young people showing serious psychological symptoms have also increased alarmingly, which appears as an increase especially in juvenile aged custodies and the necessity for psychiatric treatment. The serious presentation of psychological symptoms for boys is often strongly visible outside, with girls it is most often self-destructiveness. In relation to the young people with immigrant backgrounds, there are challenges of various levels, such as difficulties related to education, employment and living.

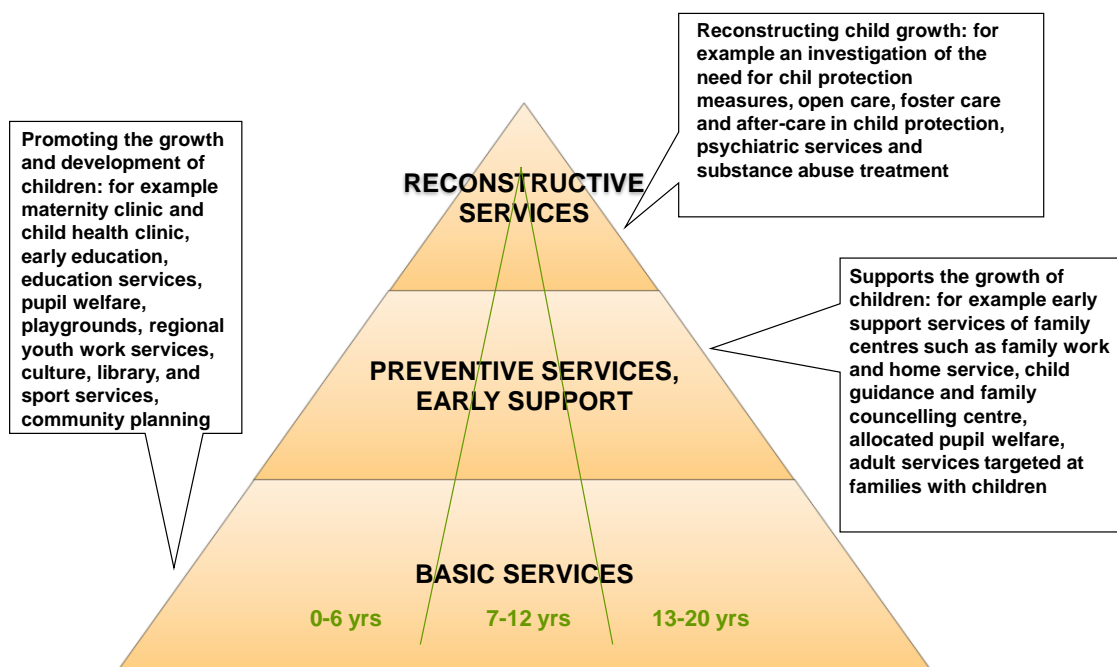
2.2 The Functionality of Services for Children and Young People

The services for children and young people have been presented according to the “welfare entity” analysis, dividing them into basic services, preventive and early support services and reconstructive services. The basic services refer to the services meeting the needs of the entire age group, such as child health clinic operation, day-care or education. Preventive services and early support are for specific target groups, support allocated at a specific child’s or family’s need, such as family work. Reconstructive services, as the name suggests, provide support to reconstruct a child’s growth and function as the last support, such as child-specific child protection or psychiatric treatment. For the clarity of the analysis, the limits have been drawn rather strictly, but

in reality several elements are found in the same services. The services are described by age groups, as the service structure is a little different for children of different ages as well.

The foundations for children and young people's welfare are good basic services targeted at everyone, in addition to which allocated preventive and reconstructive operations are required. It is important to maintain a balance between these services, and to take care of the functionality of basic services in such a manner that the necessity of reconstructive services is decreased in the long run. Based on the operating environment analysis, below are the summaries on how the services for children and young people appear in 2008.

Figure 2. The entity of services for children and young people in Helsinki



Services for Children, Who Are Under School Age (0-6 Years)

The services for children, who are under school age are a well-functioning entity according to the feedback from different operators. In basic services, multi-operator family training has been initiated successfully, and the challenge for the future is to embed it as an operation method for the entire city. The merits of the model are both versatile parenting support and enabling peer support, and the regional management structures for operators. Playground operation and early support projects allocated for families with small children are also given praise. Their supply (for example open operation, peer groups) is perceived to be of good quality, and cooperation with different operators is functional. Early education is of good quality as well, and the parenting partnership to be implemented with parents is considered to be functioning well. The health inspections for 3-5-year-olds are praised. They cover the children of their age group well, and the cooperation between the health centre and day-care is perceived to be functional.

What is seen as a challenge is how to increase customer work meeting the needs of the child. This is partially a question of resourcing, and partially a question of work arrangements. Meeting the needs of the child would enable better early support as well.

The needs of families with babies and small children are well taken into consideration in special services (child guidance and family counselling centre, Sofia's interaction unit, etc.), although the queues for mental health services and the overload of child protection have an influence on the quality and availability of some of the services.

Therefore, it is very important for the future that the welfare of the children in this age group and their families is secured. Families especially who are poor and in risk situations are to be taken into consideration.

The development challenge in relation to the monitoring of welfare is the gathering of welfare information on children, who are under school age. Currently there is virtually no information available in a coherent form, even though an abundant amount of child-specific information is produced. Secondly, the care of families with mental health and substance abuse problems, and taking children into consideration in such situations, is in need of developing. Those parents, with mental health problems who cannot be admitted into the care of psychiatric outpatient clinics, are a special challenge. In addition, the availability and continuity of substance abuse treatment is perceived to be uneven.

