

II National Strategic
Plan for Childhood
and Adolescence
2013-2016
(II PENIA)

II National Strategic
Plan for Childhood
and Adolescence
2013-2016
(II PENIA)

Approved by Resolution
of the Council of Ministers
on April 5, 2013

Courtesy Translation



Edita y distribuye:

© MINISTERIO DE SANIDAD, SERVICIOS SOCIALES E IGUALDAD
CENTRO DE PUBLICACIONES
PASEO DEL PRADO, 18-20. 28014 Madrid

NIPO: 680-14-091-0

Imprime: ESTILO ESTUGRAF IMPRESORES, S.L.

Pol. Ind. Los Huertecillos, nave 13 - 28350 CIEMPOZUELOS (Madrid)
<http://publicacionesoficiales.boe.es/>

II National Strategic Plan for Childhood and Adolescence 2013-2016 (II PENIA)

Approved by Resolution
of the Council of Ministers
on April 5, 2013



GOBIERNO DE ESPAÑA MINISTERIO DE SANIDAD, SERVICIOS SOCIALES E IGUALDAD

Index

I.	Introduction	7
II.	Conceptual framework	11
III.	Evaluation of I PENIA: results	15
IV.	Analysis of the current situation	25
V.	Glossary	45
VI.	Objectives	47
	OBJECTIVE 1.- Promote knowledge of the situation of children and adolescents, the impact of childhood policies, making the population aware and mobilizing social actors	48
	• <i>SPECIFIC OBJECTIVE 1.1: Knowledge of the reality to children</i>	48
	• <i>SPECIFIC OBJECTIVE 1.2: Improvement of childhood policies and their impact through cooperation</i>	51
	• <i>SPECIFIC OBJECTIVE 1.3: Promotion of social awareness on the rights of children by mobilizing all actors involved</i>	54
	OBJECTIVE 2.- Support families: Make progress in the promotion of policies to support families in the exercise of their responsibilities in the care, education and comprehensive development of children, and facilitate reconciliation of work and family life	56
	OBJECTIVE 3.- Media and communication technologies: Promote children's rights and children protection regarding the media and information technology in general	60
	OBJECTIVE 4.- Protection and social inclusion: Promote social care and intervention for children and adolescents at risk because of vulnerability, disability and/or social exclusion, establishing common quality criteria and shared practices capable of evaluation	64

OBJECTIVE 5.- Prevention and rehabilitation in situations of social conflict: Intensify prevention and rehabilitation activities of children and adolescents associations in situations of social conflict	71
OBJECTIVE 6.- Quality education: Ensure a quality education for all children and adolescents characterized by the instruction in values, attention to diversity, progress in equal opportunities, multiculturalism, respect for minorities, promoting equity and compensation of inequalities, helping by a continuous attention, the development of children's potential from the first years of life	74
OBJECTIVE 7.- Comprehensive health: Promoting actions to achieve the maximum development of right to health for children and adolescents, from health promotion to rehabilitation, giving priority to the most vulnerable groups	79
OBJECTIVE 8.- Child participation and appropriate environments: Promoting children's participation by encouraging appropriate ecological and social environments that allow the development of their skills, defending the right to play, leisure, free time in equal opportunities and in safe environments, and promoting responsible consumption, both in urban and in rural areas in the interests of sustainable development	85
VII. Monitoring and evaluation of II PENIA	91
VIII. Budget estimate	99

I. Introduction

Since Spain ratified the United Nations Convention on the Rights of the Child (CRC) on December 6, 1990, there have been significant progress in our country in the promotion, protection and defense of children's and adolescent's rights. To this end, the First National Strategic Plan for Childhood and Adolescence (2006-2009) was developed (hereinafter I PENIA, by its Spanish initials) and extended to 2010, as a response to a recommendation of the Committee on the Rights of the Child of 2002 in which stressed the "need to develop a comprehensive strategy for children based on the principles and provisions of the CRC."

This Second National Strategic Plan for Childhood and Adolescence (2013-2016) (hereinafter II PENIA, by its Spanish initials) provides a framework for cooperation between all levels of government, both the State government, and the regional and local governments, and other social agents involved in children's rights, such as the Platform for Children Organizations (PCO). Its approval represents a strategic and term position, putting children as a priority on the political agenda.

In this II PENIA, the broad strategic policies for children are defined by consensus with the ultimate goal of the effective implementation of the CRC rights, taking into account the duties and responsibilities of the under age. If at one time the child was not considered a subject of rights, and then only as a holder of rights, today it should be emphasized that, according to their age and their evolutionary development, he is also gradually "subject of responsibilities" in the various areas in which he lives, primarily in the family, school, or neighborhood.

This II PENIA is aimed at those under 18 years, according to the provisions of Article 12 of the Spanish Constitution and Article 1 of the CRC. Specifically, according to that article of the CRC, "a child means every human being below the age of eighteen years unless under the law applicable to the child, majority is attained earlier." In this regard, we note that generic male references that appear in the objectives and measures of this II PENIA, will also refer to the corresponding female. In particular, the term child/children will include girl/girls and boy/boys.

The development process of II PENIA has been participatory; the regional, local and state authorities have collaborated, and also major

childhood NGOs through multiple bilateral meetings as well as meetings in participatory and consultative bodies, such as the Committee of General Directors of Childhood of the Autonomous Communities, the Sectorial Conference on Social Affairs and the Childhood Observatory in which all relevant public bodies and associations participate. The Observatory reported it favorably on November 30, 2012.

In this regard, we have taken into account contributions from the following public and private institutions:

- Public authorities: Ministries involved, Autonomous Communities and the Spanish Federation of Municipalities and Provinces (FEMP, by its Spanish initials).
- NGOs, especially through the Childhood Platform (POI, by its Spanish initials), which represents some 50 childhood and adolescence associations, as well as research centers and universities. The contributions that the children sent us through the POI have also been taken into account.
- The conclusions of the Special Committee for the Study of Problems of National Adoption and related issues of the Senate that, after two years of work, were adopted unanimously on November 15, 2010. This report recommends the Government a number of proposals which include the improvement and adaptation of child protection.
- Recommendations of the Committee on the Rights of the Child of the United Nations of 2010.
- International documents from other UN agencies, such as:
 - Guidelines for the Alternative Care of Children.
 - The report of the Special Representative of the Secretary General on Violence against Children.
 - UNICEF report on the degree of achievement of the Millennium Development Goals.
 - The Commitments undertaken in the resolutions related to children's rights adopted in the United Nations General Assembly (66/41) on the girl, and in the Human Rights Council (19/37 on children's rights) adopted under the initiative of the European Union and co-sponsored by Spain.
- On the other hand, it has also been taken into account the approval and adoption by the United Nations of the Third Optional Protocol to the Convention on the Rights of the Child, regarding a com-

munication procedure of violations of children's rights, which Spain signed on February 28, 2012 in Geneva.

In the European context, we have considered both the EU Agenda for the Rights of the Child (2011) and the Council of Europe Strategy for the Rights of the Child (2012-2015).

- Furthermore, the POI and the Directorate-General of Services for the Family and Children (DGSFI, by its Spanish initials) organized three thematic workshops for reflection and debate on key issues such as: 1. - Child protection: child abuse, residential care and foster family care. 2 - Participation of children and adolescents and the opportunities and risks of information technology and 3: Child poverty, and equality of opportunities in the system or the access to health and education.

In the preparation of the document has also participated the University Institute of Needs and Rights of Children and Adolescents (IUNDIA, by its Spanish initials) of the Autonomous University of Madrid.

Finally, it should be noted that in response to the recommendation of the Committee on the Rights of the Child of the United Nations to Spain of November 3, 2010 which suggested that in the national strategic plans “should be included the necessary resources ... to improve the effective implementation of the plan”, for the first time, and unlike the previous plan, this II PENIA includes a budget estimate of the measures proposed by the various public administrations in charge of their execution.

II. Conceptual Framework

Outline

The II PENIA is based, as the previous one, in the CRC. Its main objective according to Article 4 of the CRC, is to make progress in fulfilling the rights of children and adolescents in Spain, but also in their duties and responsibilities. This must be done addressing care for children and adolescents in a multidisciplinary manner through cooperation and effective and efficient coordination of the various agents involved to ensure, promote and defend their rights.

The Spanish Constitution and state and regional regulations, constitute the reference framework for the design and proposals of this II PENIA.

This II PENIA, also in line with the CRC, believes that children are active subjects of rights and responsibilities. Therefore, their active participation has been considered essential to its development, both in the assessment of the I PENIA, and in the proposed set of measures considered unavoidable to satisfy their needs and fulfill their rights.

It is proposed, therefore, to promote from the public institutions the maximum satisfaction of the basic needs of children and the complete guarantee of their rights, in close collaboration with all the agents involved in child welfare and in the development of a conducive and safe socio-cultural environment for the optimal development of their abilities.

The principle of the best interests of the child is to remain the key principle of public authorities in collaboration with families, the children and all the actors and institutions involved in the implementation of policies and comprehensive and multidisciplinary actions.

In the present times of financial and economic crisis, it is even more necessary to stress the importance of investing in children equity. As it is known, the investment in children is the one with the highest positive impact, not only in the economic development of a society, but also in their comprehensive development.

Investing in children is essential to break the cycle of poverty and reduce inequalities in a society.

In this sense, poverty and social exclusion of children are particularly sensitive and complex issues, and given their multidimensional nature, they cannot be addressed only in economic terms but in a comprehensive way: recognizing the need to support families with children, promoting access to the labor market of their parents, adopting conciliatory measures, supporting low-income households, providing access to quality services (health,

education, housing and favorable environment) and encouraging the participation of children in policies that affect them. Only through this holistic approach, the rate of child poverty and social exclusion can be reduced and their welfare increased.

Once the I PENIA was completed and evaluated we found that, although it has helped improve the exercise of the rights of children and has been a useful tool for children's participation, as recognized by the United Nations Committee on the Rights of the Child it is essential to move forward in line with the recommendations of the Committee.

Indeed, since the completion of the I PENIA and the II PENIA, the III and IV Implementation Report of the CRC in Spain was presented to the Committee on the Rights of the Child of the United Nations. On November 3, 2010, the Committee issued its concluding observations on these reports. The PENIA II incorporates various recommendations of the Committee to its measures and responds to the challenges laid out by the Committee.

Basic principles

This II PENIA, like the previous one, is based on the following guiding principles of the CRC:

1. The principle of the **best interests of the child**, according to which all actions concerning children taken by public or private institutions of social welfare, courts of law, administrative authorities or legislative bodies, will act to the interests of the child. This involves a commitment to ensure for the child the care and protection for their well-being, taking into account the rights and duties of their parents, guardians or other persons responsible for him before the law and, to that end, implement all adequate legislative and administrative measures.
2. The principle of **non-discrimination**, under which all rights apply to all children without distinction of race, color, sex, language, religion, political or other opinion, national, ethnic or social origin, property, disability, birth or other status of the child, their parents or their legal representatives, promoting gender equality and the principle of equity.
3. To ensure the child's fundamental **right to life and to the full development of all its potential**, guaranteeing that basic needs are met in the various contexts in which he spends his life. This involves access to food, clean water and sanitation, health, housing, education, culture, family relationships, peer relationships, affection, play and

active recreation. All this from the consideration of the child as an active and interactive subject to whom his environment should provide with all the necessary resources and support for his development, without obstacles or barriers of any kind.

4. **The right to education**, which involves not only universal access to education and the obligation of the same until age 16, but also a quality education to reduce the cases of school failure. It is therefore essential to develop the tools necessary to achieve that all children –especially those that come from a troubled family environment, have a disability, or are from a national or social origin in risk of educational exclusion– are educated comprehensively with the aim of building their autonomy and successfully participate in society. Access to quality education from the earliest stages of life is the best tool to fight poverty and social exclusion and its intergenerational transmission.

