The Malta Trust Foundation

Committed to empowering lives

The Blossom Project

The Provision of Counselling Services in Schools

Report compiled and authored by Dr Bernadine Satariano based on data collected by the Psychosocial Professional team of The Blossom Project

This work is dedicated to the children and young people whose courage has inspired the Blossom Project, to the educators who support them with dedication, and to the counsellors, psychotherapists, psychologists, other therapists, and professionals whose commitment has brought guidance and care into their lives. May this project continue to serve as a source of hope, strength, and opportunity for all children in need

- Her Excellency Marie-Louise Coleiro Preca

Foreword

As Founder and Chair of The Malta Trust Foundation, I am proud to celebrate the Blossom Project, our longest-standing initiative, now approaching its tenth anniversary.

Over the past decade, Blossom has grown from a bold vision into a trusted model of school-based mental health support, placing the well-being of children and young people at the heart of education.

By embedding trained counsellors, therapists, and psychologists directly within schools, the project has reduced barriers, eased stigma, and ensured that children most in need receive timely and compassionate support.

Early intervention has fostered resilience, confidence, and a sense of belonging, while collaboration with educators ensures holistic care. As we reflect on nearly ten years of impact, we celebrate the courage of the young people, the dedication of educators, and the commitment of professionals who bring this vision to life.

The Blossom Project stands as a testament to what can be achieved when compassion, expertise, and collaboration unite, offering hope and a blueprint for the future of school-based mental health support.

Marie-Louise Coleiro Preca

Former President of Malta
Founder and Chairperson
The Malta Trust Foundation

Foreword

In recent years, the importance of enhancing the mental wellbeing of young children, youths, families and teachers has been widely discussed yet the challenges faced by the children, young people and their families within our school communities remain extremely complex. As educators, counsellors, and stakeholders in the well-being of our young clients, we are called not only to respond, but to lead with empathy, insight, and action.

The Blossom Project, in collaboration with the college psychosocial teams, is both timely and essential in creating a safe and supportive environment where every student feels seen, heard, and valued. From early intervention strategies to non non-judgmental and empathic stance, the Blossom Project strives to accompany and empower young children and adolescents in their journey towards healing and resilience.

Our aim today is to promote the nurturing of the emotional and psychological wellbeing of our children. May this be a platform to shape policies, practices, and cultures that prioritise mental health as a cornerstone of education. Together, we can build communities where mental health is not just an afterthought, but a foundation.

Isabelle Anastasi

The Blossom Project Coordinator

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The Blossom Project

01 The presence of qualified counsellors and psychotherapists in schools is no longer considered a luxury, but an educational and societal necessity.

02 Hand in hand with psychosocial teams in college, the Blossom project is filling a gap in the provision of counsellors and therapists in schools.

03 The Blossom project serves as a bridge between educational needs and the mental health and wellbeing needs of children encountering adversity.

04 It embedded a psychosocial team in primary, middle, and secondary schools.

05 It started a shift from one counsellor per college to local, daily support.

Importance of Counselling and Psychotherapy in Schools

It extends beyond the individual support but includes personal, social, family, vocational, educational, and health guidance.
It addresses the inclusion of children with disabilities and multicultural issues.

School psychologists mediate conflicts and coordinate holistic interventions *(Kourkoutas & Xavier, 2010).*

There is improved academic, social, and career development, together with reduced anxiety, depression and behavioural issues.

> What we are offering is a much-needed service, especially now... counselling services were being reduced...
> one of the biggest challenges in Malta's education system.
>
> *- Counsellor, Primary*

The Evolving Role and Challenges of School Counsellors

The role of taking care of the wellbeing of the child has evolved from the teacher's responsibility to trained professionals. Yet the counsellor's roles are often misunderstood or underutilised (Stone & Dahir, 2006). Schools are the setting for identifying and addressing children's mental health needs.

However, without counselling, the burden shifts to educators who are not trained enough for mental health support. Institutionalising counsellors is essential for modern education.

Multidisciplinary & Team-Based

The Blossom Project psychosocial team is composed of counsellors, psychotherapists, family therapists, and counselling and clinical psychologists. The team makes use of eclectic, collaborative, integrative practices across primary, middle and secondary schools.

> What makes Blossom special is the fact that the professionals work in a team... This is a place where you belong, and it gives me courage.
>
> *- Counsellor, Primary*

The operational effectiveness of the Blossom Project according to the literature

School-based services reduce barriers related to cost, transportation, and scheduling by embedding support within the daily environment (Husky et al., 2009; Colognori et al., 2012).

Early identification and timely intervention are key advantages of school-based approaches (Colognori et al., 2012).

Counsellors must be trusted, culturally competent, able to maintain confidentiality, and actively engage students through literacy campaigns and outreach strategies (Gulliver et al., 2010; Leavey et al., 2011).

The operational effectiveness of the Blossom Project according to the literature - *Child Environment and Risk Factors*

Developmental outcomes are shaped by environments including family and school, with low socioeconomic status homes presenting multiple interrelated risks (Yoshikawa, Aber, and Beardslee, 2012).

Poverty impacts children indirectly through parental stress, depression, and reduced quality of parenting (Roy and Raver, 2014; Pratt et al., 2016).

Not all children in poverty experience the same outcomes, as resilience is influenced by family functioning and parental wellbeing (Iruka et al., 2018).

Maternal depression and inconsistent parenting are directly linked to child behavioural and emotional problems such as anxiety, aggression, and withdrawal (Goodman et al., 2011; Turney, 2012).

The operational effectiveness of the Blossom Project according to the literature - *Educational Inequities and Social Class*

Schools can reflect structural inequalities, where affluent schools foster a tertiary education culture while under-resourced schools often limit the aspirations of students (McDonough, 2005; Bloom, 2007).

Students from low-income and migrant backgrounds face barriers and fewer opportunities for guidance and post-secondary preparation (Carnevale and Rose, 2003; Solorzano and Solorzano, 1995).

Parents with limited educational backgrounds depend more heavily on schools for information (Hossler, Schmit, and Vesper, 1999; Saenz et al., 2007).

School counsellors can play transformative roles in widening access to education (Corwin et al., 2004; Roderick et al., 2008).

The operational effectiveness of the Blossom Project according to the literature - *Parents' Role and Family Structure*

Parents act as primary regulators of emotional and cognitive development, mediating the effects of stress and adversity (Letourneau et al., 2019; Dougherty et al., 2013).

Parental anxiety, depression, or conflict are linked to children's internalising behaviours such as anxiety and externalising behaviours such as aggression (Burstein et al., 2010; Platt et al., 2016).

Separation and divorce are major stressors that often lower wellbeing and academic performance, though outcomes depend on conflict levels and quality of co-parenting (Amato and Sobolewski, 2001; Van Dijk et al., 2020).

Boys are more likely to show externalising problems, while girls display internalising problems such as depression, with paternal absence (Amato and Anthony, 2014; Palosaari et al., 1996).

Methodology

This study adopts a mixed-methods approach.
The quantitative dataset was collected by the psychosocial team including counsellors, family therapists, psychotherapists, and psychologists.

The data recorded for each child included presenting psychological, emotional, and social issues and demographic background were for 2022-2023 and 2023-2024.

The statistical analysis was conducted on the 2023–2024 dataset due to improved completeness, standardisation, and rigour in data entry.

Applied tests included Pearson's Chi-square were used for categorical variables and Spearman's rank correlation for ordinal distributed variables.

The qualitative data were derived from in-depth interviews with eight members of the psychosocial team of the Blossom project working in schools across the Maltese Islands.

The narratives were coded and analysed using a thematic analysis and a grounded theory approach.

Together, these methods offer a comprehensive understanding of children's needs and the value of the support services.

Limitations

The data input may have varied across practitioners and schools, and so there may be slight inconsistencies and subjectivity.

The lack of longitudinal tracking of individual children limited conclusions about the outcomes of counselling services.

Findings Part 1

What is the Blossom project doing? The Benefits and the Challenges of Counselling in Schools

The Role of Counsellors in The Blossom Project

The Blossom Project goes beyond the traditional approach

Traditional counselling used to view the *"child as the sole client."* The Blossom psychosocial team emphasise the importance of seeing the child within the relational and environmental context of the family and school.

> As time passed, there is more recognition that children do not live in a bubble...
>
> If the family is going through a lot of instability, stress, poor parenting, the child will obviously be affected. So I do talk to parents. I try to help them understand how their behaviour impacts the child."

- Counsellor, Primary

Safeguarding without barriers

A unique strength of counselling services in school including the Blossom Project is the ability to engage children without parental consent. This protects children at risk of harm and enables timely intervention.

> We do not need parental consent to speak with a child, and I have always stood by that, because if a child is being abused... the parents are never going to sign consent forms.

- Counsellor, Primary

Referral Processes, Awareness, and Accessibility in the Blossom Project

There are multiple referral pathways, either from teachers, school leadership team, or directly from children themselves.

Educators often act as key gatekeepers, especially for younger children who may not fully grasp the service.

> In Year 4, 5, and 6, I communicate with the children and explain to them... with the younger children, I tend to address the teachers and kindergarten educators more directly.

- Counsellor, Primary

Children often reach support through encouragement from peers rather than by self-referral.

> Very few children self-refer… more often, they were brought in by a friend, a classmate, or close peer.

- Counsellor, Middle School

In secondary school, referrals often begin with identification by the school leadership team, which is then passed to the guidance teachers.

> Recently, I began working with a girl… she broke down and cried… eventually, we learned she was struggling with an eating disorder and she was referred to me."

- Counsellor, Secondary School

The Value of the Blossom Project

The therapists and counsellors build everything on trust.

> In the very first session, it's essential to start building the relationship… If the child feels safe and begins to trust you, then future sessions have a chance.

- Counsellor, Primary

Many children enter counselling carrying disappointments from adults.

> Many children have been disappointed by adults... So I invest heavily in the relationship.

- Counsellor, Middle School

It helps in repairing relational experiences. While harm from adverse parenting cannot be undone, the psychosocial Blossom team provides opportunities to feel seen, heard, and valued.

> What Blossom is doing is helping children understand that at some point there were adults who took care and paid attention to their needs... That is a reparative experience on some level.

- Counsellor, Primary

Approaches used by the psychosocial team of the Blossom Project

Play therapy is used as a medium where children express emotions and experiences safely.

> Generally, I work with young children using play as a central medium in therapy... I use a non-directive approach, allowing the child to lead. But there are some children who may need a more directive approach depending on their needs.

- Therapist, Primary

Play therapy fosters safety, spontaneity, and trust. It enables children to process emotions and trauma in developmentally appropriate ways.

Eclectic Approach and the 'Here and Now'

- Focus on present feelings, thoughts, behaviours
- Experiential techniques (role-play, art, movement)

> We focus on the present... experiential techniques... in a safe place... relational approach fosters connection and self-discovery.

- Therapist, Primary

Approach of Assessment as a Planning Tool

Assessment is often informal but critical in shaping therapeutic planning.

> I like to make an initial assessment, not necessarily formal... This helps me formulate a plan for how to work with that particular child.

- Psychologist, Primary

> If a child is referred by staff member, the first thing I do is gather feedback from the teachers. Then I contact the parents and arrange to meet with them... Usually, I try to meet the children at least four times before giving feedback.

- Clinical Psychologist, Primary

This approach can also be used to balance the child and parent involvement.

> If the children are self-referred, I first meet with them... and always tell them I will need to meet the parents as part of the evaluation.

- Clinical Psychologist, Primary

Approach of Solution-Focused Interventions and Empowerment

The Blossom Psychosocial team also builds resilience by equipping children with tools to address adverse or unsafe situations.

> For example, a girl whose mother was harmed... I taught her to remember her address by heart, so if she needs to call the emergency services, she can do so confidently.

- Counsellor, Primary

The counselling also helps in shifting negative narratives to foster empowerment.

> I work a lot using a solution-focused approach... I try to help the child shift their narrative so they see things differently and feel more empowered.

- Counsellor, Middle School

The Benefits of the Blossom Projects

Creating Safe Spaces for Children

One of the most immediate benefits of the Blossom Project is the creation of a dedicated space where children feel genuinely seen and heard.

> A teacher has to deal with between 15 and 21 students per class. So often, the kids are not seen. So when they come to this room, it is their time to be seen, to be heard. Not obviously, not just from the outside. So I think they feel very much seen when they come here.