Services for Children (7-12 Years)

In Helsinki the education services are of good quality and versatile. Compared nationally, pupil welfare is relatively well resourced, and the operation of pupil welfare groups is well-established. Attention has been especially paid to the transition phase of preschool and comprehensive school, so that children requiring special support become noticed in the education system as early as possible. First and second year pupils are provided an extensive variety of afternoon activities.

There are also various possibilities for hobbies for children. The Cultural Department organises versatile art education for children and cooperates, for instance, with schools. Children use sports services a lot as well, and there are versatile sports opportunities for children of different ages and for families. Cooperation with sports organisations is close. In addition, library services have been developed, taking the needs of children of different ages into consideration.

The development challenge is the so-called group of those who fall in between, i.e. children between third and sixth year of school, who are no longer a part of playground activities, but who are not exactly the target group for youth clubs. For this age group, the objective is to develop meaningful free-time activities for the children in a so-called social exclusion risk in such a manner that operation planning occurs together with the children. The second challenge is poor families with children, who have no financial resources to pay for hobbies that cost money for their children. Free-time activities are striven to be taken to areas for the reach of these children as well.

In addition, it has come to light that the parents of school aged children and young people do not receive support to the same extent as in the baby and small child phase. However, puberty

especially is a phase when families mention they are in need of support – knowledge about the phases of development, instructions and help for parenting, and peer support between parents.

In relation to reconstructive services, the lack of resources is also shown in this age group, i.e. both the availability and quality of mental health and child welfare services suffers. Support and multi-professional cooperation for children with difficult psychological symptoms are perceived as lacking. There are still children placed in child protection institutions who are primarily in need of psychiatric treatment. Further development is needed in the cooperation between social and health care, so that children and families would receive support at the right time and in a coordinated manner.

Services for Young People (13-20 Years)

The education services are of good quality and versatile both in the final phase of comprehensive school and in secondary education. There are various choices available for young people in education, but also the needs for special groups (for example multicultural young people or those in need of special education) have been able to be taken into consideration. In vocational education, there are still too few starting places in relation to the age group finishing comprehensive school, despite the increase in number of placements. The challenge in the near future is to find an education place or place of employment for all young people after comprehensive school, and to support the students whose readiness or motivation for studying is lacking, in the beginning phase of secondary education.

Pupil and student welfare service is perceived to be of good quality as such, but young people have expressed a wish for more services, as their availability is partially perceived as difficult. The possibilities for hobbies for active, economically well-off young people are good, and also the Youth Department offers a multiple supply of activities. For those who are worse-off economically, the possibilities for hobbies are narrower.

Young people mention a need for more opportunities to be influential both in school student bodies and through the regional Ansa operation. Young people perceive the information on services as lacking. In addition, improvement on the availability for summer jobs is wished for.

In the service entity, the largest challenges are in young people, who are socially worse-off and show psychological symptoms. The amount of young people showing psychological symptoms is growing, and for example the number of users of young people's psychiatry and child protection have been growing significantly throughout the entire 2000s. The forms of help are also found lacking. The traditional operation and care methods in child welfare or mental health services do not produce results for all young people, and new, comprehensive and multi-professionally realised forms of helping are needed.

There are about 300 school drop-outs after comprehensive school every year, and the amount of people discontinuing secondary vocational education is high, but active multi-professional support and guidance for drop-outs is still lacking. There are not enough preventive services and early support available in relation to the need. In this field, the existing forms of operation, Klaari that is doing substance abuse prevention work, and the multi-professional Luotsi operation that supports young people showing psychological symptoms, are perceived as good.

3. Welfare Plan for Children and Youth – Objectives and Leading Projects

3.1 Background

The main objective for the Welfare Plan for Children and Youth is to support the welfare of all the children and young people of Helsinki and their families in the years to come. The plan covers Finnish and Swedish children and young people as well as those with immigrant or multicultural backgrounds. Central to securing the welfare of children and young people are their parents and home.

Looking from both the viewpoints of children and young people as well as services, what is relevant is how the welfare of families and the growth and development of children and young people is secured in such a manner that they become as early as possible and sufficiently supported with the help of basic services and early support. Currently, the mental and social ill-being of an increasing number of children and young people is culminated as a necessity for child protection. The responsibility for securing welfare is divided between all the branches of administration producing services for children and young people in such a manner that there would be no need for child and family-specific child protection.

Based on the operating environment analysis, various thematic challenges arise, which are to be addressed more strongly than before. The ill-being of children, young people and families with children is often connected to mental health problems, substance abuse problems, poverty in families with children, health problems, problems for immigrants integrating in to society or other issues related to multiculturalism. Increasingly more often, various factors of ill-being are accumulated upon a specific group - children, young people and families with children, which leads into a divergence development in welfare (polarisation). In the life span of children and families, these problems appear and are contextualised in slightly different ways.

From the viewpoint of the service entity securing the welfare of children and young people, it is important how children, young people and their families can be supported in a multi-professional and overall manner at the earliest stage possible. Strategies for prevention and early support are to be developed further into the existing service gaps and into new arising challenges where we will need further effort. In addition to various municipality operators, non-governmental organisations and other third sector actors are needed to take part.