It should also be kept in mind that the right to education also involves education on rights, duties and responsibilities. The CRC also guarantees children the right to be educated on the universal values of the Declaration of Human Rights and the Convention itself.

5. The principle of **participation**, which is present in various articles of the CRC, results in the right of all children to be heard and to receive age-appropriate information to express informed opinions knowingly. The objective is to consider the necessity and the right of children to have an active role in the various environments in which they live.

Although the involvement of children in formal matters, such as litigation, is necessarily linked to their level of cognitive development, their ability to form their own judgment and, obviously, the more or less appropriate way in which they are provided with information, participation occurs in an early age in the usual contexts in which he spent his life. Thus, children participate initially in the family and in the playschool from the earliest stages of life and then, in the school, associations and local contexts.

Therefore it is necessary to promote educational and parenting styles that encourage dialogue and participation of children from the earliest stages of life. It is also necessary to generate new forms of school participation previous to those formally regulated for Compulsory Secondary Education schoolchildren and continue promoting participation at the local level.

III. Evaluation of I PENIA: results

One of the responsibilities assumed by the Childhood Observatory when PENIA I (2006-2009) was implemented was its monitoring and evaluation. To achieve this goal it undertook the first Monitoring Report on the Implementation of I PENIA for the period 2006-2008 and a final evaluation. This evaluation focused on understanding the degree of compliance with the Plan, as well as on the achievements that were made and the challenges that remained open, all with the purpose to provide guidance for the design of II PENIA.

The I PENIA has been an instrument of cooperation adopted by Spain which has helped to improve the situation of children and adolescents in our country and the recognition and exercise of their rights. In parallel, legislative changes have been made and are being made now, other plans related, more or less directly, with the I PENIA have been approved, and further international conventions affecting the implementation of the rights listed in the CRC have been ratified.

The assessment of the I PENIA is based on four different information sources that are complementary: the evaluation sheets that were sent by the General-Directorate to the various Autonomous Communities, administrations and bodies –both public and private– the Web, telephone interviews, budget information, and the evaluation of experts.

In the following pages it can be found the assessment of I PENIA organized into three complementary sections of information. There is first an overall assessment in relation to the social and political situation in which it was implemented, the strategic objectives defined therein and the implementation of the measures included in the Plan. In the second section is analyzed the degree of implementation of two of the most innovative basic principles included in the Plan: gender perspective and child participation. In the third and final section we will explain the main conclusions resulting from the evaluation of I PENIA, with a particular emphasis on the fact that these conclusions are grouped into five categories, which are those that have guided the evaluation of the plan, namely: design, implementation, structure and organization, achievements and difficulties encountered.

The overall assessment of the I PENIA shows the progress in its initial goal: “Ensuring the promotion and defense of the rights of children and adolescents in the entire national territory and meeting the political commitment of the Spanish State to the United Nations Convention on the Rights of the Child “. The I PENIA, was based on a human rights approach that

goes beyond the protection of children including both vulnerable minors and “normalized children” as it addresses all children.

The I PENIA adds gender perspective and child participation. Regarding gender perspective it is important to emphasize that their measures have contributed to the design and development of equal opportunities policies.

In the second place, the I PENIA included child participation as one of its basic principles. Its implementation was an opportunity to add, for the first time, child and adolescent participation in the monitoring and evaluation of a national policy for children. This strategy has been demonstrated in each and every phase of the Plan: dissemination, implementation and evaluation. We have worked with 1,413 children and 3,852 educators, in order to explain them the I PENIA, have their assessment on the compliance of the strategic objectives and establish their priorities and demands on children. In the dissemination phase, we designed a children’s version adapted from I PENIA in the last quarter of 2006, which was distributed to children’s organizations in 2007. In 2008, the knowledge of I PENIA increased among its addressees, childhood technicians, educators, children’s organizations and institutions with relevant competencies, thanks to the adapted version of I PENIA childhood. In this phase various pedagogical proposals were also designed based on I PENIA – “A Plan to our measure for boys and girls”, “A plan to our measure for teenagers” and “The Adventure of PENIA” – and were implemented with groups of child participation in order to have the views of boys and girls. This required training for childhood technicians and educators who participated in the process to work on these proposals.

In 2009, new teaching proposals were made and, therefore, were designed new teaching guides – “Picturing the PENIA” – to work it in a playful, fun and participatory way. This experiment was conducted with children from childhood organizations and local childhood councils and also and the only peninsular childhood Autonomous Forum (Asturias), which has opened the possibility of moving child participation from regional to national level. In the first quarter of 2010 we have spread the views and assessments that children have made of I PENIA. Subsequently several workshops were developed to know the demands of children and adolescents regarding II PENIA, using for this purpose, a new teaching guide – “Reinventing PENIA”. For this process, the members of the Childhood Observatory were invited to ask participant children and adolescent about specific issues. The result of these consultations is summarized in a document prepared by the Children NGOs Platform, entitled “Reinventing PENIA. Creative solutions workshops for childhood policy.” These workshops involved a total of 829 children, aged 7 to 17, who have given their opinion on issues that affect them, especially on those which have a greater impact on their lives, and proposing creative solutions and viable for the competent authorities to go forward. The children who participated had

previous experience from participation in child participation structures, such as childhood organizations, childhood councils...

The topics on which they were consulted, corresponded to the ten strategic objectives of I PENIA (2006-2009): children situation, child policy, family, rights awareness, media and new technologies, risk or social exclusion situations, social conflict situations, education, health, environment and child participation.

The general conclusions of the evaluation and the priorities established with respect to strategic objectives of I PENIA include:

- Assessments include specific aspects that affect their daily lives, but also point to other more general aspects that would lead to general policy design for all society and for them as specific group.
- They demand quality spaces, services and public resources.
- They express their right to be consulted and to have their opinion taken into account.
- Their opinion about the problems that affect children does not match that of adults and therefore they propose different solutions to those of adults.

The main contributions made by the children in relation to each of the topics on which they were consulted were:

With regard to the situation of children only talked about the right to participation (to be consulted and heard). There have also been very few children that wanted to discuss primarily about “child policy”, probably because they do not know much about it as it is not part of their everyday experience. Nonetheless, it changes when the topic is the family. In this case, the children talk about the current economic crisis and unemployment problems. They are also very sensitive to the issue of child abuse and argue that prevention policies must be consider to serve families at risk. On the other hand, they are concerned about rights awareness, upholding the need to educate the general population and to focus the actions on risk groups. As regards the media, they think that they are absent and invisible and indicate that its contents are not interesting enough, neither for the issues that they address, nor for their sources and the information that they provide. With regard to information technology, more effort should be devoted to analyze its relationship to social networks and the degree of usefulness for training, information and communication.

In relation to situations of risk or social exclusion are there are two main issues: the problems of coexistence between different cultures and poverty. Moreover, as expected, education is one of the central topics. The most recurrent request is to stop the changes in education legislation. They also point out the need to revise the rules, as well as to carry out innovations and improve-

ments in resources and methodologies. In health –as it also happens in education and the environment– sport essential in their lives. They also point to the need for quality public health policies. Regarding the environment, they stress the demand for quality services and public spaces that serve as meeting places for recreation and leisure more affordable for them and their interests. Given the importance of open spaces for children, it is not surprising that many references are made to urban elements, their maintenance and their proper use, as well as to all matters that related to environmental sustainability. The last of the topics discussed is participation, and here the views are very clear. Children say they should be taught to participate in decisions that affect them. To do this it is necessary to create spaces where they can participate and adults that listen to them and take account of their views.

As a result of this process, the final evaluation of I PENIA notes that the previous work has provided us with experiences, good practices and teaching proposals for incorporating child participation at different levels of decision. However, the actual experience is that such participation is still weak and poor in most environments, and that when it occurs, is mainly in the local level, unable to extend to other areas.

Therefore, II PENIA still has to promote children's participation in all stages of the process, the training of experts in the pedagogy of participation depending on the level of development and other important variables to consider to make children's participation a reality in the interaction with their environment, in their daily life and, in general, in their development as active and responsible citizens.

The general conclusions have been grouped in the five major categories that have guided the evaluation of the plan: design, implementation, structure and organization, achievements and difficulties encountered.

• Design

- Strategic objectives have different levels of generalization. PENIA I included both practical goals and general ones. While achieving the former can be evaluated, on the latter we can only have information on whether the actions taken are consistent with the expected trend. Something similar could be said about the proposed measures.
- There are many similar measures in their design, as they are aimed at different objectives that complement each other.
- The files that collect the assessments from the Autonomous Communities do not always include the same information as the answers criteria were not clearly defined “a priori”. This situation makes virtually impossible to make comparisons between the data from different regions. Something similar happens with the institutions, agencies and NGOs that participated in the evaluation.

- It is not possible to make a comprehensive assessment of the costs incurred for childhood and adolescence issues.
- In general, the indicators provide clear and precise information on the situation of children in our country, but are not adequate to assess the impact of a particular measure.

- **Implementation**

- All objectives outlined in the I PENIA have been developed to a greater or lesser extent.
- The very existence of the Plan provides a framework for identifying, planning and implementing all policies on children and adolescents, but it is necessary to improve the management aspects.
- Although I PENIA emerges as a strong commitment to the promotion of child rights and child participation, its final implementation has been more closely linked to the issue of protection.
- I PENIA implementation has been uneven in the different Autonomous Communities, in accordance with priorities established by themselves.
- The implementation of I PENIA has involved governments, private companies and NGOs.

- **Structure and organization**

- I PENIA organization has been negatively influenced by successive state agency institutional changes that have occurred in the period between 2006 and 2009, as childhood policies that belonged to the Ministry of Labour and Social Affairs were transferred to the Ministry of Education and Sports, later the Ministry of Health and Social Policy, and finally to the Ministry of Health, Social Policy and Equality.
- I PENIA is strongly driven by the work done by the various working groups that exist in the Childhood Observatory, which have contributed to the implementation of the various measures.
- Different agents from the Observatory who participated in the process of implementing the I PLAN have not always understood clearly their role in decision making.
- The participation of different actors (political and technical) that are part of the Observatory has been uneven, no very sustained over time, and with different levels of responsibility.

- It has been impossible to accurately calculate the approximate spending on childhood and adolescence. Measures proposed by the administrations have not been budgeted.

- **Achievements**

- I PENIA introduces an approach to the promotion of children's participation rights which was innovative at the time for the design of new policies for children and adolescents in Spain. Today this approach must be supplemented with approach of the responsibilities depending on their age and evolutionary development.
- It has been an improvement of the situation of children and adolescents in some areas where it has acted, although in this II PENIA new improvements and challenges are proposed in line with the recommendation of the UN Committee for Spain.
- The achieved high level of participation, involvement and collaboration of all agents has been very well received, especially by NGOs for children who have been highly involved in decision-making, although this PENIA II has gone a step further when budgeting, for the first time, the measures contained therein.
- The incorporation of private companies in the implementation of I PENIA has allowed many of them to include children as a priority in corporate social responsibility.
- I PENIA has placed policies for children in an important place on the political agenda of our country but during the life of PENIA II certain structural legal reforms will be undertaken in order to give substance to these policies for children.
- It has contributed to the dissemination, monitoring and implementation of the CRC, as well as other national standards or international efforts to improve child welfare.
- It has allowed child participation as agents involved in the entire process, from the initial design to evaluation. However, this participation should be further strengthened.

