Research findings and recommendations for promoting children and young people's opportunities for balanced growth, health and impact

ENABLING GROWTH, LEARNING AND INCLUSION FOR ALL

FINNISH GOVERNMENT

Enabling growth, learning and inclusion for all

Research findings and recommendations for promoting children and young people's opportunities for balanced growth, health and impact

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MINISTRY OF SOCIAL AFFAIRS AND HEALTH

Description sheet

Abstract

In early 2016, the Ministry of Education and Culture and the Ministry of Social Affairs and Health launched the preparations for a Strategy for Children. A summary of findings from studies on children and young people was drawn up to support the preparatory work. The summary presents the key findings brought up by individual researchers and research groups, and a set of recommendations based on them. Some hundred written opinions were received, representing the findings of more than 200 researchers.

This report is based on an analysis of the researchers' original content which has been grouped into five themes. The researchers' original texts have been followed as closely as possible. In some cases, similar findings from several researchers have been combined and readability has been improved by editing the wordings and adding sentences to link paragraphs. Each paragraph ends with a link to the individual's or group's original text, and a list of the originals is provided at the end of the report. The original texts are available online at lapsistrategia.fi

The five themes are human relations, learning, safety, health and inclusion. Research findings on birth rate form a cross-cutting theme. Each theme consist of four to seven sub-themes. Researchers' conclusions and recommendations for measures are separated from the presentation of the findings and provided under the report's conclusions.

Kuvailulehti

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Tekijät	Professori Jouni Välijärvi, Jyväskylän yliopisto		
Julkaisun nimi	Edellytykset kasvuun, oppimiseen ja osallisuuteen kaikille. Tutkijoiden havaintoja ja suosituksia lasten ja nuorten monipuolisen kehityksen, terveyden ja vaikuttamisen mahdollisuuksien edistämiseksi		
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Tiivistelmä

Opetus- ja kulttuuriministeriö ja sosiaali- ja terveysministeriö käynnistivät keväällä 2016 Lapsistrategian valmistelutyön. Valmistelun taustaksi kerättiin lapsia ja nuoria koskeva tutkimuskooste. Kooste rakentuu alueen tutkijoiden ja tutkimusryhmien esiin nostamista keskeisimmistä tutkimustuloksista ja niihin nojaavista toimenpidesuosituksista. Kirjallisia lausuntoja saatiin noin sata, jotka edustavat arviolta runsaan 200 tutkijan havaintoja.

Tämä raportti perustuu tutkijoiden alkuperäistekstien sisällön analyysiin ja niiden tematisointiin viideksi eri teema-alueeksi. Raportin sisältö pyrkii seuraamaan mahdollisimman pitkälle tutkijoiden alkuperäistekstejä. Joissain tapauksissa tutkijoiden samankaltaisia havaintoja on yhdistelty ja teksti luettavuutta parannettu ilmaisuja hieman muokkaamalla ja kappaleita yhteen kytkeviä lauseita lisäämällä. Kunkin tekstikappaleen lopussa on linkki tutkija/tutkijaryhmän alkuperäiseen tekstiin, joista luettelo löytyy raportin lopusta. Alkuperäistekstit ovat luettavissa verkosta osoitteesta lapsistrategia.fi

Viisi teema-aluetta ovat ihmissuhteet, oppiminen, turvallisuus, terveys ja osallisuus. Läpileikkaavana teemana kuvataan myös syntyvyyteen liittyviä tutkimushavaintoja. Kukin teema-alue jakautuu 4-7 alateemaan. Tutkijoiden esittämät johtopäätökset ja toimenpidesuositukset on raportissa erotettu tutkimustulosten esittelystä merkinnällä "johtopäätökset".

Presentationsblad

Referat

Våren 2016 inledde undervisnings- och kulturministeriet och social- och hälsovårdsministeriet beredningen av Barnstrategin. Som bakgrundsmaterial för beredningen sammanställdes forskning gällande barn och unga. Sammanställningen består av de viktigaste forskningsresultaten som forskare och forskargrupper på området har lyft fram samt åtgärdsrekommendationer som grundar sig på dessa. Omkring etthundra skriftliga utlåtanden togs emot, och dessa representerar uppskattningsvis drygt 200 forskares observationer.

Denna rapport grundar sig på en analys av forskarnas ursprungstexter och en indelning av dessa i fem temaområden. Innehållet i rapporten följer så långt det är möjligt forskarnas ursprungstexter. I vissa fall har man förenat forskarnas likartade observationer och förbättrat textens läsbarhet genom att redigera formuleringarna en aning och genom att lägga till meningar som binder ihop styckena. I slutet av varje textstycke finns en länk till forskarens/forskargruppens ursprungliga text, och en förteckning över dessa finns i slutet av rapporten. Ursprungstexterna kan läsas på webben på adressen lapsistrategia.fi

De fem temaområdena är mänskliga relationer, lärande, trygghet, hälsa och delaktighet. Som övergripande tema behandlas också forskningsobservationer som gäller nativiteten. Varje temaområde är indelat i 4–7 underteman. I rapporten har forskarnas slutsatser och rekommenderade åtgärder avskilts från presentationen av forskningsresultat.

Contents

INTRODUCTION

Every child has a right to stable, healthy and balanced growth and development. It is the duty of the parents, policy-makers as well as service systems and their personnel to ensure that this right is also realised in practice. With strong enough a will, this is well within the adults' capabilities.

While no institution alone is able to guarantee that children can grow in peace, by working together it is quite possible to make sure that every child can reach their full potential. However, adults must first learn that stable and effective pathways to growth and learning are built together with children and young people.

This report comprises individual researchers' and research groups' take on how the best interests of the child can be realised in families, early childhood education and care, free-time activities, schools, health care and social services among other things. The report is based on the written statements of around one hundred researchers and research groups concerning what they consider their key findings relevant to this area. The researchers were also requested to give their proposals for actions that should be taken on the basis of their observations. In this document, these proposals are found at the end of each section (Conclusions). The researchers were also asked to describe any good practices that would promote the implementation of their proposals, and a considerable number of good practices were indeed submitted. However, analysing and discussing them must be left to a later date.

The research observations and recommendations collected in the report thus represent the views of each individual researcher or research group, who also are ultimately accountable for their statements. In other words, the purpose of the report was not to produce an all-inclusive synthesis of all research on children and young people in Finland. At minimum 200 experts have been involved in drawing up the over 100 individual statements, and the report thus covers research carried out in this field from a relatively large number of different perspectives. An effort has been made to document the ideas put forward by the researchers as authentically as possible, while some linguistic editing has been carried out to improve readability. For the part of these edits, the responsibility for any misunderstandings rests with the editors of the report.

The citations in the report are based on numeric codes at the end of each paragraph, which lead the reader to the original written statement of the researcher/research group. A list of researchers who submitted a statement and their codes can be found at the end of this report. Using the numeric code, the original statement can be found at lapsistrategia.fi. This website contains the references to original research publications, and in most cases, also a list of other recent publications of the relevant field.

The main responsibility for preparing this compilation report was assumed by Professor Jouni Välijärvi from the University of Jyväskylä. The researchers and research projects central from the perspective of the Strategy for Children were identified and named by the scientific members of the Strategy's steering group; in addition to Professor Välijärvi, they included Professor Niina Junttila from the University of Turku, Professor Kirsti Karila from the University of Tampere, Program Director/Ombudsman Petra Kouvonen from Itla Children's Foundation (ITLA), Professor Marja-Leena Laakso from the University of Jyväskylä, Director Anna Rotkirch from the Family Federation of Finland, and Senior Researcher Minna Ylikännö from the Social Insurance Institution. Research Manager Johanna Lammi-Taskula from the National Institute for Health and Welfare (THL) also participated in the work as an expert member. For the part of their areas of expertise, the listed researchers also carried out an initial analysis of the researchers' statements and prepared summaries based on them. These summaries can also be found on the website cited above.

The structure of the report relies on a rough division based on basic human needs, or a need for a safe life and living environment, a strive to act together with other people, and a need to make decisions on your own life. Based on these needs and joint discussions on them, five key themes were defined for describing the material, which are human relations, learning, safety, health and inclusion. From the viewpoint of children's and young people's development and learning, these thematic areas are in many ways tightly interlinked, and any attempt to separate them would trivialize the challenges children and young people face in their daily lives. Perhaps the most important message of the researchers emerging from this report is that the determinants of quality of life, both positive and negative ones, have a strong tendency to accumulate with the same children and young people. As a result of this accumulation, problems encountered on the life path often feed each another, becoming complex and impossible for children and young people to manage without help.

The researchers' statements have provided us with extensive and diverse knowledge of the trends which are harmful for a child's development or, on the other hand, support positive growth. In the future, it would be vital to promote the ability of adults guiding children's lives to work together, listen to children, and give children time when they most need it. It is also of primary importance to recognise methods proven effective by scientific evaluation through which children and young people's negative development and the cross-generational nature of problems can be halted. Most support forms scientifically proven to be effected are based on the knowledge that, by improving the capabilities of the adults guiding a child's life for working together with the child, a positive influence can be had on the child's entire life course.

1   Human relationships

1.1   Diversification of family structures and child policy

The family relationships, life situations and daily life that define children's growing environments are diversifying. It is important to also take this fact into account in service systems' operating culture. The child's and the family's participation is stressed in the organisation of a service. Political decisions create opportunities for using or restrict the availability, quality and accessibility of services. (58)

Compared to earlier decades during which the foundations of the current child policy were laid, Finnish children are today living in considerably more varied family compositions. Constant diversification can be observed in the pathways to becoming a family. Of families with children, 80% have two parents who are married or cohabiting, and 20% are single-parent families. The majority in the latter group are families consisting of a mother and her children. While approx. 9% are classified as reconstituted families in statistics, a significantly higher proportion of children live in families of this type. Almost 60% of women are not married when they give birth to their first child, while 40% of all children are born to unmarried women. Approximately one child out of ten is born to a mother who is not living with a partner or whose family situation is not known. (6)

In many respects, Helsinki region is a forerunner of trends that will spread across the country. In Helsinki, one newborn out of five is discharged from hospital to a home where the mother is the only permanent resident. The proportion of children aged between 0 and 2 who live in single-parent families is clearly smaller than this, or 15%. Mothers living in Helsinki report that 17% of infants lived in reconstituted families whose members included the infant's siblings from the mother's or father's previous relationship, or the child was born to a cohabiting couple where the mother's partner is not the child's father, or the mother and father live in different households and the infant moves between the two households with the mother. Additionally, in significantly many cases the mother regards a wide range of people not living in her household as belonging to her family, including grandparents and especially the mother's parents. (6)

While no official statistics exist on dual residence (an arrangement where the child takes turns living with each parent), it has been estimated that approx. 18% of children live with their parents in turns after the parents' divorce. This brings up many questions in terms of legislative development, including the issue of sharing the child benefit, availability of health services and day-care, the child's school catchment area, school transport in two locations etc. The key point is that children should be treated equally regardless of the family composition to which they were born and in which they live. (6)

As the range of family forms increases, children's everyday lives are diversifying. Stable daily life is undermined by a fragmentation of human relations outside the home. From the child's perspective, a key threat is the great turnover of the personnel they meet in services (especially in child welfare), and the insufficient resources of the services in more general terms. The fragmentation of the child's experience is also exacerbated by the separate, conventional and immutable nature of operating cultures. Sectoral boundaries remain high. 'Child orientation' is a popular term in political rhetoric. What a child-oriented operating culture means or what a child-friendly society could be, however, is anything but clear to employees in family services in terms of their practical work. This is a popular discussion topic, but what does child orientation mean in practice if you are, for instance, a social worker or a speech therapist, a teacher, or a director of social welfare services or education services? (62) And what does it oblige you to do as part of cooperation between experts from different sectors?

At a general level, child orientation or child-friendliness in societal decision-making means that the child's best interests and children's rights are taken into consideration. (70) However, the way in which the principles are translated into concrete terms in the child's daily life is regulated by many cultural and political factors. For example, cultural mindsets come up in families' daily lives in the way in which services for children take into account the differentiation of family forms and, for example, children's multi-local living arrangements that have become more common as a result. However, children's daily lives and wellbeing continue to be organised in the conventional family-oriented way; children's place of residence has been thought to be the same thing as their family. Many children lead their daily lives in parallel or rotating consecutive places of residence, which are not the same as their family in conventional terms. Such groups as children with dual residence arrangements, children receiving child welfare services and unaccompanied minors entering the country lead multi-local everyday lives characterised by repeated movement between places of residence. Cultural mindsets also guide the way in which children's, young people's and parents' participation in service development is seen. (70) (73) (83)

Flexibility of the family leave system, early childhood education and care services and, on the other hand, labour market flexibilities are essential questions that direct

the dynamics within the family and the child's social networking. These issues, on the other hand, affect in many ways the child's experiences of security, feelings about other people and the building of their identity. Cultural mindsets regulate the extent to which the child's best interest informs the renewal of these structures. (58) (60) (70)

The life stage that includes young children is not particularly attractive today for all young adults. Starting a family does not appeal to young adults, at least not in the age group 20 to 30. A key question is how the image of the life stage with young children could be improved or how it could already be made more attractive today for young people who will decide to have children in the future. (58)

CONCLUSION:

Location-aware evaluation and identification of children's wellbeing should be part of interventions and services for children and the persons close to them. (73)

1.2   Roles within families are undergoing a transition

Parenthood (= fatherhood and motherhood) as well as the family's everyday practices and emotional climate are key growing environments for children, which provide the backdrop and create preconditions for the growth and development of the child as well as the parents. (67)

Equitable hearing and participation of fathers and their commitment to fatherhood improve the child's and the family's wellbeing. Nurturing fatherhood has thus gradually become a cultural norm. It means that fathers wish to have a strong presence in their children's lives and to share parenting fairly with the child's mother. However, fathers' presence in children's daily lives is far from being fully realised. We could indeed say that immense potential and resources for caring, which currently remain largely untapped, lie in fathers. Supporting fathers' participation promotes more equal sharing of responsibilities in families' daily lives and can thus also promote an increase in birth rate. (40) (70) (71) (90)

Cultural changes and, in particular, fathers' increased responsibility for child care, can be seen in surveys on families' time use. On average, fathers spend more time on not only paid employment but also child care and housework. At the same time, they have less 'me-time', and they experience a shortage of time more often. They would like to

find more time for physical activity but also for spending time with their families and caring for their children. (88)

While young couples today stress gender equality and fair sharing of housework considerably more than before, they often get stuck in traditional roles once their first child is born. The consequences often are tiredness, especially for mothers, sometimes men's alienation from their partners and children, isolation from many activities, increased difficulties in reconciling work and family life etc. This is not apt to encourage couples to have several children. (62) (90)

The rigidities of the family leave system, gendered practices in the world of work and daily life, as well as a service system that is tied to conventional cultural mindsets slow down and hinder the full use of fathers' care potential in children's everyday lives. It is also hindered by the traditional operating cultures of many organisations. Seeing fatherhood as an equally important factor in supporting a child's development as motherhood will require action in many sectors of society. (71) (40) (26)

Setting flexible conditions on paternity leave has a major impact on its use. The majority of fathers felt that the time limits of paternity leave affected the father's decision to use it. The current time limit (until the child turns two) is experienced as too short, as many mothers continue to draw home care allowance and look after the child at home after that date. On its current terms, the use of paternity leave does not optimally support the strengthening of the father's independent responsibility for child care. Only one half of the fathers mainly care for the child independently when on paternity leave. In almost one half of families, the child's mother stays at home together with the father, at least some of the time. (40) (88)

The parents' socioeconomic status is linked to using family leaves. Fathers are less likely to use the leave in low-income families, or families in which the father is unemployed or an entrepreneur. When the mother has a high level of education, the father is more likely to take family leave. The reforms of the period earmarked for fathers carried out in the 2010s have increased the number of fathers taking paternity leave. (88)

Some fathers find that getting support for parenting is challenging because of their gender. Taking fathers equally into consideration from the beginning would reinforce father's participation and support their growth into fully authorised parents. Examples of this include replacing maternity health clinics by family health clinics for parents and renaming the maternity package as family package. Introducing shared parenting as the guideline in all services would promote more equal parenting roles. (71)

In Sweden, attitudes towards sharing child care and family leaves are clearly more equal than in Finland. Finnish men, in particular, support more strongly than Swedish men the male breadwinner model where the mother takes the majority of the family leaves. (88)

CONCLUSION:

It has been proven that fathers take more family leaves when they are granted more leaves earmarked for them based on their income. If the aim is to further reinforce the role of fatherhood and the father's presence, it would be justified to reform the family leave system by introducing a model of equal entitlements for the father and the mother (for example, 5 + 5 + 5 months). An additional period that the parents can share according to their preferences would speed up development in this direction. Such a model would support shared parenting but also adapt to different situations. It has been found that flexibility encourages fathers to take family leave. (71)

1.3   Building of interaction skills and loneliness

The foundation for a child's relationship with other people is already laid in the early years. Infants have little or no ability to regulate stress on their own. They depend on co-regulation with an adult. The parents' mentalization ability, on the other hand, affects the quality of care the child receives, the child's ability to regulate emotions, and their emotional bonding. Adaptation and the development of self-regulation are, among other things, guided by the number of opportunities the child has to play and practise with other children. The emotional availability of adults is apt to promote self-regulation, good-natured sociability and commitment to action in a group. The PedaSens intervention, for example, which clearly increased the pedagogical sensitivity of the participating education personnel, was built on these observations. (37) (52)

Warm parenting where the child's emotions and thoughts are accepted reinforces the child's psychological wellbeing and the forming of connections with other people. The key factor in the background of parenting quality is the parent's personal wellbeing. If the parent experiences many negative emotions and tiredness, this increases the likelihood of using non-meaningful methods of upbringing, which affect the child's emotions and behaviour in turn. Rather than being transferred to the child's development and learning as such, the socioeconomic background, for example, is mostly passed on through parenting and the family's internal interaction. In other words, interaction within the family and the qualities of parenting are more essential than the concretely

defined background. Along this line of thinking, the background is not a given and immutable entity for a child, and the mechanisms through which it influences the child's growth and development can be guided. (60)

A child grows into a member of community through human relationships, which expand gradually from the parents and the home to encompass other children and young people, and later increasingly diverse networks. These relationships determine a child's and a young person's wellbeing to a great extent. Loneliness refers to a state where a person experiences distress because of quantitative or qualitative shortcomings in their human relationships. (85)

Chronic loneliness changes the observations children and young people make on social situations, distorts their thoughts and undermines their feeling of self-efficacy, causing them to either withdraw or fight against others. A protective wall is erected around the self. While it shields the person from violations, it also increasingly isolates them from common activities. (85)

Of young people aged 15, one out of five feels lonely continuously. This proportion is 11% for 11-year-olds and 5% for 8-year-olds. More than one half (57%) of pupils aged between 8 and 15 report feeling lonely at least sometimes. Experienced loneliness is more common among girls (16%) than boys (8%). These proportions are growing in all age groups. The longer the loneliness continues, the more difficult it is to shed. The possibilities of change are already small and require strong interventions in the higher grades of comprehensive school. The most opportune time for reducing loneliness is in early childhood education and in grades 1 and 2 of comprehensive school, for example by supporting interaction skills and practising social contacts. (85) (32) (93) (10)

Of young people who are lonely, less than 30% are satisfied with their lives, whereas this proportion for other young people is 80%. Loneliness is experienced by 24% to 25% of young people with disabilities, 13% to 23% of those placed outside their homes and 14% to 21% of those with a foreign background. (10)

Loneliness is a strong indicator of later emotional and behavioural problems, social coping, psychological illnesses, physical health, and disruptions to education and careers. Loneliness experienced by 8-year-old boys significantly explained loneliness, depression, concentration difficulties, delinquency and many other behavioural and mental health disorders observed ten years later. In the higher grades of comprehensive school, the link between loneliness and symptoms is stronger in girls than in boys. The link between loneliness and psychological symptoms becomes stronger with age. Of NEETs, 70% said they were lonely. (85) (37) (32) (10)

Young people in grades 8 and 9 of comprehensive school who feel lonely suffer from daily occurrence of symptoms more often than average. Loneliness is linked to a feeling of reduced life management. It is also associated with many problems with school attendance, including truancy and fatigue. Moderate or severe anxiety is experienced by 46% of young people who are lonely. Loneliness also manifests itself as unhealthy lifestyles, including binge drinking and overweight. Young people who are subjected to mental or physical violence by their parents feel lonely more often than others. (10) (86)

Among other things, a lonely person' risk of becoming depressed is 11 times higher, and their risk of developing a social anxiety disorder is 12 times higher than average. Loneliness exposes a person to self-harming behaviours and is linked to suicides, at the latest in adulthood but often also for children and young people. School-age children and young people who suffer from chronic loneliness have an eight times higher risk of being nervous and a six times higher risk of having difficulty falling asleep compared to those who do not feel lonely. Chronic loneliness is also associated with equally high exposure to the use of medications that counteract these symptoms. A strong experience of loneliness also predicts a clearly lower than average level of physical activity. (85)

Social support received at school is linked to experiences of loneliness. Strong support and acceptance of the class, in particular, reduce experiences of loneliness. This link is stronger among boys than girls. Increased support from the teacher is linked to experienced loneliness more often than average, which indicates teachers' attempts to support those of their pupils who are lonely. Lonely pupils find the support provided by the teacher important. (32) (93)

The child's personal experience and narrative are key to recognising loneliness and intervening in it. In 8-year-old boys, self-reported loneliness explained all the observed mental health and behavioural disorders, whereas parents' and teachers' assessments only predicted some individual problems. The teacher's possibilities are also limited by the fact that almost one half of pupils at higher grades of comprehensive school do not feel that their teachers are interested in how they feel or how they are doing. (85) By international standards, Finnish pupils find that the teachers have exceptionally little interest in issues important for the pupils. (100)

Other important actions for combating loneliness felt by children and young people include continuity of treatment and encounters as well as supporting, strengthening and appreciating parenting, starting with maternity and child health clinic services. While loneliness is often cross-generational, this continuum can be severed by early intervention. Early recognition of a child's linguistic and social difficulties is the most relia-

ble method of preventing problems that emerge later. For this, however, close cooperation between experts is required, as well as sufficiently early, intensive and longstanding support to intervene in threats to children's and their families' mental health. (85)

Regional factors also have a significant impact on children and young people's loneliness and the opportunities for intervening in it. Long distances and poor transport connections in sparsely populated areas make it more difficult to establish and maintain friendships. Inequalities within the country have increased as schools in sparsely populated areas have been closed down and municipalities have centralised free-time activities to the larger population centres. Young people depend on support from their family and friends for building social networks more than before. On the other hand, digitalisation has created many new possibilities for contacting other young people. Virtual networks complement rather than replace face-to-face meetings, however. (2) (89) (19)

A minister focusing on reducing loneliness has been appointed in the UK government. This decision is based on cost calculations, according to which significant savings for the national economy can be achieved by removing root causes of loneliness. Perhaps this is something that could also be considered in Finland this spring! (85)

CONCLUSIONS:

Hearing children themselves about their experiences of loneliness is important. The adults' ability to observe this risk factor to the child's development cannot be relied on. Municipalities should also have expert teachers specialising in children and young people's wellbeing. Most importantly, time should be arranged for the adults at the school to listen to children and young people without rushing, on a one-to-one basis or in small groups. Children's experiences confirm that this does not happen in today's school classes. (85)

Social support provided by classmates reduces the experience of loneliness. Teachers can prevent loneliness by supporting friendships in the class, having the pupils practise team work skills, and ensuring that no-one is excluded and that all pupils feel accepted. It is important for teacher education to provide teachers with capabilities for recognising and supporting lonely pupils. (93) (85)

The competence of early childhood education and care professionals should be improved, especially in the areas of social skills, interaction skills, encountering parents and cooperation skills. (85)

Combating loneliness has significant impacts on the national economy as the need for drugs and support services is reduced and working ability in adulthood can be safeguarded. (93)

There are strong indications that physical activity and participation in club activities can protect young people from chronic loneliness. (93)

1.4 Transition of work and stability in children's daily lives

The demands and resources of working life are reflected on children's daily lives and affect the family members' wellbeing. On the other hand, the roots of work ability go back far into childhood and youth. The transition of work has many types of effects on employment and the relationship between work and leisure time. The demands of working life may pose a threat to the stability of the child's daily life; on the other hand, increased flexibility offers better possibilities for reconciling work and family life. Flexibility in the world of work may thus be both a resource and a stress factor. (45)

In any case, reconciling work and other areas of life will require more diverse and innovative solutions across society than before. In terms of a child's balanced life, it is important that their parents are not blamed for being inflexible and that excessive adaptation to the needs of a changing working life is not required of them. More attention should be focused on the business world as well as the structures and operating cultures of public services. (62)

Regardless of the problems, Finnish parents are relatively successful in reconciling work and family life by international comparisons, and experiences of conflict have not become more frequent over the years at population level: in 73% of workplaces, the workers believe they reconcile work with other areas of life successfully (in 2015). According to these assessments, the ability for reconciliation has also developed positively. (45)

The possibilities of reconciling work with other areas of life vary greatly in different sectors and roles. It is particularly challenging for the following groups: blue-collar workers (mainly those who work shifts or have atypical working hours, including night work), workers with fixed-term employment relationships (especially young women) as well as those working long hours (employees in expert roles). These groups account for a significant proportion of the Finnish labour market; for example, one out of five employees do shift work. When working times changed, corresponding changes were

observed in experiences of conflicts between work and the family's needs. Working in the evenings, in particular, is felt to make the reconciliation of work and family more difficult. In other words, work-life balance could be improved by fewer evening shifts, less weekend work, longer intervals between shifts, and reduced night work and working weeks in excess of 40 hours. (45)

From children's perspective, the polarisation of work has far-reaching consequences. The parents' atypical working hours have very different impacts on children's lives depending on whether the parents have a possibility of influencing their working hours and what the parents' social and financial resources are like. This puts children in an unequal position regarding their preconditions for balanced growth. (58)

A change in the world around them quite often means that children's and young people's daily lives become less stable and predictable. Their possibilities of growing in peace are under threat. Children's daily lives today no longer consist of merely close relationships. Children are also aware of and reflect on developments in their society and the global world. The transition of working life undermines children's wellbeing as their parents' employment is increasingly unpredictable. To a great extent, children and young people also construct their ideas of working life – and their future as a part of it – through their parents' work: parents who are stressed and burnt out thus communicate a rather negative picture to their children of their future. (58) (101)

For a child, predictability of daily life is a key determinant of their growing environment. It is affected by not only the parents' work but also transitions on the early childhood education and care and education path and the way their day in early childhood education and care and at school is organised. Stability and continuity should be aimed for, making children's lives more predictable. (58)

A challenge to reconciling work with the needs and interests of the family is created by stereotypical understanding of the family, gender-based sharing of family and care leaves, as well as variable leadership practices in the workplace. Some workplaces are more family friendly than others. Their practices are very often based on the relationship between the leader and the subordinate and different statuses of various occupational groups. This results in problems and experiences of unfairness in the work organisation. Adequate common rules are often missing. (26) (61)

The daily life of the family as it is encountered by children is to a great extent tied to the way workplaces organise and implement their practices of reconciling work and family life. A clear majority of working mothers and fathers find that the number of their duties has increased while the pace of work is faster and schedules are tighter. Characteristically, the boundary between working time and free time is also blurring. Almost one half of fathers and more than one out of three mothers worked overtime

on a weekly basis, and the most common form of overtime was working at home after the office hours. As the opening times of shops and other services are deregulated, the life management of parents working in these jobs becomes increasingly uncertain. It is important to assess the impacts of these changes on families' decisions to have children, for example. (40) (26) (101)

Flexibility that facilitates the reconciliation of work and family life is not offered in all workplaces by far. Even at best, only one half of workers have the possibility of using daily flexitime. One quarter of fathers and one mother out of seven report that they can do telework. Two thirds of fathers but less than one half of mothers can take care of personal business during the working day. When the demands of work and the family are on a collision course, it is usually the family that must yield. Additionally, flexibility does not necessarily relieve the tensions between work and family; it may even have the opposite effect if it means that the time spent on gainful employment increases as a whole. (40)

While organisations may have highly advanced policies and practices for reconciling work and family life, resorting to them is not always permitted, or it may be subject to specific negotiations. The relationship between the immediate supervisor and employees essentially shapes the practices. This creates inequalities between employees and companies. When the workplace applies equal practices of reconciling work and family life, commitment to the company is improved, and female employees' willingness to change jobs decreases. These practices influence commitment more than other HR management procedures. The way the practices are applied is gender-based in the sense that a woman working as a immediate supervisor is more likely to follow equal and flexible practices than her male counterpart. (26) (61) (101) (45)

In leadership, traditional views of gender roles in caring for the home and children often prevail. The predominant idea is of the father as the breadwinner, and the man's employment thus determines the way the rest of the family lives its life. Consequently, child care and his role in bringing up children remain distant for the father. Evasive fatherhood in relation to work is stressed especially in roles requiring a high level of expertise and internationality. This type of work also often spills over to evenings and weekends. (26) Coaching has been used successfully to influence supervisors' awareness of practices in their workplaces and the importance of family leaves. (45)

Cultural change takes time, however. The dual-breadwinner/dual-carer model already came up in Finnish discussions in the 1970s. Politics, however, has forgotten about this term, and the approach to family policy is highly fragmented. The development of the dual-breadwinner/dual-carer model, which supports gender equality over the long term, saw a decline in the early 1990s. In this period, development in Finland diverged from that in other Nordic countries, especially due to a policy that supported stay-at-

home mothers as carers of young children. While employment has been highlighted in recent years, no corresponding solutions to facilitate the combination of work and family responsibilities have been developed. (105).