- Therapist, Primary

This therapeutic space allows children to reclaim their sense of importance and value.

Creating Safe Spaces for Children

One of the most immediate benefits of the Blossom Project is the creation of a dedicated space where children feel genuinely seen and heard.

> Blossom is important as it can be the only safe space for a child. When children are constantly exposed to conflict between their parents, their only stable place they attend to is school. Yet, the teacher is not obliged to address the child's needs related to familial conflict. Therefore, the Blossom team is highly important in these aspects.

- Therapist, Primary

Flexibility and Access

Blossom services are designed with flexibility, including support offered beyond school hours.

> We have a flexible setup. I stay after school hours, sometimes even online so I can dedicate as much time as possible to the students, their parents, and their teachers. That's just my way of working being present and available where and when I'm needed most.

- Therapist, Primary

Support for Educators

Educators face stress from leadership conflicts, health issues, and family difficulties. Blossom offers counselling for teachers and staff, strengthening their capacity to support students.

> What is beneficial in the Blossom service is the fact that teachers and educators have the possibility of making use of the service.

- Counsellor, Primary

Beneficial experience to the psychosocial team and Recognition from Schools

The psychosocial team finds personal fulfilment and deep vocational meaning in their work.

> You feel this need to share the love you carry... when you see a child start to thrive... that kind of satisfaction... it's immeasurable.

- Counsellor, Primary

The Blossom Project is widely appreciated within schools, reinforcing its value.

> When I joined, I felt like a queen... the school is extremely grateful to Blossom

- Counsellor, Primary

Team Cohesion and Parental Assurance

The Blossom Project has supportive coordinated leadership that strengthens collaboration and team culture.

> I don't know what we would do without her! I think she's a super coordinator.

- Therapist, Primary

Parents gain reassurance knowing their child's needs are consistently addressed.

> Having a psychosocial team in school should make parents sigh with relief… summertime is an asset as certain issues cannot be addressed during the school year.

- Therapist, Primary

Daily presence offers stability and responsiveness.

> Being there daily means… there's a constant point of reference.

- Therapist, Primary

Embeddedness in the School Community

The project's integration into schools is essential to understanding and addressing children's needs.

> Children's needs are not based within the child but are based within the culture… You need to work with the school

- Counsellor, Primary

The Blossom Project emphasises a holistic and contextual model of care rather than isolating the child.

Embedding services in the school allows practitioners to respond to the cultural, relational, and environmental dynamics of the child.

Embeddedness in the School Community

The Blossom Project is a vital resource, yet professionals face ongoing challenges that limit their capacity to meet the needs of all children.

Time Constraints and Overwhelming Demand

Increased numbers of children present with complex needs far beyond available capacity.

> We're very time-limited, especially given the high number of children we need to support.
>
> *- Counsellor, Primary*

Daily referrals come from multiple staff members including teachers, the senior leadership team, and even caretakers.

> This school is... it's nonstop. Almost like a case centre... everything becomes our responsibility in some way.
>
> *- Counsellor, Primary*

Caseload pressures lead to difficulty in prioritising cases of children, it leads to interruptions in the continuity of supporting the child, and puts emotional strain on the psychosocial team.

> Sometimes I plan to see a child more intensively but then I have to space the meetings out because others might need more urgent intervention... it's very much playing it by ear.

- Counsellor, Primary

Ethical Dilemmas in Prioritisation

Limited resources force professionals to prioritise by severity rather than order of referral.

> The referral list isn't based on when cases came in, but rather on severity. That feels unfair sometimes, but it's necessary.

- Counsellor, Primary

Legal and Protective Responsibilities

Professionals often carry the burden of safeguarding children, sometimes involving legal processes.

> I've had to be a witness in court... you realise you are the only voice of the child. The details shared often hold the truth, and that truth must be honoured.

- Counsellor, Primary

Legal and Protective Responsibilities

Children do not disclose their story of abuse immediately; it requires prolonged trust and therapeutic presence.

> Sometimes they tell me that after a year... a girl came to me after many sessions and started telling me how her father abused her... it really shocks you.

- Counsellor, Primary

Challenges at Secondary School Level

Many adolescents in need of support do not engage with services.

> What is disappointing at the secondary level is that many children who need the service do not make use of it.

- Counsellor, Secondary School

Many adolescents in need of support do not engage with services.

> Sometimes a child is referred by the guidance teacher, but when I go to follow up, they say no... they don't want to come or feel that they don't need help.

- Counsellor, Secondary School

The developmental stage of adolescence amplifies autonomy, mistrust, and stigma around counselling.

Familial Instability and Loss of Hope

Persistent family issues such as domestic violence and legal disputes weaken and undermine the positive progress in therapy.

> A girl with a history of severe domestic violence... She doesn't want to come any more... even after interventions... I am sure that the problems did not simply vanish.

- Counsellor, Secondary School

Adolescents may lose faith in therapy when underlying family circumstances remain unresolved.

Forced Therapy

Therapy cannot be imposed; there should be genuine engagement and it must be child-led.

> Sometimes children are brought to sessions under pressure, and when therapy feels like an interrogation rather than a safe space, engagement stops

- Counsellor, Primary

Not every child bonds with every professional, requiring patience and persistence.

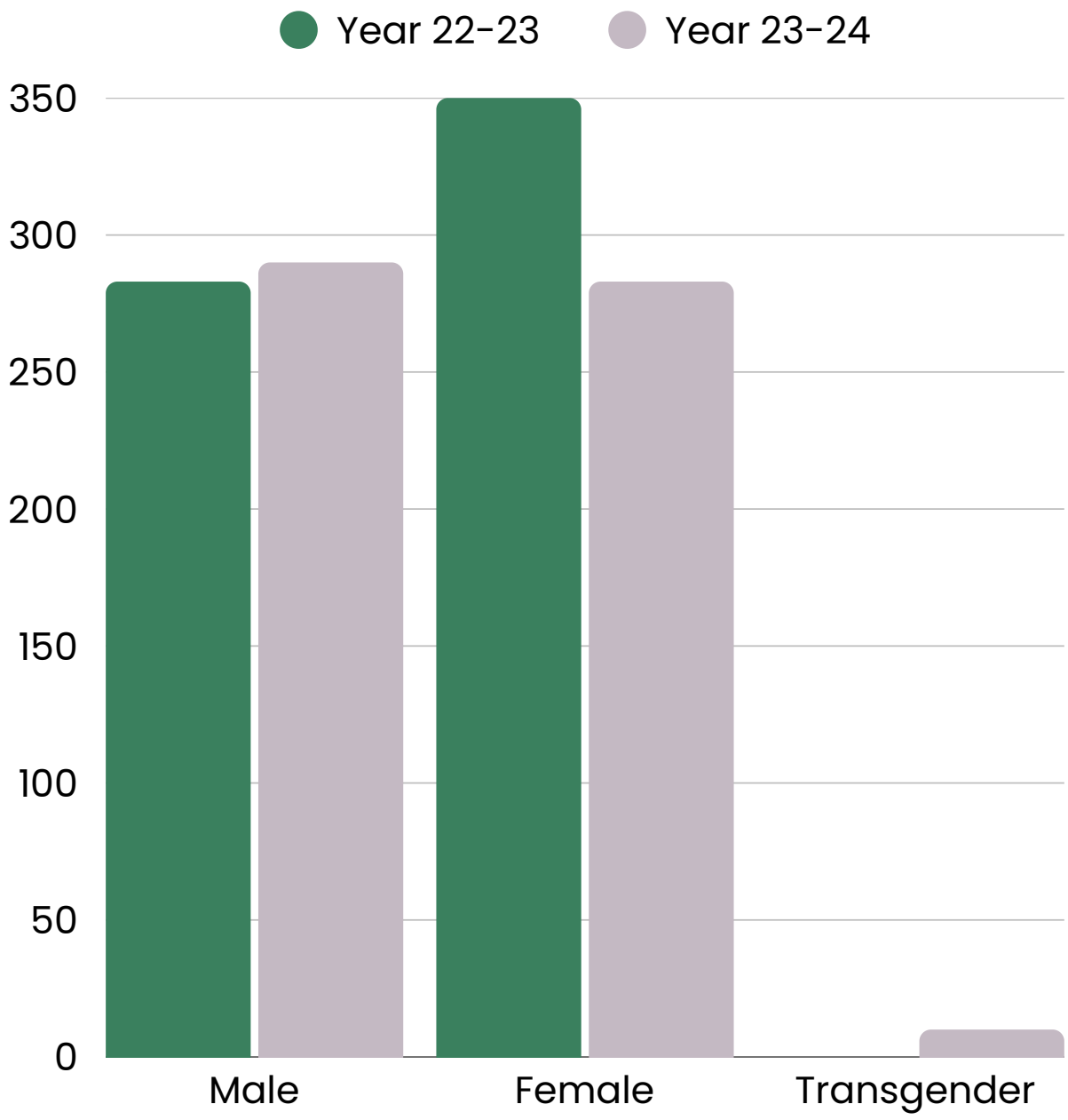
> There's always the hope that if we keep trying, the child will open up, but sometimes you have to question if the process is working. Still, we return, offering grace and another chance.

- Counsellor, Primary

Findings Part 2

Who are the children making use of the Blossom Project and why are they making use of the service?

Data Analysis: Gender of children making use of Blossom



> Girls tend to self-refer more frequently, often related to friendship difficulties, while boys are more often identified through behavioural disruptions.

- Therapist, Primary

This reflects different help-seeking behaviours from an early age as well as how schools notice children in need.

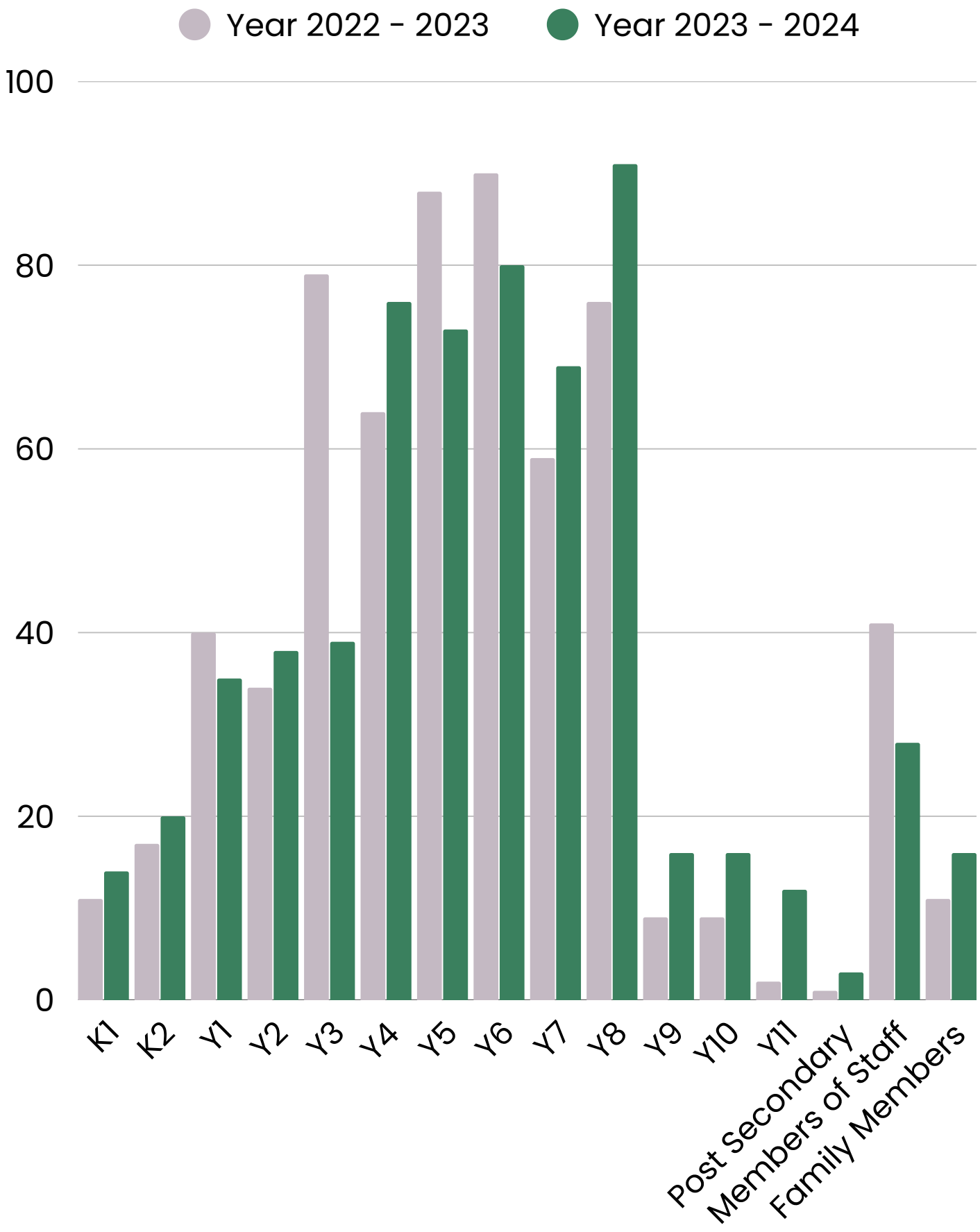
Some professionals note a reduction in gender differences in younger children.