- **Limitations**

- The legislative, political and budgetary plurality derived from the territorial organization of our country makes it complex to place the Plan priorities at the same level. Hence the differences between the Autonomous Communities, which were already explained in the section on implementation.

- Communication among the different actors involved in the implementation of the I PENIA has not been sufficient, therefore it has been emphasized in various strategic objectives and measures in the various agencies and entities. This will, without a doubt, reduce their strategic nature.
- The need for a greater role of the Childhood Observatory.

In summary, for the writing of this II PENIA, the assessment of the first plan points to the need to include in its design a smaller number of strategic objectives and measures, grouping all those that are repeated and prioritizing those that seem to be more relevant within the conceptual framework on which it is defined and the current situation of children at the time of being drafted. Similarly, it seems pertinent to refine the indicators in more detail to assess the degree of achievement of objectives. It also seems to emerge from the evaluation of I PENIA the desirability of accurate data on the budget for the implementation of policies for children, as well as greater interagency and interterritorial coordination.

Then, as an example of the policy development, as well as the plans developed in this period that affect childhood in a lesser or a greater extent, the following documents are set forth:

Legislation

- Ley Orgánica 4/2000, de 11 de enero, sobre derechos y libertades de los extranjeros en España y su integración social, en su redacción dada por las Leyes Orgánicas 8/2000, 11/2003, 14/2003, 2/2009, 10/2011 y Real Decreto Ley 16/2012.
- Ley Orgánica 2/2006, de 3 de mayo, de Educación.
- Ley Orgánica 8/2006, de 4 de diciembre, por la que se modifica la Ley Orgánica 5/2000, de 12 de enero, reguladora de la responsabilidad penal de los menores.
- Ley 39/2006, de 14 de Diciembre, de Promoción de la Autonomía Personal y Atención a las personas en situación de dependencia.
- Ley Orgánica de 3/2007, de 22 de marzo, para la igualdad efectiva de mujeres y hombres.
- Ley 27/2007, de 23 de octubre, por la que se reconocen las lenguas de signos españolas y se regulan los medios de apoyo a la comunicación oral de las personas sordas, con discapacidad auditiva y sordo-ciegas.

- Ley 35/2007, de 15 de noviembre, por la que se establece la deducción por nacimiento o adopción en el Impuesto sobre la renta de las Personas Físicas.
- Ley 40/2007, de 4 de diciembre, de medidas en materia de Seguridad Social.
- Real Decreto Legislativo 1/1994, de 20 de junio, por el que se aprueba el Texto Refundido de la Ley General de la Seguridad Social.
- Ley 54/2007, de 28 de diciembre de Adopción Internacional.
- Ley 12/2009, de 30 de octubre, reguladora del derecho de asilo y de la protección subsidiaria.
- Ley Orgánica 5/2010, de 22 de junio, por la que se modifica la Ley Orgánica 10/1995, de 23 de noviembre, del Código Penal.
- Ley 7/2010, de 31 de marzo, General de Comunicación Audiovisual.
- Real Decreto 557/2011, de 20 de abril, por el que se aprueba el Reglamento de la Ley Orgánica 4/2000, de 11 de enero sobre derechos y libertades de los extranjeros en España y su integración social, tras su reforma por Ley Orgánica 2/2009.
- Ley 17/2011 de 5 de julio, de Seguridad Alimentaria y Nutrición.

Plans, Strategies

- Plan de actuación para la promoción y la mejora de la convivencia escolar (26 de marzo de 2006).
- Plan de Acción 2010-2011 para conseguir los Objetivos de la Educación en el decenio 2010-2020 que España ha impulsado durante su Presidencia de la Unión Europea.
- Plan Director para la Convivencia y Mejora de la Seguridad Escolar (2007-2011).
- I Plan Nacional de Accesibilidad (2004-2010)
- Plan Interministerial de la Juventud (2005-2008)
- II Plan Nacional de Acción contra la Explotación Sexual Comercial de Infancia y Adolescencia y III Plan contra la Explotación Sexual de la Infancia y Adolescencia (en adelante, PESI), consensuado en el Pleno del Observatorio de Infancia el 20 de diciembre 2010.
- IV y V Plan Nacional de Acción para la Inclusión Social (2006-2008/2008-2010).
- Plan Nacional de Sensibilización y Prevención de la Violencia de Género (2006-2008).
- Plan Estratégico sobre Ciudadanía e Integración (2007-2010) y PECEI (2011- 2014)
- Plan Estratégico Nacional sobre Drogas (2008-2012).
- Plan Estratégico de Igualdad de Oportunidades (2008-2011).

- Plan Nacional de Derechos Humanos (aprobado en 2008).
- Plan Director de Cooperación Española (2009-2012).
- Plan de Acción sobre Menores Extranjeros nos acompañados (2010-2014), elaborado por la Comisión Europea.
- Plan Integral para la Actividad Física y el Deporte (Plan A+D) 2010 – 2020
- Plan de inclusión del alumnado con necesidades educativas especiales (2011-2013) elaborado por el Ministerio de Educación.
- Plan Integral contra la trata de seres humanos con fines de explotación sexual (2009-2012)
- Programa Nacional de Reformas (PNR) (2011 y 2012).
- Estrategia Española sobre discapacidad (2012-2020)

Ratified Conventions, resolutions and recommendations adopted

- Recommendation Rec (2006)19 of the Committee of Ministers to member states on policy to support positive parenting (Adopted by the Committee of Ministers on 13 December 2006 at the 983rd meeting of the Ministers' Deputies)
- United Nations Convention on the Rights of Persons with Disabilities ratified by Spain in 2008 and its Optional Protocol.
- Iberoamerican Convention on Youth Rights ratified by Spain in 2007
- Council of Europe Convention on Action Against Trafficking in Human Beings (2009)
- Council of Europe Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse, ratified by Spain in 2010.
- Convention on Jurisdiction, applicable law, recognition, enforcement and co-operation in respect of parental responsibility and measures for the protection of children (Concluded 19 October 1996) and ratified by Spain in 2010.
- Guidelines of the Committee of Ministers of the Council of Europe on child-friendly justice and their explanatory memorandum
- European Convention of the Council of Europe on the Adoption of Children (Revised). Ratified by Spain in 2010
- European Disability Strategy 2010-2020 (EU)
- III Optional Protocol to the Convention on the Rights of the Child on a communications procedure. This instrument will allow individual children to submit complaints regarding specific violations of their rights under the Convention and its first two optional protocols. Signed by Spain 28, 2012 in Geneva and in ratification process.

IV. Analysis of the situation of children and the II PENIA

After the I PENIA period, the situation of children in Spain has evolved. Progress has been acknowledged by the Committee on the Rights of the Child in its 2010 recommendations but the challenges for the coming years are no less important to consolidate some of the improvements made and especially to develop new policies with a focus on children and adolescents to respond to the new challenges.

To facilitate uniformity of the contents of this II PENIA, the analysis of the current situation is made around the same strategic objectives:

Objective 1: Promote knowledge of the situation of children and adolescents, the impact of childhood policies, making the population aware and mobilizing social actors

It is clear that the design of policies for children, must emerge from the increasingly higher knowledge of data concerning them, the coordinated action of the various relevant authorities in the field (local, regional, national and international) and social awareness.

In that sense, the Committee on the Rights of the Child remembered it in its latest recommendations of 2010 to Spain, highlighting some of the main challenges:

- The Committee recommends that the State party *strengthen its process of collection and analysis of data disaggregated*, inter alia, by age, sex or ethnic origin, of all persons under 18 years.
- The Committee recommends that the State party *continue its efforts to improve the system of effective and adequate coordination in the central administration and between regions*, to implement policies for the promotion and protection of children.
- The Committee recommends that the State party *continue its efforts to guarantee broad dissemination and understanding by adults and children of all provisions of the Convention*.

Therefore, this objective will be achieved through the improvement of existing information on children, or the production of relevant new informa-

tion that we currently do not have, such as statistical data of children of victims of domestic violence, the definition of the indeterminate legal concept of the best interests of the child, or the promotion of childhood programs under the framework of the companies' Corporate Social Responsibility.

The importance of these objectives and measures can be considered from the starting point, which can be summarized with the following notes.

According to the National Statistics Institute (INE) the number of people between 0 and 17 years of age in Spain is 8,348,433, according to census figures as of November 1, 2011, which constitutes 17.83% of the total population. The proportion decreased rapidly during the 80s and 90s, and by the middle of this past decade it has returned to increase. The highest densities of children and adolescents are in the south, and the highest population growth occurs in communities of the southwest in contrast to the north-east.

The characteristics of these children are very diverse and the different governments are making major efforts to get as complete a picture as possible about their situation and needs. It is important to highlight the work done by the Childhood Observatory at the state level, as well as the various observatories created by various autonomous communities and agencies especially devoted to the general analysis of data on the Spanish population (National Statistics Institute, Center for Sociological Research, etc.) It is also worth noting the effort in monitoring and evaluation as performed for the NAOS Strategy (2011) prepared by the Ministry of Health, Social Services and Equality, the Sports Council, the Departments of Health of the Autonomous Communities and Local Authorities.

There are several groups of children to whom some of the measures in this plan are addressed specifically. Girls and adolescent girls are the 48,56% of the total, and for them are designed many of the efforts to ensure equal opportunities from birth. It is significant the increasing proportion of children born abroad, which increased from a 4% of the population under 18 years in 2001 to over 8% in 2011. The integration of these children is turning out to be generally satisfactory, but their presence in Spain requires special attention. A relevant group which is also targeted by the plan is the gypsy children, in particular with regard to education; the existing data show clear progress in preschool and primary education attendance of the gypsy population, while the frequency of truancy and early drop remain high.

Another group of special importance is that of children under 15 with any limitation or disability, who, according to the Survey of Disability, Personal Autonomy and Dependency Situations of 2008, are 138,700. In this regard it should be highlighted the "Spanish Disability Strategy 2012-2020", which includes among its measures the promotion of early detection of special educational needs, or the reduction of the rate of early school leavers in this population to a level below 15%. Finally, public entities protect minors

under their guardianship or custody a total of 35,569 children in 2010. (Bulletin of Measures for the Protection of Children. MSSSI).

Coordination and harmonization of policies and actions of the state government, regional and local authorities, is constantly developed through organs like the Territorial Council of Social Services and Dependency, which analyzes the social needs and establish plans and intervention programs co financed with the state, establishing annual criteria for territorial distribution of budget appropriations for subsidies for the implementation of social service programs. On the other hand, the Inter-regional Committee of Directors-General for Children which regularly meets, was created to analyze relevant aspects that require pooling information for joint solutions that enable improvement in the quality of life of children and adolescents.

In this framework of cooperation and coordination, the Childhood Observatory can play an important role in facilitating the exchange of information between all levels of government and social organizations for children. One of the objectives of this II PENIA is to strengthen the role of this organ.

Regarding cooperation in the international arena, the Ministry provides all information requested by the Ministry of Foreign Affairs and Cooperation for the various reports required in international forums. The Ministry also participates at meetings convened by the European Union (where it takes part semiannually in a working group called “L’Europe de l’enfance” and is part of the Network of European Observatories ChildONEurope). It addresses the demands and also attends conferences and meetings organized by the European Commission, the Council of Europe and the periodic UNICEF Executive Boards.

Objective 2. Make progress in promoting policies to support families in the exercise of their responsibilities in the care, education and development of children, and facilitate reconciliation of work and family life

The Child Rights Committee of the United Nations, recommended in its concluding observations for Spain in 2010 to “increase the efforts to provide appropriate assistance to parents and legal guardians in the performance of their child-rearing responsibilities, particularly those from families in crisis due to poverty, lack of adequate housing or separation. Likewise it recommends measures to ensure that the needs of all children are met and to take all necessary measures to ensure that no group of children lives below the poverty line. The Committee also recommends that the State party strengthen the system

of family and children benefits and support parents and children in general, providing additional support to single parent families, families with many children and families whose parents are unemployed “.