In recent years, legislation has been reformed to support committed and present fatherhood. Among other things, financial incentives and flexibility in employment have been increased. More than one half of fathers used the quota of leave earmarked for them, or the paternity leave, after parental leave. However, the part of parental leave that can be shared by the parents is only used by five per cent, and child-care leave on a home care allowance by less than eight per cent of fathers. As the most common obstacles to using paternity leave, fathers cite the family's financial situation (41%), the fact that their spouse cares for the children at home on home care allowance (39%) and their work situation (19%). Approximately one half of fathers felt that a long absence from their job would make returning to work difficult. Workplaces seldom organise substitutes while fathers are on family leave. Work arrangements play a major role as fathers hesitate to take a longer family leave if the responsibility for delegating their tasks while they are away is left to themselves. (40)

The increased flexibilities in the world of work mean that families need non-standard hour child care more often. For young children (aged between 1 and 3), a continuously changing social environment and care times that are incompatible with the child's needs are a challenge in non-standard hour care. In practice, this means long hours in care, changing shifts and child groups, late nights at the day-care centre and transitions between the home and day-care centre at a time when the child would normally be asleep. The child's wellbeing, social inclusion and activities with other children are promoted by care times adapted to their daily routines and a flexible operating culture in non-standard hour care that addresses the child's individual needs. This is possible especially in the evenings and weekends if the group sizes are small. (65)

CONCLUSIONS:

Working hours that make it possible for the child's needs to be met (rest, sleep, safe human relationships) should be secured for parents of young children. For parents of young children, a possibility of avoiding shifts that conflict with their child's needs should be safeguarded, should they wish to do so. These situations include several consecutive night shifts and a morning shift following the previous day's evening shift, for example in the case of single parents. (65)

In non-standard hour child care, a small group size should be ensured, enabling flexible practices and the personal attention a young child needs. A child's important human relationships should be taken into consideration in the shift planning of non-standard hour child care, and a social environment that is as familiar and predictable

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as possible should be secured for the child. Solutions that have been proven effective already exist for this. (65)

The more even sharing of parental leaves and care responsibilities between men and women should be supported (26) (61) (101)

The nuclear family mindset should be dropped at all levels. The needs of diverse families should be recognised better, and life cycle thinking in the sharing of care responsibilities should be reinforced. (26) (61)

Organisations should be supported in preparing development programmes that promote the reconciliation of work and family life. Organisation culture should be renewed by providing training for leaders at different levels. (26) (101)

The themes of reconciling work with family life should be given a more prominent role in higher education. (26)

The goal of extending pre-primary education to 5-year-olds is providing children with more equal preconditions for growth. However, if the child attends pre-primary education for three hours a day, for example, and the parents have atypical working hours, what does this look like from the perspective of the child's daily life? The child's life may fall apart into an increasing number of upbringing contexts. When looking for successful solutions, the need for a systemic approach is highlighted, and taking the child's perspective into account is more important than ever. (58)

1.5 Accepting diversity in social interaction

Non-normative sexual orientation creates challenges for some children and young people in establishing well-functioning human relationships. Among other things, this is seen in social networking. Children and young people who belong to sexual and gender minorities are exposed more often than average to bullying, discrimination and violence as well as intoxicant abuse problems and mental health disorders. Some personnel members in services have inadequate knowledge of sexual and gender minorities. Their know-how is mainly based on their personal experiences, and sufficient opportunities for updating this knowledge are not available. (15)

Child welfare clients, children and young people who belong to sexual and gender minorities, and those with a foreign background or disabilities experience considerably more bullying at school than other young people. The risk of being bullied also increases when a child's behaviour differs from the norm, for example when they have

difficulties with regulating their emotions or display disruptive and aggressive behaviours towards others. The same children often also are prone to bullying other pupils. (15)

Bullying is often difficult to recognise in children's social networks, as it is subtle or kept hidden from adults. This is why, when observing peer relations between children, it is also important to focus on listening to and deciphering children's vague and difficult-to-interpret messages. In long-standing bullying situations, challenges related to interaction also emerge between the parents and school representatives. They disagree on how the situation should be interpreted and the problem solved, and what the aims of upbringing are. (15)

Seamless collaboration between the authorities, the school/early childhood education and care, and parents is required to intervene in bullying and other interaction that puts a child's wellbeing at risk. At the level of the authorities, however, the responsibility and actions to be taken are decentralised to a number of actors, and the situation as a whole and target achievement is not led or monitored adequately. The authorities are not sufficiently familiar with each other's work practices. The family thus ends up shouldering overall responsibility. There are great variations between families' knowledge and other resources, and some families find themselves dealing with multiple different problems at the same time. In that case, there is a risk of the problems encountered by the child being overlooked. (15)

2 Learning

2.1 What helps children and young people learn and enjoy a good level of wellbeing?

In early childhood education and care and at school, pupils' wellbeing is often seen as something separate from the learning of knowledge. However, emotions and social interaction play an essential role in cognitive learning. If a child is encountered and heard in different pedagogical situations, this may help carry them through other life situations. A high volume of negative feelings about school is regrettably common. (80)

In international comparisons, Finnish comprehensive school grades 7-9 pupils' level of wellbeing is close to the average. Finnish pupils, especially boys, are exceptionally satisfied with their lives, which of course is not exclusively explained by their relationship with the school. A typical feature of the Finnish school is that the pupils' relationship with teachers and the school community is rather positive but also relatively distant. Young people in Finland find considerably less often than their peers in other countries that their teachers are interested in things the pupils consider important. (100)

Many studies reiterate the observation of a school culture that focuses on facts but is emotionally rather distant. This finding is particularly common among young people at higher grades age of comprehensive school. Approximately one half (49%) of pupils in comprehensive school grades 4 and 5 find they have opportunities for talking about things that are bothering them with an adult at the school. In grades 8 and 9 of comprehensive school, only one out of five (19%) young people identified an adult at the school as a person with whom they can talk about things bothering them. This proportion is further halved among students at general upper secondary schools (9%) or vocational institutions (10%). At vocational institutions, girls were more likely than boys to experience a lack of such support from an adult. (10)

Somewhat unexpectedly, young people with disabilities or those who have been placed outside their homes experience more often than average that they can discuss their issues with an adult at the school. Of general upper secondary school students placed outside their homes, as many as one half feel they receive support, whereas the average for all upper secondary school students is 23%. It would appear that the

offer of opportunities for talking has reached young people affected by factors under-mining their wellbeing and who thus have a particular need for assistance and support better than others. (10)

In terms of communality at school, it is a cause for concern that the proportion of pupils who feel like outsiders in their school community is increasing. At the final stage of comprehensive school, the proportion of these pupils was approx. 15% in 2015, whereas at the beginning of the millennium, it was estimated to be approx. one half of this figure using the same indicator. (100)

The pupils' wellbeing and cognitive learning are not separate processes. The factors influencing a young person's health and wellbeing predict academic success and grades at the end of compulsory education. These outcomes are also predicted by the health of the class as a whole – when the health of the class is poor, the pupil's grades are lower than predicted. If a child feels their relationships with teachers are good (they feel they are heard and seen), this predicts better learning and health. Health, wellbeing and learning thus go hand in hand, especially in higher grades of comprehensive school and at the secondary level. (79)

In order for the school to support wellbeing, its activities must be meaningful for children and young people. Alarmingly, children increasingly have an cynical attitude towards school, and this attitude is becoming visible in ever younger pupils. The proportion of young people attached to the school community has gone down in recent years. Regrettably often, the pupils are forced to choose between attachment to either their peers or to school work. While the importance of interactions between young people has been recognised, the ability to use it as a resource for school work is lacking at schools. (80) (38) (100)

Motivation opens the doors to learning. Motivation for learning is supported by recognising the significance of studying, sufficient autonomy and cooperation, adopting a growth mindset (skills improve by practice) and reinforcement of self-efficacy. Learning is also affected by an individual's ability to analyse and regulate their activities. Self-regulation skills develop especially in childhood and youth, during which periods key brain areas are changing rapidly. A child and a young person needs adult support in awakening their learning motivation and practising their working skills and strategies. It is important to draw attention to ensuring that the activities are inspiring and developmentally appropriate, and to avoid rushing the development. (21)

The development of self-regulation is manifested as the regulation of behaviour on the one hand and emotions on the other. Self-regulation is linked to cognitive control in the brain. Its development begins in early interaction with the parents. Guidance that anticipates situations and stresses the consequences of actions has an important role

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in laying the foundation for self-regulation in the family. The development of self-regulation can also be strengthened outside the home if the child receives individual treatment and support. Practising the desired action promotes the development of self-regulation in the same way as physical activity is known to improve physical capabilities. (34)

With age, young people lose their enthusiasm towards school and become increasingly unmotivated. Low motivation takes the form of more absences and symptoms of boredom, cynicism and fatigue. (8) At the end of lower grades of comprehensive school, almost 40% of the pupils are cynical, and the school has lost some of its importance for them. 5% of the pupils suffer from stress. In general upper secondary school, the number of students suffering from stress was six times as high (30%). Similarly, approximately one half of them were enthusiastic about school. Of girls in upper secondary school, almost 20% experience fatigue. The incidence of fatigue has increased strongly in general upper secondary schools over the last four years. (38) Fatigued students with high grades establish their own groups, in which fatigue is further exacerbated. Support provided by teachers protects students from fatigue. (38) (10)

The more demands a child and a young person experiences compared to their resources, the more they are affected by fatigue. Fatigue blocks enthusiasm for learning. School fatigue also spills over to other areas of life. Fatigue predicts depression, whereas enthusiasm for studying increases satisfaction with life. Fatigue leads to a four-fold risk of dropping out of school. It also results in lowering the bar of educational goals and is more likely to lead to gap years. Enthusiasm experienced at school, on the other hand, promotes successful school transitions. Transitions are times at which levels of fatigue and enthusiasm change, and attention should thus be paid to ensuring their success. A family creates motivation and wellbeing together. The parents' fatigue may spill over and also affect young people. (38) (82)

Reciprocal links exist between school fatigue and social media use. Fatigue predicts digital addiction. Cynical pupils find their enthusiasm towards school work could be increased if they were allowed to use digital devices. Sleep is a key factor linking fatigue and digital addiction. (38)

Immigrant boys run a risk of becoming fatigued and cynical, especially towards the final stage of comprehensive school. Fatigue increased strongly between comprehensive school grades 7 and 9, especially in boys who had recently migrated to Finland. In these grades, girls' feelings of inadequacy grow rapidly in strength. (38)

Tools for recognising and supporting students' motivation during the study process have been developed on the basis of research evidence. They have included digital

tools helping to identify optimal times for learning when the learner is motivated and feeling well, allowing the pupils to experience interest and suitable challenges in proportion to their skills. The teacher can draw on this information for the purposes of planning the instruction and regulating the work. (38)

Especially in youth, friends' influence on a pupil's relationship with school grows stronger. Problems in relationships with friends may cause stress and anxiety, hampering school work. On the other hand, the influence of less motivated friends reinforces attitudes towards school and undermines school attachment. Teachers and parents play an important role in guiding the development of social skills, ensuring that cooperation with friends supports learning and wellbeing. In addition to developing the activities and the forms and contents of teaching, promoting positive peer relationships reinforces children's and young people's experience of social inclusion and commitment to learning and doing things together, as well as prevents bullying. (21)

Gaps in the knowledge and skills between girls and boys can be explained, among other things, by differences in learner agency (willingness, feeling of self-efficacy and strategic skills in organising the work) and social support systems. Social peer support for school work experienced by boys in both grade 4 and 7 is clearly weaker than the support received by girls. Similar differences cannot be observed in support provided by teachers and the home. Boys' also display weaker agency related to learning than girls. The school forms a very different learning environment for girls and boys, and these differences already start taking shape in lower grades of comprehensive school. (80) (60)

Research in the emergence and development of motivation also pays attention to schools' assessment practices, especially to emphasis on being active in class when awarding grades. In this situation, little or no attention is paid to children's different personalities. Some children are naturally extroverted. For others, the requirement of active participation causes stress, which may even erode their learning capabilities. Assessment based on sociability and courage of this type puts the pupils in an unequal position. Differences in temperament also affect the pupil's ability to focus on studying in different environments. (60)

Children's individual characteristics influence their ability to adapt to different care and operating environments already in early childhood education and care. Temperament, self-regulation skills and social competence, in particular, are linked to the regulation of stress. International research has found higher stress levels in the youngest children in day care than at home. Long-term exposure to stress affects children's socio-emotional and cognitive development and exposes them to illnesses. (97)

Solutions for supporting motivation have been developed on the basis of research observations. In addition to correcting errors, the principles of positive upbringing include reinforcing that which is good in each child. This is emphasised especially when a child has needs for special support. Positive upbringing stresses children's and young people's right to learn different things. It is thought that demanding the same knowledge and skills from everyone is short-sighted. Appreciating many types of skills at individual level is a precondition for efficiently accumulating competence capital at population level. This is stressed when cognitive skills not tied to specific subjects are put at the centre of curricula (generic skills, life skills, 21st century skills). A programme titled Huomaa hyvä! ('Catch them being good') strives to translate these principles into concrete terms. The programme has already been piloted successfully at a number of schools. The core idea of the programme is appreciating and developing different skills equally, for example through varying learning materials, competence demonstrations and continuous feedback. (46)

The motivation of young children, in particular, is guided by the parents' support. This is why it is important to highlight the child's strengths, resources and development potential to the parents during the child's assessment or development discussions. In these discussions, the teacher can harness the child's or young person's strengths as resources. It is also important to instruct parents to avoid passing on their own negative experiences of school to their child. (90)

Parents' participation in parents' evenings and events at the day-care centre and school as well as actively liaising with the teacher predict positive development in the child's self-image as a learner and motivation. By involving parents in their children's school work, the school creates a positive atmosphere for learning and thus supports the pupils' learning motivation. However, responsibility for school work should not be shifted to the parents, for example by requiring them to participate in doing homework. (90)

Children's and young people's wellbeing can also be supported by looking after teachers' wellbeing. Considerable differences can be found between schools in the success of community-level processes. When a reform process strengthens the teachers' shared knowledge-building and mutual provision of support, the adults at the school cope better and engage in communal learning. The processes of school development thus regulate the wellbeing of the professional community and thus the pupils. Methods of dialogical leadership help build a well-functioning community. For example, the City of Helsinki has successfully offered training in dialogical leadership for principals. (80)

The task of pupil and student welfare is to support the pupils' wellbeing and thus improve their preconditions for solid learning. The majority of children and young people

enjoy a good level of wellbeing. However, some of them accumulate an increasing number of factors that put their wellbeing and learning at risk, including challenges to learning and inclusion, bullying and loneliness. These factors can be influenced by not only the school but also the structures and processes of service systems. Pupil welfare is an elemental part of this service system. (95)

The organisation of pupil welfare services has mainly seen a positive development in comprehensive schools since the school year 2008–2009. Despite the positive development, however, the services are not available at all schools. In school year 2015–2016, 86% of the schools had access to a physician's services, 90% to a psychologist's services, and 97% to a school social worker's services. In school year 2016–2017, on average 6.7 hours of a public health nurse's and 0.9 hours of a physician's services a week were available per one hundred pupils. Similarly, the availability of a school social worker's services was 4.3 and a psychologist's services 2.6 hours a week per one hundred pupils. The personnel inputs of pupil welfare services have increased steadily, excluding public health nurse resources, which have already been equal to the recommendation since school year 2012–2013. (10)

The importance of pupil welfare is stressed in the higher grades of comprehensive school. At that time, almost all indicators of wellbeing take a negative turn. Special acts, the administration and professional practices divide the school community into those who look after learning and, on the other hand, those who are responsible for pupil welfare. Multiprofessional cooperation aiming to support the pupils' holistic development does not work effectively. The municipality prepares overlapping plans for taking care of children and young people pursuant to different statutes. However, some municipalities neglect to produce a school health care plan, or the standard of the plan is poor. Consequently, there are major variations in the services depending on the municipality and the school. This also applies to personnel resources. (79)

Additionally, there is scope for improvement and harmonisation in the multiprofessional operating culture of pupil welfare. In its current form, it does not enable sufficient cooperation between different professions, the authorities and the administration to promote the best interest of the child and the young person in pupil welfare. (95) The cooperation is hampered by the way in which each professional group relies on its own traditions and theories in its mindset and action. Their ideas of the actors' roles vary. Key challenges are associated with genuine realisation of pupils' inclusion and professionals' ability to work together for the child's best interest. A significant share of pupil welfare service resources is spent on coordinating operating models and cooperation practices. (95) (103)

CONCLUSIONS:

Innovations should be used to support the local networking and dialogue of teachers as well as social and health care professionals. Teachers' communities can create collegial pedagogical solutions, for example based on co-teaching. Teachers' collective learning and work should also be supported through in-service training. Pupils' peer learning and assessment should be used more consciously to support learning at schools.

Joint training for teachers, school social workers, public health nurses, psychologists and physicians is needed. This would enable a joint understanding, pooling of resources, and the development of a shared professional identity. For this, changes to the contents and structures of qualifications are needed. (95)

Preparations for amalgamating the Basic Education Act and the Student Welfare Act should be launched. (79) (103)

2.2　Towards more equal knowledge and skills

Among other things, equality in education means ensuring that each child and young person has a right to productive and high-quality learning. The challenge in this lies especially in taking care of those children and young people who, because of their disability, behavioural problems, ethnic background, sexual orientation or family circumstances, cannot pursue their studies fully without special support. In face of the continuously mounting competence requirements in the workplace and other areas of life, equality in knowledge and skills, and especially safeguarding a minimum level of competence for all, take on a new importance. (100) (103)

By international comparisons, the competence of Finnish young people continues to be top class. Over the last ten years, however, the average knowledge and skills of young people completing comprehensive school have declined by an amount that corresponds to more than half a school year's study. In grade 4 of comprehensive school, the positive development of learning outcomes has also stalled, however not declining as significantly. The negative development has been stronger in Finland than in other countries. At the same time, the differences in knowledge and skills between pupils have approached the international average, while they were exceptionally small as recently as in the 2010s. (100)

A special strength of Finnish schools is that the variations between schools in pupils' competence levels are smaller than in other countries. On the other hand, national

studies indicate that increasing differences between schools and the rise of so-called shopping for schools are also a real threat in Finland. In particular, this concerns the largest cities and areas experiencing the strongest influxes of immigrants. This makes it more important than ever to ensure that every child and young person receives a good, high-quality education and can get on in their lives, regardless of where they live. This will also help to combat other problems associated with immigration and integrate young immigrants in Finnish society. (18) (100) (102)

Key factors in the backdrop of the decreased level of knowledge and skills include the stronger relative decline in boys' competence compared to girls in natural sciences and mathematics as well as the rapid increase in the effects of home background. (100) (8) Previously, Finland could take pride in the fact that the impacts of parents' professional, educational and cultural status on the pupils' knowledge and skills were the smallest in all reference countries. The current correlation is close to or even exceeds the OECD average. The reduced ability of our comprehensive school to respond to the demands for differentiation is also manifested in the unimpressive academic success of young people with an immigrant background compared to other young people in Finland. Young immigrants' strengths include a strong motivation and appreciation of education which, however, our schools have been unable to utilise to support their cognitive learning. Similar observations of the impacts of home background and gender have also emerged in national evaluations. Boys' competence in mathematics, in particular, is polarised more strongly than girls'. (49) (100)

Another factor in the background of the reduced knowledge and skills levels of young people, especially in higher grades of comprehensive school, is a gradual change in young people's attitudes towards education and studying. Confidence in the significance of education as a creator of a secure future has eroded little by little. Interest in the school's learning contents and commitment to studying key subjects have declined, especially in boys, in whom they were not at particularly high levels even before. The change in young people's free-time reading has been particularly rapid. The proportion of those young people who never read in their free time increased from one fifth to almost 40% between 2000 and 2015. Of boys in the lowest quartile based on their home background, 58% did no reading in their spare time in 2015. At the beginning of the millennium, this proportion was 36%. Pupils' enjoyment of reading, motivation, attitudes and interest in school subjects have a rather strong link to their knowledge. (100)

The same gender division is also typical of Finnish young people's motivation and attitudes. The difference in attitudes towards reading between boys and girls is among the greatest in the world. This is also manifested in girls' literacy skills, which are better than boys' skills to an exceptional degree. Boys, on the other hand, have stronger confidence than girls in their competence in mathematics. This difference can already

be seen clearly in grade 4, and it becomes stronger in higher grades. Unlike literacy, however, the difference in attitudes towards mathematics does not reflect the actual competence. Girls and boys have more or less equally good mathematical skills. In higher grades of comprehensive schools, girls are even slightly ahead of boys, which is rather exceptional by international standards. On the other hand, the strong difference in attitudes towards mathematics can be seen in young people's choices of general upper secondary school and other further studies at the end of comprehensive school. (100) (49) (8)

The greatest risk factor for Finnish society is a strong growth in the proportion of those with poor knowledge and skills, which appears to be linked to the differentiation of young people's growing environments. This is apt to increase the risk of social exclusion. While the proportion of top performers at the final stage of comprehensive school has also decreased, this change has been more moderate. The proportion of young people who have not reached the minimum level of knowledge and skills at the end of comprehensive school has increased, with slight variations in the content areas, from 4% to 6% at the beginning of the millennium to 12% to 14% in 2015. This proportion remains reasonable compared to the EU average (approx. 20% in 2015). Poor knowledge and skills in different content areas accumulate on the same pupils, and also certain pupil groups. For example, one out of four young people in the lowest socioeconomic quartile (25%) has inadequate skills in natural sciences, whereas this proportion in the highest quartile is 5%. While one out five young people in the highest socio-economic quartile (20%) can be termed top performers, this figure for the lowest quartile is as low as 7%. (100) (49)

From the perspective of equality in education, the increasing differentiation of urban neighbourhoods, which affects the quality of children's and young people's growing environments and the operation of schools, is a key phenomenon. Socio-economic and ethnic segregation have advanced in Finnish urban sub-regions since the 1990s. In Helsinki, for example, some schools' catchment areas and city neighbourhoods have five times higher educational and income levels than others. Currently, the proportion of parents with a high level of education varies from 10% to 50% in lower grades comprehensive schools' catchment areas, whereas the range of annual incomes is from EUR 23,000 to over EUR 60,000. Sociospatial segregation is reaching the same levels as in highly differentiated European urban sub-regions and, for example, is greater than differences between municipalities in Finland. The rapid growth of urban sub-regions and growing share of urban population underline the national significance of this phenomenon. (102)

While the average differences between schools are small in Finland, deprivation accumulating in the lowest end of the scale is a trend that also increases inequality in the schools' operating environments. The same trend towards inequality also threatens

early childhood education and care. Deprivation accumulates in certain neighbour-hoods, and also in their schools and day-care centres. There is a strong correlation between low incomes, unemployment, need for child welfare services and ethnic dif-ferentiation, among other things. In order to safeguard children's equal opportunities for learning, particular attention should thus be paid to these areas and key institu-tions for children operating in such areas. (102)

Geographical differentiation may have significant impacts on children's and young people's lives that will still be visible in adulthood. At the individual level, severe re-gional deprivation may also have a negative effect on learning outcomes and aca-demic careers regardless of the young person's personal family background. Diverg-ing development determined by neighbourhood put the equal opportunities of children and young people at risk, for example in different neighbourhoods of Helsinki. These differences are also reflected in choices of secondary level education. The proportion of students pursuing general upper secondary studies varies from 86% to 39% be-tween the residential areas in Helsinki. (102)

The differentiation is also a challenge to the operating preconditions of early childhood education and care and schools. When deprivation accumulates, families' resources become increasingly differentiated by area. At schools, this is seen as strong differen-tiation of learning outcomes and, for example, the accumulation of linguistic chal-lenges associated with ethnic differentiation and deprivation among the mainstream population in the same schools. Similarly, the differences between the local areas of day-care units in Helsinki are even more pronounced than the differences between schools' catchment areas. The differentiating trends can also be observed in other ur-ban sub-regions (102).