Mixed schooling environments and evolving social norms may contribute to the fact that boys and girls make use of the psychosocial service almost equally.

> Maybe nowadays there's less gender differentiation in how children express themselves. Boys and girls seem to be treated more similarly.

- Therapist, Primary

Age groups making use of Blossom



There is a gradual increase in psychosocial service use in Primary Years may be due to familiarity and trust with school-based counselling/therapy built over time and accumulated challenges which require greater need for professional support.

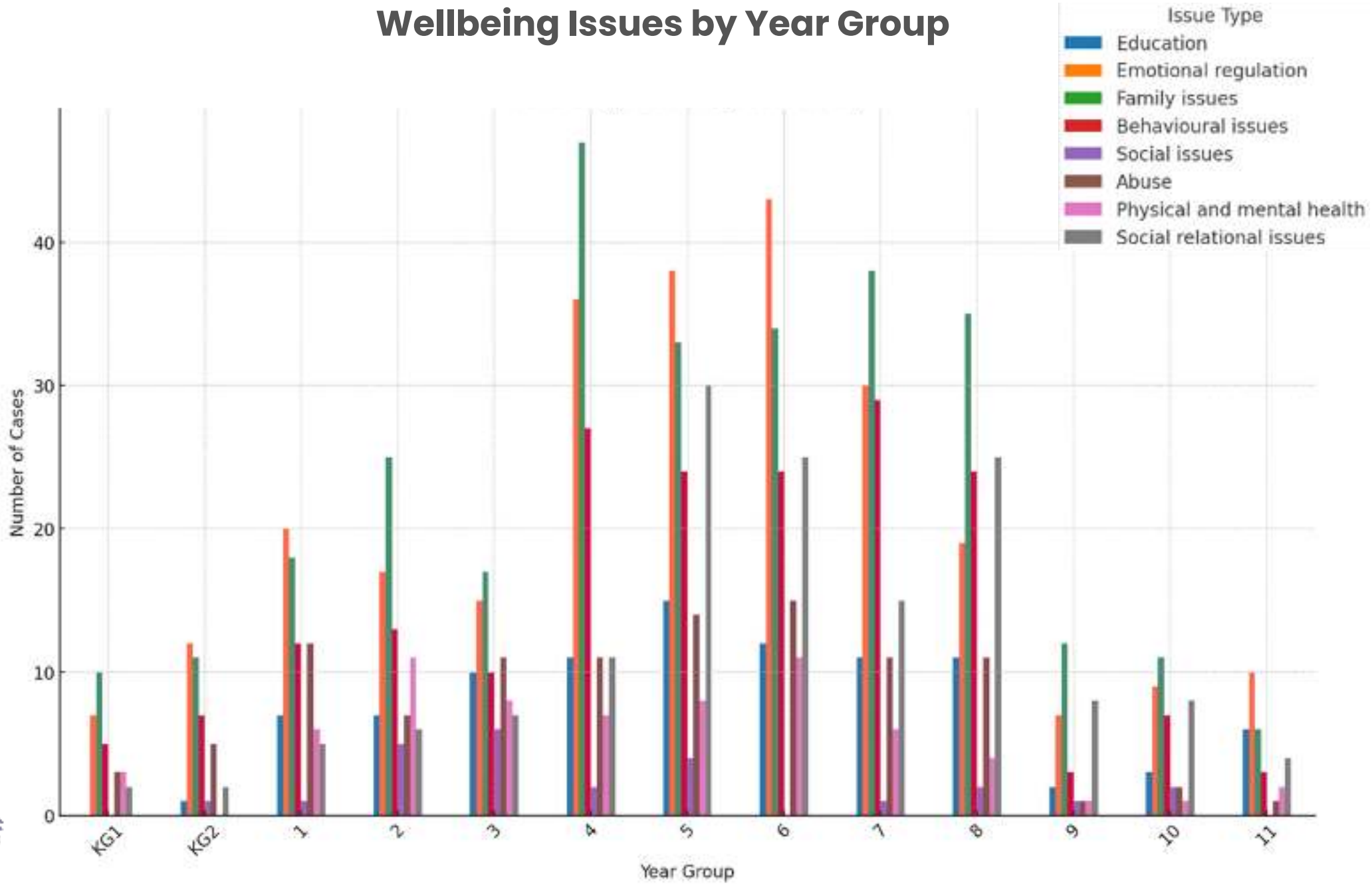
When children transition from Year 6 to Year 7 there is a significant dip in service engagement as the transition to secondary school disrupts familiarity and trust in the psychosocial services. This may be because the new environment and aspects related to early adolescence pressures temporarily suppress help-seeking.

In Year 8 there is a noticeable rise in counselling uptake as students gain familiarity with new school setting and build trust together with the growing needs of psychological challenges of adolescence and maturing help-seeking behaviour. The decline from year 9 to year 11 reflects the limited psychosocial service availability in secondary schools.

> In kindergarten, there are adjustments related to school issues... In Year 1, I don't get many referrals... In Year 2, difficulties start to emerge, particularly academic challenges
>
> *- Therapist, Primary*

Early years may mask deeper issues since children lack the language to express distress.

> In Year 3, academic issues continue but family issues become more prominent. By Year 4, stress related to performance surfaces... In Year 5, friendship stresses often continue or increase.
>
> *- Therapist, Primary*


Wellbeing Issues by Year Group
Issue Type
Education
Emotional regulation
Family issues
Behavioural issues
Social issues
Abuse
Physical and mental health
Social relational issues
Number of Cases
0
10
20
30
40
KG1
KG2
1
2
3
4
5
6
7
8
9
10
11
Year Group

Wellbeing issues and age

The psychosocial team observes,

> Do these issues start at Year 3, or Year 4, or even Year 5? It's also related to the fact that children at those ages have a greater awareness of what's right and wrong in terms of feelings... They also have some lessons from PSCD that help them develop these conversations. So, I think referrals start increasing at those ages because of that, not because the problem wasn't there earlier, but because children start to show and communicate these family issues more clearly as they grow older.

- Therapist, Primary

In middle and Secondary Schools the challenges evolve and change slightly. More complex behaviours that were less visible in younger years such as verbal aggression, self-harm and suicidal ideation, start to emerge.

> It makes sense as the brain develops, impulsivity tends to be stronger. So much of my work... involves helping students to take a step back and think about consequences.

- Counsellor, Middle School

Therefore, as children transition to adolescence, there is an increase in complex experiences.

> It seems like... the themes the children bring often come in phases. Last year, I had many self-harm cases, especially among girls. Not as much this year, but friendship issues are always very strong.

- Counsellor, Secondary

Older children are harder to engage if they lacked earlier exposure to psychosocial services.

> When the services are delayed and are introduced at the secondary level the trust contrasts with that of those exposed to the service earlier at primary school.

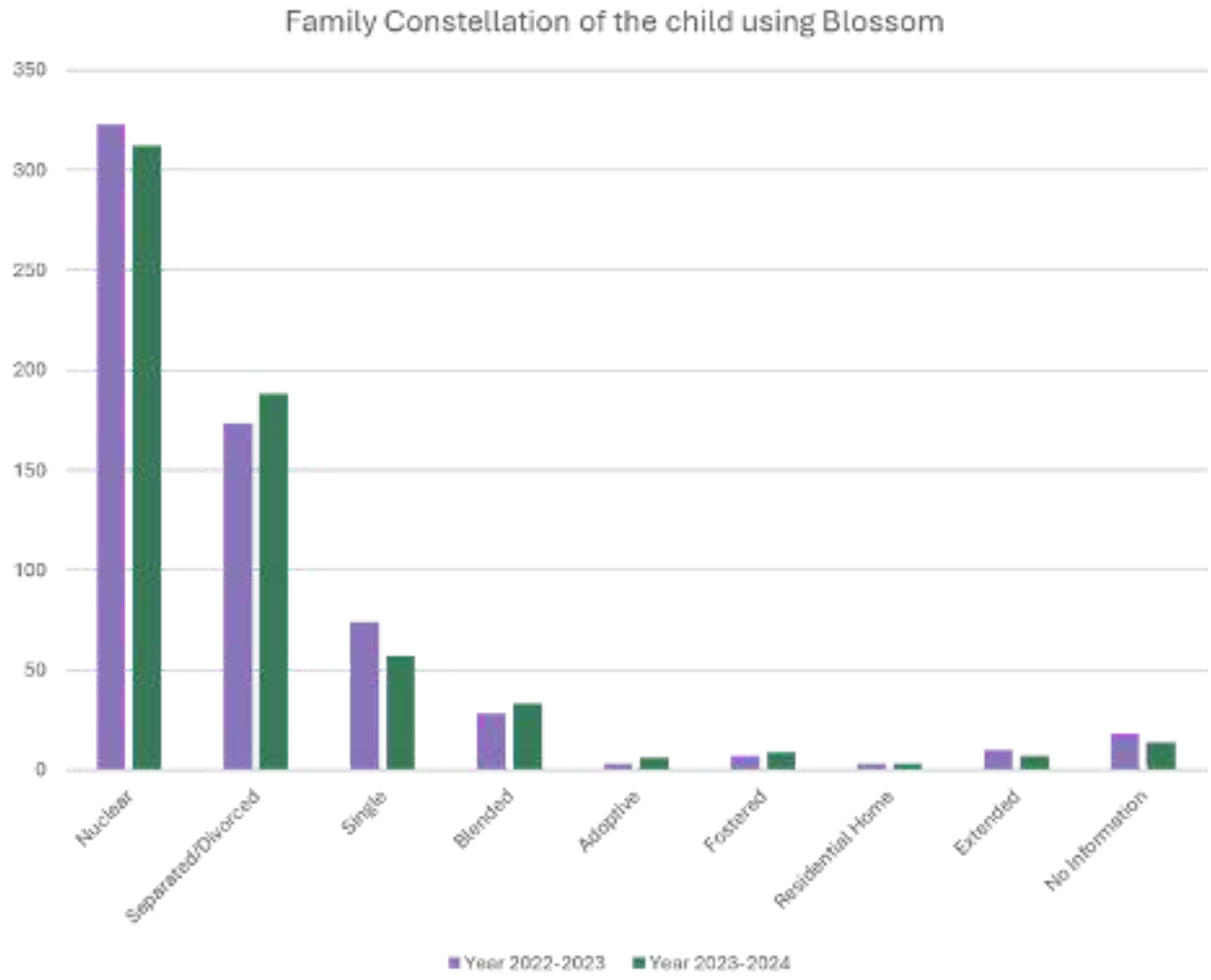
- Counsellor, Secondary

Adolescents increasingly present with absenteeism and disengagement from school. Sometimes schools perceive absenteeism as a temporary relief.

> Absenteeism is a big issue in secondary schools. Sometimes, schools almost feel relieved when troublesome students stay home, even though it's not a real solution.

- Counsellor, Secondary

Data Analysis: Family Constellation of Children



Family Instability and Cycles of Harm

While children living in a nuclear family remain the most common background, their representation slightly declined, with a concurrent rise in separated/divorced and blended family structures. This may reflect the broader societal trends in family dynamics, the trust in the Blossom services and the increased complexities experienced by children living in non-nuclear families.

Many children live amid repeated family instability, domestic violence, and unstable caregiving.