When looking at the age-specific issue, the important contexts become, in addition to the *home*

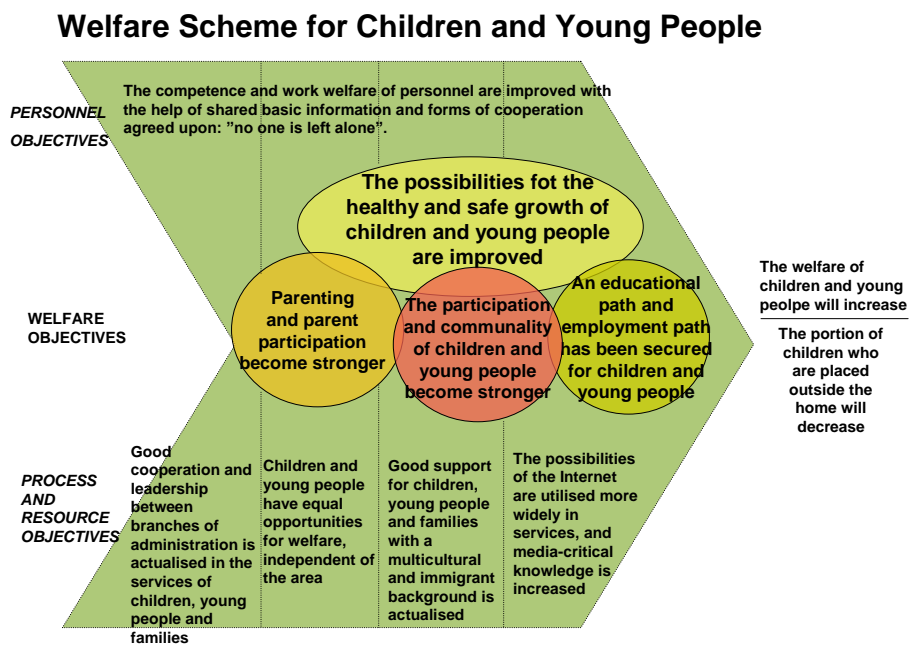
- child health clinics and playgrounds for families with babies,
- child health clinics, playgrounds and day care for small children, and
- schools, afternoon activities, and club and hobby activities, where almost the entire age group is met, for school-aged children.
- Internet, the world of networks, is a forum where children and young people spend an increasing amount of their time.

3.2 Objectives and Operations

The objectives for the Welfare Plan for Children and Youth have been chosen based on the operating environment analysis made as a part of the plan. The objective is to improve the general welfare of children and young people in Helsinki, and to lessen the necessity for child protection considerably, in such a manner that the amount of children placed outside the home will decrease. This is also a national objective related to the KASTE Programme, which is based on the concept that the necessity for foster care is an indicator, which not only describes the social situation of children and families, but also the functionality of the entire service system, and the ability to support the growth and raising of children.

The objective is that in the long run Helsinki will approach the level of Vantaa in the proportion of children placed outside home. Inside the foster care, the decrease in care places will be allocated to institutional care. In order to achieve the decreasing objective, it is central to develop other services in all levels, i.e. in basic services, preventive services and early support work forms, and in reconstructive services, including child and family-specific child protection.

Figure 3. The structure of the Welfare Plan for Children and Youth



The objectives for the Welfare Plan have been divided into three levels. The welfare objectives refer to the changes expected to occur in the wellbeing of children, young people and parents. To support these, process and resource objectives, i.e. how we develop our processes in the cooperation between different branches of administration and direct our resources in such a manner that we can achieve the welfare changes in question, have been selected. The third objective entity is personnel objectives, i.e. how to support the shared competence and work welfare in such a manner that it supports the development of processes in its part

The welfare objectives for children, young people and families are:

1. The possibilities for the healthy and safe growth of children and young people are improved
2. Parenting and parent participation become stronger
3. The participation and communality of children and young people become stronger
4. An educational and employment path has been secured for children and young people

The welfare objectives are to seek the effectiveness of the actual Welfare Plan. The welfare objectives are striven to be focused in such a manner that they can be genuinely promoted in the cooperation between branches of administration. It is not possible to respond to all of the arisen needs, but the purpose is, by allocating resources, to secure the actualisation of the objective prioritised as the most important ones and the actualisation of the leading projects. The welfare of children and young people is striven to be promoted in the plan from the perspective of the entire service entity (basic services, preventive services and early support, as well as reconstructive services), and taking the different needs of different age groups into consideration.

1-2 success factors have been appointed for each welfare objective, which are perceived as relevant in achieving the objective. Each success factor has 1-2 leading projects, which are concrete operations to be executed using multiple branches of administration, in order to achieve the objectives. Despite the leading project term, the operations are meant to be permanent, constructive changes, if they prove to be successful. No internal operations of the branches of administration have been recorded in this plan; it is focused on cooperation between the branches of administration.

The leading projects partially include new operations in project form, which are striven to be taken into basic practices through development work. A part of the leading projects are in basic work, developing cooperation practices and processes, i.e. in executing the existing forms of work in another way.

3.3. Welfare Objectives

I The possibilities for the healthy and safe growth of children and young people are improved

Two success factors have been chosen for this objective. The first important starting point is *to add low threshold help and early support in the activity environments of children and young people*, i.e. where children and young people are daily. The leading projects are allocated by age groups, according to different needs. Multi-professional early support is developed for under school-aged children and their families in the child health clinics and day-care, and for school-aged children and their families in the school environment, and especially for the young people on the Internet. The target group is the entire age group. A special project is the promotion of sexual health and preventing violence against children and youth. Low threshold sexual health services and counselling that also takes into account the needs of boys are developed. Cross-departmental professional training is organised on the prevention and identification of sexual abuse. Care pathways are created for children who are victims of violence.

Developing multi-professional support is also connected to developing cooperation and shared leadership into the areas.