The purpose of education is not only to promote knowledge and skills but also to pro-duce individual information on the basis of which such choices as those concerning further studies and occupations are made. The school-leaving grades from different forms of education, in particular, may be crucial from the perspective of an individual child or young person. Variations in comprehensive education school-leaving grades have been observed between schools, which cannot be exclusively explained by dif-ferences in the pupils' knowledge and skills. The differences are to a great extent ex-plained by the pupils' different home backgrounds but also differences in assessment practices. A national evaluation concerning mathematics, among other things, noted that while assessment appears fair within schools, the same is not necessary true be-tween schools. The comparability of grades is an important precondition for pupils' equal opportunities for pursuing secondary level studies. (103) (79) (49)

Significant differences in the grades occur between teaching groups within schools. This is believed to be due to such factors as the selectiveness of special classes

based on gender and the pupils' general academic success. Special talent in music, for example, also predicted better than average academic success in other areas. Not enough is known about the practices of forming teaching groups at the school level. (79) (103)

One of the key objectives of the comprehensive school and early childhood education and care is to guarantee equal opportunities for learning for all children and young people, regardless of such aspects as their cultural backgrounds or language skills. In the light of the current learning outcomes of the comprehensive school, supporting young people with an immigrant background has emerged as a key task in efforts to secure equality. This applies to both children and young people who have migrated to Finland (first-generation immigrants) and young people with an immigrant background who were born in Finland (second-generation immigrants). In literacy, the difference between young people of the former group and other young people in Finland corresponds to approximately three school years' studies. While the difference between second-generation immigrants and other young people is smaller, it still corresponds to more than one school year. The differences in mathematics and natural sciences are also major, or 1.5 to 2.5 academic years. In many respects, learning problems appear to be interlinked with inadequate Finnish/Swedish proficiency. (100) (49)

The teacher's educational level, the number of teaching hours as well as the quality and shortage of learning materials affect the learning of minority languages, including Sámi, Roma and sign language. Great variations occur in the competence levels of pupils who study Sámi as their mother tongue. Only slightly over one half of teachers who teach Sámi as a mother tongue have a qualification as Sámi language teachers. The education of Roma language teachers ranges from comprehensive school to a higher education degree, and almost 90% of them feel they need more training. The number of Roma language lessons varies greatly, and there are major differences between the pupils' competence levels. Approximately one quarter of the students studying sign language as their mother tongue achieve at least a good level of competence. Few sign language teachers have a qualification as a sign language subject teacher. (49)

The discussion on the reduction in resources allocated to education has been lively in recent years. The reduction in funding allocated to early childhood education and general education by education providers has, however, been far smaller than the cuts in central government transfers to local governments. While the central government has implemented its decisions on savings, expenditure per pupil in pre-primary, comprehensive and general upper secondary education has on average either remained unchanged or increased in 2006–2015. The largest education providers' expenditure has reduced while the smallest providers have increased their expenditure. The differences in resources are also reflected in the organisation of the activities. (49)

CONCLUSIONS:

Rather extensive preparations are underway to shape the policies, structures and contents of future comprehensive education. Translating the proposals into concrete terms and implementing them as every-day practices will be vital. A key principle is hearing the pupils more and improving their opportunities for participation. Another major policy is ensuring that the entire cohort has adequate knowledge and skills. A qualification produced by the comprehensive school alone is not sufficient if it does not also guarantee adequate capabilities for working and leading a decent daily life in a world saturated with information. As the goal of the comprehensive school reform should be set a competence guarantee which includes promising to young people that their knowledge and skills will be sufficient as the foundation for their future lives and lifewide learning. (100)

In an equal society, the inclusion of all children and young people and their growth into active and participating citizens should be supported at school. The idea of market-driven education is inconsistent with the principles of equal and equitable education. Decision-makers should actively strive to prevent and rectify the consequences of such policy. (14)

Concrete and visible interventions in discrimination and marginalisation are a precondition for the equal treatment of pupils. Leaders of educational institutions, teachers and student teachers must understand how the school's structures and practices may cause alienation and exclusion. Teachers need more information and tools for supporting the weakest pupils. (14)

The revival of minority languages should be continued, and new ways of promoting it should be found. Children should also have opportunities to use their language outside school; more games and TV and radio programmes, for instance, should be available also in minority languages. Learning material for minority languages is needed for all languages and syllabi, including digital material. (49)

The dialogue between school and free-time activities should be intensified. NGOs and the third sector should have a larger role in work carried out among children and young people at schools and day-care centres. This will lower the threshold and provide equal opportunities for participating in free-time activities. While many children spend a lot of time in free-time activities, even at a very young age, there is also a great number of those who do not participate in any goal-oriented activities outside the school. This is why free-time activities should be made equally accessible for all. Many pupils who, for different reasons, do not 'shine' at school may find in free-time activities an outlet for the positive expression of their special skills and thus receive

positive feedback on themselves. The school could also learn to see multiple dimensions in children and their skills.

Knowledge-based efforts to improve children and young people's wellbeing should be underpinned by more itemised knowledge of learning differences and the localisation of deprivation. No systematic studies have been conducted on the relationship between schools' economic resources and the differentiation of the catchment areas they represent. (102)

The system of needs-based resource allocation should be strengthened. Some municipalities use models of so-called positive discrimination, or needs-based resource allocation. The most accurate one of these is the pd model used by the City of Helsinki. Such models should be developed and harmonised at the national level based on research evidence. (102)

As it appears that deprivation tends to accumulate in certain areas, facing families with multiple challenges at the same time, stronger attempts should be made to find solutions through cooperation between different sectors. It is essential that cooperation between the social welfare and education services with third-sector actors be stepped up. It makes sense to channel support needed by immigrants and families struggling with multidimensional problems through schools. The threshold for reaching out for support is lower in a familiar environment. Libraries, for example, could also have an important role in supporting children and young people together with youth work. (102)

In the schools of many European countries, multiprofessional cooperation has been increased to allow teachers to concentrate better on their pedagogical work. In Finnish experiments, good experiences have been obtained of Bachelors of Social Services working at schools, which makes it possible to respond to pupils' problems in the classroom. (102)

Rather than using permanent teaching groups, different emphases in subjects should be managed through flexible groupings across class boundaries. This eliminates the risk of the school's administrative structures treating teaching groups differently and producing groups with different levels of success within the school. (103)

2.3   Choices of study paths set the direction for a young person's life

Educational transitions are key events that define a pupil's academic career and identity as a learner. Transitions are associated with many expectations and possibilities but also fears. When the transition is successful, the children accumulate transition capital that supports them in coping with later transitions during their lives. These experiences also contribute to laying a foundation for lifelong learning. However, a successful transition must be supported by a multi-actor community. Researchers recommend a transition plan as a tool which also sets out the support needed at the transition stage. The plan should also take the young person's close relationships into account. (38) (82) Such pieces of legislation as the reformed Act on General Upper Secondary Education lay down the obligation to support a young person who has finished their studies in preparing further plans.

In the Finnish education system, key choices and transitions take place after comprehensive school (joint application system) and when applying for a place in higher education studies or a job after secondary level. Especially in large cities, selecting a specific comprehensive school, and especially grades 7-9 comprehensive school, appears to be a rising trend. (102) (103) This is interpreted as part of a market-driven approach to education, a trend which is also gathering strength in the Nordic countries. As a consequence, the pupil's family background and socioeconomic position have an increasing impact on their choices. The factors that produce structural inequalities in education are also visible as increasing differences in learning outcomes. (14)

A precondition for making mature choices is a process progressing through children's and young people's personal experience. It is important to give young people a possibility of making choices that are essential for their future plans and the shaping of their identities. (21) However, many young people are offered at most one alternative at the end of grade nine, unless they are prepared to leave home. In this case, the choice is directed by the accessibility of education rather than the young person's interests. (2)

The parents' education and socioeconomic status, and even the grandparents' level of education, influence a young person's choices. Their choices and later education are also predicted by factors related to wellbeing, including subjective health, health-enhancing habits and social support in youth. In addition to their academic success, there also are major differences between those admitted to general upper secondary schools and vocational institutions regarding their wellbeing, health and health habits. General upper secondary school students had a better level of wellbeing and fewer habits damaging to their health already in grade 7 than those who applied to and

ended up in vocational institutions. The health literacy of upper secondary students is better than vocational institution students', which may further increase health gaps. (79) (32) A particular risk group is formed by boys pursuing vocational studies who had poor academic success in comprehensive school. Researchers thus recommend that health education should be given more prominence, especially in vocational education and training. (79)

Being active and having career planning skills have a clear link to the pupil's tenacity, positive attitudes to school and learning outcomes. Pupils with a higher socio-economic background have more resources than others for learning these skills. The living area also plays a role. The diverse labour market, professional networks and extensive offering of further studies in Helsinki region are manifested as more advanced career planning skills. However, career guidance work forms (including introduction to working life or on-the-job training) can help to even out differences arising from background and living environments. The City of Helsinki, for example, has succeeded in improving transitions to the secondary level by reinforcing young people's social inclusion at schools operating in challenging conditions. (47)

Today's young people are expected to be able to act rationally and independently at an early age. As a recent example of excessive trust in young people's capabilities for self-direction can be cited the reform of vocational education and training. At the same time, we see a significant proportion of young people being excluded from the world of work and education. An increasing number of different activation measures are targeted at these young people. However, they often get caught in the cogs of the support system without the activation leading to their integration in society. (28).

There are major regional differences in the numbers of pupils who apply for a place in general upper secondary school. Upper secondary school is selected by 80% of pupils in Helsinki region, while this proportion is less than a quarter in many rural municipalities. In rural areas, selecting upper secondary school often also means leaving home or coping with extremely long school commutes. Many young people experience upper secondary school as an opportunity to have more time for making decisions about their future. Young people see a great difference between the support forms for upper secondary school and vocational education and training, which does not encourage them to combine these forms of education and make comparisons based on their personal interests. (2)

The educational path selected by a young person cannot always be followed without problems. Dropping out is common, especially in vocational education and training. Nearly one out of five young adults (18% of all, 21% of men and 15% of women aged 20 to 24) do not have a secondary level qualification. Longitudinal studies show that lacking vocational education and training is one of the key risk factors for obstructions

on the life path. Supporting studies that lead to an occupation and understanding the development of young people in the final stage of childhood promote the completion of studies. While a qualification certificate remains important as a formal document when applying for jobs, it is also of great importance for a young person's self-confidence. Excessive maturity should not be expected of a young person selecting a field of study, as young people aged 16 to 17 are still looking for themselves. The upper secondary school currently expects students to make selections that have far-reaching consequences for their choices of education and careers. This causes anxiety in young people and diminishes their resources needed for developmental tasks appropriate for their age, which include finding their identity and strengths. (34)

Pupils who received special education in comprehensive school have a greater risk of being excluded from education and left without a secondary level qualification. Similarly, the transition to secondary level studies is clearly more difficult for young people with an immigrant background than their peers in the mainstream population, regardless of these students having a high motivation for pursuing education. (16) (100) (103)

An ethnification of education paths appears to take place especially when transitioning to secondary level education. For example, girls with a Somali background are directed to practical nurse training, and those with a Russian background to the sectors of tourism and trade. While some students with an immigrant background have a certain type of ethnic (or religious) identity, others are defined as representing a certain ethnic type by outsiders – often as being different from Finnish people. (44)

The expectations of their families and the rest of the community also restrict young immigrants' educational choices. Plenty of cooperation with the homes is needed to expand the range of options available for these young people. Guidance counsellors' interaction with immigrant families varies greatly by school and area and continues to be fraught with many prejudices. Attachment to free-time activities is a key informal learning context for young people with an immigrant background. Free-time activities pursued together with other young people create both knowledge-based and social resources for considering choices of education. The knock-on effects of this are still felt when the young people make choices concerning higher education. (44)

CONCLUSIONS:

The planning of transitions should be laid down as an obligation of education providers both in curricula and legislation. Special needs teachers and guidance counsellors should work together to provide targeted guidance services especially for young people in need of special support. (16)

If the aim is at providing young people with equal opportunities for further studies, no more cutbacks in secondary level education should be made. Moving away from home to study at this age is a development task which many young people find too demanding. Additionally, not everyone has the financial possibilities of doing so. This problem could also be alleviated by setting up supported housing for young people and by harmonising the support forms for general upper secondary education and vocational education and training. (2)

In guidance counselling and career guidance, different possibilities for becoming acquainted with the labour market offered by new technologies should be used. Counsellors' up-to-date competence should be ensured, for example in social media use, in order to widen young people's horizons concerning the labour market. (47)

From 'corrective actions' targeting socially excluded young people, the emphasis should be shifted towards general guidance and support systems that smooth young people's paths to education and working life. The importance of the support and guidance a young person receives at an educational institution is stressed in a situation where individualisation of studies and independence are increasingly emphasised. (28)

All young people should be entitled to support that takes their working life needs and capabilities into account. It is vital to take into consideration differences between young people which may, for instance, be associated with functional capacity, local offer or the young person's interests. Ohjaamo guidance services are a promising operating model that gathers services together and is easy for young people to approach. (28)

In reforms of both education and social services, an overall evaluation of support and guidance services offered to young people and an update of the service structure carried out on this basis are needed. This applies to both general guidance and support services (including support and guidance offered at educational institutions) and services targeted at so-called special groups. (28) (47)

2.4   Obstacles to learning can be removed

Based on estimates produced in different countries, specific neural development disorders (learning, attentiveness, perception and motor ability) affect 10% to 15% of children. Typically, these disorders do not disappear or even become milder as the child grows. When the child grows older and the competence requirements of the en-

vironment build up, the negative effects become more severe. The disorders thus exacerbate the risk of socio-emotional symptoms. The risk of learning difficulties caused by the disorder can in most cases be recognised already at early childhood education and care age or even earlier. Multiprofessional cooperation is required to identify the disorder and the risk inherent in it. (91)

At population level, persons with specific neural development disorders have a lower level of education, their work history remains fragmented, and they have a higher than average incidence of depression and anxiety. The costs of these disorders to society are also considerable. In the United Kingdom, for example, the annual costs of learning difficulties in mathematics caused by such disorders have been estimated at GBP 2.4 million. The total costs to society are considerably higher than this. (91) (59)

In Finnish education, significant resources are invested in securing basic skills. The resources are not used optimally in all respects to support children's development, however, and the support is often ineffective. Children with specific neural development disorders need considerably more individual and intensive support, especially at the beginning of their school path. (91). Additionally, a dualistic division into neurological and psychiatric disorders fragments the support and treatment paths inappropriately. The school and any difficulties encountered there should be seen as a central cause of psychological disorders, which stresses the importance of cooperation between educational, social welfare and health services in their treatment. (59)

The negative consequences of learning difficulties are obvious. This is why timely intervention in them is important, and the support should continue as indicated by the pupil's individual needs. Support for learning difficulties is readily available in grades 1 and 2. After this, the amount of support is reduced radically. Learning difficulties are a risk to the pupil's psychological wellbeing and secure future. Learning difficulties in reading and mathematics diagnosed in a child have a strong link with psychiatric symptoms, level of education and employment in adulthood. For example, of those who were diagnosed with a learning difficulty in mathematics at school, 29% received reimbursements for antidepressants and 14% for anxiolytics as adults, whereas these rates for the control group were 15% and 7%. Of those who had received a diagnosis of learning difficulties, more than 28% received basic unemployment allowance from the Social Insurance Institution for more than 258 days during their lives, whereas this proportion for the control group was 13%. (59) (37)

A poor level of skills due to learning difficulties in lower grades predicts increasing anxiety in a child in later school years. Early language impairment also lowers a child's later ability for self-regulation. Ability for self-regulation, on the other hand, is linked to the development of social skills and the way in which the emotions evoked in a learning situation affect performance. (59)

Naming speed and sequencing skills at pre-primary education age in the learning of mathematics and reading have a link to later fluency in reading and counting. Those with weaker skills are left further and further behind as the school years progress. Early problems are a particularly strong indicator of later inadequacies in mathematical skills. In dyslectic children of school age, memory and linguistic skills as well as tenacity in completing exercises and gender explained variations in sequencing skills. In meta-analyses, it has been observed that the speed of naming objects and colours can also be used as an early predictor of mathematical skills. (91) (59) (60)

In mathematics, being left behind others is a cumulative process. Unless the pupil receives help for their problems, the difference to others will keep growing. Literacy development is different from mathematics: readers who start off weak catch up on more advanced pupils during the first school years. On the other hand, skills in mathematics and literacy are closely linked, and when difficulties are observed in one of these areas, attention should also be paid to the other. (60) (91)

The development of basic skills, self-efficacy, attentiveness and positive social behaviour can also be efficiently supported as part of early childhood education and care and school activities without special expertise or exceptional arrangements. Positive results have been obtained, among other things, from pedagogy that focuses on reinforcing self-efficacy, building up basic mathematical skills and supporting attentiveness and cognitive control. (59) Many evidence-based methods for helping children with their difficulties are already in use (including Lukimat and Ekapeli (Grapho-Game)). (91)

Similar results have also been obtained from preventive work in which the commitment to the principles of teaching and guiding behaviour is reinforced among the entire personnel at a day-care centre or a school. Focus on guiding the parents from the early childhood education and care stage up has also been found effective, and scientifically tested tools for this exist. (59)

Motor learning difficulties that hamper learning occur in approx. 5% to 6% of pupils. The diversity and multiprofessional nature of support is stressed in overcoming difficulties with motor learning. It is also essential to drawn on children's and families' participation and views. Teacher's tools have been developed for recognising motor problems, but further research is needed in their cultural standardisation. When providing support, strengthening the child's self-confidence and building up their motor skills and self-efficacy in an encouraging atmosphere are essential. The teacher can promote this development in many ways, ranging from adapting exercises and breaking them down into smaller parts and, in more demanding situations, using programs for practising the relevant skills in small groups. (5)

Motor problems and developmental language disorders often go together, which is manifested as problems related to regulating the child's activity and attentiveness, for example. Disorders occur in more than 5% of the cohort. Childhood disorders continue to place limitations in youth and adulthood. Language disorders also carry the risk of less effective social relationships. The linguistic abilities of young people at reform schools, for example, are poorer than average. (96)

Language problems are often emphasised in the case of children and young people with an immigrant background. In Helsinki region (Helsinki University Hospital), approximately one half of children with the most severe linguistic disorders being seen for the first time have an immigrant background. This indicates inadequacies in the children's Finnish language learning. In Helsinki region, 21% of children aged under 7 speak a language other than Finnish, Swedish or Sámi at home (2018). Their Finnish language proficiency, in particular, predicts the educational level of immigrants. Education obtained in Finland is one of the most important predictors of employment. (96)

The organisation of special support for comprehensive school pupils is today directed by a three-level model of support for school attendance. The model has been adopted comprehensively in municipalities, even though major differences exist between them. The new model has mainly been positively received. The new requirements of multi-professional cooperation have resulted in varying interpretations, however. Principals have rather positive views of the support model's effectiveness, but the question of resources crops up continuously. By strengthening the guidance system, it is considered important to also enable pupils receiving support to continue their studies at the secondary level. (83)

The manner in which the support is organised (inclusion vs. segregation) has been found to be of little or no significance in the development of pupils in need of support. The pupils' ideas of themselves as learners are more positive in separate small groups than elsewhere, however, which may also be influenced by the lower level of requirements in a special group. On the other hand, there are indications that in inclusive solutions, pupils needing support can to some extent benefit from association with their classmates who have better skills. The number of pupils receiving support in a class or at a school is linked to a slightly lower level of knowledge and skills in special needs education pupils, however only when the number of those receiving support in them is considerably high. (83)

Young people who are left without the support they need in mathematics in grade 9 have a considerably high dropout rate in secondary level studies. Difficulties with literacy, on the other hand, influenced general academic success, also increasing the risk of dropping out of secondary level education. Less than a third of those who drop out

of studies have difficulties with mathematics, and one quarter have difficulties with literacy. It is not always possible to halt the negative development of the educational path by means of support provided at the secondary level. (37) Tests are used to identify high-risk pupils at the start of the studies. Good results have been obtained from using these tests for planning individual learning paths and supporting motivation. A poor information flow from comprehensive school to secondary education often hampers the identification of support needs, however. (91)

Some children and young people who have specific neural development disorders do not benefit from remedial and special needs teaching provided at comprehensive schools. (91) These young people need individual and intensive measures that can be combined with the individualisation of teaching. No national structures exist for this. Coordinated multiprofessional cooperation is needed to identify these children and young people as early as possible when they reach school age. Central Finland is probably the only Finnish region in which an operating model for this has been developed (Niilo Mäki Institute). Neither do schools have access to systematic tools for identifying problems and monitoring competence development across grades. (91)

CONCLUSIONS:

During the first school years, there should be a special focus on practising mathematical skills, especially with the less successful pupils. Practice should be continued individually with each pupil until their basic skills become automated. Paying attention to sequencing skills, in particular, already in pre-primary education could be useful. On the other hand, there is no need to learn reading in pre-primary education. Instruction given too early may even undermine later learning by having a negative effect on the child's motivation. (60)

In early childhood education and care and at comprehensive school, multiprofessional support is needed for those who have mild obstacles to learning, for example due to difficult circumstances at home. Pupils with socio-emotional problems also need support that stresses their strengths. Learning difficulties are caused by neurobiological factors (structural or functional), and these learners thus need careful assessment of their problems and, on the other hand, also their compensation strategies. They also need support which should continue beyond the lower grades. Multiprofessional teams which, together with parents, put together solutions for assisting pupils with their behaviour and socio-emotional problems are needed to support schools. A predictable support system activated at the start of the studies, rather than only when problems do occur, should be created in secondary level education. (37)

Flexible and inclusive solutions implemented carefully and with discretion are basically a more optimal way of organising the special support needed by a pupil, while for some pupils a small group may be the best solution. (83)

Multidisciplinary pupil welfare should operate close to the school and be part of its daily activities. Schools could have coordinators specialising in interventions who organise the implementation of interventions and the evaluation of their effectiveness, as well as refer pupils to support provided outside the school when necessary. Administrative boundaries and other obstacles to treatment between the school, health care and medical care should be removed, allowing children and young people immediate access to the help they need. The emphasis should be shifted towards earlier and preventive services. (10) (59)

Practices should be developed for reinforcing pupil welfare support integrated with early childhood education and care and the school in cooperation between experts of educational, social and health services. (10)

School health care should be developed so that it can, in addition to promoting health, also respond to some medical care needs, especially in the case of psychiatric illnesses. (10)

Funding for developing the education sector is mainly allocated to providers of early childhood education and care and education. The funding models do not enable the type of research-based development that is required to identify and eliminate learning difficulties. There is an obvious need to develop funding models allocated directly to developing evidence-based methods for evaluating and supporting capabilities for learning and school attendance. (91)

2.5 Digitalisation enables and requires pedagogy of a new type

Children's and young people's media use is constantly becoming more digital, mobile and independent. This is a fundamental cultural change. Of children starting school, 60% (2016) have a mobile phone, and almost all of them watch visual media daily. The majority of children use the Internet regularly. Most children aged over ten play digital games at least every week. (29) The children of parents with a low educational level also had more screen time. (7)

Children use the media diversely, and it is important to highlight this fact rather than merely focus on concerns over children and media. The children also commonly wish that adults would use media together with them. When seeking effective media use models for instruction, it is essential to hear and taken into account children's personal experiences and knowledge of media. Children's experiences and knowledge differ, depending on such factors as their socioeconomic background as well as their living area and region. (29)

Children's and young people's worldviews, identities and friendships are strongly shaped by social media. For example, they reflect on themselves and their choices in relation to well-known YouTuber personalities and topics of interest to young people: questions related to career choices, sexuality and social relationships are some of the themes for which young people seek answers on the web. It has been observed that children and young people as well as their parents are relatively well aware of the benefits and harms of digital environments. (16) (69)