It is clear that this recommendation emerges from the observation of a necessary and urgent family support policy that encourages family reconciliation, highlights the family support services and addresses families with special needs as a priority. These are some of the measures that PENIA II included in this objective and arise from the following analysis of the current situation.

Children in Spain live generally with their parents. Despite the decline in the birth rate, it is especially significant the number of families with 3 or more children (487,000) and the growing number of single parent families (548,600 in the third quarter of 2011, according to “Women in Numbers” from the Women’s Institute).

Regarding equal opportunities policies, although the Organic Law 3/2007 of March 22 for effective equality of women and men, introduced a paternity leave of 15 days, according to data from the Ministry of Employment and Social Security the total of paternity leaves from 2007 to December 2012 amounted to 1,651,275. Specifically in the years 2010 and 2011 were 308,510 and 301,271 respectively. Moreover, in relation to the legal possibility for fathers to enjoy a part of the maternity leave given up by the mother, the data indicate that this option is rarely used, since in 2010 from a total of 332,557 maternity leaves only 5,805 were enjoyed by fathers, while in 2011 from 324,405 maternity leaves only 5,798 were male beneficiaries.

Social spending on family protection in Spain is still one of the lowest in the European Union.

According to Eurostat, the differential between Spain and the EU as a percentage of social expenditure on family was 2.77 points (8.34 / 5.57) and in 2009 (the latest year with complete data across the EU) this difference was reduced to 1.83 points (8/6.17). In terms of percentage of GDP, while the EU average in family protection expenditure in 2009 was 2.26%, in Spain it reached 1.51%, one of the lowest rates in the EU.

Figures on relative poverty and child poverty are very alarming in Spain. The indicator that measures relative poverty is the poverty risk rate. People at risk of poverty are those living in households with income below 60% of median equivalised income, taking into account the number of persons in the household. Thus, according to data provided by the INE in Spain for 2012, the income threshold is at 15,445 euros for a household with two adults and two children under 14 years (provisional data). For the general population the at-risk-of-poverty rate is 21.1% (18.4% with income equivalent to the imputed rent). For children under 16 the rate is 25.9% calculated without imputed rent. The situation varies according to

the structure and size of the family. In the “Living Conditions Survey 2011” it is worse for single parents (38.9%), but for families with two adults and one or more dependent children the rate is 24.0%. The probability of having an income below the poverty line is more than three times (3.3) higher for people with primary education (28.9%) than for those with higher education (10.0%).

UNICEF’s report on “The impact of the crisis on children” (2012-2013) notes that the growth in childhood chronic poverty in Spain from 2007 to 2010 was 53% over the years; in 2008-2010 there were nearly 205,000 children at risk of poverty and 23.7% live in households with high poverty level: there are more poor children are they are poorer.

Child poverty is undoubtedly one of the major challenges at this time, therefore, because of its importance, it will be specifically addressed in the Next National Plan for Social Inclusion 2013-2016 whose completion is scheduled for 2013.

Gender violence at home has become a focus of priority intervention for all administrations, and according to the gender violence macrosurvey 2011 promoted by the Government Office for Gender Violence (MSSSI) and conducted by the CIS, 64.9% of women who had been abused had underage children when such abuse was occurring, with the average of 2 children per woman abused. When asked directly whether children suffered violence at some time, 54.7% of women answered yes, which means that 1,530,000 people have suffered as minors and nearly 517,000 children have suffered from it in the last year, which represents 6.2% of underage children in our country. Therefore, one of the main objectives of this PENIA II is both the visibility of these children, and their protection. So for the first time, these children will be taken into account in official statistics of domestic violence.

Objective 3. Promote children’s rights and child protection in relation to the media and information technology in general

The Committee on the Rights of the Child recommended to Spain in 2010 to continue the efforts to promote the existence of quality media that contribute to digital literacy of children, ensuring that public television takes the initiative, and to exercise a leadership role in the creation of responsible shows for the children primetime, giving priority to the development of these and not to the economic benefits, and with the participation of children in the development of the content and design of children’s programs that encourage companies operating in the Internet sector to adopt appropriate codes of conduct and to train children and adults to safely navigate the Internet.

There are clear challenges that today's child protection has to face in relation to the means of communication and information technologies. Various measures proposed in this objective relate to them and are based on the following data.

The media and information and communication technologies (ICT) are consistently present in the lives of the new generations. As an example we can mention that according to the Survey on Equipment and Use of information technologies and communication in households (INE 2011) the use of computers among children between 10 to 15 years is almost universal (95.6%) and 87.1% of them use the Internet. By gender, the data on the number of children using computers and the Internet in the last three months, are very similar. As mobile phone availability, we see that girls surpass boys by four points (68.1% vs. 63.7%). These results suggest that the use of the Internet and especially the computer is a common practice in ages before 10. It is also interesting to note that the use of mobile phones increases considerably with age to the point that, at age 15, 87.3 of children already have one. It is expected that the use of this communication channel from such an early age and consumption quickly generates new challenges, and operators have already signed, in the framework of the European Union, a first agreement to establish a code of conduct regarding access for children.

According to the study "Internet addictive behavior among young Europeans" (2012) funded by the European Commission, the relationship between social networks and online dysfunctional behavior reaches its highest proportion in Spain, so that 39.2 % of teens who spend more than two hours a day on social networks exhibit dysfunctional behaviors online compared to 13% of those who spend less than two hours daily.

As for TV consumption, the study on "Programming TV and Internet contents: the views of children on the protection of their rights," conducted by the Spanish Ombudsman's office and UNICEF in 2010, shows that almost 50% of children between 12 and 18 years watch television more than two hours on school days, and 44% watch TV between 22:00 h and 24:00 h, after "protection" hours. This study indicates that although 47% of children think that television does not respect the code of self-regulation of the "protection" time, most do not believe that the contents that are issued are inadequate for them.

From the foregoing, it follows that it is necessary to regulate the content being accessed by children. Regarding television, we must mention the approval of Law 7/2010, of March 31 for General Audiovisual Communication, which has child protection among its guiding principles. Previously, in 2005, we launched the Self-Regulatory Code of Television Content and Children, which was signed by the television networks, and whose

monitoring committee received between 03/09/2010 and 03/09/2011, 172 complaints, of which 17 were processed (9.8% of total complaints), as reflected in the VI Evaluation Report on the Implementation of the Code of Self-Regulation.

Regarding child pornography, complaints have increased as a sign of social awareness of the problems faced by child victims of the networks that are used for this purpose. With the data provided by the Ministry of the Interior, in 2006 there were 392 complaints about it, and the figure has almost doubled in 2011 with 704 complaints.

Finally, interventions to combat corruption of minors or disabled people have led to the detection of 253 in 2011, compared to 201 in 2006 (Source: Ministry of the Interior).

Regarding cyberbullying, in the hotline on cyberbullying, under the Center for Internet Security for Spain, of the Safer Internet Programme of the European Commission (PROTÉGELES), there have been 435 and 363 cases in 2011 and 2012 respectively. However, according to the aforementioned study on addictive behaviors, of the seven EU countries studied, Spain is the country in which less cyberbullying situations occur (13.3% versus 37% in Romania).

This greater impact of sexual abuse and harassment of minors, results in various measures in this II PENIA and proposals of reform of penal code to combat more forcefully the child grooming, sexual crimes against minors and prostitution and corruption of minors.

Objective 4. Promote social care and intervention to children and adolescents at risk vulnerability, disability and/or social exclusion, establishing common quality criteria and shared practices capable of evaluation

It is clear that in Spain there are many challenges posed by the system of child protection dating from 1996. The United Nations Committee focused heavily on them on its latest recommendations (numbers 42-45 and not reproduced because of its extension).

According to the Basic Statistic of Measures for Child Protection of the Ministry of Health, Social Services and Equality, corresponding to the measures imposed by the Autonomous Communities during 2010, total protection files opened for this year totals 41,155, representing a rate of 501.7 per 100,000 children. As noted on the first objective, of all these children, 4,955 are under guard and 30,614 under custody assigned by the Public En-

tities to family members, foster families or residential resources, as not all files that are opened based on evidence of lack of social protection end in protection measures. These data show an equivalent number of children who are in Residential care (14,088) and Foster care (15,100), plus judicial Foster care (5,381). As for domestic adoptions, the figure stood at 793 in 2010, compared to 916 in 2006.

Several of the measures proposed in this objective are part of a major reform of the entire legal framework for child protection that the government will undertake, based on the empowerment of family solutions in opposition to the institutional solutions and permanent versus temporary ones. This way permanent foster care will be more flexible by making administrative its constitution, and will speed up adoption to offer family and permanent solutions to this high number of children in care, or protected by public authorities, that are not having the opportunity to grow in a family.

On the other hand, according to the same Basic Statistics (data provided by the Consulates), Spain remains among the countries with the highest number of international adoptions in the world, reaching a total of 2,891 in 2010 and 2,573 in 2011 confirming the decline started from 2004, when it reached 5,541. In this area, and in the first objective in the framework of international cooperation we have included measures to ensure that international adoptions are made with the necessary safeguards and guarantees of the rights of children.

Two groups of adolescents subject to protective measures have required special attention in this period: the unaccompanied foreign adolescents and those with conduct disorder. Regarding children who arrive alone, without legal representation, from other countries, there have been established two agreements with the governments of Senegal and Morocco on cooperation in the field of prevention of migration of unaccompanied minors, their protection, return and reintegration, and the number of repatriations, has declined dramatically to 4 in 2011, compared to 111 in 2006.

Regarding children with behavioral difficulties, both the Spanish Ombudsman and the Committee on the Rights of the Child have proposed in its latest recommendations new guidelines for intervention to the governments, based on the treatment and support in their own home and social environment, limiting detention to exceptional situations and always with judicial authorization.

In relation to children born to mothers under age, the figures provided by the INE show a decline, from 4,341 in 2006 to 3,273 in 2011. Finally, with regard to children, and especially girls, in a situation of vulnerability because of their gender, the data are to be welcomed, as the number of marriages in

which one of its members is a minor has decreased, with 137 in 2011, compared to 350 in 2006.

Objective 5. Intensify prevention and rehabilitation activities for the groups of children and adolescents in situations of social conflict

The UN Committee makes two long recommendations to Spain (No. 63 and 64) in relation to the administration of juvenile justice.

And, as has been shown, social judgment on young offenders has been conditioned by certain especially serious cases, although very particular and not at all representative. The total number of minor criminal offenses in 2009 (According to Statistical Yearbook of Spain 2011, General Registry of Criminal Responsibility of Minors. Ministry of Justice.) Is 29,673. Of these, 25,372 are committed by males (85.50%) and 4,301 (14.50%) by women.

According to the same source by age segments, minors commit 4,227 (14.20%) offenses at age 14, 6,690 (22.55%) at age 15, 8,963 (30.20%) at age 16 and 9,793 (33%) at age 17. The group of 16 and 17 is the group that makes the highest number of criminal offenses.

Since the approval in 2000 of the Organic Law 5/2000 of January 12, regulating criminal responsibility of children, intervention with adolescents subject to legal action has evolved significantly. Regarding the type of measures imposed, the aim is to encourage as much as possible the rehabilitation and reintegration of children in their own social background, an approach that is reflected in the type of measures imposed: the number of measures implemented or running in 2010 was 30,878. (Basic Statistic of Measures imposed on young offenders. MSSSI, 2010), 5,805 were executed with detention (18.79%) 12,868 with probation (41.16%), 4,940 with community service (16 %), 3,344 with educational activities (10.88%) and 1,389 with weekend stay (4.49%). These data show the trend in intervention in open environment, social background environment and environments where juvenile criminal behavior are generated and maintained.

