



## Building Relationships through Innovative Development of Gender-Based Violence in Europe - BRIDGE Project

### Children and Youth Survey – 3<sup>rd</sup> Data Collection – Survey Analysis Report

Country: Malta

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This data collection took place within the framework of the regional project [“Building Relationships through Innovative Development of Gender-Based Violence Awareness in Europe - BRIDGE”](#) with the purpose of gathering information on the level of awareness among children and youth on the move on gender-based violence. Data was gathered through a questionnaire encoded in a mobile data collection tool that was used during face to face meetings.

The BRIDGE project is **supported by the European Union’s Rights, Equality and Citizenship Programme (2014-2020)** and is implemented under the lead of Terre des hommes Regional Office for Europe in Hungary, in partnership with Defence for Children International Belgium (DCI Belgium) and FEDASIL (Belgium), Association for the Social Support of Youth – ARSIS (Greece), Kopin (Malta) and Terre des hommes Romania. The aim of the project is to strengthen the response to gender-based violence (GBV) affecting children and youth on the move in European Union countries as well as to empower children and youth on the move to better protect themselves.

### 1. General

11 youth were interviewed during the third data collection of the BRIDGE project. At the time of the interviews, in the second half of November 2020, the interviewees were all residing at the Hal Far Tent Village (HTV)<sup>1</sup>, an open centre run by the Agency for the Welfare of Asylum Seekers (AWAS)<sup>2</sup>. The interviews were held in small groups with the interviewer filling in the answers on a tablet.

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<sup>1</sup> <https://homeaffairs.gov.mt/en/MHAS-Departments/awas/Pages/Open-Centres.aspx>

<sup>2</sup> <https://homeaffairs.gov.mt/en/MHAS-Departments/awas/Pages/AWAS.aspx>



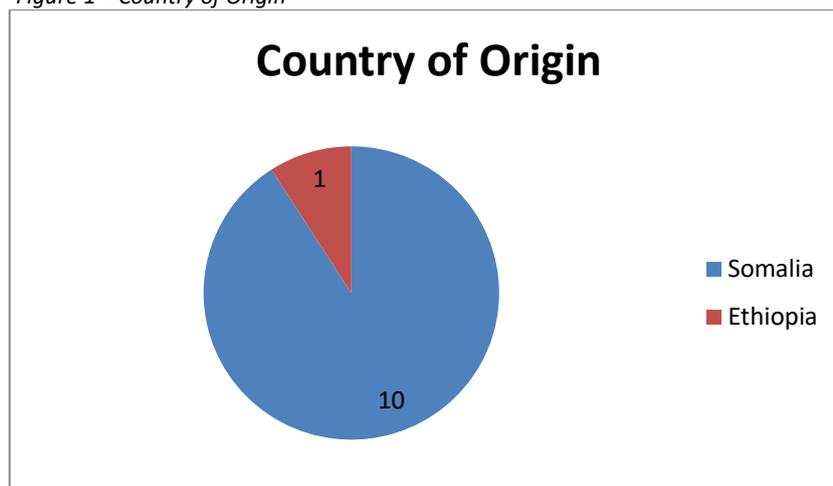
**Language.** The interviews were held in Somali<sup>3</sup>, with a professional interpreter who translated from English to Somali and vice-versa.

**Age.** The ages of the interviewees range from 16-22<sup>4</sup>. Nonetheless, all of the respondents indicate that this is their estimated, rather than their exact age.

**Gender.** All respondents are male. This is due to the fact that the majority of the residents at HTV (reflecting the majority of asylum seekers arriving in Malta) are male.

**Country of Origin.** All the interviewees – except for one who hails from Ethiopia – hail from Somalia<sup>5</sup>. (see Figure 1).

Figure 1 – Country of Origin



**Family Members.** None of the interviewees are accompanied by family members, nor were they separated from their families during the journey.

## 2. Friends and School

The majority of respondents (8) observe that they have found friends of their age at HTV, with five indicating that they found a few, and three that they found a lot. Meanwhile, almost all (10) youth state that they are spending time with friends who are at least five years older than them (with 3 indicating 'a lot' and 7 replying 'a few'), while one youth states he does not do so. They generally spend their time staying at HTV / not doing much (4 respondents), playing football (4), relaxing and resting (3), doing their own thing (1), looking for work (1), and swimming (1).