The other success factor is allocated to reconstructive services. A challenging group is young people showing difficult psychological symptoms, who are customers of child welfare, youth psychiatry, and who have great difficulties for example in their schoolwork. What is relevant is *bringing services at the right time and in an increasing amount to the activity environments of children and young people as well*, which has been perceived to add to the effectiveness of the work. For example, in relation to child protection and youth psychiatry, the new approach emphasises both intensive support for young people in peer groups (Kaste Programme) and in child protection, intensive support given directly at home. Attention is paid to the comprehensiveness of the support, by means of multi-professional cooperation, instead of support and treatment fragmented in different parties.

II Parenting and parent participation become stronger

The most important securers of the welfare of children and young people are their own parents. Parenting support is well available in the pregnancy and baby phase, but the amount of support decreases significantly as the children grow. Puberty in particular is a phase when the necessity for parenting support is apparent. In relation to this objective, the success factor is *to increase multi-operator parenting support and peer support in basic services and reconstructive services during the different phases of families, childhood and adolescence*. Low threshold parenting support allocated to the entire age group is especially developed in connection with the schools, in their age group to all early pubescents and their parents (Kaste Programme). The different needs of families, such as divorced families, are also taken into consideration.

Parents especially suffering from mental health and substance abuse problems are taken into consideration in the reconstructive services. These reasons are the most common factors causing the necessity for child protection. Currently, from the parents who have mental health problems, the ones falling in between are those whose diagnosis is not “sufficient” for receiving psychiatric treatment. In the cooperation between the branches of administration, means are sought for securing the treatment of these parents. The second emphasis is on developing the overall family care of parents with substance abuse problems and their children in a versatile manner.

III The participation and communality of children and young people become stronger

An important factor for the balanced growth of children and young people is the communality of their growth environment, and to what extent the children and young people feel to be participating in their communities. Communality is discovered to be connected to, for example, the mental health of girls and committing crimes for boys. The success factor is chosen to be *the development of interactional and emotional skills to become the resource for a balanced growth of children and young people*. Children and young people have different possibilities for being involved in hobbies and self-actualisation, for example due to the wealth of the parents. The operations are the development of various free-time and holiday time activities for school-aged young people, especially in the areas that are socio-economically weaker. In addition, the age group falling in between, children between 3rd and 6th years of school and the needs for multicultural children and young people are taken into consideration.

Furthermore, the operation also includes increasing cultural and art activities in the education of schools, which will increase the development of children's interactional and emotional skills. The target group is the entire age group.

The other success factor is *Taking the ideas of children and young people into use in designing services*, with which the influencing possibilities of children and young people are wished to be increased, both in their residential areas and in designing the services allocated to them.

IV An educational and employment path has been secured for children and young people

Dropping out of school is one serious risk of social exclusion in the life span of a child and young person. Every year, approximately 300 young people are left without a place to study after comprehensive school in Helsinki. The success factor is chosen to be *the active prevention of dropping out of school in different phases of the educational path*. In comprehensive schools, attention is paid to the development of the operation culture and the learning environment in schools and to the support of young people with immigrant backgrounds.

In relation to those who are left without a place to study after comprehensive school, the chosen emphasis is to develop different operational methods in order to reach these young people and to guide them into education. Also in secondary vocational education, the amount of drop outs is high. The chosen emphasis is to support those young people who are at risk of dropping out with various means, and to guide those who have already dropped out back into education.

Figure 4. Success factors in the service entity

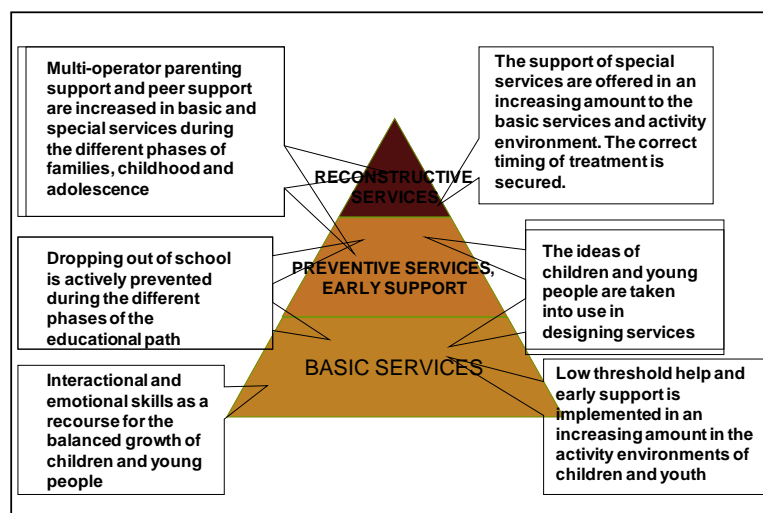
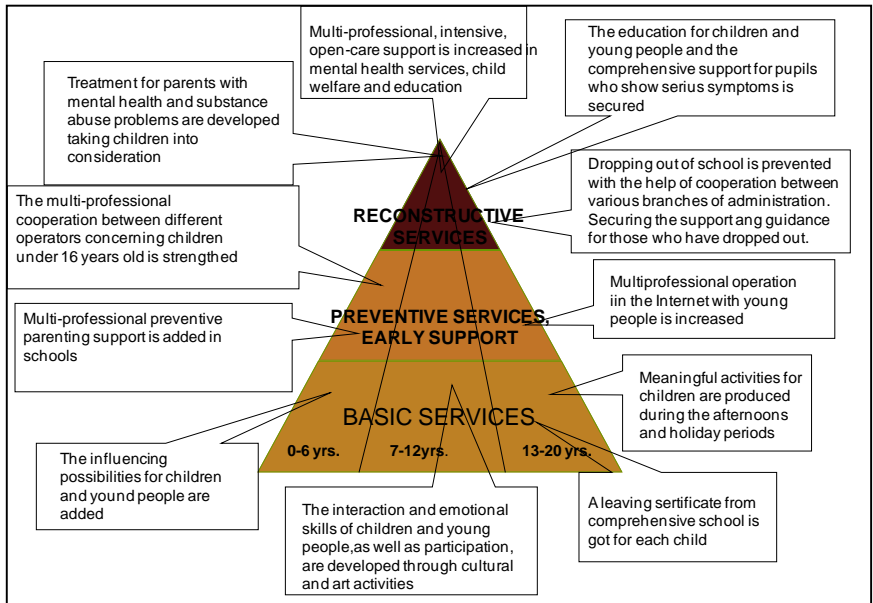