The publication of the Circular of the Attorney General's Office 1/2010, of July 23, on treatment from the Juvenile Justice System of the abuse of minors against their families, provides compliance measures in an open environment, in their own social context where it occurred, for minors who commit criminal abusive behavior, in order to solve, in the most educational way and within their environment, the situations that have come to this family violence.

The results in some Autonomous Communities on the profile and intervention with juvenile offenders, suggest the need for further discussion

on the origin and maintenance of criminal behavior in children, and an analysis of their most common profiles and generate programs based on best practices of intervention. These good practices should be elucidated through reliable rates of recidivism and the analysis of the success factors associated with programs with juvenile offenders. In relation to this last point, the University of Barcelona has carried out a study commissioned by the Ministry of Health, Social Services and Equality entitled “Success factors associated with intervention programs with young offenders” which sets out good practices in educational activities carried out in the various regions that contribute to the reduction of the motivation and crime risk for the youth.

To adequately respond to this reality, the fifth objective includes measures of knowledge, administrative cooperation, training professionals involved, violence prevention through family support and intervention with violent groups, etc.

Objective 6. Ensure a quality education for all children and adolescents characterized by the instruction in values, attention to diversity, progress in equal opportunities, multiculturalism, respect for minorities, promoting equity and compensation of inequalities, helping by a continuous attention, the development of children’s potential from the first years of life

Clearly one of the major challenges we face as a country is that of quality education. A good job depends on a good education, and employment will be the key driver to overcome the drama of unemployment. Successive PISA reports call into question the results of our educational system. Precisely measures included in this objective are intended to prevent school failure and truancy, to strengthen instruction in values, and pay special attention to children with the greatest needs, such as disabled children, foreign children... also in line with the recommendations of the Committee on the Rights of the Child.

Probably it is in this area where the minor population in Spain have their greater challenges, despite the significant fiscal boost it has received in recent years, with an increased investment of 50%, from 27,000 million in 2000 to nearly 51,000 in 2008 (Social Indicators. INE. 2010).

The greatest achievements are concentrated in early childhood education: the data provided by the Ministry of Education, Culture and Sports indicate that the enrollment rate at three years is now at 99.1% in 2009-10,

and the number of children enrolled in the first cycle education (for 0-3 years) has increased from 199,341 in 2004-2005 to 398,340 in 2009-2010. The number of schools has also increased significantly; there has been an increase of 1,146 centers between the academic years between 2008-9 and 2010-11.

The main challenge is undoubtedly found in the high school dropout rates that are reflected in the certainly troubling following data:

- The suitability rate (ratio between the actual number of students who are enrolled in the course theoretically appropriate for their age and the total population of that age) at age 15 is 58.6 and almost 40% of children aged 15 has repeated a year (INE. Social Indicators. 2010).
- In 2008-2009, 25.9% of students failed to graduate from ESO and 17% did not complete primary education at age 12 (Facts and Figures of education in Spain. INE).

Many are ongoing measures aimed at alleviating this situation: curricular adaptations, compensatory measures, diversification programs, faculty support, creation of special schools, etc. Regarding this we cannot forget the impulse given to Quality Physical Education programs, as they are an important factor in improving student achievement.

The Committee on the Rights of the Child also provides a recommendation to “*promote professional training and education for children who have left school without a certificate ... to improve their job opportunities*”¹. In this sense, the Initial Professional Qualification Programmes as a measure of attention to diversity. Their purpose is to offer an alternative to students who have not obtained the Certificate in Secondary Education, so they can get a professional qualification to facilitate their access to the labor market. It is primarily aimed at students aged 16 years, in order to educate them on the competences of a Level 1 qualification of the structure of the National Catalogue of Professional Qualifications. During 2011-12 the number of students in these programs was 82,939 (data from the Ministry of Education, Culture and Sports). It is expected that in 2012-13 the number of students in this mode will increase by 1,587 up to 84,526.

Regarding Roma students and according to existing data and reflected in the National Strategy for Social Inclusion of Roma Population in Spain 2012-2020, we see significant progress in the same, especially in schooling in kindergarten and primary education. Enrollment rates in primary education are lower than for the whole population, but have increased significantly in recent years, between 1994 and 2009 there has been an improvement of almost 30 percentage points in the Roma children who have attended child-

¹ Recommendation n. 55

hood education prior to compulsory schooling (87% in 2009). In the case of primary education, schooling of Roma children is practically normalized, although the frequency of truancy and dropping out remains a worrying concern, these phenomena are intensified in the first cycle of compulsory secondary education in which the situation is worse in the case of Roma girls. The presence of young Roma people in post-compulsory education, despite being perceived as a growing trend, it is still rare and the gap with respect to the whole population is large.

In 2007, 1.6% of the Roma population had reached the level of non-compulsory secondary education (baccalaureate, middle level vocational training and the like) compared to 19.4% of the total population according to the annual data from the 2006 Labor Force Survey; in the case of college graduation, the gap was larger: 0.3% of the gypsy population compared to 22.3% of the total population.

The most recent data published in this area, included in the study Roma Population, Employment and Social Inclusion, Fundación Secretariado Gitano, 2011 which uses the methodology of the Labor Force Survey (EPA, by its Spanish initials) show that the differences in the educational level between the Roma population and the general population, although it has been generally reduced compared to the previous study, in 2005, they are still very significant. Thus, the illiteracy rate is almost four times that of the general population (8.6 vs. 2.2). Regarding the highest educational level attained, it indicates that the Roma population with secondary education or higher represent 10%, compared to 45.1% of the general population, according to the EPA of the 2nd quarter of 2011. Only 2.6% of the Roma population has a degree or a higher level of education.

Regarding the inclusion of students with special educational needs and according to statistics from the Ministry of Education, Culture and Sports, 97.4% of these students enrolled in secondary education are in the same center as the population that have no need of special education. In the earlier stages, preschool and primary education, the figures are somewhat lower, 89.4% and 87% respectively. It is also significant the rapid increase in the percentage of foreign students, which add to the difficulties of their migrant status (language, culture...) the deficiencies originated in their education systems of origin. The number of children born in other countries has multiplied by 7 during the period 1999-2010, and now make up 10.02% of the students. The distribution of these students is very uneven, and in some centers almost 90% of the students are foreign, compared to others where there are none or very few.

As for schools, most are public, 69.79% in 2009-10 (Source: Ministry of Education, Culture and Sports), although there is variation by educational stages. Regarding the coverage, during 2009-2010 there were 34.1 places

per 100 children under three years in the whole Spanish territory. Of these, less than half (15.9%) are public. During 2008-2009, the 65.99% of students attending compulsory secondary education did it in a public center and 34.10% in a private one. The average student-teacher ratio has improved significantly and is now at 10.34 students enrolled per teacher in public and 13.44 in private.

According to the Statistic of the Society of Information and Communication in non-university schools during 2009-2010, of the Ministry of Education, Culture and Sports, the average number of students per computer intended for teaching and learning is 4.3, 3.5 for public schools of primary education, 3.8 for the public schools of secondary education and vocational training schools, and 6.7 for private schools. There is a significant improvement over the previous year, especially in public primary education (5.2 in the previous year) and private schools (8.4).

Using data from the same source, the period 2009-2010 is the first in which the number of the computers located in ordinary classrooms (48.4%) exceeds those in specific computer classrooms (26.6%). 90% of schools have broadband, and 49.8% have a connection faster than 2 Mb. These figures represent a significant increase over the year 2008-2009, when 87.1% had a connection faster than 512 Kb connection and only 40.1% at 2 Mb.

In terms of culture, statistical data published by the INE, 2010, indicate that there are 6,608 libraries in our country, having a total 8,963 local service points dependent on these libraries. Of these 4164 are public. The latter had 108,006,723 visitors in 2010 and the number of children enrolled in them was 3,640,159.

Moreover, the study of the Federation of Publishing Guilds of Spain sponsored by the Directorate General of Books, Archives and Libraries of the Ministry of Education, Culture and Sport, said that all children between 10 and 13 years read at least once per quarter. All the children read books, 48% read magazines, and 22.5% read newspapers. In terms of gender, girls read more magazines than boys, while the latter read more newspapers and comics. During their free time, 72% of children are frequent readers (weekly) and 5.5% occasional (monthly or quarterly). The novelty is that 48.7% of them read in digital format.

In connection with sports as a substantial element for the “comprehensive health,” relevant data show the prevalence of sedentary lifestyles among children and adolescents in our country in relation to sports. The Sports Council in its “Study of the sport habits of schoolchildren in Spain” (2011) shows that 46% of schoolchildren in Spain are moderately sedentary (11%) or sedentary (35%). Moreover, the recent study ALADINO, conducted by the Spanish Agency for Food Safety and Nutrition (AESAN, by

its Spanish initials) in 2011, described a prevalence of excess weight (overweight + obesity) in children aged 6-9 years (45.2%).

Objective 7. Promoting actions to achieve the maximum development of the right to health for children and adolescents, from health promotion to rehabilitation, giving priority to the most vulnerable populations

The UN Committee recommended Spain “to continue and intensify its efforts to combat the abuse of psychotropic substances by adolescents, control childhood obesity, and pay close attention to the health of children and adolescents.” Treatment of consumption of substances with addictive potential and childhood obesity are some of the measures included in the objective, and other that relate to issues such as overmedication, promoting health in school, etc.

Currently and according to official data from the INE, life expectancy at birth (2011) in Spain has reached 82 years (85.0 years for women and 79.2 years in men), which puts us at the head of the EU countries with an increase of more than two years since 2000. On the other hand there is an obvious gender difference, always favorable to girls with a gap of six years.

Infant mortality (deaths under one year per 1,000 live births) is one of the highly relevant indicators that is widely used to measure the effect of economic conditions on the health of mothers and newborns and also the quality of health services, disease prevention and health promotion. The evolution of the infant mortality rate in Spain has been falling steadily: in 2011 there were 3.14 deaths, 3.3 per thousand births in 2009, 3.5 in 2006 and 4.4 in 2000. (Source: INE)

Injuries produced by external causes are the most common cause of death in the age group of 1-19 years (the 3rd most common cause of death when you consider the age group of 0-19 years). The data provided by the INE for the year 2010 show that in that year, 445 people died due to injuries from external causes aged between 0 and 19 years. In addition, 32,589 children and young people had to be hospitalized as a result of injury, 90 children under 19 years are hospitalized each day as a result. It is noteworthy that 29,076 of these situations (89.2%) were urgent, according to the MSSSI.

In 2010 pediatricians from the Health Centers of the National Health System offered medical 32.4 million ordinary consultations (non-urgent), with a 5.0 frequenting consultations per assigned pediatric population and year, according to the Information System of Primary Health Care (SIAP,

by its Spanish initials, MSSSI) 2010. According to the Hospital Morbidity Survey (INE, 2010) in 2010 there were 405,334 hospital admissions of children aged 0 to 14 years (232,014 boys and 173,320 girls) (440,902 in 2006, 252,958 boys and 187,944 girls).

Health centers of the National Health System must ensure compliance with the rights of children in accordance with the European Charter for Children in Hospital* (adopted unanimously in 1986 by the Parliament, Council of Europe, UNICEF and WHO) and the Convention on the Rights of the Child of the United Nations* (in force since 1990). Thus, to improve the quality of care in hospital pediatric units based on scientific evidence, on the best available knowledge and good practices, it will be extended until age 18 so that children receive appropriate care to their age and needs, and can be accompanied by the mother, father or relative, participating actively in their care, and collaborating with professionals in the diagnostic tests or therapeutic interventions in any form of care, provided that their situation does not contraindicate it.