None of the respondents attend school, and three respondents add that it is not possible – nor are there opportunities – to study or work. They haven't received information about how to access classes or any type of education. One respondent also notes that life is very difficult in general.

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<sup>3</sup> The original plan included French and Arabic interpreters in order to interview persons speaking these languages and thus obtain a better representation of the migrant population. However, on the planned day, both interpreters were held up due to work- and COVID-19-related reasons.

<sup>4</sup> Ages were given by respondents and may be different from their officially assessed ages that are on record; all participants were living in the adult section of the open centre

<sup>5</sup> However, three respondents who identify as Somali have their families currently based in Ethiopia, thus leading to a discussion, during the interview, as to whether they should answer 'Somalia' or 'Ethiopia'.

### 3. Awareness of GBV: Hypothetical Scenarios of Violence and / or Abuse

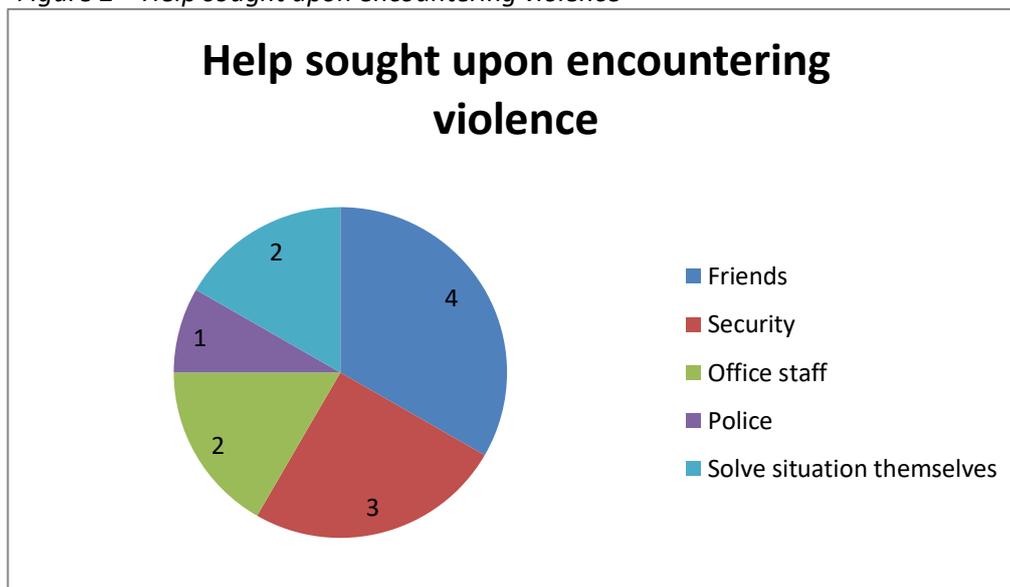
No respondent answered the questions in this section (refer to sections 5 and 6 of this report for further details).

### 4. Support found at the Centre and in Malta

This section explores the respondents' perceptions of the support with regard to violence and abuse to be found at HTV and in Malta in general.

When asked from whom they would ask for help if they encountered any form of violence (see Figure 2), four of the respondents reply that they would ask friends, three mention security, two indicate that they would ask the office staff for help, and one mentions the police. Two respondents indicate that they would try to solve the situation themselves.<sup>6</sup>

Figure 2 – Help sought upon encountering violence



With regard to support they can find at HTV, four respondents indicate that they do not know / want to answer; while three observe that no services are available inside the centre (with one respondent observing that he has never needed any help, nor has anyone ever informed him of existing services). Meanwhile, five respondents mention other – much more basic – services than those listed: food and a bed /container to sleep in (with one mentioning that the accommodation is only for a limited time).<sup>7</sup>

With regard to support found in Malta in general, once again, four respondents indicate that they do not know / want to answer (one of whom observes that he does not go out); and the majority (6) indicate that there is no service available. One respondent observes that only friends help him.

<sup>6</sup> Multiple answers were possible.

<sup>7</sup> Multiple answers were possible.

However, when asked if there is **medical support**<sup>8</sup> if someone needs it, the majority (7) of respondents indicate that there **'probably' is**; while three respondents reply **'definitely not'**. One indicates that he does not know / want to answer. Meanwhile, three respondents are sure ('definitely') that they have to pay for medical services and two think this is probable; while four think 'probably not'. Two respondents do not know / want to answer.