Children's possibilities of using the digital offering and solutions that promote their inclusion vary a great deal. This is a key challenge to education aiming for equality. The use of digital devices depends greatly on the family background. Social media and the digital environment cause more distress and problems related to identity building to young people in the lower socioeconomic groups than to others. Correspondingly, the well-to-do obtain more benefits and support for their development from social media and digital device use. They also use the devices more creatively. (16) (69)

The civic participation through sociodigital tools of young people at school age is divided unevenly. Almost one half do not use technology intensively, and approx. 25% focus exclusively on gaming. Only 10% to 15% of pupils use the technology to create something new. On the other hand, the majority of young people participate in digital interaction directed by friendship on the web. Interaction directed by interests, on the other hand, is less common. Of the user groups, gamers' networks are somewhat more limited than the networks of basic users and creative participants. (8)

The digitalising global society sets new boundaries of power, truth and information and determines the roles that shape young people's daily lives and future. (58)

At school, pupils receive little or no guidance in using digital technology for their studies or for creative participation anchored to it. It is little used for developing new types of pedagogical operating models. Technology is mainly employed for conventional forms of study. (8) It has also been observed in Nordic comparisons that smartphones and other devices are commonly used in the classroom, but mostly for activities unrelated to school work. Teaching methods relying on technology may even restrict both

the accessibility of essential teaching content and pupils' active participation. Technology-mediated teaching also tends to individualise learning paths in ways that increase rather than reduce differences between the pupils in learning. (14)

There is a sizeable gap between the practices drawing on technology at school and the practices of studying used by young people outside the school. Regardless of the limited support provided by the school, young people share independent peer support for learning on information networks. Many young people versed in the digital world report that they would be more studious at school if they could use technology more intensively. (8)

Curricula stress the use of technology for promoting future skills, including self-directedness, innovativeness and team work. However, there are great variations between Nordic teaching practices regarding the extent to which they ensure that the teaching content is covered comprehensively on the one hand, and promote pupils' autonomy, activeness and inclusion in teaching on the other. In Finland, instruction follows the content-focused pedagogical tradition more closely than in other countries. The furniture, teaching methods and assessment practices in Nordic classrooms have been found to be mainly conventional and teacher-centric, and they leave little room for pupils' initiatives. (14) (100)

Teachers' lack of skills is one reason for the slow uptake of technology in teaching. Teacher education does not provide the students with sufficient capabilities for operating in digital environments. The experiences of recently graduated teachers support this conclusion, as do analyses of curricula for teacher education. The offer of instruction in information and communication technology is inconsistent and varies in different degree programmes. (19)

CONCLUSION:

A change of school culture is needed. Young people's autonomy, active agency and transversal competence should be supported extensively. The school should guide young people in the academic and creative use of technology. Young people should be given models for using technology in personal and communal learning. Young people's own communal development efforts should be supported and used without hesitation by introducing their results at schools. (8) (14)

2.6   Integrating arts and physical activity in teaching promotes wellbeing

The basic premise of teaching is providing holistic support for a child's and a young person's development. To ensure a balanced development of their personalities, simultaneous attention should be paid to children's different functions. (34) Arts and physical education are an essential part of this package. Arts education plays a key role in fostering cultural inclusion and equality, in particular. The challenges to arts education at comprehensive school include delivering consistent quality: 35% of music teachers and 24% of visual arts teachers in higher grades of comprehensive schools do not have formal qualifications. Many class teachers also feel insecure when teaching these areas. A significant part of the comprehensive school's learning outcomes are not reached, not even at the minimum level. Many children and young people are unsure of their abilities and skills. A young person's lack of confidence in their abilities and unfamiliarity with cultural activities are the strongest predictors of not participating in culture later. (4)

The various areas of learning are not separate from each other. Relatively strong evidence already exists of the positive transfer effects of music and physical activity on cognitive learning. In early childhood education and care, musical games and other musical activities have been found to promote the expansion of vocabulary, counting skills, attentiveness, ability to regulate emotions and social skills. A Finnish pilot study found that additional time spent on music and physical activity did not have a negative effect on cognitive learning outcomes even if the time spent on cognitive learning was thus reduced. However, learner-centric activities that ensured the learners' participation and careful planning of such activities were required for this. (4)

Finnish children participate in physical activity and get daily exercise less than before. In the meantime, however, developing a physically active school culture is stressed as a curriculum objective. Traditional physical education at school is not capable of responding to this need. Bodily expression and dance, in particular, offer extensive potential which is almost completely untapped in today's school. (4) For example, promising results have been obtained from the effectiveness of dance performances produced by young people, and the workshops and concluding discussions associated with them, in preventing bullying. (87)

There has been an unfortunate divergence between the school and artistic and cultural activities outside the school, and they do not form an integrated and equally available service package for children and young people. Basic art education, for instance, only reaches approx. 12% of children and young people. Particular groups

who miss out include boys, higher grades comprehensive school age pupils and multi-cultural young people. A significant part of children and young people are also excluded from these activities for financial reasons. (4)

Solutions for more extensive integration of multiple forms of music and physical activity in school instruction have been sought in cooperation between schools and researchers of the field. The results obtained from arts education integrated in the school day and based on cooperation between the class teacher and an art educator from outside of the school are encouraging. Musical exercise and dance, for example, have been found to support pupils' agency and promote interaction, togetherness and empowerment in groups where pupils do not have a common spoken language. In pre-primary education and grades 1 and 2 of comprehensive school, pupils' group formation, self-confidence, feeling of security and togetherness were reinforced under the guidance of a dance pedagogue. Technology use motivates pupils to participate. In music, technology is seen as a multi-media method of producing culture rather than only a learning tool. (4)

Learner-centric art activities increase the experienced meaningfulness and significance of learning, thus supporting the pupil's wellbeing. Children and young people see social relationships and the peer community as meaningful in art activities. Cultural youth work offers facilities for free-time activities, whereas young people themselves would like long-standing support for and expert guidance in their hobbies. This can be enabled by cooperation between the school and other actors. Club and free-time activities organised at the school improve pupils' attachment to school and school satisfaction. Free-time activities organised in connection with the school day also tackle the mechanisms of advancing inequality by offering the same opportunities to all children and young people. (4) (99)

When comparing different hobbies, it was found that artistic activities (music, visual arts, manual skills, drama) promote the regulation of both behaviour and emotions as well as wellbeing across the broadest front, in addition to promoting artistic expression and thus creativity. The impacts are seen in both working skills (concentration) and action as a group member (social and ethical development), and thus also in orientation to cognitive learning. (34)

CONCLUSIONS:

Inequality in cultural inclusion, which results in a division between active creators and passive consumers of culture, should be eliminated. Promoting pedagogy that takes cultural starting points into account is essential. Cooperation across the boundaries of the educational and cultural sectors is the key to this. Clear structures are needed for this cooperation, however, to enable schools to work together with third-party art and

cultural service providers. In the interest of good accessibility and equality, these ac-
tivities should be part of the day at the day-care centre or school or take place imme-
diately after it. (4)

The activities of early childhood education and care should be reformed to ensure that
they offer children equal opportunities for participating in free-choice cultural, art and
other recreational activities without segregating the children on economic, regional or
any other grounds. Statutory support and clarification are needed to promote free-time
activities organised at school. (34)

2.7 Organisation of early childhood education and care

Legislative reforms and the updated National core curriculum for early childhood edu-
cation and care have had a positive impact on the development of activities. However,
the changes have also enabled a trend of regional differentiation. The entitlement to
the services varies by municipality. The sizes and compositions of child groups at
day-care centres differ, and there is a greater turnover of children in groups. Children
do not always have permanent groups. Parents feel uncertain about the current devel-
opment. (72)

The reforms carried out do not, however, sufficiently take into consideration the differ-
ent forms of early childhood education and care, including family day care and open
early childhood education and care. The increasingly market-driven character of early
childhood education and care has created new types of challenges to the steering
system and the equality of services. The responsibilities of private service providers in
relation to the municipality's steering obligation are unclear. Municipalities struggle to
offer steering of a consistent quality for public and private services. The manner in
which support measures for children's development and learning are organised also
varies between service providers. In private services, financial reasons often are an
obstacle to organising the required support. (49)

Early childhood education and care plans provide solid guidelines for ECEC delivery.
However, there are significant differences between the regions regarding the precon-
ditions for implementing the local ECEC planning process. The personnel's in-service
training is a critical factor in terms of the smooth running and implementation of this
process. Outside cities, problems are caused by the fact that any training is often or-
ganised far away, and finding substitutes is difficult. (49)

The local family policy and early childhood education and care services on offer provide a rigid framework for children's daily lives and growth pathways. A family's choices are also determined by the parents' employment and financial situation, family and life situation, place of residence, the available support (both support from peers and family/friends as well as institutional support), the family's own and culturally determined ideas of the best interests of the child and good parenting, the available information, as well as factors related to the child's health and personality. Consequently, there are numerous ways of organising a child's care and upbringing. This is not very often exclusively a question of the family's free choice. (84)

The Finnish discussion on early childhood education and care is characterised by tensions: a strong mentality stressing the significance of either upbringing at home and the mother's care on the one hand, or participation in early childhood education and care services on the other. In political and public discussions, home care and participation in ECEC services are often presented as mutually exclusive, whereas in reality, the parents make considerably more complicated choices related to daily child care and early childhood education and care. (70)

Caring for young children at home is common in Finland, and most families use child home care allowance at least for a time. On average, the allowance is used for 13 months. The overwhelming majority of those receiving home care allowance are women, while as few as approx. 7% are men. Home care allowance is used for longer in the families where the mother has a low level of education or has been unemployed before receiving the home care allowance. Using home care allowance is also somewhat more common in single-parent families. The findings indicate that a higher level of home care allowance slows down the transition to work of both persons in and without employment. The transition to work is also slowed down by a rural municipality of residence and the unemployment rate. (88)

The parents' evaluation of early childhood education and care quality affects their choices of child care solutions. If the quality of early childhood education and care does not meet the preferences of the mother, in particular, she is almost three times more likely than other mothers to continue on home care allowance when her youngest child reaches the age of 2. This is the most important factor predicting the mother's child care choice when her age, income, education, number of children and work history are taken into consideration. Regarding the quality of early childhood education and care, the most common aspect criticised by parents is group sizes. (40)

Municipalities use different discourse types associated with structuring the local policy and organising care. These discourse types are tied to the societal and cultural understanding of how important equal and high-quality early childhood education and care is. This also determines the arguments for supporting the home care of children. For

example, in some municipalities the condition for entitlement to a home care allowance increase paid by the municipality is that all the under school-age children in the family are cared for at home, rather than allowing an older sibling to participate in early childhood education and care. (84) (70)

Municipalities increasingly use performance-based steering of early childhood education and care. The performance indicators do not encompass the objectives of ECEC experienced as the most important by teachers and parents, however. Promoting social justice, for example, is difficult to translate into an indicator, and according to teachers' and parents' experiences, there is an over-emphasis on facilities utilisation ratio, which is easier to measure. The personnel feel that their professional autonomy has been reduced as performance guidance becomes more widespread. There are also indications that as a result of distortions in performance guidance, attention is focused on successful and well-adjusted children, whereas there is less consideration for children who need more help and support. (77)

Experienced employees find the changes in the work environments and the work culture of early childhood education and care confusing. As key changes are experienced the new expectations of professionalism, changes in professional relationships, and the requirements of developing the work. The changes are also relevant to their relationship with children and parents. (75)

ECEC personnel prioritise daily human relationships work. They report a critical increase in administrative tasks, more bureaucracy, and time swallowed up by planning, evaluation, documentation and networking. Significant development needs are associated with the forms of cooperation with parents, as the objective is increasing the parents' possibilities of participating in and influencing the activities. (72)

Many factors in the work of kindergarten teachers and childminders create loading and stress. Rushing, emotional pressures, and the demanding nature of the work are a challenge to their coping and recovery from work. The work is also characterised by continuous changes, diversity of the children at the day-care centre and their backgrounds, and lack of clarity concerning the duties and responsibilities of different occupational groups. Many young employees feel they cannot work competently. At the same time, however, the work contains many inspiring aspects that bring the personnel joy. According to measurements, day-care centre employees are on average not suffering from high stress levels. They experience good work engagement. (37) (75)

Educating and bringing up children is work based on values. The personnel's values are often unconscious and difficult to verbalise. The values experienced as essential by the employees and the requirements of daily work often result in an ethical dilemma: the daily restrictions prevent the realisation of key values in encounters with

children. Mentoring as well as narrative and action-based methods have been found effective in creating possibilities for ethical consideration and reflection on the daily work. Mentoring also supports personnel's wellbeing, attachment to the occupation, professional competence and development work in different career stages. Additionally, mentoring is a key tool for the induction training of new personnel. Induction training often remains inadequate, and this is one reason why a large part of new employees experience their work as challenging and difficult. (72) (75)

CONCLUSIONS:

Regional differences in the offer and use of early childhood education and care services should be monitored and evened out. The equality of parenthood should also be supported and promoted by hearing both fathers and mothers in issues concerning the children. (84)

Diversification of early childhood education and care services. A mobile day-care centre, for example, could be an effective way of increasing the participation rate in sparsely populated areas. By regulating the child groups at day-care centres, it should be ensured that the groups are permanent enough to support children's peer relations and togetherness. (72)

Multiprofessional teams and putting mentoring on a permanent footing should be supported. Interaction between different types of expertise creates strength and sensitivity for development work in a community of educators. Team work is also a way of processing professional states experienced as unsatisfactory in daily work and the negative emotions caused by them. To maintain a well-functioning community, providing induction training for new employees is one of the key factors. Through mentoring, an employee produces and maintains interpretations of their professionalism, competence and working life in day-care. (75)

Early childhood education and care organisers and service providers should be supported in implementing a local steering system and enhancement-led evaluation. Early childhood education and care personnel and parents should also be involved in the evaluation work. Evaluation should not be directly tied to the personnel's salaries or the day-care centres' funding, and evaluations should not be used for making comparisons between centres. (77) (49)

Child impact assessment should be used in both municipalities and at the national level in policy-making and when planning service organisation. The office holders responsible for early childhood education and care in municipalities should be offered training on assessing child impacts and safeguarding children's rights. (84) (77)

The objectives and requirements set for different operating forms of early childhood education and care should be clarified at the national level to improve their equality. The municipalities' obligation to supervise and steer private ECEC providers and the division of responsibilities between the municipality and service providers should be clarified. (49)

It is important to increasingly stress the importance of early childhood education and care and child health clinic activities as services that equalise children's capabilities for learning. They should guide the parents to understand the impacts of early discussions, reading, play and literature on vocabulary, thinking and basic mathematical skills. (49)

3 Safety

The majority of children and young people enjoy a good level of wellbeing. Finnish young people, especially boys, are exceptionally satisfied with their lives by international standards. The challenge, however, is that problems related to wellbeing accumulate in many different forms on the same children, young people and families with children. The division into winners and losers is threatening to take place earlier and more prominently than before. Long-standing accumulation of problems is a serious threat to the positive growth and development of these children and young people, and ultimately also to civil peace. (86) (88)

The most significant factors putting children's wellbeing at risk are loneliness (see Chapter 1), mental and physical violence, and poverty of the family. More than others, these risk factors are experienced by those belonging to vulnerable groups, including children and young people with disabilities, placed outside the home, with an immigrant background or living in a single-parent family, and the children of mothers with a low level of education. (86)

3.1 A safe growing environment at home, the day-care centre and school

The great majority of Finnish children and young people live, grow and learn in environments that are mentally and physically safe and balanced. Not all children and young people have such a peaceful environment in which to grow and learn, however. Some of them encounter discrimination, bullying or other abuse regularly. These experiences have far-reaching consequences in their lives. If not addressed, they put the young people's health, wellbeing and learning at risk in ways that lead to exclusion from society's normal functions in adulthood. (78) (86)

Three per cent already experience abuse in infancy, including lack of care or attention or shaking. One out of eight parents of four-year-old children say they had filliped or slapped the child or pulled their hair. Boys are exposed to child abuse more often than girls. One out of eight parents finds pulling a child's hair or filliping acceptable, men more often than women. The parents' alcohol use and tendency for violent behaviour increase the risk of child abuse. Programmes have been developed for controlling and reducing violence in families, and good results have been obtained from these interventions. (10) (78)

Parents' wellbeing and satisfaction with life affect the child in many ways. Of parents who have given birth, 23% are highly satisfied with themselves as parents. This experience is shared by 21% of other parents. The corresponding shares of those who are at least relatively satisfied with their parenting are 93% and 90%. Three per cent of parents who have given birth and seven per cent of other parents score a deviant result when responding to a battery of questions that measures interaction or bonding (mental image of the infant) between the parent and the infant. (10)

The parents of four-year-olds are also mainly satisfied with their parenthood. One out of eight often feels inadequate, however. Women are more likely to feel inadequate than men (14% vs. 5%). Women feel they need support for their coping (40% vs. 17%) and parenting (33% vs. 15%) considerably more often than men. (10)

The parents' life situation is reflected on the quality of the child's living environment. Seven per cent of parents with four-year-old children often feel lonely. This experience is more common among women than men (8% vs. 4%). Loneliness is more common in single-parent families; one out of five (19%) single parents is lonely. Parents' experience of loneliness has strong links with their depression symptoms, psychological stress and need for support related to both parenting and their personal coping. (10)

More than one out of three parents of four-year-olds report that the child had been bullied at home, in care or during free time in the last year. Almost one out of ten of these parents has experienced mental violence in their intimate partner relationship in the last year, and a small minority (1–2%) also physical, sexual or economic violence. (10)

Most children and young people at school age have a well-functioning and open relationship with their parents. More than 90% feel they have a good dialogical connection with their parents. Depending on the level of education, 7% to 9% of girls and 5% to 7% of boys can almost never discuss their issues with their parents. These young people display significantly more daily symptoms, overweight, binge drinking, loneliness, fatigue, anxiety and truancy than others. Problems with talking to the parents are also linked to mental and physical violence used by parents. Difficulties are considerably more common in families where the parents were born abroad, the child or young people has significant cognitive or physical disabilities, or the mother's level of education is low. (10)

One out of eight grade 4 and 5 pupils, one out of four grade 8 and 9 pupils, more than one out of four general upper secondary school students, and one out of five vocational students experience mental violence used by their parents, including a refusal to talk, verbal abuse, or threats of hitting or whipping the child, at least from time to time. (10) The mother's low level of education and the family's alcohol use are linked to experiences of mental violence used by the parents. Physical violence used by parents against a child is less common but not unheard of. The proportion of pupils affected by physical violence is 4% to 6% depending on the age group. (10)

Experiences of mental violence used by parents are considerably more common among young people with some physical or cognitive disability. At higher grades of comprehensive school and upper secondary school, more than 40% of these young people said they had experienced mental violence used by their parents in the last year, whereas this proportion for all young people is one out of four. (10)

Young people who had experienced mental violence used by the parents displayed more daily symptoms, loneliness, symptoms of anxiety, binge drinking and school fatigue. Experiences of mental violence are also linked to life management and satisfaction with life. (10)

Learning is disrupted by bullying at school already in the lower classes. Seven per cent of pupils in comprehensive school grades 4 and 5 and six per cent of pupils in grades 8 and 9 reported experiencing bullying at least once a week. By international comparison, the incidence of bullying at Finnish grades 7-9 comprehensive schools is close to the average. One per cent of general upper secondary students and three per cent of vocational students experience regular and repeated bullying at school. Boys are more likely to feel that they are being bullied than girls. In the last ten years, the incidence of bullying has dropped, especially among boys. Young people with a foreign background, placed outside the home or with disabilities as well as those whose mothers have a low standard of education experience considerably more bullying at school than others. (10) (15; see section 1.5) (100)

Intervening in bullying and talking about it are important but do not necessary resolve the situation. In grades 8 and 9 of comprehensive school and in upper secondary school, approximately one young person out of three feels that bullying continued or got worse after it had been reported to an adult in the school. Bullying erodes a young person's wellbeing, satisfaction with life and feeling of life management. Problems with school attendance, including school fatigue and unauthorised absences, are considerably more common among young people subjected to bullying at school. Young people who are bullied at school also feel significantly more often than others that their parents have used mental or physical violence against them. (10) (15; see Chapter 1) (38)

More than one out of ten boys (12%) and one out of three girls (30%) in grades 8 and 9 have experienced sexual harassment in the last year. Young people placed outside the home have an up to five times higher risk of experiencing sexual violence than their peers living with the parents. Rainbow youth, especially boys, also experience sexual violence significantly more often than other young people. (10)

The nature of a child's problems affects their interaction with adults. When a child has serious problems, this threatens the adult's wellbeing and puts their coping to the test. Consequently, supporting not only the child but also the people important for the child, including parents and teachers, is important. (20) Support is particularly important when the young person has got lost in their life in one way or another. The number of these young people in our midst is rather high. One young person out of five suffers from different mental health problems, for example. The majority of these problems go untreated. Problems in youth strongly predict a corresponding diagnose in adulthood. This often has long-term effects on later wellbeing, health and ability to study and work. The factors that disrupt young people's mental health and shake the secure foundations of their lives in other respects contribute to 18% (men 21%; women 15%) of Finnish people aged between 20 and 24 having no employment, education or a vocational qualification. (21) Lack of vocational education and training is a serious threat to making it in life. (34)

A safe growing environment is created in cooperation between children, young people and adults and, on the other hand, among adults. In early childhood education and at school age, positive relations with parents and teachers are vital factors that protect children and allow them to grow in peace. They may protect children from the negative effects of development risks and other problems associated with human relations. A positive relationship between a teacher and a child may also even out differences between children stemming from different family backgrounds. It is important for a child to be able to talk about their issues with an adult and feel that they are heard. (21) (100)

Children's and young people's wellbeing and the safety of their growing environment can be promoted by carrying out systematic child impact assessments and bringing the perspective of child budgeting to bear on all political decisions and services. This way, the predictability of services for children and families can be improved, a cross-sectoral operating culture can be reinforced, and gaps in the service system and professional competence can be identified. It must also be possible to ensure that the child's and young person's right to be heard is realised and that they can influence the preparation and implementation of decisions affecting them. The discussion on a child and family friendly work culture should be structured around a more critical and differentiated approach. Especially organisations working 24/7 should formulate strategies for taking into account and intervening in stress factors. (58)

The child impact assessment should also support the growing environments of those families whose contact with services is superficial but whom the services would benefit the most. Critical evaluation of operating cultures, daily practices and operating methods from the perspective of children's experiences is also needed. Additionally, it is important that public and private service providers are thus put in an equal position, for example regarding supervision and the required quality criteria. (58) (49)

CONCLUSIONS:

Home services and family work referred to in the Social Welfare Act should be developed and integrated better in other services, including family centres, student welfare and services for adults. Home services and family guidance should be integrated in home visits. The principle is that family work with a single family is carried out as required by the family's needs. (10)

A Child welfare academy should be set up to collect, compile statistics on, analyse, report and implement in practice information on child welfare. (33)

The Parental Box is an evidence-based, easy-to-understand and inspiring initial information package on parenthood given to each parent. Based on experiences gained, ideas of a parenting school and a parenthood 'driving licence' for school-age children have emerged. This would comprise instruction given to all students on what looking after a child involves. Instead of overdoing it or neglecting the child, information about what sufficiently good parenting means is needed. (37)

3.2 When the parents' resources are insufficient to safeguard the child's peace for growing

The parents' divorce may be a severe risk factor to a child's wellbeing and also a threat to their safety. If there has been violence in the family before separation, there is a considerable risk of it continuing or even becoming more brutal. In that case, the child's daily life is overshadowed by constant fear, insecurity, physical violence and even death threats against the mother or the child themselves. In these situations, children adopt different positions, build their security and strive to cope with situations involving violence in the aftermath of divorce. This makes identifying needs for assistance and support more difficult. In complex and intertwining problems associated with divorces, safeguarding and promoting children's wellbeing is often less of a priority than dealing with the parents' rights. (31)

Difficult custody disputes transect the entire service system for families with children. In these situations, children and families are often given the runaround from one unit to another, and individual interventions do not bring the desired results. The practices of drawing up statements by the Social Board related to acrimonious divorces are inconsistent and time-consuming. Their effectiveness, foundation on research evidence and consistent quality vary in different parts of the country. (73)

The recognition of children's and young people's situations, needs and expectations and the determination of their need for support are hampered by a fragmented knowledge base. In particular, this applies to those children and young people whose problems are multidimensional and long-standing, and sufficient assistance cannot be provided for them through the support services offered by the school. Information on the reasons for the need of child welfare, clients' backgrounds, client paths and practices often is disjointed and inadequate regarding a child. The actual effectiveness of different practices is not known. (32) The field of child welfare is affected by a severe lack of knowledge and shortcomings in the coordination of information. (33)

Placing a child or a young person outside their family is an extreme way of guaranteeing them a safe growing environment. These young people need help for their school attendance as well as support persons and families. They would often like to see firmer interventions in their parents' problems. Providing stable daily lives for these young person is not without its problems. According to children's and young people's experiences, the social workers responsible for their affairs do not have enough time to meet the young people. Foster care places are not supervised sufficiently. (33)

The culture of child welfare lacks transparency, which is manifested as neglect, shortcomings in children and young people's inclusion, and the ensuing adjustment problems. More transparency is called for at all levels of the system. It is also believed that increased transparency would help dispel prejudices related to child welfare. Children and young people felt violated by the system in situations where they were given unsubstantiated promises concerning the duration of their placement, for example, or their future was not planned at all. Young people placed outside the home would like home-like placements where individual needs and preferences are responded to flexibly. This is not about major issues – being allowed to select your own furniture and put posters on the walls would be sufficient for creating a feeling of having a safe personal space. (33)

Above all, children and young people placed outside the home would like adults to have time, competence and motivation to encounter them. A good support person is characterised as empathic, honest, dedicated and someone who enjoys their work. Trust created in this way can make up for multiple experiences of lack of safety, botched encounters and distrust in previous life stages. (33)

Increasing transparency and inclusion in child welfare is seen as essential in order to ensure that the services meet the children's reality better. The processing and evaluation of information on a child is one-sidedly shaped by frameworks of interpretation used by professionals, which may block genuine listening and understanding of the information from the child's perspective. The suggestive nature of information produced by children is a challenge of its own. Children often stay silent about their family's internal affairs to protect their family or when they doubt the reliability of the adult asking questions. (33) (88)

The child's world can be reached in difficult situations when the work is based on mutual understanding. In situations where the parents oppose to child welfare work, children risk being left without the support they need. Child welfare services should invest in work forms that address the child's interests especially in such situations. (33)

It has been proven that high social validity can be achieved through family-oriented forms of treatment and rehabilitation. Family rehabilitation has successfully reduced children's problems with regulating their emotions and behavioural problems as well as stress experienced by guardians over parenting. However, the results also indicate that in the future, it will be important to seek means through which the social functional capacity of children with neuropsychiatric symptoms can be reinforced across a broad front and simultaneously in different growing environments, including the school. (88)

As an example of evidence-based development of new operating models can be cited the SOS partnership of the SOS Children's Village. In a SOS partnership, the child and the family are at the centre of service organisation. In practice, this means persons who liaise between the families and the service system. The dedicated worker model means that each family with children has their own employee who they can turn to with any issue. Another model strongly supported by research is the Family Partner model in which a family needing multiple services is given a support person to determine their support needs and help resolve problem situations. The key task of the family partner is to support the strengthening of family members' agency and thus ultimately make themselves unnecessary. (81)

CONCLUSIONS:

Particular attention should be paid to children in a vulnerable position when the parents' rights and obligations conflict with the child's best interests and rights. In this situation, recognising the child's agency and status as a subject is important, and an active status in legal processes, professional practices and client processes should be created for them. Operating forms other than those based on speech are also needed. This is highlighted in situations involving different linguistic and cultural backgrounds. Art-based methods, for example, can support encounters in social work. (31)

The guidelines for preparing statements by the Social Board associated with acrimonious relationships between guardians should be updated. (73)

Prevention of and intervention in violence experienced by children and young people and domestic violence should be made part of all services. (10)

3.3 Safeguarding children's and young people's health

This Chapter mainly focuses on safeguarding the health of young children. An examination of research evidence related to school-age children's health care is contained in Chapter 2.