In relation to the health of our children and adolescents, the MSSSI has carried out in 2012 a campaign in the website of the Spanish Agency of Medicines and Health Products (AEMPS, by its Spanish initials) in order to warn them on the illegal sale of drugs. This campaign is aimed particularly at young people to let them know why they should buy drugs with guarantees, which may be the health risks of consuming these substances, and what sites sell these illegal products.

Health Strategies in the National Health System incorporates specific recommendations for child and adolescent care.

The NHS Cancer Strategy defines between their lines of work one dedicated to assisting children and adolescents, where such assistance is proposed to be from the start a comprehensive care for children and their family and social environment. In Spain, approximately 1,400 children and adolescents are diagnosed with cancer every year. A serious illness, increasingly curable, requiring complex treatment often long, in the child's life. A disease that affects decisively to the personal and social structure of a family. Today in Spain, 1 in every 2,000 adults is a childhood cancer survivor. Therefore, the goal of pediatric oncology cannot be other than getting the child healed of cancer and helping him to become an adult with a normal life, both physically, emotionally, and socially, an adult with the same rights and duties as their contemporaries who were not sick.

In the Rheumatic and Musculoskeletal Diseases Strategy NHS, despite its low incidence and prevalence compared to other childhood diseases, they are considered a significant health problem for children as they are causing limitations and sometimes important disabilities. In addition, children and adolescents with these conditions require specific and comprehensive atten-

tion, allowing early diagnosis, proper treatment and successful transition to adulthood.

In the Palliative Care Strategy the NHS pays special attention to children and adolescents in advanced and terminal stages, and their families. The death of the child is an event for which the health community and family environment are not sufficiently prepared. Society, in general, does not expect children to die and families, in particular, tend to believe that medicine can cure almost all diseases. These expectations lead to family and medical personnel sometimes to reject a formal transition to interventions that do not target healing. It is therefore important to provide children and adolescents with advanced-stage terminal illness and their families in a time of great need and of special vulnerability, with assessment and comprehensive care at all times tailored to their situation, at any level of care and throughout its evolution.

The Strategy for Addressing Chronicity in the NHS consider the perspective of the life cycle to recognize the social determinants of health that act throughout all stages of development (prenatal, infancy, childhood, adolescence, youth, adulthood and old age) and to promote in health, prevention of disease and adequate access to health and social services, giving priority to the most vulnerable and disadvantaged, strengthening intersectoral collaboration in order to achieve favorable outcomes in health, wellness and quality of life for people of all ages. The Strategy includes as specific recommendations to the pediatric population:

The promotion of collaboration between health and social systems with the educational system, involving families and teachers in the design, implementation, monitoring and evaluation of interventions to promote health during childhood and adolescence

The promotion of participation of children and adolescents, their development and involvement in the decision making on actions to meet their health needs and problems, and the planning, implementation and evaluation of their attention.

The improvement of their transition from pediatric chronic illness to adult consult, making it flexible and individualizing the age limit at which this transition is made.

It is also noteworthy, in line with Recommendation No. 49 for Spain by the CRC, which contained various recommendations on child health, including specifically attention to children's mental health: "The Committee recommends that the State Party having made a national policy on child mental health, including the promotion of mental health and emotional well-being and prevention of common problems of mental health in schools and primary healthcare, and establish professional teams specialized in children's mental health to serve children in need in the inpatient and outpa-

tient services.” In this sense, it provides for the creation of a specialty of child and adolescent psychiatry in the draft RD core, currently in process.

Additionally, the Ministry of Health, Social Services and Equality, in Mental Health of Children and Adolescents is developing three initiatives:

1. Through the update of the Mental Health Strategy of the National Health System, 2009-2013 that includes objectives and recommendations on mental health of children and adolescents. Ten Autonomous Communities have carried out several programs targeted for children, adolescents, parents and youth, both in general and for neighborhoods or situation of social risk. They have launched plans to promote physical activity, a balanced diet, smoking cessation, promotion of healthy lifestyles, prevention of metabolic syndrome in psychiatric patients, programs for health education, and others. Among the list of the guidelines for clinical practice supported by the Ministry are:
 - CPG for Eating Disorders
 - CPG on the management of depression in adolescents
 - GPC on Autism.
 - CPG hyperactivity disorder and attention deficit
2. It has developed a consensus document in the framework of the European Pact for Mental Health and Welfare with the title: “Mental health and education of young people.”
3. The “Report on the situation of mental health care and mental disorders of children and adolescents in Spain” (2009) suggests possible areas of application of the philosophy of the Mental Health Strategy to these groups.

Finally, in 2010 the Guidelines for Clinical Practice on Attention Deficit Hyperactivity Disorder (ADHD) in Children and Adolescents were published, in the framework of cooperation laid down in the Quality Plan for the National Health System of the Ministry, then call of Health, Social Policy and Equality.

In this regard, in the group under 15 years, the number of hospital discharges for mental health disorders are stable, about 3,000 per year. According to the MSSSI, anxiety medication use among children had a prevalence of 10.1% in the last 12 months, compared to 7.4% in 2006. This increased medication has been of concern to the Committee on the Rights of the Child, which recommends increasing access to psychological and social interventions to address mental health problems in childhood (Source: Hospital Morbidity Survey 2010-INE).

HIV, which was a major focus of attention in the past, seems finally controlled for children and new HIV infections in children are practically nonexistent, with only three cases of infection transmitted from mother to child in 2010 according to the National AIDS Registry (MSSSI) as of June 30, 2011. In any case, there are still a significant number of children living with the virus, since the total number of pediatric cases (0-12 years) registered in Spain as of June 30, 2010 is 1,018 (INE Spain's. Statistical Yearbook 2011).

Abortion has been at the center of public debate following the approval of the Organic Law 2/2010, of March 3, on sexual and reproductive health and abortion. According to data from MSSSI in 2011, the rate of under 19 who had abortions that year increased up to 13.67 which represents the highest percentage of teenage abortions in recent years, with a total of 14,586 cases in absolute terms. As indicated by the National Sexual Health Survey of 2009, 71.5% of boys and 69.4% of girls report having kept their first sexual intercourse before age 19 years. These data require measures of information, training, and family, school and social prevention, as support measures for pregnant adolescents and mothers.

In relation to children who use psychoactive substances, the State Survey on drug use in secondary education (ESTUDES, by its Spanish initials) of the Government Delegation for the National Plan on Drugs, offers a very complete overview and it is one of the largest school surveys worldwide. According to the data from this survey and the Survey on alcohol and drugs in the general population in Spain (EDADES, by its Spanish initials), the most consumed drugs by students of 14-18 years (2010) are alcohol, tobacco and cannabis.

In this regard, it has been of special significance the decline of tobacco consumption in 2010, something that started in 2004. So, that year 21.5% of students smoked daily and in 2010 the number had fallen to 12.3%. The percentage of adolescents aged 14 to 17 who reported having consumed alcohol in the past 30 days is 63% (2010), slightly higher than the figure for 2006 (58.0%). The number of those who report having used cannabis is 17.2%, which decreased to 1998 levels. Especially positive are the figures of those who report having ever used cocaine or ecstasy in life, whose evolution has gone down from 5.1% in 2008 to 3.9% in 2010 and 1.9% to 1.7% respectively from 2008-2010. There is a different behavior between girls and boys: the former have a pattern of consumption of tobacco, alcohol, and sedatives (with or without prescription), higher than that of men, while boys are mostly in the consumption of all other substances. However, illegal drugs except cannabis, are consumed by a very small percentage of both sexes.

In the field of road safety, the data provided by the extinct Observatory for Road Safety of the Traffic Department, whose record is systematic, show that the number of children killed and injured in traffic accidents has

declined considerably in recent years. If in 2006, 167 children were killed on the roads, the number dropped to 129 in 2010. Regarding the number of serious injuries, the figures show a decline from 1,091 to 826. Still, traffic accidents are the leading cause of infant mortality in Spain. The latest data provided by the Ministry of the Interior registered 42 deaths under 14 years in 2011 and 39 in 2012.

Objective 8. Encourage child participation by promoting appropriate ecological and social environments that allow the development of their skills, defending the right to play, leisure, free time in equal opportunities and in safe environments, and promoting responsible consumption, both in urban and in rural areas in the interests of sustainable development

Respect for the opinions of children and their gradual participation in society is one of the important recommendations made by the Committee on the Rights of the Child. To accomplish this objective some measures have been included, such as sport facilities for all municipalities, the development of social spaces and playgrounds, and the promotion of volunteerism.

The conditions of the environment where children lives varies greatly depending on aspects such as income level, type of household and even the region of residence. However, we can give some information about areas for which there are basic patterns recorded.

The right of children to participate in civil society, and especially in matters that affect them is being growingly recognized by many government and social actors. In this regard, we should highlight the growing number of municipalities that have already bodies or councils for child participation (12% of a total of 8,144 municipalities) registered through the program “Child Friendly Cities”. The Child Friendly Cities Program is an initiative of the Spanish Committee of UNICEF funded for 10 years by the MSS-SI whose main goal is to promote the implementation of the CRC by the Spanish Local Authorities. Along with this basic purpose and because of it, this program also aims to promote the participation of children in local public life through Childhood Councils or, more generally, forums for child and youth participation created for this purpose. It also fosters networking and facilitates relations between local governments and between them and other parties in the development of the CRC to share information and cre-

ative solutions. During this process 54 Spanish cities have been recognized as “child friendly”.

With regard to child participation in associations, Spain has a long tradition which remains until now. The figures provided by the Survey of Childhood in Spain 2008, a study by F. Vidal and R. Mota indicate that 44% of children between 6 and 11 years say that they belong to a group or association, as well as 31% of those between 12 and 14 years. The authorities have also made efforts to have the child and adolescent perspective in the design and evaluation of policies and services that affect them, but it is a path that has just started and there is still a lot to do until participation is effective and autonomous.

Currently, the area that has more clearly regulated child participation is education, where high school students have clearly defined how they can influence decisions that affect them through school councils. Probably it is over this period when the basis for a new model of decision making that have children as protagonists are created. Play, leisure and recreation can be factors of sufficient physical activity for children’s health, but it is not assured when it comes to children over 13 years and adolescents, and especially female. Therefore it is very important to promote safe environments for children, including strategies to ensure or at least encourage movement and energy use at these ages. In the words of F. Vidal and R. Mota (Survey of Childhood in Spain 2008), sport saves the Spanish association world, both in childhood and in youth and adulthood. According to the study of these authors, 64.5% of children aged 6 to 14 years say that they performs sports activities, figures well above those found for volunteering (8%) or artistic activities (31%).

In many recent regulations adopted by the Autonomous Communities the right to child participation is considered specifically, but even with this regulation, its effective implementation is very diverse and uneven, not only in our country but in others.

Following the instructions and recommendations of international organizations, and taking into account the culture and customs of each country, it is necessary to intensify our efforts to effectively develop this right together.