With regard to **legal assistance**, four respondents are sure that there is none ('definitely not') while four think **'probably'**. Three respondents indicate they do not know / want to answer. As to whether they have to pay for it, the majority (6) give no reply, while three respondents indicate they do not know / want to answer. Two respondents indicate that legal assistance is 'definitely' provided against payment.

Finally, with regard to respondents' perceptions of their privacy being respected if they report bad behaviour, while three indicate **'definitely not'** and **'probably not'**, two indicate **'definitely'**. Three respondents indicate they do not know / want to answer, and the rest (3) do not provide any response.

The observations some of the respondents make – when asked if there are any additional comments they would like to make – are overall negative, including:

- No education / job (the latter including because of COVID-19)
- No access to support
- No mingling with people outside of centres (in 1.2 years)
- 6-month duration limit at HTV
- Needing help.

## 5. Conclusions and Recommendations

Based on the responses provided to the survey questions, it is evident that the HTV residents interviewed for this study are unhappy with their situation.<sup>9</sup> As also detailed in the next section, the atmosphere during the interviews (emanating from their situation at HTV) was such that it was not amenable to pose questions on GBV. Feelings of dissatisfaction emerge for example, from their answers to questions on how they spend their time (refer to section 2 of this report), where, significantly, four respondents observe that they do not do much.

Further observations throughout the survey reiterate lack of opportunities to study and find work, but also lack of support. The replies (or lack of them) to types of support available at HTV and in Malta in general are quite stark, where the majority of respondents seem not to know what (if any) GBV-related services are available. Indeed, most cite food and bedding as the only services available at HTV.

Significantly, the majority (6) of the respondents would either seek their friends' help or try to solve the situation themselves should they encounter violence; and the majority (9) either feel their privacy would not be respected if they reported violence or do not know (or want to answer). Such responses (or lack of them) point towards a lack of (perceived) support at the centre.

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<sup>8</sup> In general in Malta, rather than at HTV.

<sup>9</sup> At the time of the interviews (21 November 2020), all interviewees had been in detention for at least 3 months (with the average duration being 6 months).



Based on these findings, a number of recommendations emerge as pertinent and urgent<sup>10</sup>:

- (More) information, guidance and advice needs to be offered (in various languages) to the resident youth at HTV, especially with regard to finding work or study.
- Information on available services – or the development of necessary services – such as medical/health care, psychosocial support, legal advice and translation services needs to be disseminated in accessible means throughout the Centre. Such services also need to be readily available and accessible (e.g. provided in the languages spoken by the residents; taking into account cultural considerations) by all HTV residents.
- Opportunities for leisure activities are of great importance to feelings of well-being which evidently eludes the participants of this survey. Such opportunities can be provided, without great costs, at the Centre itself.
- Relatedly, most of the interviewees seem to feel a lack of support and understanding at the Centre and a lack of faith in the asylum system in general, leading to a lack of faith in staff. These systematic failings are having an adverse effect on both residents and staff alike. The Centre needs more staff and resources to cater for the large number of residents who reside there and for them to be given training and support so that the psychological and emotional wellbeing of residents can be better supported.

## 6. Ethical Aspects and Limitations

The situation(s) described above emerge also from (and at the same time, led to) the fact that interviewees were initially hesitant to speak to the interviewer, thinking that their responses would be relayed to authorities. This was one of the reasons that in this round of data collection, the survey was administered in small groups rather than individually. While this did not necessarily greatly affect the answers, it is worthwhile noting the data collection in this round differed methodically from the first two.

As was the case in the first round of data collection (also held at HTV), interviewees were under the impression – and expected – the interviewer to help them. The overwhelming worry voiced by the interviewees centred on the fact that open centres are currently allowing residents to stay only for six months<sup>11</sup>, and residents receive little guidance on how to find work or access classes. Such predicaments have led to feelings of desperation and hopelessness, compounded by the perception that no help is to be found nor is anyone willing to help them.

As mentioned earlier, therefore, the situation faced by the interviewees is such that it was either not appropriate to pose – or they did not feel comfortable replying to – questions on issues which are not currently a priority for them.

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<sup>10</sup> It is noted that the Covid-19 pandemic has had an adverse effect on information services and activities at the Centre

<sup>11</sup> Some of the interviewees face impending eviction.