The child health clinic is a key service which safeguards a child's undisrupted life path. Finnish people are satisfied with child health clinic services. They are experienced as accessible and non-stigmatising. The confidential interaction is praised. Extensive health examinations are experienced as useful. They support inclusion and reinforce parenting resources. (9)

Maternity clinic and child health clinic services reach almost all pregnant women (99.3%) and custodians of children under the school age (99.5%). Almost all health centres organise extensive health examinations at child health clinics as required under the statutes. The examinations reveal families' problems that would otherwise remain hidden. Slightly more shortcomings are associated with other health examinations. (9)

90% of the health centres can always organise additional child health clinic visits when required. The support needs of families who do not use the services are almost always investigated. One half of child health clinics have a joint operating model for

intervening in bullying and neurological development problems, and more than one half have a model for intimate relationship problems, disciplinary violence and parents' mental health problems. Of the health centres, 88% organise family guidance for those expecting their first child, and 57% have parents' groups after delivery. One out of ten organises groups for fathers. Visits to the homes of parents who have had their first child in accordance to the statutes are organised by 90% of the health centres. (9)

Almost all parents (95%) find that the pregnancy was monitored expertly and competently at the maternity clinic. Similarly, parents feel that the child's health, growth and development are monitored expertly and competently at the child health clinic (96%). Nine out of ten find that topics important for the parents are discussed on child health clinic visits, and the parents are listened to sufficiently. Correspondingly, almost all (98%) of parents with four-year-old children found that the child's health, growth and development are monitored expertly and competently at the child health clinic. (10)

The recommended personnel numbers cannot be implemented in all respects. The recommended personnel numbers in proportion to the number of pregnant women are fulfilled by 52% of the health centres concerning public health nurses and 48% concerning physicians. The situation is more or less the same at child health clinics. The personnel identifies as a key concern the insufficiency of personnel resources in proportion to the needs. The shortage and great turnover of physicians, in particular, are experienced as a problem. Children's and families' problems are more complex and extensive than before and thus more difficult to treat. Especially immigrants' special issues challenge the expertise of the maternity and child health clinics. (9)

However, there are regional differences in the effectiveness of maternity and child health clinics. Some health centres have made unauthorised decisions to only organise health examinations for some part of the cohorts. Families and children are thus not treated equally in terms of preventive services. (9)

The fact that childhood events are linked to health and life satisfaction in later life underlines the importance of a well-functioning child health clinic network. Problems related to intoxicant abuse and mental health are often cross-generational. In adults, they are typically associated with experiences of severe trauma and insecurity in childhood. This undermines their ability to regulate their emotions and understand their own and the child's behaviour. However, effective support forms have been successfully developed for these problems. Therapies that support emotional bonding, mentalising and regulating emotions help parents respond to their child's needs. Video work has been found particularly effective, as well as group-based interventions. Peer support counteracts the isolation, shame and guilt typical of those suffering from intoxicant abuse and mental health problems. Interventions that support the

whole family have also been productive. Internet-based interventions are a new development area of early intervention in intoxicant abuse and mental health problems. They have also been found effective in reducing post-natal depression. While the development efforts are still in their initial stage, the new models offer cost-effective treatments for those with milder symptoms. (7) (9) (52)

Those who have been through stressful events in their childhood have a low level of education, become divorced or are unsatisfied with their lives in adulthood more often than others. They also have more emotional and financial problems. The parents' divorce and mental health problems experienced in childhood as well as living on social assistance are linked to being granted a disability pension for mental health reasons before the age of 25. In particular, the risk of an early disability pension is increased by a mother who is on a disability pension because of a mental health diagnosis and situations where both parents use mental health services. The risk for girls is 1.4 times higher than for boys. (88)

An accumulation of problems in a family typically leads to fatigue in the parents. A parent's fatigue is manifested as increased use of negative methods of upbringing. The child, on the other hand, responds to them with undesirable behaviour. Parental fatigue may coincide with positive emotions: a parent may love their children deeply and be grateful for them, while also experience inadequacy and powerlessness in their role as a parent. Unlike in the case of work burnout, a parent cannot hand in their notice. The consequences may include emotional distance to the child and family life. Parental fatigue is linked to not only the interaction between the child and the parent but, in extreme cases, seriously neglecting the care of the child and physical abuse. (60)

Parents' loneliness is linked to symptoms of depression and psychological stress. Experiences of loneliness are more common among mothers, especially in single-parent families. The children of parents with depression symptoms and psychological stress display more unsocial behaviours, which further expose the children to loneliness, bullying and mental and physical violence. This phenomenon increasingly tends to be cross-generational. (86)

While the services safeguarding children's and young people's health mainly work appropriately, this is not true for all children and young people. Attempts to adapt the bodies of intersex children to conform with the gender normative system continue and, on the other hand, most transgender and non-binary children do not receive the treatment and support they need. Changing the legal gender is tied to a medical process which hampers children's and young people's possibilities of living as a member of the gender they identify with in educational institutions. (25)

While female genital mutilation only concerns a small proportion of girls living in Finland, for these few this is a serious threat to their wellbeing. The tradition causes health harms, psychological trauma and social harms in girls. Approximately 70% to 80% of women with a Somali background and approx. 30% of women with a Kurdish background have undergone female genital mutilation. As the most effective means for preventing female genital mutilation have been found training professionals and informing the groups practising this tradition about the harms caused by the procedure and its unlawfulness in Finland. (10)

A significant part of children and young people complete at least part of their compulsory education in schools other than those in their local areas by means of exceptional arrangements. Approx. 3,000 children and young people participate in instruction provided at a hospital school annually. The pupils mainly are child or youth psychiatry patients. More than one half of the pupils attend the hospital school as so-called day pupils, or from their homes or placements. 43% of the pupils attend hospital school while being treated at a ward. In recent years, the trend in hospital schools has been towards a reducing proportion of hospitalised children and young people and, on the other hand, shorter periods of hospitalisation. At the same time, the number of child and youth psychiatry referrals is growing, and increasingly young children display diverse symptoms. In other words, children and young people with psychiatric symptoms attend their local school more often than before, which puts many types of pressure on instruction, pupil welfare and special support arrangements alike. (48)

CONCLUSIONS:

Children's, young people's and families' inclusion in planning and implementing treatment has improved, but their possibilities of participating should be developed further. The goals and actions aiming to promote inclusion and possibilities for exerting influence should be set out in children's and young people's wellbeing plans and other documents concerning children, young people and families. (10)

Further reinforcement and maintenance of consultative and centre of expertise based hospital school activities: hospital schools have large volumes of competence in encountering pupils with psychological symptoms. It would make sense to use of this expertise better in the hospital district's municipalities. Hospital schools will also continue to offer an excellent research laboratory for the national development of demanding special support. (48)

3.4 Financial security

Extreme conditions, including child poverty, have a negative effect on a child both indirectly through the parents' ability to cope and directly, for example as a lack of possibilities for free-time activities. Poverty also results in discrimination among peers. Financial problems expose the parents' intimate partner relationship to stress and undermine the quality of parenting. In poor families, the parents are more likely to suffer from repeated depression, anxiety or fatigue, and to lose their temper with their children more often than others. The family's financial situation also affects the children's health habits, school attendance, loneliness, being bullied and anxiety. If the family is poor, the child has a greater risk of being excluded from education and the labour market later on, as well as experiencing financial problems, mental health disorders and teenage pregnancies. This is why early prevention of problems is also justified economically. (34) (86)

The child poverty rate kept going down in Finland from the 1960s up till 1994, in which year it was as low as 4.5%. It started increasing from 1995 and had tripled by 2007. The child poverty rate was 12.7% in 2016, with 135,000 children living in poor families. The poverty rate of single-parent families increased sharply between the 1990s and 2007, in which year almost one out of three single-parent households were poor. In 2016, this rate was 32%. In two-parent families, the poverty rate was eight per cent in 2016. The highest poverty rates in two-parent families are recorded when the youngest child is under the school age. These families have also seen the sharpest increase in the poverty rate in recent years. Consequently, the increase in poverty in the 2010s has affected particularly families with young children. The family's poverty when the child is young puts the child at the greatest risk of social exclusion in adulthood. (39) (19) (17)

In single-parent families where the parent is unemployed, the poverty rate had increased to 50% by 2011, and in single-parent families where the parent was not in the labour force, the poverty rate was approx. 70%. (17)

Child poverty is naturally linked to the parents' employment situation and low basic security benefits if the parents do not have work history entitling them to earnings-related benefits. However, international comparisons also show that in countries representing the single breadwinner family model, the risks of poverty are greater than in countries following the dual breadwinner model. Additionally, changes in family structures challenge family policy and have some unexpected impacts. (105) (88)

The real value of income transfers to families with children has dropped since the 1990s. The share of social welfare expenditure targeting children and families decreased by two percentage points in 1995–2006 to approx. 11%, dropping further to 9.6% in 2016. The incomes of families with children have also been negatively affected by a number of tax and fee increases. (39)

Families' assessments of their own finances to a great extent confirm the picture created by these austere statistics. Two out of five parents of four-year-old children experience the family's financial position as at most reasonable, and one out of ten has worried about running out of food in the last year. In single-parent families, three out of five parents find their financial position reasonable at best, and more than one out of five has worried about not having enough food. One half of parents with comprehensive school or secondary level education experience their financial position as at most reasonable, and one out of seven has been worried about running out of food. The family's poor financial position has a negative impact on children's health habits, symptoms and subjective health. Among other things, school fatigue, loneliness, being bullied and anxiety are more common than average in this situation. (10)

The background factors of poverty in families with children typically are the breadwinner's low level of education, the transition of working life, and unemployment connected to these factors. An immigrant background also exacerbates the risk of financial problems. Employment is not the only independent variable, however: in more than two out of five poor families with children (42%), the custodian was working in 2016. The background factors also include growing income differences. The incomes of families with children in the lowest income quintile have not grown much since the 1990s. The incomes of families in the lowest income quintile have also grown little in the 2010s, which explains the new increase in the poverty of families with children, even if the average real incomes of these families have remained more or less the same in 2012–2016. (39) (86)

Poor single parents often are young, they do not necessarily have ties to working life yet, and their children are at an age of needing constant care. Low-income couples are more likely than others to divorce, and the financial problems leading to poverty may thus go back to the time when the couple was married. (88)

Divorce situations, single parent status and being an informal carer are significant risks to a family's financial position. In 2010, almost one half of single mothers received child maintenance allowance paid by the Social Insurance Institution, of whom almost 60% received the allowance because the person liable to pay child maintenance had failed to do so. Two thirds of parents who care for their child on informal care support are forced to cut down on their consumption, and almost one out of ten cannot make the ends meet with their personal income. (88)

The guardian's low level of education is one of the key mechanisms maintaining poverty in families with children in Finland. Being excluded from vocational education and training at secondary or higher education level increases the likelihood of ending up as a guardian of a poor family with children, and growing up in a poor family increases the likelihood of ending up with a low level of education. Financial problems thus create stress for both children and parents while increasing the risk of children and young people having problems in the future. (39) (34)

The erosion of and regional inequalities in primary services for children since the 1990s are key reasons for the social exclusion and growing inequality of children and young people. This is seen as an increase in the client numbers of parenting and family counselling centres, child welfare and psychiatric care. Savings in primary services have increased the need for corrective services. Inequalities in access to and the quality of services have also increased. (39)

CONCLUSIONS:

In efforts to stop inherited poverty, it is important to ensure that all young people complete at least secondary level vocational education and training. This can be promoted by participation in early childhood education and care, access to which should consequently be secured for all children. (34)

Equality in access to assistance and support should be ensured, and the threshold for seeking help and support should be lowered further. Particular attention should be paid to those children and young people who face simultaneously a number of challenges to their wellbeing. (10)

Apprenticeship training, outreach youth work and other client-centric support as well as one-stop guidance should be strengthened as permanent operating forms. (39)

3.5 Doing things together makes children feel safe

The parents' life situation to a great extent determines the level of social safety provided by the family and the stability of a child's life. The parents' educational level, which is also interlinked with employment and incomes, is one of the factors closely associated with the quality of the social environment in which a child and a young person grows.

Single parent status has become more common among women with a low level of education in recent years, while the same is not true for women with a high level of education. The children of mothers with a low educational level are twice as likely to be born to cohabiting parents and four times as likely to be born to a mother who is not cohabiting or married compared to mothers with a high level of education. Of all children, 41% go through their parents' separation by the time they are 15. One out of three children born to a married couple and more than one half of those born to a cohabiting couple experience parental separation. The children of mothers with a low level of education are more likely than others to experience separation, and also earlier in their lives. Of these children, 43% experience their parents' separation before school age, and two thirds before the age of 15. This experience affects 12% of children whose mothers have a high level of education before school age and clearly less than one third by the age of 15. On average, the children whose mothers have a low educational level live only one half of their childhood (before turning 16) with both parents. Four out of five children with mothers who have a high level of education live their childhood with both parents. (17)

Labour market development has very different effects on the growing environments of children living in different types of families. The employment rate of mothers with no spouse has dropped dramatically. During the depression of the early 1990s, the employment rate of mothers with no spouses dropped clearly below the employment rate of mothers with spouses, and it has never recovered. (17)

The school is an important environment in which children build sustained relationships with other children and adults. Reinforcing social skills is one of the school's key tasks. However, the school does not offer a socially stable growing environment for all pupils. Many children and young people experience detachment from their community at school. Of comprehensive school grade 4 and 5 pupils, 65% feel they are an important part of the class community. This proportion is more or less the same at higher grades of comprehensive school. By international comparison, Finnish grades 7-9 comprehensive school pupils' attachment to their school community is at an average level. Strong togetherness predicts significantly higher than average life satisfaction. Weak togetherness, on the other hand, is linked to a high incidence of bullying and experiences of loneliness. Alarmingly, the proportion of pupils who feel like outsiders at school has almost doubled among grades 7-9 comprehensive school pupils in the 2000s. (See also section 2.5) Girls' attachment to the class community, in particular, experiences a dramatic decline in the higher grades. (10) (100)

Students' attachment to their study group is higher at vocational institutions (69%) than in general upper secondary school (57%). Differences in boys' and girls' attachment to the class community remain great also during the transition to secondary level: boys feel a part of the class community significantly more often than girls. Eight

out of ten young people who feel they are an important part of the class community at school are satisfied with their lives. (10)

An immigrant background is a demanding challenge to children's and young people's sustainable networking in the community. The meanings of racism and ethnification are different to children than to young people and adults. In this respect, children are in a weaker position than adults, among other things because in public debate, only acts classified as racist offences are often defined as racism. This excludes racism among children from the examination. Discrimination in working life is also often forgotten about when talking about these children's lives. While workplace discrimination only touches children indirectly, its impacts on the quality of their lives may be great. Racism, and ethnicised social relations in general, thus play a major role in the identities and wellbeing of an increasing number of Finnish children. (35)

Undocumented children arriving in the country are a small but particularly vulnerable group of young people whose wellbeing is threatened on many fronts. In 2015, a total of 95,000 unaccompanied minor asylum seekers arrived in Europe, of whom slightly more than 3,000 ended up in Finland. In 2018, 68 unaccompanied minor asylum seekers had reached Finland by the end of September. Family reunification is almost impossible for unaccompanied young people in Finland today. In the absence of a family, these children and young people are forced to live in institutional care in Finland until their turn 18. They often suffer from loneliness and worry about the fate of their families in the former home country. As a rule, these young people are housed following the group home and family group home model. Living in isolation from the rest of society for an extended period hampers the establishment of social networks with other children and young people. The basic rights of the child are not realised in the case of unaccompanied minors. (18) (76) (78)

In terms of children's and young people's normal social networks, children placed outside the home are a risk group. Many factors that hamper socialisation into society accumulate on their life paths. Reform schools are the last-resort growing environment for those within child welfare services. The most common reasons for being placed in a reform school are serious problems with school attendance, intoxicant use and delinquency. It is estimated that up to 90% of young people placed in a reform school have significant psychiatric symptoms, including behavioural disorders (76%), learning difficulties (57%), bipolar disorders (50%), intoxicant abuse disorders (40%) or self-harming behaviours (25%). The reform school personnel do not necessarily recognise all types of symptoms: weird thought content of a psychotic nature and depression in boys often remain undetected. (27)

Those placed in reform schools experience many types of problems in adulthood, including a low level of education and the consequent difficulty of finding employment,

problems related to reproductive and sexual health, a high risk of criminality and violence, high incidence of psychiatric illness, and an increased psychosis risk. Their risk of premature death is seven times that of the mainstream population; the most common causes of death are intoxicants, suicide and traffic fatalities. These young people's problems accumulate in young adulthood as after-care support measures cease at the age of 21. (27)

While the starting points of children and young people placed in a reform school are difficult and their outlook for a problem-free future is dim, this extreme solution however also offers an opportunity for a successful change of direction on the life path. A controlled environment enables an intensive therapy process. The therapy is fraught with numerous challenges, however. The young person often has a strongly negative attitude towards the therapy and the personnel. Shortcomings in their verbal skills and difficulties in processing emotions also undermine the effectiveness of psychotherapy based on discussions. To help these young people, new, evidence-based methods are needed. (27)

Research focusing on special groups can help clarify and structure the understanding of the processes through which education and the remainder of the service system result in exclusion in themselves. The experiences of young prisoners, for example, stress the importance of school in building stable social relationships. The need for support is diverse, and in addition to stressing learning, a strong grasp of upbringing is needed. The school is also an important institution because it reaches all children and young people on a daily basis. In prisoners' reminiscences, negative experiences of school were reiterated, however, which reinforced the feeling of being somehow inferior to the others. This feeds isolation, and the young person ultimately loses all desire to adapt to the school. Among other things, they referred in their stories to teachers' actions that upset them, as a result of which the pupil started actively provoking their environment and defying the teacher's authority. In their experience, a relationship with even a single safe adult can prevent the exclusion of a growing young person. (48)

CONCLUSIONS:

The vocational education and training and social networking of single parents should be supported by special measures. Children born to single parents presumably have tenuous or non-existent contacts with the other parent. Awareness of the incidence of 'total single parenthood' and the accumulation of deprivation associated with it has not been sufficient. Support family activities could help these parents and thus create a more stable living environment for the children. (17)

A child-friendly integration policy should be created in Finland, which would enable unaccompanied children and young people to be heard and instil hope in their lives. These young people should also be seen as active agents in and experts of their lives. Preconditions for this include hearing the young people, clarifying the different services and better coordination of services. More options for their housing should be created. (76) (78)

Young people placed in a reform school and others with serious behavioural symptoms are a special group with a high risk of social exclusion. Developing therapies for them would increase equality in society and reduce deprivation and human suffering. Preventive treatment is also highly cost-effective in financial terms. To complement the current therapies, arts-based methods are needed, for example. Research evidence of their effectiveness is already beginning to accumulate. A longer after-care period for young people placed in reform schools would help them to integrate in society by offering support in the challenging stage of becoming independent. (27)

3.6   Right to cultural wellbeing

While Sámi children today have somewhat stronger identities, they still feel their position as an ethnic group threatened. Support from society for transferring the Sámi language and culture to children is experienced as inadequate. Early childhood education and care services in Sámi are mainly provided in the Sámi homeland areas, and little or no resources have been directed at developing contents and methods. In other parts of Finland, attending comprehensive school in Sámi and studying the language is only possible sporadically. The educational authorities in municipalities do not have sufficient awareness of the Sámi rights. Parents are forced to fight for them on behalf of their children. The availability of Sámi-speaking social welfare and wellbeing services is poor, which has frequently been commented on by international bodies. There is also a shortage of Sámi-speaking maternity and child health clinic services. One third of Sámi people experience ethnic discrimination. Persons and families with the strongest attachment to the Sámi language and culture have a particularly high exposure to it. Up to 60% of this group have experienced discrimination at some time. This has negative impacts on the wellbeing and health of children and young people in these families. (11)

According to the personal experiences of rainbow youth, the fact that they belong to a minority is not seen as significant when intoxicant abuse and mental health services are being organised for them. This is often inconsistent with young people's personal experiences of their needs or the personnel's ability to address their special needs.