V. Glossary

AECID	Spanish Agency for International Cooperation and Development
AESAN	Spanish Agency for Food Safety and Nutrition.
CC.AA	Autonomous Communities
CCAI	International Adoption Advisory Council
CC.LL.	Local Governments
CRC	Convention on the Rights of the Child
CEF	State Council for Families
CEOE	Spanish Confederation of Business Organizations
CGA	General Council of the Bar
CGCEES	General Council of Associations of Social Educators.
CIS	Center for Sociological Research
CNIE	National Center for Educational Research and Innovation
COE	Spanish Olympic Committee
CSD	Spanish Sports Council
CSIC	Higher Council for Scientific Research
CSPJ	High Judicial Council
DGECT	Directorate General for Territorial Assessment and Cooperation
DGIO	Directorate General for Equal Opportunities
DGITSS	General Inspectorate of Labor and Social Security
DGM	Directorate General for Migration
DGPAD	Directorate General for Policy Support to Disability
DGPND	Government Delegation for the National Plan on Drugs
DGSFI	Directorate General for Family and Children
DGSPCI	Directorate General for Public Health, Quality and Innovation
DGT	Directorate General for Traffic
DGVG	Government Delegation for Gender Violence
ECAIS	Collaborating Entities for International Adoption
EPE.RED	RED Public Enterprise Body
FEMP	Spanish Federation of Municipalities and Provinces
FGE	State Attorney General
IM	Institute for Women
IMSERSO	Institute of the Elderly and Social Services
INAEM	National Institute of Performing Arts and Music
INC	National Institute of Consumers

INE	National Statistics Institute
INJUVE	National Youth Institute
INTECO	National Institute of Communication Technologies
INTEF	National Institute of Educational Technology and Teacher Education.
MAEC	Ministry of Foreign Affairs and Cooperation
MEC	Ministry of Economy and Competitiveness
MECD	Ministry of Education, Culture and Sports
MEYSS	Ministry of Employment and Social Security.
MHAP	Ministry of Finance and Public Administration
MI	Ministry of the Interior
MINETUR	Ministry of Industry, Energy and Tourism
MJ	Ministry of Justice
MP	Ministry of the Presidency
MSSSI	Ministry of Health, Social Services and Equality
OECD	Organization for Economic Cooperation and Development
ODH	Office of Human Rights
OEVM	State Observatory on Violence against Women
OI	Childhood Observatory
NGO	Non-Governmental Organization
ONTSI	National Observatory of Telecommunications and Information Society
OVDG	Observatory for Domestic and Gender Violence of the CGPJ
PENIA	National Strategic Plan for Children and Adolescents
PESI	Plan for Children Sexual Exploitation
POI	Platform of Childhood Organizations
RTVE	Spanish Radio and Television
SEC	Secretary of State for Communication
SESSI	Secretary of State for Social Services and Equality
SETSI	Secretary of State for Telecommunications and Information Society
SET	Secretary of State for Tourism
ICT	Information and Communication Technologies
TVCCA	Autonomic Televisions

VI. Objectives

The II PENIA provides 8 OBJECTIVES that, although following the parameters of I PENIA, have been grouped and allocated as follows: first, the first general objective has three specific objectives related to the information necessary to carry out all the measures, and coordination and collaboration aimed at their achievement. On the other hand, the rest, which are directly related to improving the protection and good treatment of children and adolescents in the context of their rights.

Also in the last of the objectives have been integrated measures for child participation and appropriate environments, understanding that the latter are the cornerstone of an effective and feasible education as active and responsible citizens.

OBJECTIVE 1: Promote knowledge of the situation of children and adolescents, the impact of childhood policies, making the population aware and mobilizing social actors

SPECIFIC OBJECTIVE 1.1: Knowledge of the situation of children

MEASURES	RELEVANT BODY	COLLABORATING BODY
<p>1.1.1.- General statistical analysis</p> <ul style="list-style-type: none"> - Continue the development of statistical compilations or publications about the “situation of children in Spain “or” Children in figures “on a regular basis in order to establish series. - Offer new statistical information on issues that affect children between 0-18 years, disaggregated by sex, age, disability status and habitat. 	<p>MSSSI (DGSFI - OI) (DGPAD)</p> <p>INE</p>	<p>MSSSI (DGPND)</p> <p>MECD</p> <p>INJUVE</p> <p>CSIC</p> <p>UNIVERSIDADES</p>
<p>1.1.2.- Statistical Bulletin of Measures for Child Protection: Improving the Statistical Bulletin of Measures for Child Protection that offers a more complete description.</p>	<p>MSSSI (DGSFI – OI)</p>	<p>CC.AA</p>
<p>1.1.3. - Statistical Bulletin of Measures Imposed on Young Offenders: Improve the Statistical Bulletin of Measures Imposed on children who have committed offenses.</p>	<p>MSSSI (DGSFI – OI)</p>	<p>CC.AA CGPJ</p>
<p>1.1.4.- Regulate the establishment, between regions and the State Administration of an information system that facilitates the knowledge of the situation of child protection in Spain, both for purposes of compliance with specific measures protection and for statistical purposes.</p>	<p>MSSSI (DGSFI)</p>	

MEASURES	RELEVANT BODY	COLLABORATING BODY
<p>1.1.5.- Development of reports:</p> <p>1.1.5.1.- Periodic preparation of Reports on the Implementation of the Convention on the Rights of the Child and its optional protocols and responses and requests or contributions to rulings requested by the U.N.</p> <p>1.1.5.2.- Participation in negotiations on resolutions and texts on child rights in the United Nations framework.</p> <p>1.1.5.3.- Preparation of responses to questionnaires and other requests from the U.N.</p>	<p>MAEC (ODH)</p>	<p>Departamentos Ministeriales competentes FEMP CC.AA ONG'S</p>
<p>1.1.6.- Knowledge and information sharing internationally: Promote awareness actions, training, best practices and support for networks of organizations and specialized institutions or UNICEF-Spain institutions through the exchange of experiences on the status of the childhood, especially in the neighboring countries (EU) and the countries included as priorities (historical, geographical and sectorial) in the Master Plan for Spanish Cooperation.</p>	<p>MSSSI (DGSFI)</p> <p>MAEC</p>	<p>Red Europea de Observatorios Nacionales de Infancia</p> <p>OI</p> <p>AECID</p> <p>UNICEF</p>

MEASURES	RELEVANT BODY	COLLABORATING BODY
<p>1.1.7.- Registration of cases of sexual exploitation of children: Data collection for the preparation and registration of cases of child sexual exploitation in Spain in connection with III PESI (2010-2013) (Action Plan against Sexual Exploitation, by its Spanish initials), including trafficking cases data among others, which provides direct control, through the Coordinating Board of Immigration, to the State Attorney General over all criminal proceedings of human trafficking in our country.</p>	<p>MI</p> <p>MJ</p> <p>FGE (Coordinating Board of Immigration)</p>	<p>OI</p>
<p>1.1.8.- Knowledge and use of data on gender violence: Collecting statistical data on children and adolescents born to women victims of gender violence.</p> <p>1.1.8.1.- Compilation of statistics on adolescent victims of domestic violence.</p>	<p>MSSSI (DGVG)</p> <p>FGE</p>	<p>MJ</p> <p>MSSSI (OGVM)</p> <p>OI</p> <p>CC.AA.</p>

SPECIFIC OBJECTIVE 1.2: Improvement of childhood policies and their impact through cooperation

MEASURES	RELEVANT BODY	COLLABORATING BODY
1.2.1.- Best interests of the Child: Establish, standardize and systematize criteria for determining the best interests of the child between the different branches of the government and the administration, joining the next legislation review on child protection.	MJ MSSSI (DGSFI)	MSSSI (DGPND) CC.AA.
1.2.2.- Local and Regional Plans: Encourage the development of regional and local plans for children and adolescents, including specific resources (human and material) for execution and analysis of the contents of these plans, and evaluate and disseminate good practices resulting therefrom.	CCAA CC.LL FEMP	OI ONG's UNICEF
1.2.3.- Inter-ministerial Cooperation: Promoting inter-ministerial cooperation to improve comprehensive childhood policies.	MJ MSSSI (DGSFI)	MAEC CC.AA
1.2.4.- Inter-regional cooperation. - Promote inter-regional cooperation, forums for dialogue and exchange of experiences and encouraging consensus. 1.2.4.1.- Inter-regional Cooperation for international adoption: establish lines of action agreed with the regions to provide guarantees in processing adoptions, provide quality attention in the information services, international adoption preparation and processing of application files for international adoption and post-adoption services.	MSSSI (DGSFI) CC.AA	ECAIS

MEASURES	RELEVANT BODY	COLLABORATING BODY
<p>1.2.5.- International Cooperation.</p> <p>1.2.5.1.- International Cooperation for Development: To promote, assist and undertake activities of international development cooperation in a wide-ranging way that incorporates the principles of the CRC participating in international programs embedded in multilateral and bilateral childhood and other specialized instruments and international conventions on the protection of children and youth signed by Spain.</p> <p>1.2.5.2.- International cooperation regarding parental responsibility and child protection: Develop effective channels of cooperation between state and regional authorities relevant in matters of parental responsibility and child protection.</p> <p>1.2.5.3.- International Cooperation in Regard to International Adoption: Promote international cooperation actions (with exchange of experiences and best practices among professionals) in line with principles of the CRC and the Hague Convention on Intercountry Adoption, in order to establish the necessary precautions to ensure that adoptions take place in countries that offer guarantees to safeguard the rights of children.</p>	<p>MAEC</p> <p>AECID</p> <p>MSSSI (DGSFI)</p> <p>MJ CSPJ</p>	<p>MEYSS (DGM)</p> <p>CCAA</p> <p>ONG's</p> <p>ECAIS</p>
<p>1.2.6.- Incorporate a report on the impact on children in the analysis of the regulatory impact of Bills and regulations.</p>	<p>The whole Ministries</p>	

MEASURES	RELEVANT BODY	COLLABORATING BODY
1.2.7.- Information system on international adoption: Promote the development of a swift and efficient information system between countries on procedures and exchange of experiences of international adoption.	MSSSI (DGSFI) MAEC (Directorate General for Spaniards residing abroad and Consular and Migration Affairs)	CC.AA ECAIS
1.2.8.- Childhood Observatory: 1.2.8.1.- Childhood Observatory should become a collegial organ under the terms provided in the legislation (Law 6/1997 of April 14) 1.2.8.2.- Intensify the Childhood Observatory character as a forum for participation between the public administrations and associations.	MSSSI (DGSFI)	CC.AA
1.2.9.- Regional and local observatories: Promote collaboration with the Childhood Observatories of the Autonomous Communities and Local Corporations in order to establish a homogeneous and common system of communication and information on childhood policies of the Administrations.	MSSSI (DGSFI - OI) CC.AA. CC.LL. FEMP	
1.2.10.- Proposal to approve a comprehensive care plan for children under three who suffer from severe disabilities by the Territorial Council of the System for Autonomy and Care for Dependency, with the aim to facilitate early intervention and rehabilitation of their physical, mental and intellectual skills.	IMSERSO	CC.AA. ONG's

SPECIFIC OBJECTIVE 1.3: Promotion of social awareness on the rights of children by mobilizing all actors involved

MEASURES	RELEVANT BODY	COLLABORATING BODY
<p>1.3.1.- Research and data on the social perception of the rights and duties of children: Include questions concerning attitudes and opinions about children and adolescents in other studies and opinion polls.</p>	<p>MSSSI (DGSFI) INJUVE</p>	<p>OI INE CC.AA.</p>
<p>1.3.2.- Awareness on the rights and duties of children: Promote awareness campaigns and actions on the rights of children and adolescents, aimed at the general public and professional groups working with children (police, lawyers, judges...); among them, most notably, the celebration of Universal Children's Day which commemorates the Convention on the Rights of the Child and promote actions that encourage child participation.</p> <p>1.3.2.1.- Provide to the media and the general public, factual information about the conditions of detention of minors and intervention in cases of young offenders.</p>	<p>MSSSI (DGSFI) (DGPAD)</p> <p>MAEC (ODH)</p> <p>MECD</p> <p>CC.AA</p> <p>CC.LL (FEMP)</p>	<p>OI</p> <p>ONG's</p>
<p>1.3.3.- Encourage and support the development of Corporate Social: Responsibility programs for the Spanish entrepreneurs, focused in childhood and adolescence. Programs should promote respect for the human rights enshrined in the United Nations Global Compact and the non-use of child labor by Spanish companies in third countries.</p>	<p>MEYSS</p>	<p>SOCIAL PARTNERS</p> <p>MINETUR (SET)</p>