> The family problems... mostly related to situations where sometimes the mother is unstable in relationships, where the father is aggressive... It's a cycle of instability, and the children are the ones caught in the middle

- Counsellor, Primary

These contexts necessitate prolonged therapeutic engagement as children lack reliable support systems.

Family Seperation

While often stigmatised, separation can sometimes be protective.

> It's actually better for a child to have one stable parent than two parents constantly fighting... I once had a child tell me, 'I prefer it now that they're separated.

- Counsellor, Primary

Children are often used as weapons in parental conflict.

> What worries me the most is parental alienation, because I can never really know if the child is saying certain things because the other parent is truly aggressive, or because of influence?"

- Counsellor, Middle School

Parental Alienation vs Abuse

Alienation suspicions must not overshadow the real risks of abuse.

> She said: 'My father... actually, he abuses my sister.' These are the kinds of disclosures that stay with you forever... but they also fuel your determination to act.
>
> *- Counsellor, Primary*

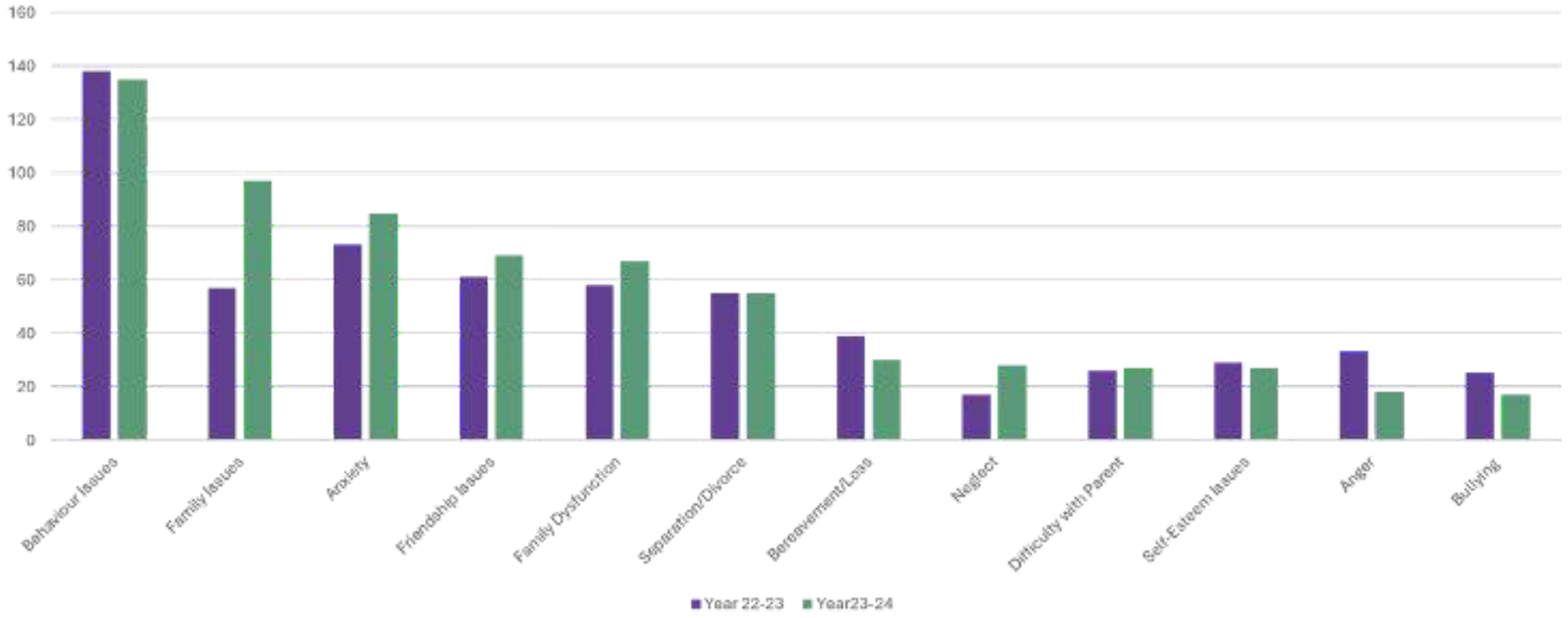
If there is abuse, child protection services are involved, but due to a lack of human resources and daily influx of child protection referrals, feedback to counsellors is not always timely.

> Child Protection will speak to the child. But they are inundated... there's a clear gap in the counselling process.
>
> *- Counsellor, Middle School*

However, as children age, they often stop sharing family problems in fear of stigma or fear of causing family breakdown.

Many times, loyalty and cultural norms reinforce secrecy and silence. Therefore, children internalise responsibility and limit themselves from seeking help.

Prevalent issues experienced by children making use of Blossom services



The overall prevalence of psychosocial concerns remained relatively stable across both years. The behavioural issues remained the most common difficulty, though cases showed a slight decline, indicating the possibility of improvement.

The family-related stressors increased sharply across time as family issues rose from 57 to 97 cases, and family dysfunction increased from 58 to 67. These patterns suggest growing domestic issues, possibly linked to socio-economic instability and persistent family vulnerabilities.

The reported cases of anxiety increased too likely driven by academic demands and peer relationship difficulties.

Friendship issues remained substantial, showing that peer challenges continue to be a central source of distress.

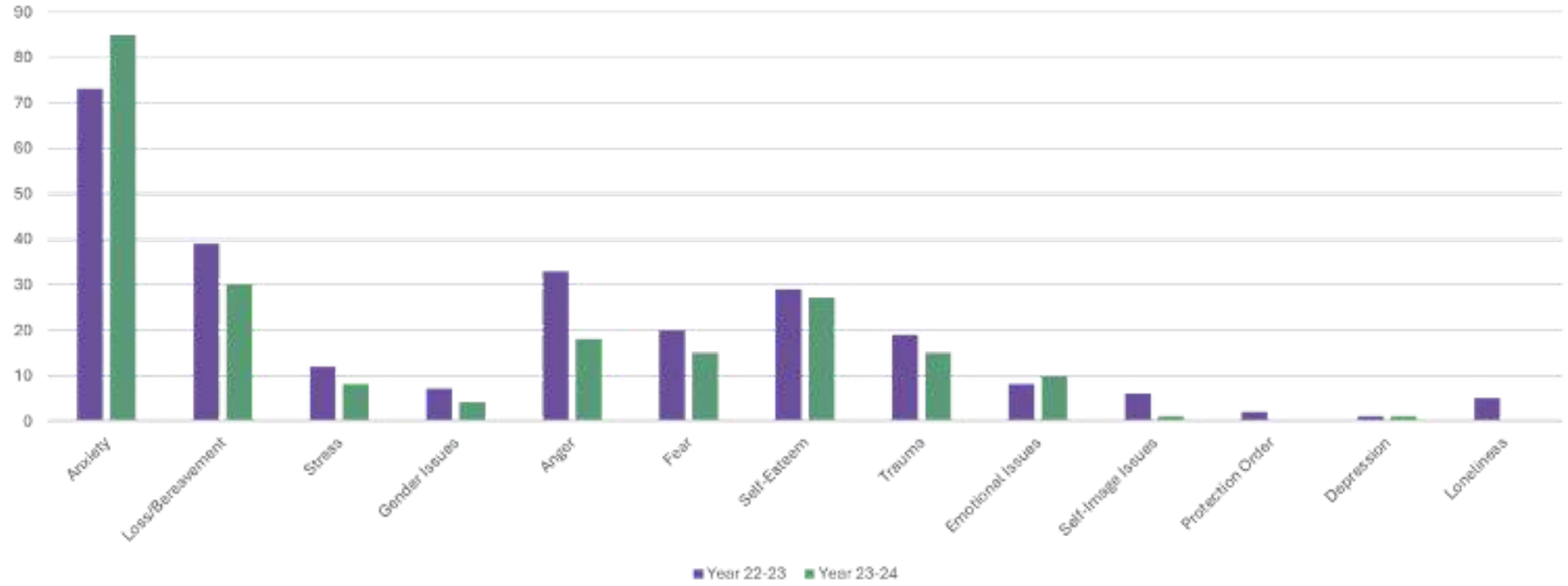
Several externalising problems declined, including anger and bullying, indicating potential benefits of school initiatives, counselling, and anti-bullying programmes.

Reports of bereavement, loss, and self-esteem concerns also showed modest decreases.

Issues of neglect increased significantly, with 11 more cases reported compared to the previous year, highlighting a growing risk tied to parental capacity and socio-economic pressures.

Concerns related to separation, divorce, and parental difficulties remained stable, showing these are chronic stressors in many families.

Number of children making use of the Blossom services experiencing emotional distress



Anxiety cases increased from 73 to 85, making it the most common form of emotional distress across both years. This rise may reflect a true increase, better detection, or greater willingness to seek help.

Loss and bereavement remained a major issue, with the death of a parent or significant adult often causing profound grief and exposing deeper vulnerabilities such as abandonment and existential insecurity.

Gender-related issues declined from 7 to 4 cases. This reduction may reflect stronger school support systems, greater inclusivity, and wider social acceptance of gender diversity.

Anger (33 cases) and stress (12 cases) were reported in 2022–2023 but declined in 2023–2024, suggesting that early intervention strategies may be helping students manage these difficulties.

New categories of concern, including self-esteem, life transitions, and obesity-related issues, appeared in 2023–2024. Their emergence shows that assessments are becoming more comprehensive and better at capturing diverse emotional struggles.

The appearance of self-esteem issues as a distinct category in 2023–2024 reflects challenges with identity, self-worth, and belonging, which are closely connected to risks of anxiety, depression, and relationship difficulties.

Reasons for emotional dysregulation

Children's difficulties often originate in family dysfunction due to instability, neglect, or abuse together with financial hardship and poor parental regulation.

> Many times, the family situation disrupts the child's stability... Sometimes, we build and help the child, but then something happens again in the family, and progress is lost

- Therapist, Primary

High-conflict separations and dysfunctional households drive emotional dysregulation and regression.

> Children regress academically or emotionally, struggling with regulation. Many parents can't regulate their own emotions and therefore can't model this for their children.

- Therapist, Primary

> Some parents leave a partner for financial security but enter unstable relationships, causing children concern... Children often become parentified.

- Counsellor, Primary

Long-Term Emotional Repercussions

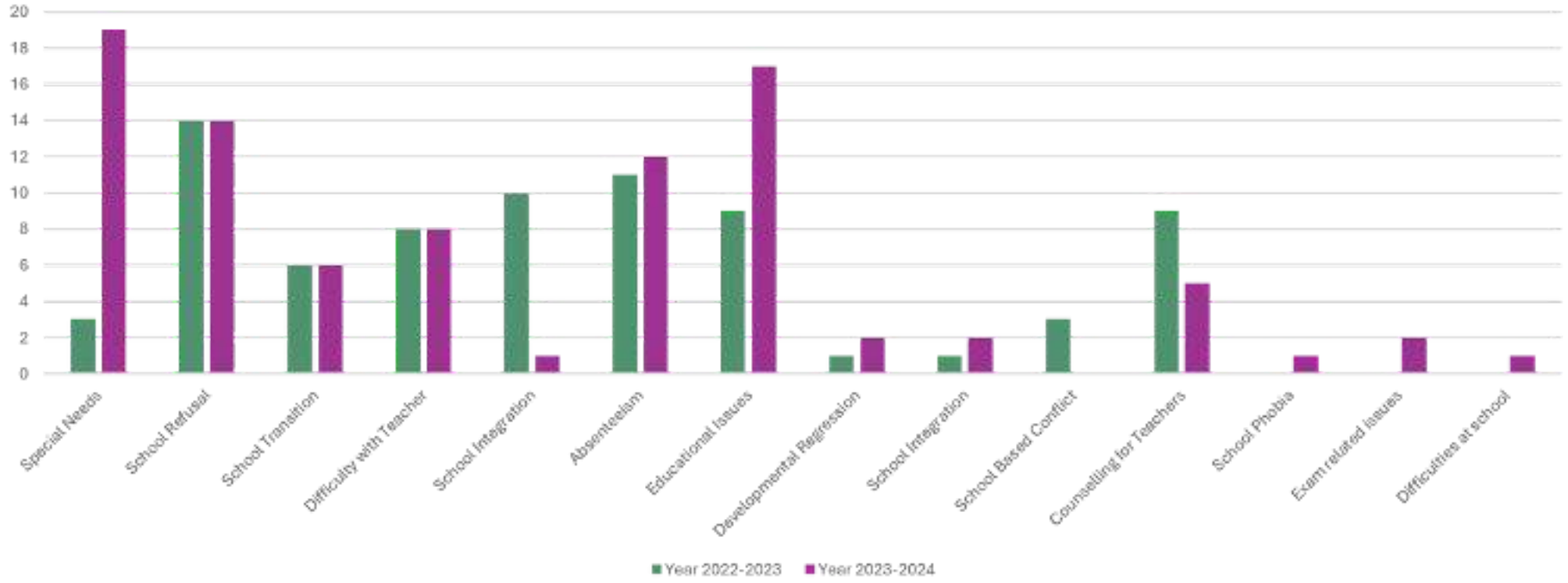
Case retention decisions reflect awareness of childhood adversity's lasting impact.