Figure 5. The placement of leading projects into the service entity and different age groups



3.4 Leading Projects Related to the Welfare Objectives

Welfare Objectives:

OBJECTIVE I: THE POSSIBILITIES FOR THE HEALTHY AND SAFE GROWTH OF CHILDREN AND YOUNG PEOPLE ARE IMPROVED		
Success factor: <i>Low threshold help and early support is realised in an increasing amount in the activity environments of children and young people</i>		
LEADING PROJECT 1: Strengthening the multi-professional cooperation between different operators concerning those who are under 16 years old. Functional healthcare services for youth are essential in the prevention of future health problems.	DESCRIPTION: 1.1 Developing multi-professional service entities in the services for preschool-aged children and their families, as well as leadership and cooperation projects. The objective is to intensify early support in the services for preschool-aged children. The examples are the actualisation of social guidance in day-care, starting cooperation on the inspection of 4-year-old children between the day-care and the health centre, and in addition developing regional leadership projects based on the family network model. Methods for supporting the children and young people in divorced families are developed. Changing the calculation factor for those who turn 3 in day-care two times a year, 1 st January and 1 st August. Day-care groups are striven to be made smaller. 1.2 Developing multi-professional service entities in the services for primary school-aged children, as well as leadership and cooperation projects.	Responsibility: <u>Social services</u> Health Centre, Education Department Responsibility: <u>Education</u> <u>Department,</u>

	<p>Intensifying early support in connection with the schools. In addition, regional cooperation and leadership structures in multiple branches of administration are created. In relation to structures, the family network model developed in connection with family training is utilised. The entity includes a research project on the necessity and adequacy of pupil welfare.</p> <p>The daily presence of public health nurses in schools is increased. Also school social worker and psychologist services should be readily available. New contact methods such as phone or web based services should be developed.</p> <p>A mission description for those visiting homes is reintroduced (Bachelor of Social Services, polytechnic) generally, when necessary. Substance abuse prevention work is strengthened to reduce smoking and the use of intoxicants.</p> <p>1.3 The work to prevent violence against children and youth is strengthened. Care paths are developed for sexually abused children and youth, new models are developed for identifying victims of sexual abuse.</p>	<p>Social Services, Health Centre, Youth Centre</p>
<p>LEADING PROJECT 2: Increasing multi-professional operation on the Internet with young people</p>	<p>2.1 Starting, intensifying and expanding the cooperation between the Netari network youth house, network health care and social work on the Internet. Possibly the participation of other operators in multi-professional cooperation. Taking also the needs of Swedish speaking and multicultural young people into consideration in development work.</p>	<p>Responsibility: Youth Centre, Social Services, Health Centre</p>
<p>Success factor: <i>The support of special services are offered in an increasing amount to the basic services and activity environments of children and young people, and the correct timing of treatment is secured</i></p>		
<p>LEADING PROJECT 3: Multi-professional intensive support is increased in mental health services, child welfare and education. An early stage care path is needed for children and youth with mental health problems.</p>	<p>DESCRIPTION: A functioning entity of forms of support are developed and implemented, with whose interaction, the necessity of foster care and special health care is striven to be reduced.</p> <p>3.1 Initiating a multi-professional intensive method, which combines therapeutic, rehabilitative and operational methods in order to rehabilitate a young person showing difficult psychological symptoms. The Kaste Programme</p> <p>3.2 A fast intervention family work is taken into practice, whose objective is to offer intensive help into the home quickly, in a situation where the interaction between the young person and the parent is in serious conflict, and there is a risk of taking the young person into custody.</p> <p>3.3 The organisation of mental health services for children and young people are clarified in such a manner that the treatment responsibilities of psychiatric treatment, child guidance and family counselling centre, and children's foster care are defined, and low threshold mental health services are intensified. The objective is supported by, among others, the regional work of children's and youth psychiatry, expanding the customer work of the child guidance and family counselling centre to adolescents and their families, and the research project for pupil welfare (leading project 1.2).</p> <p>3.4 The placement of children in custody primarily into families is secured. When taking children into care and placing in custody it is</p>	<p>Responsibility: Social Services, Health Centre, Education Department, Youth Centre, Hospital District of Helsinki and Uusimaa</p> <p>Health Centre, Social Services, Hospital District of Helsinki and Uusimaa</p>

	secured that small children are not be placed in institutions unless there are health conditions that require institutional care. Small children are to be primarily placed into families.	
LEADING PROJECT 4: Securing the education for children and young people and the comprehensive support for pupils who show serious psychological symptoms and who are in particular danger of social exclusion	<p>4.1 Developing a multi-professional model for pupils showing serious psychological symptoms in order to support studying in joint classes and in supported special classes. The operation of classes and making and executing the pupil's learning and rehabilitation plans are supported multi-professionally.</p> <p>4.2 Creating multi-operator operation methods in relation to those pupils who are unable to study in a group at all and who have been directed to the temporary special arrangements of education. Securing the comprehensive support and its actualisation for these students.</p> <p>4.3 Securing the school attendance of children and young people who are in the child welfare institutions of the city of Helsinki, and who show serious psychological symptoms.</p>	Responsibility <u>Education Department</u> , Social Services, Health Centre, Hospital District of Helsinki and Uusimaa