They argue that this erodes the young person's possibilities of being heard and understood in services. (15)

CONCLUSIONS

The possibilities of the Sámi for maintaining their language and culture and transferring it to their children should be secured in all parts of Finland. (11)

Culturally appropriate client work with the Sámi aiming to build a service package meeting the individual's, the family's and the community's needs should be developed. In particular, an employee needs competence related to the Sámi culture when bringing up difficult topics. Timely support for life management provided in their own language should be available for young people locally. (11)

Developing service structures is a particular precondition for promoting the equality of rainbow youth. Structures and working conditions that support continuous development are required in order to maintain and update employees' professional competence. In addition to training, the employees' coping should be looked after. (15)

3.7 The child's safe life as a motive for parenting

The birth rate in Finland has decreased steeply for the last eight years running. However, this drop did not only begin in this millennium. The total fertility rate has been less than what is required for population renewal, or 2.1 children, already since 1969. In low birth rate countries, fluctuations in the birth rate have traditionally been linked to how predictable and safe young people consider their future to be. While the birth rate usually drops during economic recessions, in the 2010s the drop has been much more dramatic than what could be expected based on the financial figures. The economic boom has not resulted in an increase in the birth rate. A more in-depth change has taken place in the culture of having children. The stage of having young children is not particularly attractive to all young adults, and starting a family does not appeal to most of them, at least not in the age group 20 to 30. (90) (62) (92)

Finnish people have traditionally been family oriented. Children and a family have been a key goal and a desirable lifestyle for many. Under the pressures of work, finances and studies, however, having children is postponed more and more; the average age of giving birth is going up, and the actual number of children is going down. The negative effects of employment on the birth rate are indirect. These effects are

manifested as young people's goals related to finances and housing, and as they pursue their goals, paid employment and striving to find work cause them to postpone having children and reduce the actual number of children they have. The birth rate is dropping especially among people with a lower level of education whose financial situation is the most uncertain. In particular, parents often decide not to have a second and a third child due to the difficulties of reconciling work and family life and their exhaustion. (88) (92) (101)

While personal values and choices are important as individual factors in decision-making for Finnish people, they explain decisions related to having children considerably less than structural factors. There are significant differences between municipality types regarding the number of children aimed for, family values and the structures that regulate people's decisions to have children. The lowest ideal number of children is seen in Helsinki region. Here the pressures of finances and work are the greatest, and a child is experienced as a restriction more often in Helsinki region and urban municipalities. Residents of rural areas are more family centred than city dwellers. Along with the individualisation of lifestyles and extended youth, parenthood has increasingly become an individual choice rather than a strict cultural norm. Instead of traditional values, other societal structures affect young people's choices and guide them to postpone parenthood more and more. (92) (62) (101)

In addition to the health impacts, giving birth at a higher age also has many other consequences for children's lives and the prevailing cultural values. Those who have their children at an older age often are highly motivated parents who make great investments in their children. The birth of children is increasingly desired and planned, and the parents dedicate more time to caring for their children. They also wish to have their children closer together in age, which may increase the stress of the 'busy years' in a family with children. Finnish people also wish to have fewer children than before. Up till 2015, an average of 2.3 to 2.5 children was considered the ideal in Finland. The number of those who wished to remain childless was extremely low. In recent years, 12% to 15% of those aged between 20 and 59 did not want any children, and the average ideal number of children remains at around two. The ideal number of children for the youngest adults aged between 20 and 24 was clearly even less than this. Approximately one Finnish person out of six (17%) aged between 18 and 40 finds that the demands of parenthood would be too exacting for them. (88) (90) (92)

Today's young people experience parenthood as extremely demanding and responsible. Both in politics and individuals' images, a child is seen as a mental and financial investment. This creates uncertainty and puts young people under pressure to perform well in their parenthood. The uncertainty is also increased by the inconsistencies and inflexibilities of family policy, as a result of which young people's future is uncertain. (101)

Social policy indirectly promotes a higher birth rate, but this is no longer sufficient to compensate for the financial burden or the factors with negative effects on work and lifestyles. Reconciling work, parenthood and other areas of life is experienced increasingly more demanding. More than one half of parents (54%) find that parental fatigue has influenced their wishes for more children. Parents also bring up loneliness and a lack of social networks as key factors behind fatigue. Based on research, parental fatigue is diagnosed as a specific syndrome. It may coincide with positive emotions: a parent may love their children deeply and be grateful for them while also experiencing inadequacy and a lack of resources in their role as a parent. Unlike in the case of work burnout, a parent cannot give notice. The consequences may include emotional distance to the children and family life. Parental fatigue is linked to not only the interaction between the child and the parent but, in extreme cases, serious neglect and physical abuse of children. (60) (92)

A key group in terms of birth rate trends are young students. From the health perspective, they are at the optimal age for having children. However, the problem lies in reconciling studies and the daily life of a family with children and, on the other hand, ensuring financial and social security. The reconciliation of studies and family life in higher education was investigated in 2016. One out of ten students with a family had been left without support from family and friends when striving to reconcile studies and family life. One quarter felt that their own and the family's social relationships were inadequate. As many as one half of the respondents considered financial support provided by society inadequate. Part-time studies, flexible examination practices and the possibility of following lectures online could make the daily life easier in a student family with children. Only one third of the students could study part time, approximately 40% had access to flexible examination practices, and one quarter could listen to lectures online. (90) (88) (92)

CONCLUSIONS:

Structural factors prevent people from achieving their personal goals, for example regarding the number of children and the timing of their births. Policy actions are needed to make sure that having children can again become a personal choice. (92)

Ways of appreciating work carried out at home, including child care, to its true value in national accounts should be investigated. (92)

Information and guidance that promote fertility awareness should be given to young people. Mistaken beliefs regarding factors related to having children are common among young people. Special attention should be paid to men when organising support. (92)

Better reconciliation of studies and family life should be supported by more family friendly organisation of studies and general social policy. (92) (101)

The pressures of performing well in parenthood should be ameliorated by accepting diverse routes to parenthood and treating different forms of families equally in legislation, family benefits and services. (101)

A more flexible parental leave system and even sharing of costs between the father's and the mother's employers would give parents more equal possibilities for participating in caring for their children. (101)

3.8   Development of new operating models

New operating models have been developed as a response to concerns over fragmentation of services. Multiprofessional child welfare teams represent an effort to reduce fragmentation and reinforce a child-centric approach. The same team looks after the entire process from assessment to after-care. This systematic operating model has been piloted since 2017 by using a quasi-experimental research design. The model has proven challenging, but there is a determination to continue its development. Joint discussions of client cases within teams have been found particularly useful. While the time for face-to-face client work has not increased as hoped, one-to-one meetings with children have become more common and, in part, more intensive. As the greatest obstacle to the development aimed for is experienced the great client numbers. While the objective was that the number of children per social worker would not exceed 20, this figure increased during the pilot project from 32 to 37. The conclusion was that more practice in and training for team work was needed, and the joint operating model should be clarified and translated into more concrete terms. (1)

CONCLUSIONS:

A national frame of reference is needed to guide the overall monitoring of children and young people's wellbeing. (10)

A network of family centres that reaches all families with children should be created across the country. The family centres should be developed following national policies. As a result, the emphasis of the services is expected to shift towards preventive services. A sufficient knowledge base is needed to monitor and evaluate the implementation of family centres. (10) (78)

A national model of multidisciplinary assessment and assistance provision should be developed and introduced to promote a uniform and family-centric service package for children, young people and families with children and the management of their affairs ('one child, a single situational picture'). (10)

Cooperation between parties providing and organising services for children and young people should be secured in a changing operating environment. An agreement on the leadership system should be reached, the system should be put on a permanent footing, and the existence of effective cooperation structures and agreed practices should be ensured. (10)

4   Health

A child's entire ecological environment plays a role in their development. It was previously believed that the impacts of the environment are communicated to children through the parents and the home, and the primary task of the day-care centre, for example, was to support parenthood. Today we know that this is not true. Children have several parallel development environments, which are only partly interconnected. All these different environments play their own roles in both a child's positive development and the creation of problems. Children and young people's development processes and the disturbances occurring in them are the joint effect of many different factors. An intervention focusing on a certain psychological symptom, behaviour or environment is not sufficient to prevent it; systematic cooperation between all development environments, services and the family is required. The coping of a child and a young person hinges on interaction between the individual and the environment. (56)

4.1   The psychological and physical problems of children, young people and their parents are interlinked

The processes of health harms and social exclusion affecting children and young people are often passed on from one generation to the next, which stresses the importance of supporting the entire family. As the most central factor that prevents families from accessing support, those needing support cite the fragmented service system. The parents' inadequate grasp of life management and the family's difficult overall situation do not allow multi-phase processes of seeking help. As a result, those who need it most are excluded from support. (48) (56)

Mental and physical health are interlinked in many ways. Particularly sensitive phases for mental health development are pregnancy, the first years of life and youth. The majority of adults' disorders go back to their childhood and youth. About one half of all mental health disorders manifest themselves for the first time by the age of 14, and three quarters by the age of 25. (50)

Parents' mental health and intoxicant abuse problems during pregnancy and in the child's infancy pose a serious risk to parenting and the child's development. Parents' disorders may damage the development of the foetus' brain and stress regulation system. After birth, this will impede the development of the infant's bonding and feeling of security. More cognitive and socio-emotional difficulties and deviations in the stress

hormone system than average are diagnosed in the later development of children whose parents suffered from disorders. (7)

In a pilot study of families with infants, in which municipalities in six regions participated, 13% of parturients had had symptoms of depression. These symptoms were the more common, the less educated the parturient was. (10)

One out of five parents of four-year-old children (19%) report having experienced depression symptoms lasting for at least two weeks, and six per cent feel psychological stress. Both depression symptoms (29% vs. 20%) and psychological stress (11% vs. 6%) are more common among parents of single-parent than two-parent families. (10)

Medical treatment of the parent's mental health and intoxicant abuse problems may have harmful effects on the foetus. On the other hand, therapies which not only address the intoxicant abuse and mental health problem but also support parenthood have proven more effective than others. The child's participation in the process also improves commitment to therapy and its effectiveness. (7)

Parents' physical illnesses pose an equal risk to children's mental health. Persons suffering from psychiatric problems have experienced physical illnesses of their parents in the childhood more often than the rest of the population. Many children live in a situation where a parent's physical illness affects them and exacerbates emotional and behavioural disorders. Of young adults, approx. 7% had lived through a parent's cancer in some stage of their lives. These children and young people use psychiatric specialised medical care services more than others of their age. Service use is increased by a simultaneous need for psychiatric treatment of parents suffering from physical symptoms. Many children and young people referred to specialised medical care receive a crisis diagnosis but not a diagnosis of a psychiatric disorder. Work practices that promote adjustment and have preventive effects should be included in family-centric treatment of a parent's illness. (30)

In Finland, approx. 24% of children who had encountered a parent's traumatic brain injury use psychiatric specialised medical care services, they have more psychiatric symptoms, and they receive a psychiatric diagnosis more often than their peers. (30)

Approximately 5% of children have behavioural disorders at the age of 8. On average, this means 1 to 2 children in each school class or early childhood education and care group. The proportion of children with behavioural problems is significantly higher than this, or 33% assessed on the basis of international criteria. An untreated 28-year-old with a childhood behavioural disorder has cost society 10 times more as a result of high use of different services than those who do not have the disorder in question,

and 3.5 times more than those who only have behavioural problems. Today, relatively effective prevention of children's and young people's mental health disorders is possible at an early age. Prevention means targeting measures not only at the child but also their parents, the rest of the family and the social environment. (50) (53)

From 2011 to 2015, the incidence of children aged between 5 and 12 being referred to child psychiatry specialised medical care increased by 22%. The most common diagnoses for these children in 2015 were ADHD/ADD (3,325 children), behavioural disorders (2,298 children), anxiety disorders (805), autism disorders (795), social interaction disorders (743) and depression (579). (50) Specialised medical care is unable to respond to the increased need for treatment. At the same time, mental health services for children and young people are not available, or they are very inadequate, in primary health care. (10) (22) (79)

Of school-age children, 11% to 13% suffer from moderate or severe anxiety. Girls suffer from anxiety considerably more often than boys, and high levels of anxiety are also experienced by young people whose families have financial difficulties. Young people with an immigrant background also suffer from anxiety more often than average. Prolonged anxiety makes it more difficult for a young person to cope with studying and other age-appropriate challenges. (10)

The number of those suffering from school fatigue is also great. The incidence of school fatigue has increased, especially among girls; for example, almost one out of five girls in grades 8 and 9 of comprehensive school and in upper general school (17%) suffer from school fatigue. School fatigue has strong links with anxiety, and when prolonged, it may lead to depression and increase the risk of other factors posing a threat to wellbeing, including dropping out of education. (10) (38) (See section 2.5 for details)

The development of a behavioural disorder is affected by a number of factors related to the child's living environment and their personal characteristics. The children of mothers who had post-natal depression have a 5.5 times higher risk of developing a behavioural disorder by the age of 12 compared to the children of mothers who were not depressed. At population level, the incidence of post-natal depression is 12% to 20%. (50) (43)

Parents are not systematically screened for depression or symptoms of anxiety at all child health clinics. Infants' potential emotional and behavioural problems are also not assessed using consistent methods before the age of four. Additionally, the data is not saved in a digital format, and the information they provide is thus not passed on

for the purposes of later treatment and service counselling. Primary level health services still lack competence in infant psychiatry and easily accessible forms of therapy for helping the families of infants. (54)

Initial results indicate that new, arts-based work forms have proven promising in supporting young people who suffer from psychological and behavioural problems. As an example can be cited drama workshops that focus on the wellbeing of young people placed in reform schools and, in particular, on processing their emotions, which have a strong emphasis on children's and young people's inclusion. By means of art, the workshop aims for finding untapped potential, crossing boundaries and bold solutions. According to participants' experiences, the drama workshop relieved their anxiety, helped them exceed themselves and encounter their personal boundaries and fears, inspired them to immerse themselves and, on the other hand, helped them focus. They said that the work brought out new sides and abilities both in themselves and other group members. The activities offered them new experiences and they got braver as they went along – experiences of success were rewarding. For many young people, this was the first time they became interested in drama. The group was experienced as safe, and there was no bullying. The metaphorical protection of art freed them to express themselves (costumes, milieu exercises). The drama exercises offered young people an alternative method of communicating and processing their emotions. (23)

In different projects, good experiences have been obtained from mental health and intoxicant abuse nurses working at schools. Their integration in pupil and student welfare services would be well justified, but issues related to data protection, for example, have emerged as a problem. (10)

There is a great turnover of personnel in work aiming to support young people's mental health and learning, for example psychologists. This is not conducive to developing good professional practices. (2)

CONCLUSIONS:

Rather than focusing on problems, positive aspects should be highlighted in the treatment of young people's mental health and behaviour. While these children and young people are not lacking in creativity, enthusiasm and skills, the treatment and service system lacks methods for highlighting the good in them. (23)

A large part of young people with problems have difficulties in communicating verbally and recognising their emotions. Many have low motivation for participating in therapy. Providing alternative forms of communication which take the child's individual needs

and preferences into account is important Through cross-administrative cooperation that seeks new work forms, the stigma of child welfare can be dispelled, for example by bringing theatre and low-threshold drama exercises to reform schools. (23)

A training project focusing on the development of psychosocial work in early childhood education and care and schools should be launched. The objective is to reform the basic training of different occupational groups in this area to meet the requirements of the new low-threshold services. (3)

Training forms and contents that cross occupational boundaries and prepare the participants for cooperation should be created for basic vocational education and in-service training. The current forms of education and training do not impart sufficient capabilities for working in school environments, even if these occupational groups are highly likely to work in schools. This would also promote staying at work and the development of effective professional practices. (2)

In high-risk families, treatment should already begin during pregnancy. It would be useful to treat problems related to parenthood together with intoxicant abuse and mental health disorders. More short, evidence-based interventions focusing on bonding and mentalising and methods based on video work should be developed. Physical treatments should be combined with therapies that support parenthood, especially during pregnancy, thus reducing stress that harms the foetus. More support should be provided for fathers' wellbeing, intimate partner relationships and shared parenting. (7)

There are obvious grounds for taking children's needs for support into account when a parent becomes physically ill. Support for children's psychosocial wellbeing and preventive measures are essential, especially in connection with parents' illnesses that are intensive and/or life-threatening in nature, including cancers, brain injuries, chronic illnesses and MS. (30)

A national consensus group of researchers and clinicians should be established to define the illnesses in case of which the child's need for treatment and support should be investigated. The recommendation should include an obligation to ask all patients if they have children and if they wish to talk about their children, and to offer a working method that promotes adjustment to the new life situation. Administrative support, monitoring and the requisite personnel training for child-centric work in adult health care should be ensured. (30)

A national network of hospital school actors should be put together to maintain and develop special expertise in this field. The network would offer consultative support for other educational institutions in questions requiring demanding special expertise. (48)

4.2   Looking after wellbeing and health

Children, young people and their parents are mainly satisfied with the health services they have received at health centres and schools. This satisfaction does not extend to all those who need support, however. Major scope for improvement is seen in the provision of support for families suffering from ADHD symptoms and children's language disorders, for example.

According to national studies, the majority (96%) of health centres have a common practice for additional visits to maternity and child health clinics for the purposes of early identification of a family's support needs and tackling any problems. 82% have a common practice for organising the clinic's home service and 91% for organising family work, whereas 73% of health centres have an arrangement concerning specialised medical care consultation for primary level services for families with children. Health and social services for families with children have been integrated in more than one half (53%) of health centres. 59% of health centres have an agreement on regular cooperation with NGOs working with families, and one out of two (50%) has an agreement on cooperation practices with municipal sport and cultural services. (10)

Approximately one third (34%) of health centres organise combined maternity and child health clinic services, approximately one quarter (27%) provide these services separately, and 38% use models that combine these services in various ways. From the perspective of children and their families, the benefits of a combined maternity and child health clinic include the continuity of care and personal relationships from pregnancy until the child is at school age. Parents appreciate continuity, which promotes trust between the family and professionals. In a comparison study, the combined model resulted in higher client satisfaction, and the availability of home visits improved. This model was also considered to enable better support for parents, especially for parents needing special support. (94)

In infancy, the breastfeeding habits adopted by the mother have a significant impact on the child's health. Not breastfeeding, or sub-optimal duration of breastfeeding, increase the child's risk of contracting usual childhood infections, becoming overweight or obese, and developing diabetes. Not breastfeeding is also linked to the child's poorer cognitive performance at school age and income level as an adult. Breastfeeding is associated with lower infant mortality also in developed countries. Breastfeeding

reduces the mother's risk of developing breast cancer, ovarian cancer and type 2 diabetes. (10) Breastfeeding can be influenced by efficient and systematic breastfeeding guidance at maternity and child health clinics. A breastfeeding clinic can help mothers cope with more challenging breastfeeding problems. (10)

Regular health examinations play a key role in looking after school-age children's health. Most grades 4 and 5 pupils of comprehensive school find that the health examination was carried out to a high standard. Approximately 70% of children said that their family and other issues important for them were discussed during the examination. Approx. 80% of children feel that their opinions were listened to and they dared talk honestly about their issues. Among the guardians of the corresponding child group, 68% found that the entire family's wellbeing was looked at during the child's health examination. More than 80% experienced that issues important for parents were discussed and the parents' opinions were listened to during the examination, and the parent dared talk honestly about their issues. Less than two thirds (62%) felt they had received sufficient support for their parenthood. (10) (9)

Around 63% of higher grades comprehensive school pupils, 67% of general upper secondary students and 70% of vocational students found that their health examination was carried out to a good standard. The difference between girls and boys is significant. While more than 70% of boys were satisfied with the examinations, this figure was as low as 57% to 65% for girls depending on the level of education. Boys were more likely than girls to find that issues important for them are discussed during the examination, their opinions are listened to, the young person's home life is talked about, and they dare talk honestly about their issues at the examination. (10)

The provision of support for children's and young people's wellbeing, for example social rehabilitation, is directed by a number of different professional mindsets and operating models simultaneously. Experts' capabilities for multidisciplinary communal activities are highlighted as a precondition for realising the child's best interest. It is important that children and young people are supported as part of their local community and familiar social networks. Social rehabilitation is an example of a service supporting children's and young people's wellbeing that so far remains rather unstructured for both employees and clients. This also applies to many other multidisciplinary forms of service. Evidence-based clarification of contents, concepts and practices as well as training based on it are needed for local-level actors, in particular. (2) (31) (91)

In municipalities, responsibility for coordinating cross-administrative work is assumed by a wellbeing and health promotion team (Hyte). A Hyte team operates in almost all (96%) municipalities in Continental Finland. Local actors, including representatives of NGOs, training organisations or companies, may also be invited to participate in Hyte teams in an attempt to systematise and intensify the cooperation. In 2017, educational

services were represented in 94%, social and youth services in 84%, cultural and free time services in 82% and health services in 80% of municipalities' Hyte teams. (10) (31)

Municipalities' development plans make visible the local objectives and operating structures that support children's and young people's wellbeing and social inclusion. In order to develop activities that successfully serve children and young people, it should be ensured that different actors are familiar with each other and know how to work together on the interfaces of educational, social and health services. As the tasks of counties and municipalities change, this interface requires particular attention. The efforts to intensify cooperation between the sectors are also informed by the special features of the regions (including population structure and geographical distances). Due to regional differences, an open mind is needed when establishing inter-professional and research-oriented cooperation relations. (31)

In studies, support for children suffering from ADHD symptoms and their families emerges as a key example of development needs in multisectoral cooperation. ADHD symptoms comprise a disorder which restricts the child's functional capacity and the early identification of which is key to successful treatment. ADHD leads to reduced functional capacity, as a result of which the child finds it difficult to cope with tasks required of them in such environments as the school. It is often not possible for a child to finish school without targeted multiprofessional support measures. If no early support is provided, the problems become more complex and intertwined during the school path. As a result, more diverse, intensive and costlier multiprofessional support will be needed in later life stages. Studies indicate that one third of persons with ADHD symptoms had already become, or were about to become, socially excluded as adults. Their experiences built a picture of lowered self-esteemed and thus experiences of being less valuable and unfit as members of society. They find it impossible to break the circle of exclusion without help. (42)

ADHD often is cross-generational. Consequently, it is important to investigate the support needs of the whole family. This is not realised today for parents of children with ADHD symptoms. In many cases, they have been waiting for support for as long as decades. Some of their children have similarly waited for support and treatment for years. Especially at school, the provision of support is excessively dependent on the class teacher's expertise. Parents are concerned over the unequal access to support measures and even the school's refusal to provide support, for example making appeal to resource issues. Families also call for a strength-based mindset in professionals. Stigmatisation results in under-performance in children with ADHD symptoms and erodes their self-confidence. Noticing and positively reinforcing the child's strengths protects their psychological development and is of primary importance in the child's life. (42)

The offer of support in social and health services is also unequal. There may be a backlog in service provision, and the turnover of personnel is great. When a professional is replaced, the investigation of the child's situation always starts from the beginning, which delays and even prevents access to support and treatment. Both children and their parents have been observed to experience that the professionals at a family counselling centre do not listen to, or understand, the child's need for help sufficiently. Discussions about upbringing are emphasised, while the child actually needs medical support. (42)

ADHD is to a certain extent a gendered syndrome. ADHD medications are used by boys more often than girls. A key observation is that the birth month predicts the use of ADHD medications. The population share of children taking ADHD medications is 33% greater among those born later than early in the year. Research findings indicate that the same growing environment (e.g. school) has different impacts on children at different stages of development. International studies have found that postponing attendance at a day-care centre and school reduces the likelihood of a child needing ADHD medication. (88)

In a developmental language disorder, the child's linguistic skills do not develop as expected. A language disorder often comes with associated disorders in motor development and regulation of activity and attentiveness, for example. An untreated language disorder carries a risk of poorer quality in social relationships and emotional difficulties in adulthood. Language disorders are also linked to higher unemployment and a low socioeconomic status. For example, 19% of those who received a diagnosis of a language disorder as children continue living with their parents at the age of 30, and 26% are on a pension. The provision of earlier and more extensive support is justified as younger children benefit from support measures more than others. This will also bring economic savings. A language disorder is a key risk factor of social exclusion whose costs over a person's life span are estimated to be over EUR 2 million. (96)

To support professionals and those leading their work, psycho-social interventions for children have been evaluated on a platform titled Kasvun tuki (Growth support, www.kasvuntuki.fi). These efforts have resulted in the creation of a portal through which working methods subjected to a scientific evaluation can be found for supporting children's growth in their development communities. The purpose of this development work is to create preconditions for mainstreaming and spreading effective operating models. Population-level implementation of interventions tested in experimental designs must be supported by multidisciplinary research, monitoring and development. For example, the Centres of Expertise co-located with university hospitals could in the future serve as the base for these therapeutic and corrective methods. (50) (56)

Based on initial results, an intervention that improves parents' mentalising ability has proven a promising method for encountering parents in different risk situations in therapy, for example mothers who have used intoxicants during pregnancy and their children. For participants in groups aiming to strengthen the mentalising ability, the greatest benefits have been peer support provided by other parents, more in-depth understanding of interactions between a parent and an infant, and the whole family's participation in the group. Parents also reported increased interest in the emotions of both the infant and their spouse. Many parents said that they continued the discussions at home and that their intimate partner relationship had improved. (52)

Support programmes have also been developed for mothers suffering from depression. In mothers who had a high level of depression symptoms during the last trimester of their pregnancy, these symptoms became more severe after birth. When these mothers participated in open group activities (such as family café activities or an open day-care centre), there was a statistically significant decrease in their symptoms of depression, and the difference to those who did not participate in a group was considerable and permanent. Similar benefits were not observed in a control group. The conservative conclusion is that participation in low-threshold open group activities support the mental health of at-risk mothers. (52)

The objective of the PAKKA operating model is to reduce young people's harmful alcohol use by influencing the local community. Activating adults, which also spreads awareness of intoxicant abuse problems and the power of showing a good example, plays a key role in this. In a pilot project, the operating model successfully promoted responsible sales of alcohol and activated entrepreneurs and the lobbying groups in the industries selling and serving alcohol to organise effective self-supervision. Underage access to alcohol was reduced, and minors began to drink less. Adults' opinions of and attitudes towards young people's alcohol use and the example set by parents through their own drinking habits also became more critical. (51)

The Incredible Years® classroom management programme is intended for early childhood education and care personnel, pre-primary and primary school teachers, special needs teachers and other professionals working with children. It is mainly intended for preventing and treating behavioural disorders in children aged between 3 and 12. This intervention developed in the US has been studied for as long as 30 years. The idea of the programme is that children's behaviour can be influenced by changing the way the adults act. A number of randomised control trials (RCT) of a high quality have been conducted on the Incredible Years® classroom management intervention, all of which have produced similar findings. The teachers' working methods with children who have behavioural problems have become more positive, while the pupils' social skills have improved and they have less behavioural problems. (53)

The initial results of the Lapset puheeksi ('Let's talk about children') service model have been encouraging. The number of child welfare reports dropped in the area where the model was piloted during the experiment, while their number went up at the national level. Psychiatric services were also used less in the participating municipalities, whereas the number of visits increased elsewhere. One of core areas of this service model is systematic multidisciplinary cooperation. It is based on a common goal of all stakeholders (good and well-functioning daily lives for children) and a jointly built infrastructure. All stakeholders, including local NGOs, take part in decision-making and the activities. The NGOs' input is vital, as the public services have limited possibilities of supporting the daily lives of children and families. (56)

The purpose of parenting groups, on the other hand, is to promote positive methods of upbringing that have been proven effective and help parents handle their children's behavioural problems and disorders. In the contents of the parenting programme are emphasised the significance of child-led play and doing things together, respecting the child and taking their developmental level into account, positive child rearing strategies, making rules, predictable routines, supporting learning, and proven methods for intervening in a child's bad behaviour. A number of randomised control trials (RCT) of a high quality have been conducted on the programme, all of which have produced positive findings. (57)

Voimaperheet ('Power families') is an operating model for early identification and low-threshold prevention of behavioural problems in children under school age that has been proven effective by research evidence. By means of a survey conducted at the child health clinic, families belonging to the risk group are identified at the health examination for four-year-olds. The possibility of participating in a guidance programme implemented through the internet and on telephone is offered to parents in need of support. The families have access to a digital treatment environment whenever and wherever they are. The families receive treatment with a short delay as the process does not include a time-consuming referral practice. Compared to the control group, children who participated in the programme had fewer behavioural problems, and the parents' skills improved. The programme also reduced children's anxiety, affective symptoms and sleep problems as well as improved their capabilities for empathy. The families in the intervention group used health services almost 50 per cent less than the control families. The differences persisted two years after the treatment. The initial results of an implementation study on this operating model showed that the programme also retains its impact at population level. (43)

CONCLUSIONS:

Extensive problems, including children's and young people's exclusion, are the joint product of many factors over a number of years. An intervention focusing on a certain psychological symptom or behaviour is not sufficient to prevent them; systematic research-based cooperation between all the development environments of the child is required. (50)

More resources and a clear regional division of duties will be needed to maintain these methods and to support competence in Finland in the future. A national unit focusing on promotive and preventive cross-sectoral growth support will be needed. Similarly, the Centres of Expertise operating in conjunction with university hospitals could provide a base for therapeutic and corrective methods used to respond to behavioural problems or anxiety in children and young people, for example. The work of these centres would serve the entire region and support the services provided by municipalities. (50)