> I believe that that kind of pain always leaves a mark. It's like a wound... Later on, it may come out as bitterness, or sometimes as kindness... that bitterness comes out in bullying, in how they talk about their parents, or in unexpected ways.

- Counsellor, Primary

Retention is seen not only as a crisis response but as a reparative process for long-term healing.

Number of issues related to schooling experienced by children using Blossom services



The school-related data shows both continuities and changes in school-related concerns between 2022–2023 and 2023–2024.

Cases linked to special needs have increased, suggesting that better identification and stronger inclusion practices can address some of the issues experienced by children.

However, school refusal rose sharply, which may reflect academic pressure and increased emotional vulnerabilities such as anxiety, relational insecurity, and difficulty coping with school demands.

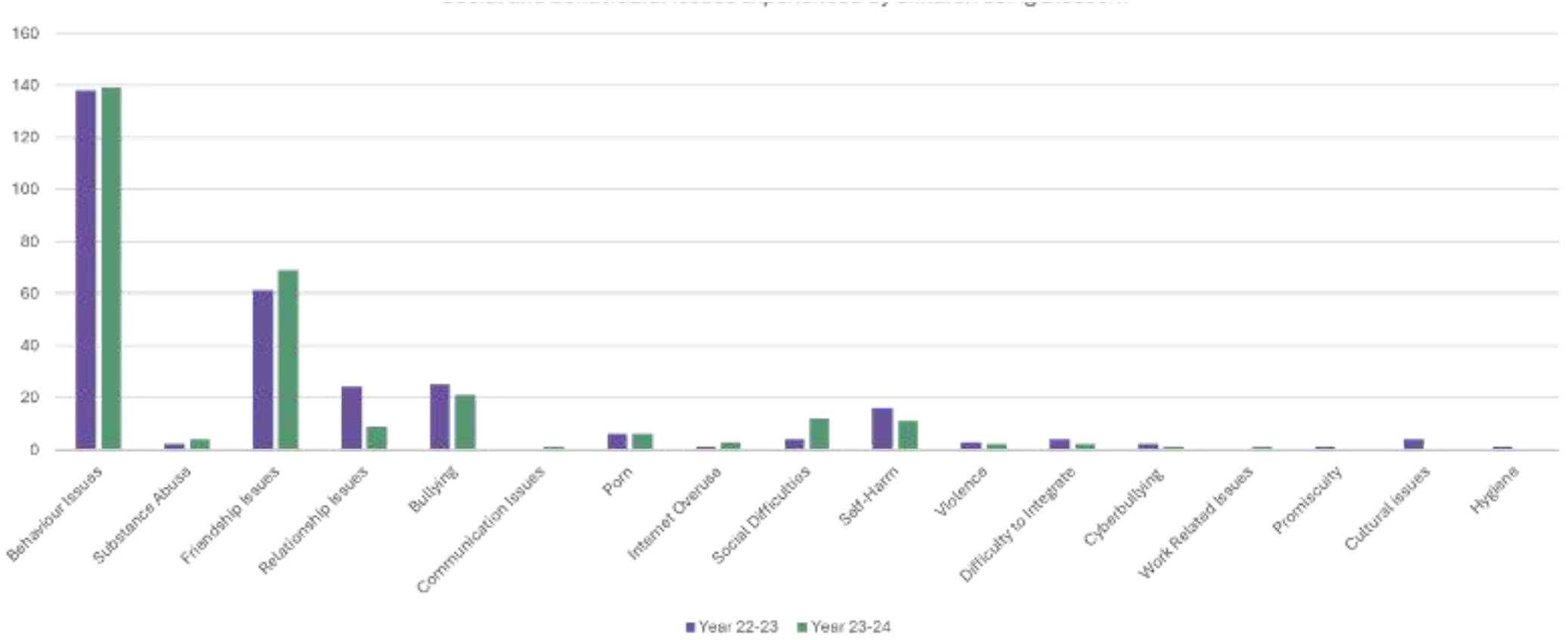
School transition challenges and difficulties with teachers remained stable and school integration issues, present in 2022–2023, largely disappeared by 2023–2024.

Absenteeism and educational difficulties declined, implying that effective interventions in attendance and academic engagement can be addressed.

School-based conflict and teacher counselling requests remained low, while school phobia declined modestly, possibly due to early anxiety interventions or improved school climate.

Exam-related and general school problems stayed minor, indicating academic pressures play a secondary but persistent role.

Socio-behavioural issues experienced by children making use of Blossom



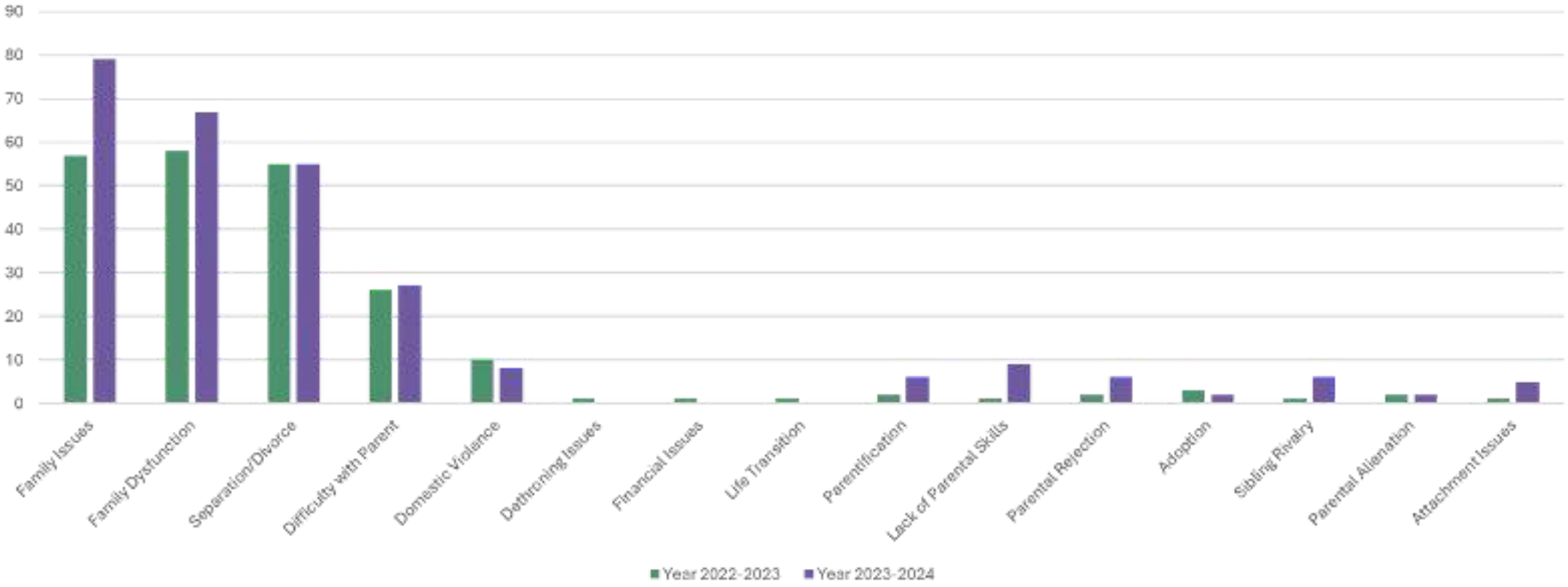
Across the years, behavioural concerns were overwhelmingly prevalent, showing that disruptive and challenging behaviours dominated referrals. These patterns likely reflect emotional dysregulation, unmet developmental needs, or challenges at home and school.

Friendship issues were also substantial, confirming the central role of peer relationships in children's wellbeing, and how much feelings of exclusion affect mental health and adjustment.

Additional concerns included bullying, relationship issues, and self-harm, each highlighting underlying emotional distress and the need for safe, supportive environments. Self-harm fell from one scholastic year to the next, which may signal improvements in interventions. Yet, although the numbers have reduced, the issue remains concerning.

Less frequent but a slight concerning increase in issues of porn exposure, substance abuse, and cyberbullying, reflecting early risk behaviours in digital spaces.

Children experiencing family issues making use of Blossom services



The Blossom psychosocial team have registered a high number of family-related psychosocial issues, with both family dysfunction and family issues rising across time, showing escalating relational distress at home.

Separation and divorce remained stable, confirming disrupted family structures as a critical factor in children's emotional struggles.

Secondary concerns included difficulty with parents and domestic violence, pointing to deep emotional insecurity, fear, and abandonment.

Although less frequent, there is a significant increase in issues related to parental rejection, parentification, attachment issues, lack of parental skills, and sibling rivalry, all highlighting neglect, role confusion, or insufficient emotional nurturance.

Such trends have serious implications for child mental health and developmental outcomes, emphasising the importance of school-based services like the Blossom Project.

Family and Presenting issues

Many children in Blossom schools live with deep fears linked to family instability and conflict. Children worry about becoming like their parents.

> "I've noticed that some children are afraid that they will turn out like their mother or father. That fear is a driving force behind their engagement in therapy."
>
> *- Counsellor, Middle School*

Parental separation or conflict creates loyalty dilemmas for children.

> Children in separated families often become emotionally fragmented, unsure who they are allowed to love without feeling they betray the other parent.

- Counsellor, Middle School

Children's emotional balance is often fragile in unstable family systems.

> If you pull one of the bricks, the tower may fall.

- Counsellor, Middle School

The Complexity of Case Retention – Safety and Risk

Retention decisions are influenced by concerns about safety for the child and others. The Blossom psychosocial team face uncertainty when risk is not clear-cut.

> One of my biggest concerns is always when there's no safety net... But then... sometimes I'm not sure... maybe it's just under the surface. And that uncertainty is what makes it so hard because if there is a threat, we can't afford to miss it.

- Counsellor, Primary

This highlights the ambiguity and vigilance required in safeguarding roles.

Retention as a Relational and Hopeful Process

Professionals also consider a child's motivation and resilience.

> There are others, children who... you can feel there's a small spark inside them... Even if they don't seem 'ready,' I still give that tentative. Because that spark might be what keeps them going.

- Counsellor, Primary

Retention becomes a way of holding space for potential growth, even amid uncertainty.

The Need for a Safe Space

The Blossom project might be offering the only safe space where children can be seen and heard.

> What keeps a case open... is that the child has no place where they can feel seen and heard. Very often they can't even be children when they're home... this safe space here [Blossom therapeutic room] is where they can just be children.