OBJECTIVE II: PARENTING AND PARENT PARTICIPATION BECOME STRONGER		
Success factor: <i>Multi-operator parenting support and peer support are increased in basic and special services during the different phases of families, childhood and adolescence</i>		
LEADING PROJECT 1: Adding multi-professional parenting support in connection with schools that utilise the family network model	DESCRIPTION: <p>1.1 Creating a Kvartti preparing model, whose objective is to offer both informative support and possibilities for peer support for the parents. The operation is actualised as multi-professional cooperation in connection with schools. The Kaste Programme.</p> <p>1.2 Family group conference as a work form will be established</p>	Responsibility: <u>Social Services</u> , Health Centre, Education Department, Youth Centre
LEADING PROJECT 2: Developing treatment for parents with mental health and substance abuse problems, while taking children into consideration	<p>2.1 Discovering the means, with which the treatment of parents with mental health problems can be secured. Taking into particular consideration those parents who do not meet the criteria for psychiatric special health care. Taking the children into consideration in mental health treatment.</p> <p>2.2 Developing models in order to secure the treatment of parents with substance abuse problems and their children as a whole family treatment. The targets for development are especially detoxification and the day rehabilitation of family rehabilitation.</p>	Responsibility: <u>Health Centre</u> , Social Services, Hospital District of Helsinki and Uusimaa Responsibility: <u>Social Services</u> Health Centre
OBJECTIVE III: THE PARTICIPATION AND COMMUNALITY OF CHILDREN AND YOUNG PEOPLE BECOME STRONGER		
Success factor: <i>Interactional and emotional skills as a resource for a balanced growth of children and young people</i>		
LEADING PROJECT 1: Producing meaningful activities for	DESCRIPTION: <p>1.1 One interesting hobby is striven to be secured for each child and young person, independent of the socio-economical situation of the parents.</p> <ul style="list-style-type: none"> • Creating models to offer hobby activities equally for all 	Responsibility: <u>Youth Centre</u> , <u>Education Department</u> , Social Services, Cultural

<p>children and young people during the afternoons and holiday periods</p>	<p>children and young people as a cooperation between the branches of administration.</p> <ul style="list-style-type: none"> • Hobby and club activities to be offered during the afternoons are developed for those between 3rd and 6th years of school in all residential areas, as a cooperation between the children, parents, branches of administration and organisations, especially listening to the children themselves. The needs of special pupils are taken into consideration. <p>1.2 Holiday period and summertime activities are developed in cooperation between the branches of administration and organisations.</p>	<p>Office, Sports Department, City of Helsinki Urban Facts <u>Education Department</u>, Youth Centre Cultural Office, Sports Department, Library, Social Services <u>Youth Centre</u>, Education Department, Cultural Office, Sports Department</p>
<p>LEADING PROJECT 2: The interaction and emotional skills of children and young people, as well as their participation are developed through cultural and art activities</p>	<p>2.1 Compiling a cultural education plan for children and young people. The cultural supply is increased to be used by the pupils and in teaching, as a cooperation between the city's own cultural institutions, different cultural operations and schools.</p>	<p>Responsibility: <u>Cultural office</u>, Education Department, Library, Youth Centre and Sports Department.</p>
<p>Success factor: <i>Taking the ideas of children and young people into use in designing services</i></p>		
<p>LEADING PROJECT 3: Increasing the influencing possibilities for children and young people</p>	<p>DESCRIPTION:</p> <p>3.1 The Ansa activities, which support regional youth activity and influencing possibilities are developed and intensified as a part of the Voice of the Young in Helsinki operation. The emphasis is on developing both the regional and city level influencing channels linking to, for example, the leadership structures to be developed in the areas.</p> <p>3.2 Adding the ways that children and young people can participate in designing the services concerning them. Developing an interaction designing model for the use of the branches of administration.</p>	<p>Responsibility: <u>Youth Centre</u>, Education Department</p> <p><u>Youth Centre</u>, with other branches of administration as partners</p>

<p>OBJECTIVE IV: AN EDUCATION AND EMPLOYMENT PATH HAS BEEN SECURED FOR CHILDREN AND YOUNG PEOPLE</p>		
<p>Success factor: <i>Dropping out of school is actively prevented during the different phases of the educational path</i></p>		
<p>LEADING PROJECT 1:</p>	<p>DESCRIPTION: 1.1 The operation culture and learning environments of the school are</p>	<p>Responsibility:</p>