Long-term training aiming for reflecting on their activities and changing their personal operating methods organised for early childhood education personnel and teachers can change children's problem behaviour, increase positive interaction, and improve children's social skills. (53)

Measures aiming for behavioural changes in an entire cohort which are in keeping with the community's general norms and ensure the commitment of as many people as possible to following them are the most successful. The best success is obtained through operating models where different professionals join their forces at the local level. Efforts to improve children's living conditions are often hampered by cultural taboos of adults. Through shared activities and knowledge building, harmful rigid mindsets can be overcome, and issues can be discussed directly. (51)

All preventive activities are not effective or automatically bring cost savings. Interventions should be compared to find the methods that bring best value for the resources. Group activities incur lower costs than activities organised for individual families. Digital interventions may potentially be more cost-effective. However, digital interventions in which professional personnel is used are not necessarily less expensive for the party footing the bill than conventional interventions. The costs to society are reduced, however, if participation costs are lower, including travel expenses. More clients may drop out of digital than conventional interventions. (55)

Cross-administrative measures, interprofessional expertise, access to multidisciplinary special services and the ability of these services to respond to needs are emphasised in supporting children's wellbeing. Preconditions for preventing problems include cooperation between different professionals going beyond multiprofessional competence and work in social and health services, for example with the professionals at school and in early childhood education and care. Preconditions for preventive work and efforts aiming to support wellbeing include reinforcing the experiential knowledge and inclusion of children, young people and parents as a key area of development, also at the level of supervisors and directors. (31)

To promote breastfeeding, an action plan and infrastructure to support its implementation are needed: a permanent, full-time national breastfeeding coordinator and regional breastfeeding coordinators. A national breastfeeding survey should be conducted to underpin development. (10)

4.3 Women give birth later and involuntary childlessness is becoming more common

The period before conception, pregnancy and foetal development, the birth and the first years of life are the cornerstones of a child's life and wellbeing. The average age of women giving birth for the first time has increased steadily in recent years, and the proportion of those with no children has grown. In 2017, the average age of primiparas was 29.2. In the same year, 13% of primiparas and 22% of all parturients were aged over 35. Highly educated women and those living in cities become mothers later than women with a lower level of education and those living in rural areas. The drop in the birth rate is particularly visible as a lower number of first children, and this is more prominent among women with a higher level of education. (90) (105)

Having children later increases the incidence of involuntary childlessness and also has health effects on the mother and the child. Childlessness is also a psychosocial problem. It may cause deep sadness, hopelessness and challenges in personal relationships. Approximately 15% of Finnish men and women trying for a baby have experienced problems with getting pregnant. Involuntary childlessness has been experienced by 16% of women and 10% of men aged between 30 and 69. Approx. 60% of those experiencing childlessness have received treatment for the problem. While the number of infertility treatments at the beginning of the millennium was 7,000 to 8,000, it was over 14,000 in 2015. Pregnancy results from an infertility treatment in three per cent of those aged 25 to 29 but as many as 20% in the age group 40 to 44. The likelihood of the treatments being successful decreases as the woman ages. Infertility

treatments are associated with risks for both the woman receiving the treatment and the child. (64) (90)

Involuntary childlessness may cause deep and chronic sadness. Even when infertility treatment results in a pregnancy, the parents may carry the identity of a childless person and difficult experiences with them in parenthood, which thus affects the entire family's wellbeing. Significantly, not all parents who have been through childlessness find they can use the time during the pregnancy to prepare for parenthood, as it is mainly spent in fear. Women and men who have experienced childlessness need support with processing their diverse and difficult emotions, the demanding fertility treatments, difficulties in their intimate partner relationship as well as building a mother's identity and growing into parenthood. Support is needed in all stages of becoming a parent, and it may smooth the path to parenthood for many families and improve the functionality of the family. (64) (90)

Many risks that reduce the birth rate are exacerbated as the prospective parents age. The quality of the ova and sperm deteriorates. Among other things, age is linked to complications in the mother, the number of anomalous deliveries, and the infant's birth weight and health. A low birth weight is associated with many other health risks for the child. In addition to age, such factors as underweight or overweight, smoking, psychological stress and lack of physical activity reduce fertility and thus pose a risk to the health of the infant to be born. (90)

In men, a higher age also has a negative effect on the health of the child to be born, even if the impact is rather small at population level. Between 1987 and 2009, the average age of becoming a father increased from 28.7 to 30.4 years. The higher a man's level of education, the more likely he is to only become a father when aged over 30. An increase in sperm mutations as the man ages may increase the risk of miscarriage or the child's risk of developing a cancer. The father's age is linked to the incidence of prenatal death, pre-eclampsia and Caesarean sections. The father's higher age has been associated with the child's increased risk of schizophrenia, autism, bipolar disorder and congenital malformations. (90)

Young adults have insufficient knowledge of the effects of age on fertility. Men's knowledge is more likely to be incorrect than women's. In addition, even if they were familiar with the facts in general, it is often difficult for young adults to perceive the age-related decrease in fertility as something that concerns them personally. In a survey conducted in 2015, approximately one out of five women aged 20 to 35 and 45% of men in this age group believed that a woman's fertility only decreases significantly at the age of 45. In the School Health Promotion Study, approximately one fifth of general upper secondary students, over one third of vocational students and 40% of

comprehensive school students did not know that getting pregnant becomes more difficult after a woman turns 35. At population level, men and women with a low level of education had less knowledge of this issue than others. (90)

CONCLUSIONS:

Fertility counselling should become a natural part of health advice, ensuring that young people planning a family are aware of them. Information about fertility, the planning of pregnancy and family planning tailored for different individuals and family situations should be offered in youth work, in general health services for adults and at maternity and child health clinics alike. (90)

As the birth rate drops, the health care system should prepare for an increasing demand for fertility treatments, and the financial and ethical guidelines related to them should be considered. (90)

Giving birth at a biologically optimal age should be supported by eliminating some of the obstacles created by factors reducing the birth rate, including those related to employment, finance, housing and studying. (92)

Statutory psychosocial support should be provided for infertility treatment patients, and a psychologist's services should be included in the treatment process, as is the case in many other European countries. It is important that professionals are able to recognise difficult situations and support parents during pregnancy and after it, ensuring that crucial interaction and growth towards parenthood can be initiated before the child is born. The 'normalisation' of diverse emotions and talking about them openly as well as different tools that promote interaction – games, diaries and mental exercises – could support early interaction and help initiate growth towards motherhood. (64)

4.4 A healthy lifestyle brings long-term benefits for promoting wellbeing

Children and young people consider their health, physical fitness and a healthy lifestyle important. Looking after your health and wellbeing improves the quality of life and predicts a more positive future. However, these beliefs do not always have a bearing on children's daily choices and decisions. (22)

Lack of physical activity brings increasing health challenges to children and young people. While increased physical activity improves wellbeing, the amount of physical activity has also been shown to have a link to children's general learning capabilities. Increased physical activity has been proven to influence the development of mathematical skills, among other things. In the early years of childhood, children remain relatively active but lose their enthusiasm once they reach puberty. Reduced physical activity as children become older is a special Finnish characteristic. Of children under the school age, slightly more than one half get the recommended amount of physical activity. Approx. 40% of lower grades comprehensive school pupils (aged 9 and 11), one quarter of 13-year olds, and as few as one out of five 15-year-olds were physically active in keeping with the recommendations. While boys accumulate more moderate and strenuous physical activity than girls, girls participate in light physical activity slightly more than boys. Support from parents and friends affects children's and young people's rate of activity. Their other physical, social and emotional environment also has a major influence on their level of physical activity. Sedentary behaviours have a clear link with screen time, among other things – the less they participate in physical activity, the more screen time children and young people accumulate. (22) (66) (106)

Children's physical activity has been successfully promoted by integrating different forms of exercise in all daily activities at schools. From a pilot project, the Schools on the Move programme has become an action plan for promoting physical activity. Today, as many as 289 municipalities (93% of municipalities) and their over 2,000 comprehensive schools participate in the programme. Its implementation is based on the specific starting points of each school and municipality, which select the most suitable operating forms for achieving the objectives of the programme. The activities are supported by actors from outside the school. The objective has been changing the school culture by putting increased physical activity and decreased sedentary behaviours, inclusion of the pupils and personnel, and support for learning at the centre. A follow-up study indicates that the programme has managed to change the school culture towards providing more encouragement for physical activity. (106)

In addition to the school, club activities are another key institution that guides children and young people towards physical activity. 62% of children and young people participate in sports club activities. This proportion has increased in recent years. Participation in club activities drops as children grow older. While two thirds of 9-year-olds participate in these activities, this share for 15-year-olds is as low as one half. Boys are more likely to participate in club activities than girls. The most typical reasons for dropping out of club activities include getting tired of the sport, not feeling at home in the team or the group, and the lack of enthusiasm and fun. Young people who participate in club activities are more likely than others to meet the recommendations regarding physical activity, screen time and sleep. Girls participating in club activities

have clearly fewer experiments with intoxicants than others. While boys participating in club activities rarely smoke, they use snuff more often than other boys. (22)

Urban planning has an impact on daily exercise, especially in the case of children and young people. Increasing restrictions preventing children's and young people's possibilities for free mobility are an international phenomenon. Children and young people engage in less uninstructed physical activity in their free time, and cycling or walking as means of transport have been replaced by car travel. The crucial factor is the distance to be travelled. Consequently, the compactness of the built environment comes up as a key factor regulating the mode and independence of mobility. A reasonably compact urban structure supports children's and young people's independence and activity, whereas public transport and cars are more likely to be used in a highly compact environment. (104)

Taking plenty of daily exercise is a key method of weight management. It also has many other positive effects on children and young people's wellbeing. In addition to possibilities for being physically active, the greenness of the built environment is also associated with better subjective health. Observations support the idea that both a suitably compact living environment and an abundance of green infrastructure have impacts on wellbeing. Consequently, rather than limiting urban planning and efforts to promote physical activity exclusively to environments intended specifically for children and young people, the entire city should be developed as an environment that encourages physical activity. In this context, linking new areas to existing urban structure emerges as an important issue. (104)

In addition to their proven positive effects, physical activity and sports also have their risks. After school and the internet, sports activities are the third most common place where children and young people experience bullying and discrimination. The risk of becoming injured is also great. In 2016, 56% of boys and 50% of girls said they had had an injury connected to physical activity at least once in the past year. The more days a week the young person engaged in physical activity, the greater the risk of injury was. (22)

Children's and young people's physical activity and health habits regulate their physical appearance and body image. The higher incidence of overweight is partly a consequence of reduced physical activity but also an effect of changing eating habits. Overweight is one of the key risk factors to children's and young people's wellbeing throughout Europe. The increase in its incidence appears to have halted or slowed down among older pupils in Finland, while a similar trend cannot be observed in pupils aged 11 and 13. Overweight is not distributed evenly and, among other things, the family's low socioeconomic status increases its likelihood. (32) (106)

Creating a positive body image is an important development task for a young person. For some, dissatisfaction with their bodies burdens their mental health. Boys are more likely to experience that they are the right size than girls, and experiencing oneself as obese is considerably more common among girls than boys. In girls, body dissatisfaction is linked to increased psychosomatic symptoms. Body dissatisfaction may also be manifested as poorer subjective wellbeing and behaviours that are harmful to health. (32)

Positive changes have taken place in young people's alcohol use at the beginning of this millennium. Fewer Finnish 15-year-olds drink alcohol every week or drink enough to become intoxicated. Young people are less likely to start experimenting with alcohol at an early age. Experiences of intoxication were slightly more common for Finnish young people than the European average: in 2014, one quarter of girls and one third of boys said they had been intoxicated at least twice in their lives. Early experiences of intoxication are also more common in Finland than on average in Europe, but the greatest decrease in these rates in 2002–2014 was recorded in Finland of all the countries. Alarmingly, the positive trend does not include young people suffering from depression and with parents who had a low level of education, at least one of whom was unemployed. (32) (79)

Young people also smoke less. The new nicotine products (including e-cigarettes) cause strong addictions, however, and young people are starting to use them. The health harms of nicotine are much more severe than what was thought earlier, and a reduction in conventional smoking will not necessarily bring the desired health impacts if the new products become more widespread at the same rate. (79)

Excessive drinking of energy drinks results in sleeplessness and psychosomatic symptoms. Gambling-related harms are also common among young people, which is an argument in favour of setting age limits and more effective supervision. (79)

The share of fruit and vegetables in children's and young people's diets has changed little between 2002 and 2010. A minor proportion of schoolchildren continue to eat enough fruit and vegetables to meet the nutrition recommendations. There are differences in eating habits between genders and socioeconomic groups. Boys continue to eat fruit and vegetables considerably less than girls. Children and young people from lower socioeconomic classes are less likely to eat fruit and vegetables. Finnish schoolchildren have sugary soft drinks and sweets less often than their peers in international comparisons. A link has been proven between eating breakfast daily and other healthy habits. (32) A link between eating habits and the child's sense of coherence and development of self-esteem has also been proven. (98)

Children's and young people's health literacy, or ability to make decisions related to their own and other people's health, is an essential factor in explaining differences in health and health habits. Health literacy is to a significant degree learned in informal environments (including sports clubs and peer groups). The risk groups in terms of health literacy comprise especially young people with poor academic success and those who follow non-academic study paths. (22) (32) (106)

Health selection related to different educational paths in adulthood thus already begins early and in teenage years, and the school plays an important role in it. The differences not only between the genders but also upper secondary and vocational students remain great in many areas of wellbeing. (10) (79) (106)

A number of factors that carry a risk to wellbeing, social inclusion, health, healthy lifestyles, school attendance and safety of the growing environment are more common for young people with disabilities, with an immigrant background or placed outside the home. The differences between young people beg the question of how health and wellbeing gaps could be narrowed more effectively and how young people could access support and help for their life situations at an earlier stage. More active intervention in factors putting their wellbeing at risk is needed, and these factors should be monitored systematically from the early years on. (10)

Children's and young people's possibilities of participating in physical activity can be promoted in many ways using the physical structures of their growing environment. In early childhood education and care, space for moving and being active should be provided for children, especially when a child is unable to concentrate. Children's ability to concentrate is highly individual. A space that allows physical activity enables children to practise regulating their actions, gradually adapting to the environment. This space should be available immediately when a need for brisk activity crops up. It allows the child to discharge their energy in a meaningful way, also in terms of the entire group's activities. After being physically active, the child is more prepared to return to an activity that requires concentration. (66)

CONCLUSIONS:

Time should be created for families to be physically active and do things together. A precondition for this is more rational organisation of free-time activities by ensuring that skilled instructors lead activities at children's local exercise facilities, eliminating the parents' need to spend their evenings as chauffeurs. The optimal environment for the physical growth of a child under the school age is a playground or a park close to the home. (66)

Improving health literacy is a key method for reducing health gaps. Health education should be given more prominence at school and especially in vocational education and training, in which its status has been considerably weakened in recent years. It is also important to recognise young people with low health-related resources. (32)

Supporting young people's self-esteem and positive body image is vital, especially for those at comprehensive school grades 7-9 age. Children and young people can be encouraged to notice the positive features of their bodies and be physically active for other reasons than those related to their appearance.

Strategic cooperation between a number of actors is needed to coordinate different forms of daily exercise (school commutes, school days, afternoon activities, free-time activities, free-time travel, the home and the local environment). Particular attention should be paid to comprehensive school pupils in higher grades. Children and young people should be involved in and motivated for planning new activities. (22)

The local living environment of a child and a young person should be as self-sufficient as possible regarding its exercise facilities, and factors that obstruct their use, for example requiring bookings or charging fees, should be eliminated. Schoolyards are used relatively little. As children grow older, schoolyards are used less and less. Their use could be intensified by means of zoning and other urban planning, among other things. (22) (104)

An effort should be made to involve children and young people in different ways in the planning and implementation of sports club activities, which could make their hobby more inspiring and fun and increase the likelihood of children and young people remaining involved in it for longer. (22)

Good possibilities should be offered for every child's physically active lifestyle. Recreational physical activity should also be possible for low-income families. Supporting daily exercise is even more important. Urban planning plays a key role in this. The centralisation of services results in long distances, preventing independent and active travel. (104)

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5   Social inclusion

5.1   Appreciating and respecting the child's viewpoint and interpretation

It is important for children to feel that their inclusion is significant. This requires mutual respect between children and adults. (12) At educational institutions, children and young people are sensitive to recognising and telling apart officially expressed goals and the real values and practices that guide the community's activities. Trust between generations is thus built through actions. In order to be credible, an adult must encounter children and young people appreciatively. This reinforces their feeling of inclusion and being heard and accepted. (28)

The possibility of belonging to a community and influencing your own life is a key precondition for wellbeing. Today's children and young people wish to influence such issues as a sustainable future. Their means of participation are undergoing a transition, however. Attempts to promote young people's active citizenship and participation in joint decision-making have thus been made in numerous projects. However, the outcomes of these projects are rarely mainstreamed as permanent practices. In practice, young people do not know how they could participate, or they find that no-one is interested in their opinions. Even for those who participate actively, it is difficult to understand how their participation ultimately influences the decisions. (28)

Pupils' attachment to the school community is reinforced by their experience of being involved in building the school's daily life. However, the practices of the school do little or nothing to inspire the pupils to take action for developing their community. Only 10% of pupils in grades 8 and 9 of comprehensive school feel they can influence the arrangements of lessons, planning of school work and recesses, formulation of common rules, facilities planning, school meals or the organisation of the school's joint events. Secondary level students find their possibilities of exerting influence as slightly better. Of vocational students, 23% consider their possibilities of exerting influence on the daily processes of their studies as good, whereas this proportion among general upper secondary students is as low as 11%. Boys experience their possibilities of exerting influence as better than girls at all levels of education. (10)

The findings of international comparisons are similar. What emerges in them repeatedly is a strong paradox between understanding how Finnish society and its structures and institutions work on the one hand and experiences of personal participation

on the other. While grades 7-9 comprehensive school age pupils' level of competence in the former area is on par with the best in the world, this rarely leads to a willingness to serve as an active member of society who influences its development. This figure is the lowest of all countries included in the studies. The administrative structures and culture of Finnish schools or the adults' attitudes attract few pupils to participate in daily decision-making. This also applies to political and other communal activities. (100)

Climate change is an example of a phenomenon which motivates young people to take action and which may give them experiences of meaningful participation also at school. Young people's concerns have had a significant influence on the UN's Sustainable Development Agenda, among other things. Sustainable development is also an example of a process in which young people are forced to reconcile their different views regarding their attitudes towards the environment. For young people in rural areas, forests and lakes offer both wellbeing and future jobs, whereas for urban young people they are environments for free time and recreation. (28) (81)

Children's and young people's development progresses in many parallel dimensions simultaneously. One-sided emphasis of any one dimension may overshadow other important aspects of being a human. Crucial dimensions are a child's inclusion and significant personal relationships in which the child is seen and heard, and the possibilities for self-directedness offered by the growing environment. Discussions on children often one-sidedly stress adults' ideas of factors affecting children, without hearing the children themselves about how they experience things and what they want out of life. (34) In political decision-making, children's lives are examined as a reality consisting of geographically expanding circles, beginning with the family and finally reaching global environments. Children themselves experience the world in which they live through their multi-locational and cross-boundary daily lives. Children's experience often challenges the authorities' views, which is why the prevailing interpretation of how children's rights are realised should be assessed critically. (74)

Children's representative participation in its current form (including children's parliaments and student associations) is to a great extent based on children adopting adult-like operating models. However, this type of participation is mainly of interest to children and young people who have plenty of social and cultural resources. In these bodies, the relationships between children and adults multiply and intensify, but the relationships between the representatives elected to a structure created by adults and the children they represent often dwindle and become more distant. (63)

The adults working with children play an essential role in creating an experience of whether or not the child's opinion counts. For example, if the teacher, caretaker, principal, cook, public health nurse or cleaner at the school encounters children and

young people respectfully and appreciatively, an experience of belonging to the community is created. By acknowledging children's daily involvement as part of social participation we take their perspective into account in the same way and with the same appreciation as adults' views. These experiences are more significant for children than any organised operating models, however well-functioning they may be. (81) (102)

CONCLUSIONS:

The daily activities of day-care centres should support children as political agents of their own lives, which requires acknowledging and accepting the political diversity of a democratic society as a premise that also applies to children. (74)

New forums and operating methods are needed through which children and young people can themselves determine the building blocks of a sustainable future, for example, and make decision on optional ways of following a sustainable way of living in their daily lives. Forests near schools, for example, should thus be preserved as important learning environments. (28)

The themes of sustainable development objectives and climate change should be made a permanent part of the tasks for children's parliaments as well as municipal and regional youth councils. The parliaments and councils will make their own decisions on sustainable development projects to be implemented each year. (28)

In treatment services, gamification would enable familiar and easy-to-approach means of influencing the treatment they receive for children and young people. Processing a difficult issue through a familiar environment makes it possible for them realise the patient's rights in health care. For children and young people, the most natural way of learning about such civic skills and rights may be virtual world applications, which are less 'official' than conventional channels of participation. (36)

We should ask critically who defines the structures for participation. Children's participation should not depend on their ability to operate in structures handed down to them. This is a particularly vital question when creating the county government. As decision-making is removed further away from children's local environments, the risk of the voices of very few children being heard at the county level is increased. (63)

5.2 Meaningful inclusion is created in children's and young people's daily lives

In a diversifying society, children's and families' feeling of belonging to groups and communities is a key aspect of wellbeing. Togetherness is enabled, restricted or prevented through daily encounters, pedagogical practices and political decisions at the local and national level. It is essential to identify the child's significant communities and support him or her as part of them. At the same time, children should be encountered without preconceptions, or preconceived ideas of what an individual representing a certain culture, family background or disability is like. (81) (101)

In the experiences of pre-teens and teenagers, the most natural way of building social inclusion and agency is through their daily lives. Every-day situations of participation and extensive societal issues are stressed simultaneously in their experiences. Meaningful experiences of participation may include a possibility of making decisions about their hobbies, pets or people with whom they spend time. Organised structures for participation, including student association boards or children's parliaments, play a relatively minor role when they consider their possibilities of participating or making decisions. Making decisions on daily things often is much more influential as an experience than an opportunity for making decisions on 'large' issues that have no personal significance. Children have many resources, experiences and skills in their daily lives and communities that can be reinforced, thus giving a number of different children experiences of belonging to society. (81) (101) (19)

Supporting children's and young people's daily inclusion is important to ensure that the support offered by the growing environment meets their needs. Leaders and supervisors in different institutions have an important role in creating and maintaining a willingness and structures for supporting children's and young people's inclusion and cooperation. Children and young people are often not aware of their opportunities for exerting influence and participating. The majority of them are excluded from active inclusion. A precondition for inclusion is dialogical knowledge-building together with professionals and parents and offering diverse channels for participation to young people with different backgrounds, capabilities and interests. Children and young people can be encouraged to participate by acknowledging that their expertise is of equal value to adults'. A precondition for mainstreaming new operating models that support inclusion is that the institutions' leadership supports them by all available means. (31)

While children themselves stress the communal aspect of inclusion, adult educators usually highlight its individual elements. For children, inclusion is motivated by playful, informal, liberating, joyful and action-based forms of implementation in which they do things together. Virtual environments today have an important role as children's own

everyday operating environments. They enable many ways of acting which are typical for children and which have been assessed as important for their upbringing, including play, learning, operating in social communities, participation and exertion of influence as well as self-expression. (19)

A precondition for reinforcing communality is that the skills of both the children and the adults working with them are promoted at different levels. For example, a study on health literacy found that, rather than addressing children's needs, social relationships or living environments, the theoretical frames of reference and models of this field focus on an individual's cognitive skills and development. An examination of health literacy and mental health services found that children have very few possibilities of participating in activities and decision-making that promote their health. Based on these observations, different evidence-based practices, methods and tools have been developed to promote children's inclusion, including child-centric participatory planning, digital story-telling and growth folders. There has also been a need to prepare recommendations and guidelines for planning and evaluating digital spaces suitable for children and young people. (19)

The built environment also affects children's and young people's possibilities of being an active part of their communities. This is influenced by possibilities for independent mobility on the one hand and the opportunities for acting offered by the environment on the other. Without sufficient freedom of mobility, children will not find the opportunities offered by the environment. In the international context, children's possibilities for independent mobility are under a serious threat in today's world, and increasing restrictions are being placed on them. Finland is a rare exception: in a comparison of 16 countries, Finnish children had the greatest freedom of mobility. However, this freedom has also become more limited in Finland over the last 20 years. (104)

A topical example of the significance that the built environment has on children's and young people's possibilities for participation and changes taking place in them is the completion of the Ring Rail Line in Helsinki region. It has increased young people's opportunities for mobility and getting together, influencing the local and geographical conditions that determine youth culture. The built connection opens up possibilities for using the urban space in new ways. Geography thus sets cultural, social and geographic conditions on young people's interaction. The means of transport themselves become spaces used by young people. (87) Important meeting places for young people are found on the trains and in localities along the line. The increased opportunities for mobility renew the youth culture in the area. (87)

Children's and young people's participation in planning their living environment is fully possible and can be implemented if the working methods used are age appropriate.