- Therapist, Primary

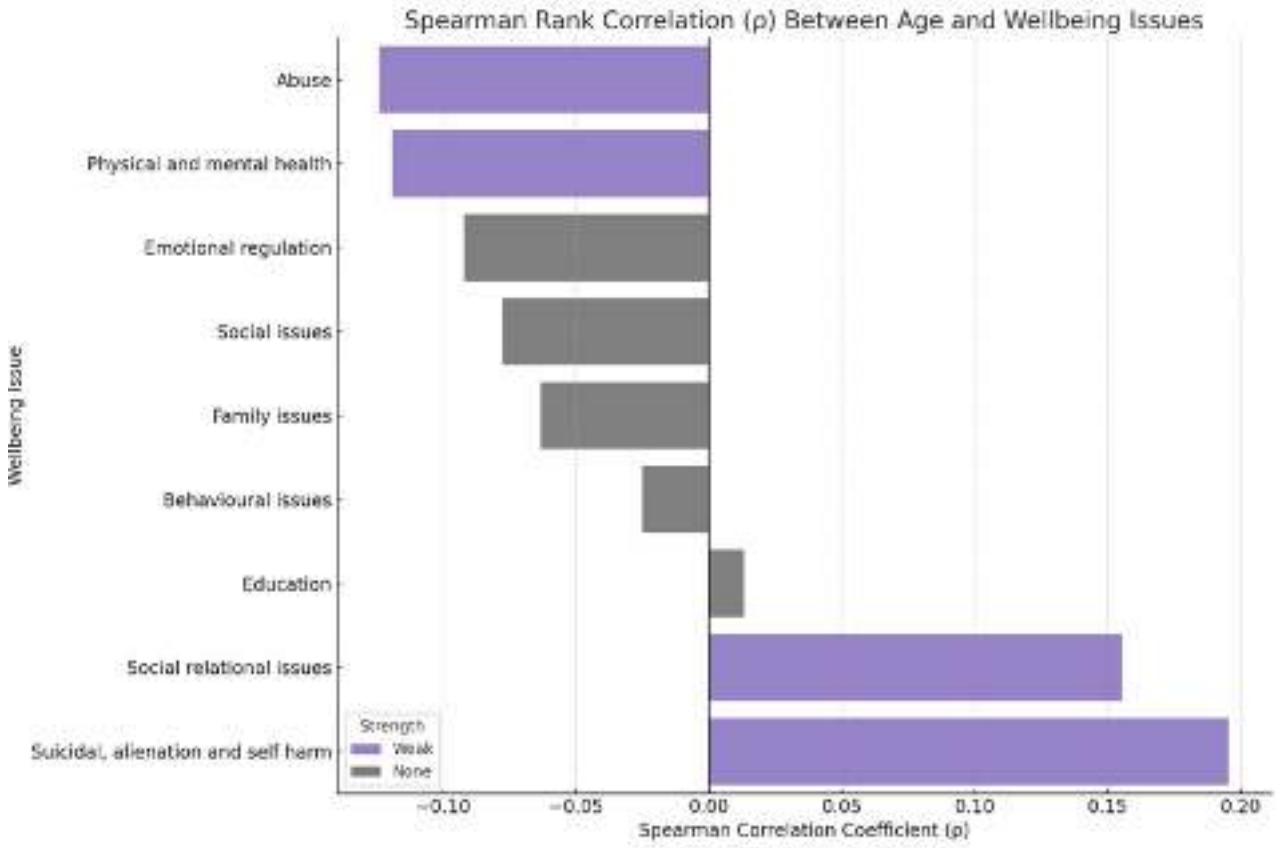
Children may also express a desire for more support.

> Another reason why I would keep the case open is because they keep asking to come for the sessions.

- Counsellor, Primary

Statistical Analysis

Correlations between Age and Issues



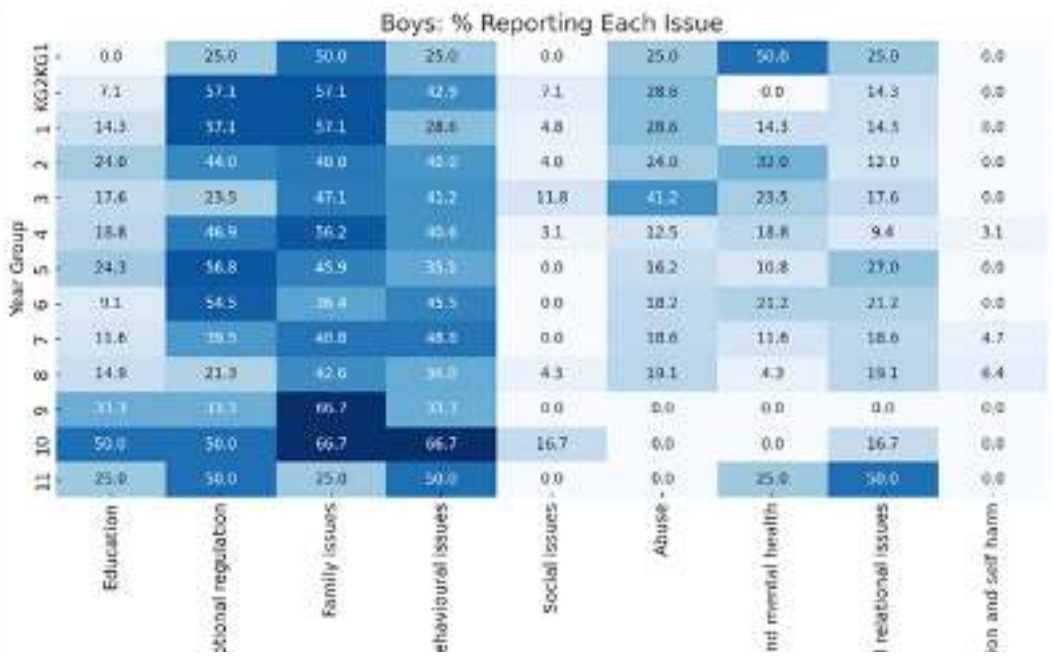
The correlation analysis explored the connection between children's age and the number of psychosocial issues, identifying both age-related and age-independent concerns.

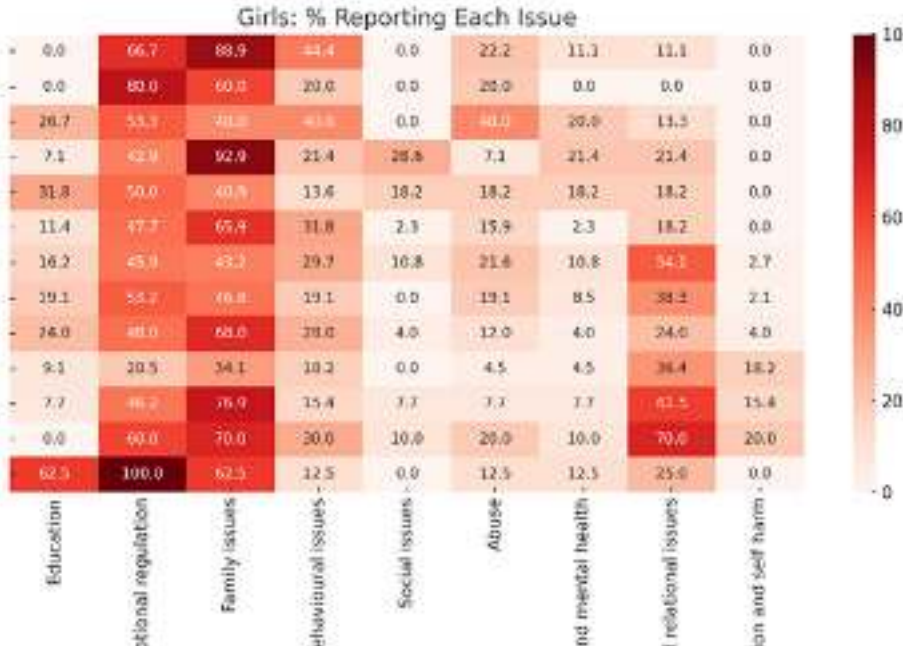
A statistically significant positive correlation was found between suicidal ideation, alienation, and self-harm and age ($\rho = 0.196$, $p < 0.001$). Although weak, this relationship highlights that severe emotional distress tends to increase as children get older. This matches the research emphasising that adolescence is a period of heightened vulnerability due to identity struggles, academic and social pressures, relational complexity, and biological changes such as hormonal shifts.

Social relational issues also displayed a weak but significant positive correlation with age ($\rho = 0.156$, $p < 0.001$). This indicates that relational difficulties become more prominent as peer relationships become more important as they grow older. Failures in managing peer acceptance, intimacy, and belonging can contribute to isolation and emotional dysregulation, especially during early adolescence.

Stronger negative correlations were observed for physical and mental health issues (ρ = -0.119, p = 0.004) and abuse (ρ = -0.124, p = 0.003). The lack of reporting physical and mental issues as children grow older suggests that possibly these issues are detected during an early childhood stage and are addressed accordingly as children grow older. While referrals for issues of abuse may decline as children grow older, this may be so as children may opt to report abuse less due to fear and stigma. However, the emotional impacts persist, requiring continued support.

Heat map of issues experienced according to Gender and Year group





Pearson's Chi squared results indicating if gender is of significance with specific issues

Issue	Chi2 Statistic	p-value	Significance
Education	0.22	0.89784	Not Significant
Emotional regulation	2.36	0.30802	Not Significant
Family issues	3.66	0.16075	Not Significant
Behavioural issues	18.24	0.00011	Significant
Social issues	1.92	0.38215	Not Significant
Abuse	1.71	0.42605	Not Significant
Physical and mental health	4.86	0.08821	Not Significant
Social relational issues	18.37	0.0001	Significant
Suicidal, alienation and self harm	3.82	0.14777	Not Significant

Pearson's Chi-square tests revealed significant gender differences for behavioural issues and social relational issues, while no significant differences were found for emotional regulation, education, family issues, abuse, physical and mental health, or suicidal ideation. Behavioural issues were more common among boys, who are more likely to exhibit externalising behaviours such as aggression, defiance, hyperactivity, and conduct problems.

Boys may often express distress physically or through behavioural rather than verbally. This makes their struggles more visible and more likely to attract adult attention and intervention. In contrast, girls may internalise distress in the form of anxiety, depression, or withdrawal, with their difficulties sometimes reframed as emotional sensitivity rather than behavioural problems. Moreover, social relational issues were more frequently reported among girls, reflecting the higher emotional value they place on peer relationships. Smaller peer networks can make conflict, exclusion, or relational aggression more emotionally impactful.

The heat map illustrates that some issues follow clear gender-based trends, while others are consistent across both boys and girls.
Among boys, the most persistent challenges in early and middle primary years were emotional regulation, family issues, and behavioural problems.
Among girls, emotional regulation difficulties were sustained from the early years through secondary school, showing particularly high levels between KG1 and Year 6 and continuing into adolescence.
Family issues were common in both genders but slightly more persistent among girls, particularly in Years 4–8, reflecting heightened sensitivity to family disruptions.

Gender and presenting issues

Girls' Internalisation of Struggles

Girls often internalise difficulties, making them less visible to staff.

> Girls tend to internalise their problems more... They suffer quietly and don't attract attention.
>
> *- Counsellor, Middle School*

Assumption that "quiet girls are coping" risks underestimating their needs.

> There's this undercurrent that says, 'If she's quiet, there's no problem.' But that's not true... Sometimes it's actually worse.
>
> *- Counsellor, Primary*

> Girls can be very controlling in their friendships, creating exclusionary environments that harm self-esteem.
>
> *- Counsellor, Middle School*

Boys' Externalisation of Distress

Boys are more likely to act out their distress through aggression or disruption. These behaviours draw immediate attention from teachers and administrators.

> Boys externalise more. They might act out physically or cause disturbances that get immediate attention.

- Counsellor, Middle School

A consequence of this is that boys' struggles are often treated as more urgent, while girls' issues remain hidden.

> Boys' anger and behavioural issues make them more visible but also more likely to be labelled negatively.

- Counsellor, Secondary

Pearson's chi results comparing age group, family status and issues experienced

Issue	Chi2 Statistic	p-value	Significance
Education	11.61	0.63763	Not Significant
Emotional regulation	25.31	0.03166	Significant
Family issues	92.02	0	Significant
Behavioural issues	10.51	0.72393	Not Significant
Social issues	14.32	0.42645	Not Significant
Abuse	24.92	0.03537	Significant
Physical and mental health	19.23	0.15621	Not Significant
Social relational issues	20.76	0.108	Not Significant
Suicidal, alienation and self harm	31.45	0.00479	Significant

A Pearson's Chi-square test identified significant associations between family structure and four domains: family issues, emotional regulation, abuse, and suicidal ideation/self-harm.

Family issues were most intense in blended families, beginning in early primary years and escalating into secondary school.

Children from separated families consistently reported high levels of family problems across all stages.

Children in nuclear families, experienced substantial family difficulties, especially in early and late primary years, before stabilising during adolescence.

motional regulation difficulties showed distinct family-based variations where children in blended families experienced few difficulties during the early years (Possibly also as the child is not yet living in a blended family), yet the issues increase sharply during adolescence due to accumulated relational stress.

Children in nuclear families also experience high emotional regulation issues from early primary stages, suggesting issues in early attachment.

Abuse was most prevalent in nuclear families, especially in early and late primary years, indicating that it can be concealed within intact family units, and social norms may delay detection.