<p>A leaving certificate from comprehensive school is obtained for each compulsory education-aged child</p>	<p>developed especially in the upper years of comprehensive school multi-professionally, by for example intensifying interaction abilities and participation, and by interfering in the absences of pupils by utilising multi-professional cooperation.</p> <p>1.2 The educational services, and integration services are developed for those young people coming into Finland at the ages of 13 to 16 in cooperation with different branches of administration.</p>	<p><u>Education Department</u>, Youth Centre, Social Services, Health Centre</p> <p><u>Education Department</u>, Social Services, Health Centre, Heke</p>
<p>LEADING PROJECT 2: Dropping out of school is prevented with the help of cooperation between various branches of administration, and securing the support and guidance after comprehensive school for those who have dropped out of school</p>	<p>DESCRIPTION:</p> <p>2.1 Developing versatile support operations for secondary education, in order to prevent students from discontinuing their studies, especially in the early phases of education, as cooperation between the different branches of administration. Developing models, with which a) the students who are in danger of discontinuing are identified, gratuitous absences are prevented, and they are supported to continue their studies, and b) supporting and guiding those young people, who have already discontinued their studies. (In the Tsemppari Project, the Timeout Guidance Model for Young People is utilised, which is already in use in Helsinki for those who have dropped out of the army.)</p> <p>2.2 Operational methods are developed, with which the young people who have left without a place to study are supported, guided into education and other necessary services. Every year, approximately 300 young people are left without a place to study after comprehensive school. Includes a report on the target group, and the development of support actions in the cooperation between the branches of administration. During the council period, three new areas are included into the Luotsi youth outreach work.</p>	<p>Responsibility: <u>Health Centre</u>, Education Department, Personnel Department, Youth Centre, Social Services</p> <p><u>Personnel Department</u>, Education Department, Youth Centre, Health Centre, Social Services</p>

3.5 Process and Resource Objectives

- 1 Good cooperation and leadership between branches of administration is actualised in the services of children, young people and families
 - In all branches of administration, cooperation is conducted with children as the priority and through their needs by crossing sector borders and actively removing cooperation obstacles (compiling guidelines connected to the cooperation, developing and securing consultation practices occurring with different parties).
 - Parents and other adults in families are included in the planning and execution of welfare services for their children and youth together with city employees.

- The general management of services concerning children and young people is secured. Developing local regional cooperation networks further and defining their responsibilities and jurisdiction.
- Processes and knowledge are developed in cooperation with the branches of administration and the inhabitants of the municipality. Also organisations and another third sector are included.
- The child-centeredness of services and immediate customer work made with the child are increased.
- Multi-professional support and help are offered for children, young people and families early enough, in such a manner that the increase in the necessity for reconstructive services is stopped.
- Increasingly more services are offered into the activity environment of children and young people (for help to be offered at home, different help offered in connection with day-care and schools for children, young people and parents).
- The shared basic information concerning children and young people is developed in such a manner that it will help to evaluate the development of the welfare of children and young people and the usage of the service entity in the future.
- The possibilities for young people showing psychological symptoms to receive immediate mental health support is improved.

2. Children, young people and families have equal opportunities for welfare, independent of the residential area

- In order to prevent regional inequality, Positive Discrimination resourcing is taken into shared review together with the branches of administration, and shared operation possibilities are agreed upon.
- In addition, various knowledge and operation methods needed in the areas are reviewed. Developing the utilisation of PD indicators further, in order to promote regional equal development.

3. Good support for children, young people and families with a multicultural and immigrant background is actualised.

- Securing in particular the housing of families and young people with immigrant backgrounds, securing the studying and hobby possibilities for multicultural children, parenting support and education against racism and operations supporting communality are taken into consideration.
- Mothers with immigrant backgrounds especially are taken into consideration with attention to their learning of the Finnish language and in creating possibilities for employment.
- In relation to the multicultural children and young people, taking into consideration the healthy and secure growth of Romany children and securing their opportunities for an education
- The education and recruiting of multicultural employees and employees with immigrant backgrounds is taken as a special challenge for the future years.

4. The possibilities of the Internet are utilised more widely in services, and media-critical knowledge is increased

- Services and activities are offered on the Internet in an increasing amount, as the Internet is the central activity environment for increasingly more children and young people. For example, it is possible to reach those young people there, who the traditional services do not reach. However, guidance from a web conversation into traditional services when necessary is essential
- Children, young people and parents need knowledge and tools for the critical usage and management of media. Media education is to be realised from day-care aged children and by utilising different operators (also organisations).
- In the future, investing in educating employees to use the Internet, critical media education and realising services on the web.

3.6 Personnel Objective

1. The competence and work welfare of personnel are improved with the help of shared basic information and forms of cooperation agreed upon: “no one is left alone”.

- Developing and increasing the multi-professional basic information related to the welfare of children and young people with shared, multi-professional education, which are both regional and centralised according to each need
- Promoting multi-professional cooperation and method knowledge, for example by agreeing upon the structures of cooperation and management, and with the help of shared guidelines.
- The education and recruiting of multicultural employees and employees with immigrant backgrounds as a special challenge for the future years.
- In the future, investing in educating employees to use the Internet, critical media education and realising services on the web.
- Youth aftercare and employment counselling are integrated into child protection processes.

4. Plan Management, Follow-up and Evaluation

The Child Welfare Act requires that a plan for evaluating and monitoring the welfare plan for children and youth is made.

The management group is responsible for following up the Welfare Plan on the upper level, which consists of the directors of the branches of administration that were responsible for the preparation. The management group will meet once or twice a year for a situation report.

A control group is formed for each welfare objective (4 pcs), to whom the leading projects of the objective in question will produce information for follow-up and evaluation. One department manager from each branch of administration will operate as the chairpersons for the control group. The control group is responsible for the control of the leading projects. A coordinator,

whose job description and title is specified later, is responsible to the management group for the preparations.

In addition to these, an evaluation group is established who is responsible for the overall evaluation planning of the Welfare Plan and partial actualisation. The evaluation group consists of representatives from different branches of administration, which already possess evaluation know-how. The group will compile information on the usage of services and welfare that is already produced in the branches of administration. The group will create indicators, and will also make evaluations on the changes in welfare, and will report them forward. The group will consult leading projects when necessary in relation to the evaluation.