For this purpose, a SoftGIS method based on geographical information has been under development since the 1990s. Today this web-based method is already in use in over 80 countries (https://maptionnaire.com/). (104)

CONCLUSIONS:

Children's daily lives and everyday communities should be acknowledged as significant in terms of childhood decision-making. Daily encounters are more significant than even carefully arranged 'official' operating models. Should the willingness to do so exist, societal decision-making processes can be built in which anyone can participate according to their personal choice, regardless of their age. (81) (101)

New channels and modes of participation should be created for children and young people, taking their daily lives into consideration. For example, the forms of participation created by the social media can be used in this. (31)

Hearing the children's perspectives and children's participation are not realised sufficiently even in digital environments. Organisations should update their culture, making children's participation an element carefully built in their activities. The realisation of children's participation should also be monitored and evaluated systematically. For this, shared multidisciplinary education programmes are needed for experts working with children. Mainstreaming of good examples and campaigns that build awareness of the importance of children's participation are needed. (19)

Services for children and young people should be found especially in locations where they seek for information and build knowledge together with others (e.g. YouTube). It would be useful to involve the most popular YouTube personalities in this building work. (19)

Children's possibilities of acting independently in their living environment should be appreciated and strengthened. Independent agency finds its concrete expression in such areas as children's freedom of mobility. The development leading to restrictions in possibilities for independent mobility should be halted. (104)

5.3 Building new opportunities for participation

The challenges to children's participation are associated with organisation structures and the definition of participation. Children's participation is not a genuine and effective part of organisations' current cultures or their leadership and decision-making structures. There are shortcomings in the identification, evaluation and monitoring of the impacts of participation. Children's ideas, views and opinions often remain invisible when decisions are made. (19)

In practice, the objective of guiding young people towards becoming active citizens and exerting influence is society has not been achieved as intended. There has been a lack of ability to identify young people's characteristic ways of participating and being active in their own communities. In most projects, young people's participation is only thought of as traditional political activity. Against the backdrop of this tradition, young people's lack of participation is only seen as a societal problem. Young people's independent activities and daily decisions, including consumer choices, communication on the social media or, for example, participation in campaigns focusing on the ethics and fairness of life, should be acknowledged as a socially important way of participating and exerting influence favoured by young people. (19) (28)

Inclusion is often implemented in the narrow sense as the duty to find out children's and young people's views. In this process, their formal participation is meaningless for the young people themselves. Genuine inclusion is a dynamic process taking shape in social interaction between people. This is why it is important that the evaluation and promotion of inclusion are part of the practices of the service field as un uninterrupted process. (24)

Children and young people are under-represented in the hearing processes of legislative drafting. The current channels of participation are one reason for this. Young people's user experiences of the lausuntopalvelu.fi web service, for example, have revealed a number of obstacles to participation. The language used on the service is challenging, and Finnish and Swedish are the only languages available for submitting your opinions online. Banking IDs, which few children and young people have, are required to log in. Understanding the structure of the site is challenging for those unfamiliar with legislative work. There also are obstacles of a more fundamental nature to young people's participation. In the context of regulation on bullying in the Act on General Upper Secondary Education, for example, it was observed that the views of the participating young people were not given visibility in the summary of the hearing. Neither were their thoughts in any way seen in the final statute. (13) (28)

Rather than automatically meaning that they are followed, taking opinions into account and organising hearings mean that different perspectives are acknowledged as part of the discussion. It is clearly not possible to create a model or a system that would allow all children to participate, but societal decision-making processes could be put together on the basis of which anyone, regardless of their age, could participate in different contexts at their discretion. (81)

Children see things and think about them differently from adults. When evaluating and reforming services, it is important that their world and ways of thinking are harnessed and used in decision-making. Channels typical for children include producing drawings, videos, writings and blogs, for example. The children themselves are the best persons to provide information related to them by different means. Children can assemble their own clubs or 'delegations'. It is essential to encounter children using language that they understand, in a context that is safe for them and selecting operating methods natural for them. (99)

It has been observed that arts and cultural education is an effective channel for some children and young people to make their voices heard when their other capabilities do not enable it. Artistic expression builds up children's and young people's cultural and social capital and thus their capabilities for operating actively in society. (4)

CONCLUSIONS:

At all Finnish school, a physical and virtual learning environment should be implemented annually, through which young people are given opportunities to come up with ideas, experiment with and try out different forms of civic participation (similar to the Vaikuta! theme day organised by Nuorten Keski-Suomi association in Jyväskylä region). (28)

Children can themselves consider and decide how everyone's opinion can be heard. In this situation, it should be ensured that quiet or minority children are not excluded and that their voices are also heard. Additionally, it is important that decision-makers, office holders and researchers spend time at day-care centres and schools in order to hear and see children. (99)

Knowledge and skills related to legislative drafting should be added to curricula, including analysing legislative texts as well as Government proposals and statements. As far as possible, young people should be familiarised with legislative drafting, for example by writing statements to practise their skills. Sites for digital participation should be developed to ensure young people's equal opportunities. A virtual council

could also be set up in which young people could take part in discussions on legislative drafting at school and in youth facilities. (13) (28)

In the development of the current sites for digital participation, equal usability should be taken into account, for example regarding age groups and backgrounds. Particular attention should be paid to the usability of the sites for young users. (28)

Vocational competence related to inclusion, equality and encounters should be more consciously and strongly integrated in the training content and professional identities of different expert groups. The objectives of inclusion should be shared in the field of services, and they should not exclusively depend on the willingness of individual employees. (24)

5.4 Opportunities and resources for participation vary

The foundation for belonging to groups and communities is laid through the structural solutions by which children are included in or excluded from the services. Different living environments offer varying opportunities for children and young people. Life situations and the offer of services vary significantly in different parts of Finland. A number of schools have been closed down in sparsely populated areas in recent years, and many children and young people are facing significantly longer school commutes. At the same time, other services in municipalities have been centralised, and their accessibility varies increasingly. There are also great variations within municipalities. This has a major impact on the options children and young people have for taking part in free-time activities, establishing and maintaining friendships or exerting influence on their living environment together with others. (2) (49) (103)

Establishing and maintaining friendships with other young people is challenging in locations where distances are long and public transport scarce. In this situation, young people are highly dependent on lifts, funding and encouragement given by their family and friends, which puts them in an unequal position. When school transport is the only transport service, for some young people the home is the only place where they can spend their free time. Children living in remote areas who lack family support either for financial, social or other reasons should be a particular cause for concern. On the other hand, there may also be great variations in young people's knowledge and skills related to using the opportunities offered by their living area in cities. Not all young people can afford to use public transport, and this excludes them from services that would otherwise be available. Children's possibilities of fulfilling their potential are also

tied to the family's educational and income levels. Development leading to inequality starts already before school age. (2) (4) (89) (103)

In particular, the differentiation of children's opportunities for participation and wellbeing puts at risk the growth, learning and wellbeing and the realisation of the best interests and rights of children who are in a vulnerable position. Special attention should be paid to children whose families experience different types of deprivation, social and health-related problems, including parents' intoxicant abuse or violence, or whose daily lives are marred by problems following the parents' divorce. (31)

There are significant knowledge gaps related to identifying the starting points for children's and young people's differentiating wellbeing, marginalisation and vulnerable status. (31) Deprivation, intoxicant abuse and delinquency form a cumulative circle of exclusion requiring correctly targeted and timely interventions. A precondition for supporting social inclusion in these situations is drawing on young people's experiential knowledge and familiarity with the local culture. Through reinforced social inclusion, effective processes of personal social rehabilitation can be created for these young people. Four different agency roles (positions) can be identified in interviews with young people: those who focus on their personal rehabilitation, those who carry communal responsibility and develop the activity, as well as seekers and drifters. These positions influence the meanings of social rehabilitation and its different forms. (31)

In order to overcome children's unequal opportunities for participation created by their living areas, the 'school day' and 'school transport' should be reinvented. When the school day is determined and school transport is arranged to also include different organised free-time activities and less formal socialising outside of school, lack of transport connections does not necessary exacerbate the trend towards increasing inequality in inclusion. (89)

CONCLUSIONS:

Children's different experiences should be taken into account in child policy, also those experiences which we might wish did not to exist, to safeguard the child's best interest and rights equally. Not all children are kept safe and protected by the family and close relationships in all situations. (31)

Regional disparities and families' different circumstances, including long distances, are a challenge to developing more diverse early childhood education and care services. Could mobile day-care centres, for example, be re-introduced? Such arrangements could help increase children's participation rate in early childhood education and care also in sparsely populated areas. (72)

Long distances create unfair conditions in childhood years, even if children and young people in marginal areas did not themselves recognise their othered position. Some municipalities have responded to wishes related to children's free time and hobbies by offering a 'club taxi'. (89)

Youth work and possibilities for pursuing hobbies should be brought to schools and integrated in the school day. This would benefit especially young people living in sparsely populated areas, those from low-income families and young immigrants. In order to promote equal opportunities for participation, seeing to effective public transport and lowering the costs are important. (2)

Attention should also be paid to regional differences and special features when supporting Sámi children's inclusion and wellbeing. (31)

As the municipalities' tasks change, particular attention should be paid to the interfaces between educational, social and health services. It is important, especially for principals, to acknowledge the school's diverse significance in enabling and supporting children's and young people's balanced development. The local operating structures that support children's and young people's wellbeing and participation should be made visible in municipalities' wellbeing plans, and it should be ensured that all administrative sectors can work together on the interface of educational, social and health services. (82)

A personal digital growth folder should be created for each child, which follows them throughout the school path into the world of work. In early childhood education and care and comprehensive school, all children and young people should be guaranteed equal opportunities for learning to use digital devices and environments in order to promote inclusion. (19)

5.5   Inclusion of special groups

While children and young people's inclusion and equality as well as encountering them are highlighted in policy documents, their experiences of exclusion, not being talked to directly and having their views ignored are alarmingly common, especially when the child or young person belongs to a marginal group. Social status, ethnicity, gender and disability as well as living in a rural or 'remote' area continue to shape experiences of services. Children and young people themselves would like face-to-face encounters in services as well as long-term client relationships based on trust. (24)

The hearing of children's voices when their parents have intoxicant abuse or mental health problems is managed poorly in practice. The child's voice is drowned out by activities revolving around the parents' problems. Care personnel's expertise should be updated ensuring that they would be able to, and it would occur to them, to also listen to the child. Digitalisation is part of the solution. Many tools have been developed for hearing the child's voice. Promising results have been obtained from piloting them. For example, a tool that anticipates children's and young people's problems supports earlier intervention in problems even before they emerge. This tool helps to pool the information possessed by teachers, early childhood education and care personnel as well as social welfare and health care experts. (99)

Immigration, and migration in general, shape the Finnish childhood in many different ways. In addition to examining the status of certain groups of children (e.g. refugees and asylum seekers), it would be a good idea to also look at 'childhood in diaspora' in more general terms, as well as the significance of different transnational ties and networks for different child groups. An intersectional perspective in analysing different phenomena could be useful for illuminating certain changes that have occurred and are occurring in the Finnish childhood. (35) These matters also have a bearing on children's and their families' inclusion.

The question of how we can guarantee the inclusion of immigrant children and their families looms large. Children no longer wonder about multiculturalism at day-care centres and schools when time is spent on studying and talking about different cultures. The gulf between the parents is deeper. As support for bringing up their children, families need information and material about other cultures and religions. Different types of events, discussions and free-time meetings have also proven effective. Prejudices among parents are also dispelled effectively when their children attend the same free-time activities. (99)

Children and young people arriving in Finland are not a uniform group. Children's agency in refugee situations should be understood and supported through their experiential family relationships, which often are inconsistent with the narrow Western interpretation of the nuclear family that stresses hierarchic child-parent relationships. (74) Unaccompanied minor asylum seekers find it difficult to establish contacts with young Finnish people, for example because of their differentiated education and housing solutions. Young people would like to have more reliable adults in their daily lives, and they would like the adults to have enough time to listen to what they have to say and spend time with them. (76)

Arts-based methods have been successfully used in young people's integration. At its best, integration implemented by means of art is an experience that empowers young

people and strengthens their agency. It gives them tools for bringing up and expressing challenges related to integration and reinforces multicultural interaction. Artistic expression can also serve as an instrument of societal participation. The use of artistic methods increases the possibilities of hearing and seeing children's and young people's needs from the perspective of different marginal positions, which improves the ethical sensitivity and social justice of the activities. Research associated with harassment and violence following divorce has also shown that children's sensitive and even conflicting experiences can be investigated and heard. (31)

Gender minorities usually receive little attention in discussions on the equal treatment of children and young people and their rights as members of society. Non-heterosexual and transgender youth encounter lack of safety, violence and discriminatory practices both in their school communities and in other services. Heteronormative pressure causes problems with self-esteem, dropping out of education, difficulties with career choices and problems with coping at school. The status of transgender youth is clearly poorer than the position of non-heterosexual young people. Gender is significant, for example in that non-heterosexual men and transfeminine persons encountered more school violence than non-heterosexual women and transmasculine young people. Young people in rural areas are more likely than their peers in urban areas to conceal their sexual identity and experience of gender. New technologies can thus support information activities and provision of assistance for transgender youth also in rural areas. Many educational institutions fail to comply with the legislation by not drawing up an equality and non-discrimination plan together with the children and young people. (25)

Young people living in institutions are often excluded from many functions that build communality. 'Encounters, inclusion and communality in children's and young people's excursion and free-time activities' is a project that supports the individual growth of children and young people living in children's homes and promotes the building of a caring community. This operating model has been proven to have positive effects on the wellbeing of children living in children's homes and also the personnel responsible for their care. While particular attention has been focused on the children's personal experiences of the meaning these activities have for them, the personnel's experiences were also studied. (87)

Reform schools are the last-resort growing environment for young people within child welfare services. While the starting points often are difficult, placement in a reform school also offers an opportunity for successful change of direction on the life path. It is essential to reinforce the experience of inclusion of young people placed in a reform school. Inclusion comes from a feeling that you can influence your situation by your own actions. To achieve this, the young person needs sufficient privacy, however also

taking into account their and other people's safety. Rather than punishments, the use of rewards is recommended to strengthen the feeling of inclusion. (27)

CONCLUSIONS:

In educational institutions, children and young people's ability to study and grow in a safe environment should be improved, regardless of their ways of experiencing or expressing their gender and sexuality. To achieve this, better equality and non-discrimination planning in the institutions is required. Good planning could also effectively prevent sexual and gender-based harassment. (25)

A child-friendly integration policy should be created in Finland, which would enable the hearing of unaccompanied children and young people and create hope in their lives. Multilingualism should be understood as a resource in young people's lives. It facilitates the establishment of friendships across cultural boundaries and thus promotes social inclusion, long-term integration and a feeling of togetherness. Young people should be encouraged to use and combine several languages in their linguistic expression. Young people would also like to make friends in their new home country. In order to build intercultural friendships and forms of communality, more ordinary encounters in daily life are required. To facilitate this, adults who listen to young people and who involve everyone in the activities by their own example involve are required. (76)

The basic and in-service training of professionals (teachers, instructors, youth and social workers) should also comprise contents that address the structural and cultural obstacles affecting the educational and employment opportunities of different young people (including young people with an immigrant background, rainbow youth, those with disabilities) and support encountering all young people sensitively in services. (28)

Appendix. Researchers' statements

* The numeric code in the table below is a link to the relevant researcher's statement if the author has given their permission to its publication.

Code	Author		Organisation	Heading/topic of research summary
1	Aaltio	Elina	National Institute for Health and Welfare	Piloting of a systemic child welfare operating model
2	Aapola-Kari	Sinikka	Finnish Youth Research Network	Significance of regional differences and the family's resources to young people's life paths and choices: young people's opportunities for education and free-time activities vary
3	Ahonen	Timo	University of Jyväskylä	Planning and launching of a development and training project related to developing psychosocial work in early childhood education and care and at school
4	Anttila	Eeva	University of the Arts Helsinki	Meaning of arts and culture for individuals and society
5	Asunta	Piritta	University of Jyväskylä	Recognising and supporting pupils with motor learning difficulties in a school environment
6	Castrén	Anna-Maija	University of Eastern Finland	Diversity of children's families and children's multi-locational living
7	Flykt	Marjo	University of Tampere	Provision of early support for families, parenting and a child's development when a parents has mental health or intoxicant abuse problems
8	Hakkarainen	Kai	University of Helsinki	Growing mind project. Young people's technology use, wellbeing and interests
9	Hakulinen	Tuovi	National Institute for Health and Welfare	Status and development challenges of maternity and child health clinic services
10	Halme	Nina	National Institute for Health and Welfare	Measures for strengthening the child's best interests, inclusion, a family-friendly operating culture and services
11	Heikkilä	Lydia	University of Lapland	Wellbeing and equality of the Sámi (SÁRA project)
12	Heino	Tarja	National Institute for Health and Welfare	Child welfare
13	Heiskanen	Heta	University of Tampere	Hearing children and young people
14	Holm	Gunilla	University of Helsinki	Equality in education
15	Hästbacka	Noora	Finnish Youth Research Network	Rainbow youth in intoxicant and mental health services (2015–2017); Multiple dimensions of bullying at school as an object of youth work and research (2017–2018)
16	Jahnukainen	Markku	University of Helsinki	Support in the transition phase – from comprehensive school to the secondary level

17	Jalovaara	Marika	University of Turku	Links between family dynamics (including cohabitation and marriage as well as separation and divorce) and economic and social inequality
18	Jauhiainen	Jussi	University of Turku	Asylum seekers and undocumented children
19	Kankaanranta	Marja	University of Jyväskylä	Including and hearing children – practices, methods and tools for effective inclusion in children's local and virtual operating environments
20	NOT AVAILABLE			
21	Kiuru	Noora	University of Jyväskylä	Holistic promotion of children's and young people's growth and wellbeing
22	Kokko	Sami	University of Jyväskylä	Children's and young people's physical activity behaviours in Finland (LIITU study)
23	Känkänen	Päivi	National Institute for Health and Welfare	Research in arts-based methods in child welfare
24	Lahtinen	Jenni	Finnish Youth Research Network	Children's and young people's inclusion in services and more specifically in foster care in child welfare services
25	Lehtonen	Jukka	University of Helsinki	Diversity of genders and sexualities in children's and young people's lives
26	Lämsä	Anna-Maija	University of Jyväskylä	Family-friendly working life
27	Manninen	Marko	National Institute for Health and Welfare	Young people placed in reform schools
28	Mietola	Reetta	University of Helsinki	ALL-YOUTH project; young people's opportunities for participating in society, young people's experiences of inclusion and factors affecting trust in society
29	Mulari	Heta	Finnish Youth Research Network	Young children's media cultures
30	Niemelä	Mika	Oulu University Hospital	A child and a parent's physical illness
31	Nikupeteri	Anna	University of Lapland	Recognising children's and young people's differentiating starting points for wellbeing, marginalisation and vulnerable position; Identification of children's and young people's service needs and supporting their inclusion in a changing society; Cross-administrative measures, inter-professional expertise and availability of multidisciplinary special services
32	Paakkari	Leena	University of Jyväskylä	Wellbeing at school; Children's inclusion; Health resources; Experienced loneliness; Health literacy; Children's and young people's health indicators: overweight, sleep; Children's and young people's self-images: experienced weight; Children's and young people's health behaviour: alcohol use, eating habits
33	Pekkarinen	Elina	Finnish Youth Research Network	Research in child welfare: a summary
34	Pulkkinen	Lea	University of Jyväskylä	Perspective of developmental psychology
35	Rastas	Anna	University of Tampere	Vulnerable groups, immigrants

36	Ryynänen	Sanna	University of Lapland	Realisation of minors' rights and decision-making in public health services
37	Sajaniemi	Nina	University of Helsinki	Early childhood education and care and special needs early childhood education and care
38	Salmela-Aro	Katariina	University of Helsinki	School fatigue and enthusiasm: requirement-resource model
39	Salmi	Minna	National Institute for Health and Welfare	Subsistence
40	Salmi	Minna	National Institute for Health and Welfare	Work and family
41	NOT AVAILABLE			
42	Sandberg	Erja	University of Helsinki	Restless and inattentive children, children with ADHD symptoms and their families
43	Sourander	Andre	University of Turku	Child psychiatry
44	Souto	Anne-Mari	University of Eastern Finland	Meanings of ethnicity and racism in shaping young people's educational pathways
45	Toppinen-Tanner	Salla	National Institute for Health and Welfare	Flexibility in the world of work in support of reconciling work and family life
46	Uusitalo-Malmivaara	Lotta	University of Helsinki	Positive upbringing
47	Vuorinen	Raimo	University of Jyväskylä	Sufficient operating preconditions for providing guidance as set out in the Core curriculum for basic education
48	Äärelä	Tanja	University of Lapland	Hospital schools and preserving them as a strong part of demanding special support; Dropping out of education as part of development towards social exclusion and supporting families with this issue
49	Karvi		Finnish Education Evaluation Centre	Summary of the findings of national evaluation activities
50	Kouvonen	Petra	Itla Children's Foundation	Children's and young people's mental health, Effective parenting and the support of close community
51	Holmila	Marja	National Institute for Health and Welfare	Reducing alcohol use by influencing the local community
52	Kalland	Mirjam	University of Helsinki	Link between parents' ability for mentalising and encountering the child
53	Karjalainen	Piia	National Institute for Health and Welfare	Incredible Years classroom management method
54	Puura	Kaija	University of Tampere	Supporting early interaction in the work of maternity and child health clinics
55	Rissanen	Elisa	University of Eastern Finland	Cost-effectiveness of early support for parenting
56	Solantaus	Tytti		Collective support for favourable development and coping
57	Incredible Years		Incredible Years	Incredible Years parenting group
58	Laakso	Marja-Leena	University of Jyväskylä	Views of researchers of children, childhood and family at University of Jyväskylä
59	Aro	Tuija	University of Jyväskylä	Developmental neuropsychological difficulties and psychological wellbeing; Development of mathematical skills

60	Aunola	Kaisa	University of Jyväskylä	Preventive work and supporting parents; development of mathematical skills
61	Heikkinen	Suvi	University of Jyväskylä	Family-friendly working life
62	Jokinen	Kimmo	University of Jyväskylä	Meaning of child orientation, Situation of young families
63	Kiili	Johanna	University of Jyväskylä	Representative inclusion
64	Lehto	Siru	Jyväskylä University of Applied Sciences	Construction of motherhood following extended childlessness
65	Salonen	Eija	University of Jyväskylä	Social and emotional wellbeing of young children in the context of non-standard hour child care
66	Sääkslahti	Arja	University of Jyväskylä	Children's physical activity
67	Terävä	Johanna	University of Jyväskylä	Parenting and the family's everyday practices
68	Turja	Leena	University of Jyväskylä	Children's inclusion and self-confidence
69	Wilska	Terhi-Anna	University of Jyväskylä	Consumption and digitalisation
70	Karila	Kirsti	University of Tampere	A child-friendly society
71	Eerola	Petteri	University of Tampere	The father, fatherhood and diverse families
72	Estola	Eila	University of Oulu	Early childhood education and care legislation and the state of early childhood education and care in municipalities
73	Forsberg	Hannele	University of Tampere	A child's parallel and changing places of residence
74	Kallio	Kirsi-Pauliina	University of Tampere	Agency in environment issues, early childhood education and care and for those with a refugee background; publications
75	Kupila	Päivi	University of Tampere	Early childhood education and care personnel, working career and professional support
76	Kuusisto	Anna-Kaisa	University of Tampere	Integration of unaccompanied minors in Finland
77	Paananen	Maiju	University of Tampere	Performance guidance in the daily life of early childhood education and care
78	Paavilainen	Eija	University of Tampere	The cares and risk conditions of a family with children and the support needed to address the risks
79	Rimpelä	Arja	University of Tampere	Wellbeing, health and the school
80	Soini-Ikonen	Tiina	University of Tampere	Learning and wellbeing at comprehensive schools
81	Stenvall	Elina	University of Tampere	Children's opportunities for everyday participation
82	Turunen	Tuija	University of Lapland	Educational transitions
83	Vainikainen	Mari-Pauliina	University of Tampere	Support for learning and school attendance at comprehensive schools
84	Childcare project		University of Tampere	Mechanisms promoting inequalities in early childhood education and care
85	Junttila	Niina	University of Turku	Children's and young people's loneliness
86	Lammi-Taskula	Johanna	National Institute for Health and Welfare	Research related to risks to children's wellbeing: a summary
87	Finnish Youth Research Network		Finnish Youth Research Network	A summary of research carried out by the Finnish Youth Research Network

88	Ylikännö	Minna	Social Insurance Institution	A summary of the Social Insurance Institution's studies on children's and families' wellbeing
89	Armila	Päivi	University of Eastern Finland	Perspectives of research in children and youth in Eastern Finland
90	Rotkirch	Anna	Family Federation of Finland	Birth rate and the timing of parenthood in the life cycle
91	Niilo Mäki Institute		Niilo Mäki Institute	Learning difficulties and other more specific neural development disorders
92	Pekkola	Juhani	Kymenlaakso University of Applied Sciences	Motives and structures relevant to having children among Finnish people aged 18 to 40 in 2015
93	Lyyra	Nelli	University of Jyväskylä	Results of WHO's student health survey on loneliness among young people at school age
94	Tuominen	Miia	University of Turku	Continuity of care in maternity and child health clinic services
95	Salminen	Jaanet	University of Turku	How a school can be turned into a wellbeing community
96	Laasonen	Marja	University of Turku	Developmental disorders in language development; Bilingualism
97	Tervahartiala	Katja	University of Turku	Links between a child's individual characteristics and stress regulation at home and in day care
98	Lagström	Hanna	University of Turku	Children's eating culture
99	Huhtasalo	Jenni	University of Turku	Multiple problems in families
100	Välijärvi	Jouni	University of Jyväskylä	Challenges related to knowledge and skills in basic education in the light of international comparisons
101	Rönkä	Anna	University of Jyväskylä	Factors affecting reductions in the birth rate
102	Bernelius	Venla	University of Helsinki	Internal divergence in cities and its impacts on early childhood education and care and schools
103	HEJ		Centre for Educational Assessment at Helsinki University, HEJ	Equality of learning and assessment and support for learning
104	Kyttä	Marketta	Aalto University	Research on the theme of the child and the environment at Aalto University
105	Haataja	Anita	No organisation	Family policy, family leaves and birth rate
106	LIKES		LIKES Research Centre for Physical Activity and Health	Physical activity of children and young people, the Schools on the Move programme

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