Abuse in blended families rose modestly in adolescence, but nuclear family prevalence remained the dominant pattern.

Suicidal ideation, alienation, and self-harm were absent in primary years but emerged in adolescence, most notably among blended-family adolescents.

No significant family-type differences were found for educational, behavioural, physical health, or social relational difficulties, suggesting these are shaped more by school, socio-economic, or individual factors.

Overall, findings reveal that children living in blended families experience escalating adolescent vulnerabilities; children living in separated families experience persistent behavioural and regulation difficulties across stages; while children living in nuclear families experience unexpectedly high dysfunction and abuse in childhood.

This means that family form does not guarantee safety, but the quality of relationships is more decisive than structure.Child wellbeing must be understood developmentally and relationally, recognising that vulnerabilities unfold dynamically over time.

Pearson's chi squared test comparing the number of interventions according to family group and age group and issue

Issue	Chi2 Statistic	p-value	Significance
Education	53.85	0.10389	Not Significant
Emotional regulation	79.25	0.00045	Significant
Family issues	128.72	0	Significant
Behavioural issues	65.02	0.01288	Significant
Social issues	67.8	0.00706	Significant
Abuse	63.65	0.01714	Significant
Physical and mental health	48.38	0.23082	Not Significant
Social relational issues	50.12	0.18231	Not Significant
Suicidal, alienation and self harm	75.16	0.00126	Significant

The Pearson's Chi-square tests were used to explore how children's wellbeing issues vary by family group, school band, and intervention level (low: 1–6 sessions, medium: 7–12, high: 13+ sessions).

Significant associations were found for emotional regulation, family issues, behavioural problems, and social difficulties, while educational issues showed no significant link.

Results highlight that risks intensify with age, with non-nuclear families disproportionately affected.

As children progress into adolescence, there is a sharp increase in the need for medium and high interventions, showing that unresolved difficulties accumulate and deepen over time.

Emotional regulation difficulties ($\chi^2(76) = 79.25$, $p = 0.00045$) are present across all family groups but especially pronounced in non-nuclear families.

When detected in early primary, it is often managed with low-level interventions. Yet in secondary, there is a sharp rise in cases needing high-intensity support, suggesting unresolved early issues may result in persistent dysregulation.

Family issues ($\chi^2(76) = 128.72$, $p < 0.00001$) are consistently high in separated, single-parent, and blended families, intensifying with age. Late primary and secondary students grow in reliance on medium to high interventions, showing the long-term impact of family instability.

Behavioural difficulties ($\chi^2(76) = 65.02$, $p = 0.01288$) present across all family groups in early years, often contained with short-term interventions.
•Social issues such as issues of poverty or discrimination were significant ($\chi^2(76) = 67.80$, $p = 0.00706$) were evenly spread in early years, but became more severe in secondary, especially for children in blended and separated families.

Suicidal ideation, alienation, and self-harm ($\chi^2(76) = 75.16$, $p = 0.00126$) emerged only in adolescence, concentrated among students from non-nuclear families.

Social relational issues were not statistically significant according to family groups, but data show a sharp increase in adolescence, requiring medium to high interventions, often linked to peer difficulties.

Physical and mental health issues, too, showed no strong statistical association ($\chi^2(76) = 48.38$, $p = 0.23082$) as it is present across all family groups and are often managed at low to medium levels, since they may then be referred to other professionals.

This means that emotional regulation, family instability, behavioural issues, and social difficulties are key developmental risks, intensifying with age and family complexity. Interventions must be developmentally sensitive, family-aware, and increasingly intensive over time to counter escalating vulnerabilities.

Pearson's Chi squared test results of nationality group and issues experienced by children making use of Blossom services

Issue	Chi2 Statistic	p-value	Significance
Education	9.45	0.30595	Not Significant
Emotional regulation	10.87	0.20926	Not Significant
Family issues	25	0.00155	Significant
Behavioural issues	4.93	0.76496	Not Significant
Social issues	74.99	0	Significant
Abuse	24.61	0.00181	Significant
Physical and mental health	5.86	0.66236	Not Significant
Social relational issues	14.16	0.07781	Not Significant
Suicidal, alienation and self harm	5.56	0.69612	Not Significant

Pearson's Chi-square analysis revealed significant associations between nationality and family issues, social issues, and abuse. However there were no statistically significant differences observed for educational difficulties, emotional regulation, behavioural issues, physical and mental health, social relational issues, or suicidal ideation. These indicate that family disruptions, socio-economic struggles, and abuse risks are disproportionately experienced by migrant children.

Migrant children reported higher family difficulties ($\chi^2 = 25.00$, $p = 0.00155$) due to separations, relocations, precarious work, and disrupted parental roles. These may also reflect operational and socio-economic issues, not simply parental dysfunction.

Migrant children experience social issues ($\chi^2 = 74.99$, $p < 0.00001$) and face poverty, cultural barriers, language challenges, and peer exclusion. Moreover migrant families, due to vulnerabilities of economic insecurity, precarious housing, and limited access to services, are more likely to experience abuse ($\chi^2 = 24.61$, $p = 0.00181$), neglect and maltreatment. Cultural differences in discipline may also lead to misunderstandings or underreporting. Abuse should be interpreted within the broader context of disempowerment, not as inherent to migrant families.

No significant associations were found for educational difficulties ($\chi^2 = 9.45$, $p = 0.306$), emotional regulation ($\chi^2 = 10.87$, $p = 0.209$), behavioural challenges ($\chi^2 = 4.93$, $p = 0.765$), physical/mental health ($\chi^2 = 5.86$, $p = 0.662$), social relational difficulties ($\chi^2 = 14.16$, $p = 0.078$), or suicidal ideation ($\chi^2 = 5.56$, $p = 0.696$). These findings may mask under-identification of language barriers which can obscure learning difficulties; cultural norms and families may underreport mental health concerns due to stigma, mistrust, or fear of repercussions.

This means that migrant children face elevated risks in family functioning, social integration, and abuse, while other vulnerabilities may remain hidden or under-recognised. Schools, social services, and mental health providers must adopt culturally responsive frameworks to identify both visible and concealed risks, ensuring that migrant children receive appropriate support.

Nationality and presenting issues

Socioeconomic hardship compounds migrant children's psychosocial vulnerabilities.

> I had a case where these children were living in a garage... When they experience anxiety, shame, and embarrassment, this isolation only worsens their feelings.

- Therapist, Primary

External racial tensions, xenophobia and school life put pressure on children. Community conflicts and racial tensions frequently enter the school environment.

> Usually it starts outside, but then it continues at school. There's this continuity… Our school has even become known for gang-related activity… Once they've formed out there, they bring it all into the school.

- Counsellor, Primary

Even children as young as Year Six may be influenced by neighbourhood dynamics. Language Barriers have an impact on the level of integration and support of migrant children.

> We've had sessions with a child who uses sign language… We use Google Translate. It's not ideal.

- Therapist, Primary

Culture and Use of Blossom Psychosocial Services

Certain cultures discourage sharing problems outside the home.

> A mother from Brazil… 'We don't air our problems outside the home.' The child said, 'I cannot say because my mom would get angry.

- Therapist, Primary

There is still stigma around counselling in some migrant communities

> A single mother from Eritrea absolutely refused… for them, counselling is like a mental disorder.

- Counsellor, Primary

Findings Part 3

Who are the families of children making use of the Blossom project?

Parents' Role and impact

Parents' responses to their child's struggles are critical to outcomes.

> The child's improvement is very much related to the will of the parents to address the needs... The crux mainly is how the parents are behaving.

- Therapist, Primary

> Some parents feel super guilty... Others are defensive, blaming the child. Some see me as a threat, view the school as a threat.

- Counsellor, Primary

A recurring challenge is the reluctance or withdrawal of parental cooperation.

> They're not always willing to do what I suggest. Family might come once but then phase out... They start believing the child is the problem.

- Counsellor, Primary

Children's progress is strongly tied to parental agency and engagement.

> They had severe problems, serious mental health challenges. But now... in just six months, things began to change. They found support. Even the mother started working.

- Counsellor, Primary

The buffering effect of one supportive adult can safeguard a child's wellbeing.

> Even just having one supportive parent is enough… if the child at least has one supportive parent, grandparent, or extended family member, that is enough to support the child.
>
> *- Counsellor, Primary*

Parental Neglect

Parental neglect is a recurring issue identified by the Blossom psychosocial team.

> They're growing up with no solid base, no emotional anchor.
>
> *- Counsellor, Primary*

Children arrive at school hungry, thus undermining learning and wellbeing.

> We have children who come knocking at the guidance door so we can give them something to eat.
>
> *- Counsellor, Middle School*

Some children manage daily routines on their own.

> The girl… wakes up on her own, prepares her own lunch, and then comes to school many times late obviously.
>
> *- Counsellor, Primary*

Employment does not always guarantee adequate care. Single-parent households face compounded pressures, leaving children without adult presence.

> They are always dirty, no healthy lunch… if there is a single mother with four children who doesn't earn so much money… it is useless to keep calling her.

- Counsellor, Primary

Abandonment

Some children are effectively "raising themselves."

> There are children whose parents spend time away… They may be growing without boundaries… this kind of abandonment. They're not physically abandoned, but left very much to their own devices.

- Counsellor, Primary

Devices often substitute for adult presence and supervision.

> Because they have no one to care for them, they spend much of their time online… it exposes them to other harms.

- Counsellor, Primary

Consequently, children are feeling abandoned, exposed to harmful content and online abuse, and a lack of attachment and affection.

Neglect intensifies as children grow older due to false assumptions of independence.

> As children grow older, especially by Year 5 and Year 6, neglect seems to increase. Parents feel the children are old enough to fend for themselves, but they are still too young.

- Therapist, Primary

Balancing poverty and neglect

Employment does not always guarantee adequate care. Single-parent households face compounded pressures, leaving children without adult presence.

> They are always dirty, no healthy lunch... if there is a single mother with four children who doesn't earn so much money... it is useless to keep calling her.

- Counsellor, Primary

Migrant families face added challenges of housing instability and low wages.

The dilemma of neglect

Absence of adult supervision prevents participation in extracurricular activities.

> Since parents are at work, children do not partake in extracurricular activities... Some with no one at home go out with peers... sometimes forming gangs.

- Counsellor, Primary

Emotional neglect is highly damaging as children internalise rejection, yearn for affection and a sense of security which is absent at home.

> She feels she is a burden to her family... She asks me to adopt her on a regular basis, and she asked the teacher to adopt her.

- Counsellor, Primary

However, reporting neglect is an impossible dilemma due to limited social services.

> What shall I do, refer all the children?... there aren't any institutions that can take care of all these children... so you have to close an eye.

- Counsellor, Primary

This highlights the tension between child protection ideals and practical constraints.

Neglect and abuse

Neglect often coexists with hidden forms of abuse.

Older siblings sometimes are burdened with caregiving responsibilities, yet accidents of abuse may also happen.

> There are situations that truly terrify me, like when parents leave a 16-year-old alone with a 10-year-old... we are confronted with signs of incest, and sadly, this isn't rare.

- Counsellor, Primary

Findings Part 4

What is the school environment like for children making use of the Blossom Project?

School Environment

Many schools cultivate a protective, caring, inclusive climates that normalise counselling and emotional expression.

> The school environment is very important... I find it very nurturing, very much like a community... teachers become... social workers... mini therapists... there's an atmosphere of openness... even the idea of counselling and therapy has really no stigma.

- Therapist, Primary

The school environment is often the "stable place" or "middle ground" for children living with family and community instability.

However sometimes there are unrealistic expectations that schools should solve problems originating in other broken systems.

> So the school ends up being embedded in the neighbourhood and deeply involved in family issues... it's almost assumed that the school... has to solve... even when... they are not professionals trained to solve family or neighbourhood problems... there are huge expectations on a school which is meant to be an educational institution, to solve problems that actually belong to two other broken systems.

- Counsellor, Middle School

Time and Population Limitations

School structure limits continuity,

> Since you're working in a school, time is very limited... I only have two years... holidays and outings take up time... many barriers hinder this relationship from being built.
>
> *- Counsellor, Middle School*

Large student population, diverse nationalities, and complex needs strain the available support.