The actualisation of the Welfare Plan for Children and Youth are followed up with three level indicators:

- 1 Wide indicators describing the welfare of children and young people
- 2 Welfare indicators, which describe the actualisation of the welfare objectives
- 3 Indicators describing the operation of leading projects

The indicators concerning the welfare objectives are:

- The portion of children from the age group, who are placed outside the home, will decrease
- Depression in young people will decrease
- Smoking by young people will decrease
- The portion of children taking part in hobby activities will increase
- The portion of young people left outside of education will decrease

The indicators related to the welfare objectives are partially congruent with the indicators included in the KASTE Programme. The Welfare Plan for Children and Youth is also included into the Strategy Programme of Helsinki for the years – 2012 (outline), where the evaluation criterion for the improvement of welfare for children and young people is presented to be that the portion of 0-17-year-olds from the age group, who are placed outside the home, will decrease.

The implementation of the Welfare Plan for Children and Youth is reported regularly during the council period for the political decision-makers; annually to the boards and once to the council. Concrete objectives related to the leading projects and operations will be presented in connection with the allocation plan suggestion.

5. Summary on the Current Status of Child and Family-specific Child Welfare and Development Policies

Summary from chapter 4

The reformed Child Welfare Act requires that the necessity for child and family-specific child protection and the resources in use are reviewed in the welfare plan for children and youth; as well as the amount of employees and their level of education, and operation costs. Furthermore, the central service strategic policies in relation to child and family-specific child protection are described in this chapter.

The user numbers for child and family-specific child protection have been increasing throughout the 2000s. In 2008, 8,232 children were users of child protection, which was 8.6 % of the entire child population of Helsinki. The portion of adolescent child protection users especially from their age group is considerable. The majority of users are those of child protection in open care. In 2008, 2,572 children and young people were placed, which is 2.7 % of the child population. In 2008, approximately 1,100 multicultural children were in child protection, which is more than their relative population portion, and an increase in the amount is likely in the future years. There were 203 child protection users whose mother tongue is Swedish, who are mainly users in the Swedish social services.

At the end of 2008, 131 child protection social worker vacancies and 83 social instructor vacancies were available in the family centres, on the open care of child protection. 41 % of the social workers did not have qualifications. The turnover of social workers is substantial, which is influenced by for example work load, payment and organisation and resourcing. In 2008, the social workers of the open care of child protection had approximately 41 child users per employee. In addition, the child's parents and other familiar and authority networks are always in a customer relationship.

The purchase services for the institutional care of foster care have doubled from 1994, when the volume of the city's own institutions has been added only slightly. From the foster care expenses of 2007, the portion of purchase services was 44 % and the city's own institutional care 40 %. Family care has been striven to be added, and 47 % of the care days of foster care was family care in 2007.

Child and Family-specific Child Protection Service Strategic Policies

The objective for the Welfare Plan for Children and Youth is to increase the wellbeing of children and young people and to decrease the necessity for taking into custody. The intensifying of basic services and early support in the cooperation between the branches of administration and organisations bears important meaning in achieving this objective. In child and family-specific child protection, the objective in its turn means that the emphasis of services is striven to be transferred to a lighter open care in place of heavy institutional care. The effectiveness of the open care of child protection is to be increased by various means, in order to reduce the necessity for placements.

The most important policies for the structural change of child protection are:

- intensifying early support
- intensifying the open care of child protection
- developing comprehensive family rehabilitation
- centralised customer management for foster care
- intensifying the own operation of foster care
- expanding family care
- increasing the supported housing of young people

The intensifying of the open care of child protection is connected to, for example, personnel resources and the development of the intensity of work. The objective is that the social worker of child protection should have approximately 30 child cases per employee. Also the amount of social instructors should be increased into the level of the amount of social workers. With this, the requirements of the new Child Welfare Act on the orderliness of work and the actualisation of the tasks of the social worker in charge could be responded to in a better way, as well as to secure the immediate work with families and to decrease workload. With new, intensive and comprehensive forms of support, the effectiveness of open care is striven to be developed. Family group conferences as a work form will be established.

In the foster care of child protection, family care will be expanded according to plan. When taking children into care and placing in custody, small children are not be placed in institutions unless there are health conditions that require institutional care. Small children are to be primarily placed into families. Family care will offer more effective treatment for children, but it is also considerably more cost-effective than institutional care.

The exhibition of psychological symptoms for children and young people becoming aggravated will bring its own limitations for the expansion of family care. Increasingly more children and young people to be placed are in need of treatment support and limits. In relation to the institutional care, the city's own institutional care will be intensified in order to secure sufficient self-sufficiency. In order to intensify customer guidance, a unit of its own will be founded during the spring of 2009, and special personnel on foster care will be increased to meet the treatment necessities of children and young people. Purchase services both in open and foster care are reduced, but they will be partially maintained in the future, as their role in, for example, producing target-specific special services is important.

The task descriptions and process of child welfare have been developed considerably during the previous years. In relation to processes, special attention has been paid to the evaluation and the customer guidance process for foster care, social work during placement, and the aftercare process. The current customer guidance model of foster care has been demanding, and it has taken a lot of work. The objective is to clarify the customer guidance process into foster care with the help of the new customer guidance unit. In addition, less attention has been paid to the social work during placement due to the work load of the social work of open care. Currently the objective is to improve the quality of social work during placement and possible reorganisation. The social work of after care has been scattered to several operators (open care, special services of after care and social stations). The special problem of young people requires special knowledge of social work and close cooperation between different professionals