> My school... around 850 students... on paper, the number should be half... how many children can I actually manage to see?
>
> *- Counsellor, Middle School*

> When the school population starts increasing drastically, the school problems increase too... the Blossom team... cannot catch up and support everyone..
>
> *- Therapist, Primaryl*

Discipline vs Addressing the Problem

Many times, behaviour is given more priority than the underlying need. Educators may focus on classroom order while missing the psychological drivers of behaviour.

> Some educators expect that children should not misbehave... certain behaviour may seem disruptive rather than a call for help.

- Therapist, Primary

Punitive discipline may not be beneficial. Indeed, excluding children from outings or using repetitive writing tasks can deepen shame and disengagement.

> When children misbehave, they are not permitted to go for the school outing... they don't even know what they did wrong... another type of discipline... 'I must come in school on time'... not effective... expecting a primary child to be responsible from a young age is already damaging.

- Counsellor, Primary

Exclusionary discipline can replicate home-based neglect inside school.

> If this child already has abandonment issues at home, and then at school, the disciplinary approach is to exclude him from class, that's double abandonment, double neglect.

- Therapist, Primary

Referral Bias and Invisible Distress

There has been a positive shift in referral methods,

> The administration now has understood that when there is family conflict and misbehaviour… the child needs to be referred… They do tend to refer… anxiety or family issues.

- Counsellor, Primary

However subtle, chronic signals such as turning up late or being quiet and withdrawn are under-referred compared with "in-your-face" behaviour.

Some leaders under-refer or conflate roles.

> Some members of the SLT… either they do know what the counselling service really is or they don't believe in it… I always have fewer cases from their cohort.

- Counsellor, Middle School

> Many people think I'm… an educational psychologist who can conduct formal assessments… that's not the case.

- Counsellor, Primary

Home support, school engagement and exam pressure

Weak academic support at home fuels classroom frustration, avoidance, and help-seeking as escape.

> Since the parents... are not supporting them... they start falling behind... they seek this service because they are not catching up... It's very hard to be in class and have no idea what is going on... 'I'm not good enough.

- Counsellor, Primary

Exam pressure deprioritises Blossom sessions and students feel torn between academic rules and help-seeking.

> At secondary... there is this pressure that children do not miss lessons... missing lessons for sessions is not perceived positively.

- Counsellor, Secondary

> Some educators do not permit students to attend... and so the child may feel they're disobeying... being called during a lesson may mean a warning... in fact, teachers shout at me in front of the children... 'Come back another time.

- Counsellor, Middle School

Overwhelming School Environment

High concentrations of vulnerable students and mixed-ability integration strain teacher capacity.

> Some classes… a big percentage of children with difficulty… to empathise with every single child… it is overwhelming.

- Counsellor, Primary

> Integration classes have many different nationalities, some do not speak English, at different ages… exhausting for the teacher… a three-year-old, a nine-year-old.

- Therapist, Primary

Rising numbers of children with specific needs,

> In a Year 1 class, for example, there are three Learning Support Educators… half the students are statemented… classrooms are getting smaller… but the number of children with needs is becoming more concentrated.

- Therapist, Primary

Limited midday clubs leave isolated students without prosocial spaces.

> Midday school activities are limited… some children… spend time alone.

- Counsellor, Secondary

> Many times the school administration is very busy… I have to communicate with the assistant heads as they have more time

- Therapist, Primary

Physical built-up environment and location of the therapy room

The visible quality of the school building too shapes how children feel about being valued and cared for.

Dilapidated settings signal neglect and lower worth to students, especially at key transition points.

> The general environment for example, the tiles are grey, very old, with cracks and holes in them. They also have a problem with pigeons, and their droppings and noises affect the classrooms... Many students tell me that the school environment is unpleasant, and they're really looking forward to a better, more modern school.

- Therapist, Primary

The location and the visibility of the therapeutic space room too influence help-seeking and self-referral.

> Sometimes the position of the therapy room too can help children to seek help. When the therapy classroom is near the ground, children may be more likely to self-refer and seek help.

- Therapist, Primary

Positive leadership appraoches

Leadership that encourages inter-professional collaboration fosters stronger integration.

> After a talk on wellbeing in education for educators, the number of people coming for sessions doubled. Encouragement extends not only to children but also staff and sometimes parents.

- Therapist, Primary

Leaders with long-term presence in schools develop deep contextual knowledge.

> The administration and head have been in the school a long time... She knows the names of all the children by heart... understands the family situations and is very supportive.

- Therapist, Primary

Positive leaders move away from punishment toward understanding and empowerment. Discipline becomes restorative when there is better recognition of the child's perspective.

> They never give punishments like taking away break time... Instead, they try to understand the child's perspective and empower them.

- Therapist, Primary

Findings Part 5

What is the neighbourhood like for children making use of the Blossom Project?

The impact of the context of the child

The neighbourhood is a determinant of school dynamics as children bring external conflicts into classrooms, requiring schools to manage issues beyond their remit.

> Our school is a multi-national school in a high-risk area, and there are many different nationalities. Often, conflicts that begin outside of school continue within it... The fighting, the name-calling, and the bullying that happens in the park is out of our control. This girl, only 10, was targeted at that unmonitored place and then brought the issue into the school.

- Counsellor, Middle School

Rival communities or no community at all

In small, close-knit communities, local rivalries and family disputes spill into schools, shaping class placements and peer relations.

> We have a community, a very closed community, everyone knows everyone else's business. If I've had a fight with you outside, I don't want to be in the same class with you because the fighting will continue...

- Counsellor, Middle School

Migrant families often lack the support of an extended family, reducing the informal protection for children many times provided by Maltese families.

> Living in a community some are quite anonymous… no family, no friends, just here to work.

- Counsellor, Primary

Community and its impact on child wellbeing

Community events like bereavement ripple into schools, creating shared grief and crisis dynamics.

> Children feed off each other's emotions… last year, a child's father died, they look to the therapist to handle the emotional weight, so it becomes a crisis intervention.

- Therapist, Primary

Fear of gossip and shame further reduces uptake of therapeutic services.

> There's still a strong belief that seeking therapy means you are weak… many people come from stigma, it's very present.

- Counsellor, Secondary

Conclusion
The Role of the Project Blosson

The Blossom Project fills a critical gap in Malta's educational system by embedding resident psychosocial professionals within schools. The Blossom project offers accessible, consistent, school-level support.

Multidisciplinary team structure (therapists, psychologists, counsellors) ensures holistic care.

Therapeutic Approaches of the Blossom Project

It emphasises trust and relational work with children who have histories of mistrust.

The counsellors and therapists make use of play therapy, assessment, gestalt therapy and solution-focused strategies, amongst others, for resilience and agency.

The Blossom project professionals experience time constraints due to heavy caseloads, which force prioritisation, leaving some children waiting; they also experience difficulties with parents, as not all are cooperative, but some are defensive or neglectful.

The retention of cases depends on child safety and the lack of other people who can provide care to the child.

Professionals experience ethical tension between workload and children's dependency.

The team recognise the need to move from punitive discipline to supportive, restorative approaches.

Daily presence in schools is critical to ensure stability and trust.

The data collected by the psychosocial professionals, when analysed statistically, tells us that as children grow older, they are much more likely to experience social relational problems related to peer norms, belonging and loyalty, together with suicidal ideation, and self-harm, the most severe expressions of distress. Moreover, as children grow older, they are less likely to report abuse and are more likely to regulate their emotions.

Boys are more likely to be referred for externalising behaviours, while girls are more prone to experience relational distress such as exclusion, coercive friendship dynamics, and loneliness.

Emotional regulation, family issues, educational struggles, and suicidal thinking do not differ significantly by gender.

Family constellation is the strongest determinant of child wellbeing. Children in non-nuclear families (separated, single-parent, blended) are at higher risk for family-related difficulties and behavioural and emotional dysregulation.

Yet the data also reveal that abuse disclosures are most frequent in nuclear families during early and middle childhood, indicating that a nuclear family does not automatically guarantee safety. Abuse can remain hidden in “stable” configurations where external scrutiny is lower and loyalty pressures higher.

For adolescents, the sharp rise in suicidal ideation and self-harm is most prominent in non-nuclear families, likely reflecting attachment insecurities and complex step-family transitions.

Family dysfunction disrupts children’s stability and attachment. Children are continuously being exposed to conflict, separation, neglect, abuse, and parental mental health struggles.

Children are often caught in alienation and loyalty conflicts, leading to abandonment feelings.

Parents’ willingness to engage is crucial. Parents who are willing to address the issues and cooperate foster improvement, while those who are defensive worsen outcomes.

Linked to poverty, work demands, and cultural barriers, children are arriving hungry at school, from a primary-age children are left unsupervised, and emotional absence is many times substituted with digital devices.

Migrant families are especially vulnerable due to a lack of extended networks.

Stigma, shame, and cultural norms discourage disclosure.

Yet, one supportive adult (parent, relative, or professional) can transform resilience.

When analysing the impact of the number of interventions, it emerged that early primary emotional regulation issues can often be contained with a handful of sessions.

But when children reach adolescence without those foundations, the pattern is harder and costlier to shift, with many cases requiring 13+ sessions.

Children experiencing family-related problems need intense intervention.

Behavioural difficulties and children experiencing social issues of poverty tend to also be reasons why therapists and counsellors dedicate a high number of interventions and support.

Family problems, social hardship, and abuse are more frequently reported among migrant children, rooted in the family's economic precarity, lack of community support and language barriers. Notably, other factors such as educational difficulty, emotional regulation, behavioural symptoms, social-relational issues and suicidal ideation do not differ significantly by nationality, which may reflect both under-identification and the caution many migrant families put on their children.

Conclusion
The School and the Neighbourhood Context

The Schools are the Middle Ground between education and psychosocial care, and educators, counsellors and therapists face challenges when they have to balance empathy with workload pressures and discipline with child-centred care.

However, when the leadership is empathetic, supportive and collaborative, both staff and children can benefit.

Teachers face fatigue from dual roles of academic instruction and complex behavioural management.

Language barriers and rising special educational needs heighten pressures.

Neighbourhood Influence on School Life

Schools reflect and absorb neighbourhood dynamics, including multicultural tensions (ethnicity, religion, race), family disputes in close-knit communities and feelings of anonymity and isolation in migrant areas.

Collective crises (e.g., bereavement) ripple into schools, requiring therapists as first responders.

Cultural stigma around therapy persists in traditional/rural communities and some migrant groups.

Why is Blossom Special?

> Blossom is important as it can be the only safe space for a child. When children are constantly exposed to conflict between their parents, their only stable place is school.

- Therapist, Primary

> What is beneficial in the Blossom service is the fact that teachers and educators have the possibility of making use of the service

- Counsellor, Primary

> Let me tell you, for me... You feel this need to share the love you carry with someone who doesn't have it. And when you see a child starting to thrive, that kind of satisfaction that you feel... it's immeasurable. It stays with you for life. Honestly, if you gave me a million pounds, I wouldn't be any happier than I am when I see that child begin to grow. It's the truth.

- Counsellor, Primary

Testimonials

"is there any place or person where you feel that you don't have to worry about being smart enough, or good enough, or making mistakes?"

- Interviewer

"Yes. With you. When I'm here, I know I'm already smart enough and I don't feel like I'm a bad boy. This is my safe place. It's the perfect place to be. Like when I went to Gnejna and there were people protecting the turtle's eggs so they can survive and when I talked with them, they taught me things I didn't know, but even I taught them things they didn't know."

- 9-year-old boy

"I trust you and even though my parents don't want me to come here, this is my only safe space where I feel I can talk freely about what is happening at home."

- 11-year-old girl

"Xtaqt nirringrazzjak tal-meeting li għogbok torganizza l-erbgħa li għaddew. Kien tajjeb ħafna li tkellimt mal-mara tiegħi għax ħadna stampa aktar ċara ta' x'inhu għaddej u x'jista jsir biex ngħinu lil XXXX. Xtaqt kont preżenti, imma l-mara għaddietli l-informazzjoni kollha. Grazzi ħafna tax-xogħol professjonali tiegħek u tal-għajnuna li qiegħda tagħtina"

- Parent of a boy in year 3

Thank you, for always finding time to listen to XXX. For your dedication and support. XXX always felt special and better after meeting you. I truly appreciate it. May God Bless You and give you strength in your work to continue supporting children.

- Parent

> It is something that matches the ideals of Her Excellency… A service for all children… Whatever colour, race, size, or body difference there is, Blossom embraces it all.

- Therapist, Primary

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