MEASURES	RELEVANT BODY	COLLABORATING BODY
1.3.4.- Introduce the CRC in university education: Integrate the content and principles of the CRC and its optional protocols on higher education, especially in careers related to the different areas of child welfare and healthy habits, incorporating them in the process of continued training.	MECD (DGPU)	MSSSI (DGSFI)
1.3.5.- Spreading and dissemination actions: 1.3.5.1.- Disseminate II PENIA and the III Plan Against Children and Adolescent Exploitation (hereinafter, III PESI) including versions tailored to the language and format for children and adolescents. 1.3.5.2.- Disseminate reports made in Spain on the implementation of the CRC and its optional protocols, as well as the observations and recommendations made by the Committee on the Rights of the Child 1.3.5.3.- Disseminating the Conventions, Resolutions, Recommendations, EU Regulations and Directives emanating from international organizations and affect children under 18 years (on disabilities, positive parenting, information technologies...) 1.3.5.4.- Web Pages: Encourage the creation of Web pages on rights, duties, needs and interests of children for professionals, parents and child and adolescent public on this issue, and consolidate existing ones.	MSSSI (DGSFI) MINISTRIES CC.AA	OI CC.LL FEMP ONG's CGCEES
1.3.6.- Awareness and promotion of positive parenting. - Take actions and programs that promote educational models in the family to prevent and eradicate violence by encouraging positive parenting.	MSSSI (DGSFI) FEMP	CEF MSSSI (DGVG) ONG's
1.3.7.- Promoting equal opportunities. - Promote activities to defend and promote equality among children, regardless of gender, age, nationality, ethnicity, disability, religion, social or other status, intervening from early childhood to reduce social inequalities. In particular, to promote and disseminate male models of responsibility and family care in order to eliminate gender stereotypes in households daily life	MSSSI (DGIO) (DGPAD) (DGSFI)	CC.AA CC.LL (FEMP)
1.3.8.- Social awareness on children exposed to violence. - We should encourage actions to raise the awareness of children exposed to gender violence in their family context	MSSSI (DGVG)	MSSSI (DGSFI)

OBJECTIVE 2: Support to families

Make progress in the promotion of policies to support families in the exercise of their responsibilities in the care, education and development of children and to facilitate the reconciliation of work and family life

MEASURES	RELEVANT BODY	COLLABORATING BODY
<p>2.1.- Promote studies on the needs of families of the 21st century, both at the national and European level, with particular attention to the orientation, education, special needs of vulnerable groups, family mediation, meeting places and conciliation of family life.</p>	<p>MSSSI (DGSFI) (DGPAD)</p>	<p>CEF ONG's CC.AA</p>
<p>2.2.- Promote the positive exercise of family responsibilities (Positive Parenting) promoting the development of the skills and competencies of parents to carry out their caring responsibilities and education of their children, as well as promoting an environment that supports and enhances this exercise:</p> <p>2.2.1.- Promote and develop multilateral cooperation with all actors involved (Autonomous Communities, local corporations, associations, experts) for the study, awareness, dissemination of information and best practices especially for groups with different needs, such as children with disabilities, professional training and promotion of specialized social services.</p> <p>2.2.2.- Maintain awareness programs and training in positive parenting and education skills and free from violence, with the collaboration of regions, municipalities and associations.</p> <p>2.2.3.- Include positive parenting as one of the strategic lines of the next Comprehensive Plan of Family Support.</p> <p>2.2.4.- Include parental education services and other family support services in the catalog of social services.</p>	<p>MSSSI (DGSFI) (DGPAD)</p> <p>CC.AA</p> <p>CC.LL (FEMP)</p>	<p>CEF ONGs</p>

MEASURES	RELEVANT BODY	COLLABORATING BODY
2.3.- Exchange of good practices in social work with families, including their dissemination, to establish basic principles agreed by all public and private entities involved.	MSSSI (DGSFI) IMSERSO CC.AA	CEF ONG'S
2.4.- Quality criteria for family support services: Establish quality standards in the development of orientation services, family education and meeting places, as well as training professionals to evaluate their effectiveness.	MSSSI (DGSFI) CC.AA	CEF CC.LL (FEMP) ONG's
2.5.- Promote conciliation between work, family and personal life 2.5.1.- Optimize quality services for children schools 0-3 years during the working hours of their parents, thus following the parameters of the European Union guidelines, supporting compliance with minimum standards of quality, staff training and facilities and promoting the exchange of experiences in conciliation and the development of educational and recreational activities. 2.5.2.- Encourage the participation of social partners in promoting the conciliation of work, family and staff. 2.5.3.- Increase enforcement of enterprises in regards to the rights of parents to the conciliation of personal and family life. 2.5.4.- Promote measures boosting flexibility and balance in enterprises, especially in relation to the care of children under 3 years. 2.5.5.- Promote studies or analysis for the rationalization of schedules to facilitate better compatibility of work and family life. 2.5.6.- Promote the participation and responsibility of children in household chores regardless of their gender and in relation to their age.	MECD (DGETC) MEYSS (DGITSS) MSSSI (DGSFI) CC.AA	IM MSSSI (DGSFI) ONG's

MEASURES	RELEVANT BODY	COLLABORATING BODY
<p>2.6.- Participation of families. - Promote the participation of families or guardians with children through associations.</p>	<p>MSSSI (DGSFI) CC.AA</p>	<p>CEF ONG's</p>
<p>2.7.- Assist in the promotion and development of the programs managed by NGOs to: 2.7.1.- Facilitate the compatibility between work and family life. 2.7.2.- Support families or guardians who are in especially difficult circumstances or social vulnerability 2.7.3.- Orientation programs, family mediation and meeting places. 2.7.4.- Support programs for families. 2.7.5.- Support for families or guardians with children with disabilities and/or dependency status. 2.7.6.- Family education programs and positive parenting.</p>	<p>MSSSI (DGSFI) (DGPAD) IMSERSO CC.AA</p>	<p>ONG's</p>
<p>2.8.- Early detection of child abuse. - Promote a system for early detection of gender violence and child abuse in the family environment of children and adolescents with the involvement of schools, the health sector, police and social services.</p>	<p>MSSSI (DGVG) (DGSFI) MI</p>	<p>MECD MJ CC.AA CGCEES</p>
<p>2.9.- Review minimum ages: 2.9.1.- Raise the minimum age for marriage and sexual consent to prevent abuses in the latter case from the older to the younger, and fight against pedophilia, according to the observations of the UN Committee on the Rights of Child and the Council of Europe, reaching agreements with the various political forces in Parliament on the proposals by the MSSSI and the Ministry of Justice. 2.9.2.- Setting a standard with sufficient range to standardize legal age limit to have access to legal substances with addictive potential, in line with the range of legal age, throughout the state.</p>	<p>MJ MSSSI (DGSFI) (DGPND)</p>	<p>MJ</p>

MEASURES	RELEVANT BODY	COLLABORATING BODY
<p>2.10.- Comprehensive care for families and children at risk of social exclusion: Promoting comprehensive care programs for these families and children, combining in a flexible and effective specific attention to families by social services and the intensification of the proceedings toward the most vulnerable groups: children in foreign-born families, single parents, large families, families with unemployed members, children in transition to independent living... among other groups.</p>	<p>MSSSI (DGSFI) IMSERSO MEYSS CC.AA</p>	<p>ONG's</p>
<p>2.11.- Develop a Comprehensive Plan of Family Support</p>	<p>MSSSI (DGSFI) (DGPND)</p>	<p>CEF ONG's</p>

OBJECTIVE 3: Media and Communication Technologies

Promote children's rights and child protection in relation to the media and information technology in general

MEASURES	RELEVANT BODY	COLLABORATING BODY
3.1.- Media: Promoting actions aimed at the media (advertising, video, press, cinema, mobile, Internet ...) to promote values education and children's right with special attention to violent content.	MINETUR SETSI INTECO MP (S de E Comunicación)	OI CC.AA EPE Red.es
3.2.- Develop a critical view of television in the family environment, the school and society at large, which would be constructive, participative and respectful of different children (children with disabilities, ethnic minorities, immigrants, etc. ..) with the collaboration of public administrations, social organizations and media companies, spreading training materials and promoting attractive alternatives for young audiences.	MECD MSSSI (DGPAD) MINETUR SETSI	OI ONG's Empresas y Operadores del sector Telecomunicaciones CC.AA
3.3.- Control and sanction mechanisms for TV programming: Strengthen control and sanction mechanisms for the content of television programming in children prime time, prioritizing content aimed at children and sensitizing parents.	MINETUR SETSI MP (SEC)	OI

MEASURES	RELEVANT BODY	COLLABORATING BODY
<p>3.4.- Internet access: Promote awareness and training activities aimed at children and adolescents, families and teachers to improve Internet access for all and good use with actions such as:</p> <p>3.4.1.- Training for families and children in the proper use of the Internet and its opportunities, taking into account their different capabilities and developing support techniques and design for accessibility for all.</p> <p>3.4.2.- Promote learning the new languages of information technologies and boost access to online educational content based on the principles of universal accessibility and design for all children, avoiding any digital exclusion or inequality (gender/disability) to access and use of new technologies that could lead to double discrimination.</p> <p>3.4.3.- Promote the prevention of abuse or sexual exploitation of children and adolescents through the Internet. Provide training for children and adolescents on the activities and behaviors that may constitute criminal offenses (cyberbullying, grooming, hacking ...) or any unwanted consequence.</p> <p>3.4.4.- Promote access to communication technologies, especially the Internet and other audiovisual media for all children with any disability.</p> <p>3.4.5.- Develop and disseminate guidelines to prevent the abuse of ICT</p> <p>3.4.6.- Promote and develop the presence of the Government Delegation for the National Plan on Drugs in social networks as a way to access the youngest populations in order to raise awareness of the risks of addiction.</p>	<p>MECD (INTEF)</p> <p>MI</p> <p>MINETUR SETSI INTECO (Red.es)</p> <p>MSSSI</p> <p>(DGPAD) (DGPND)</p>	<p>OI</p> <p>ONG's</p> <p>CC.AA</p>
<p>3.5.- Children's opinion about information technologies (hereafter ICTs) Promote studies to elicit the views of children about the opportunities and risks perceived in relation to the media, information technologies and social networks, and their attitude and perception of parental "surveillance" and how to address conflicts arising from excessive or improper use.</p>	<p>MINETUR (INTECO)</p> <p>INJUVE</p>	<p>OI</p> <p>EPE Red.es</p> <p>ONTSI CC.AA</p>

MEASURES	RELEVANT BODY	COLLABORATING BODY
<p>3.6.- Internet Security: Collaborate on improving the levels of network security through dissemination and promotion of filtration systems that can be installed from the servers.</p> <p>3.6.1.- Promote self-regulatory codes and hotlines, by competent agencies and entities.</p>	MINETUR SETSI	MI Companies and operators of telecommunication area ONG's
<p>3.7.- Awareness and training. - Promote professional meetings between media and communication experts and experts in childhood and adolescence through seminars and workshops for the exchange of experiences and good practices, with the aim of analyzing the spaces dedicated to children and the social image that the media project.</p> <p>3.7.1.- Develop a Plan on awareness and training on the use of ICT: Start up this Plan in the schools with the aim of raising awareness about the importance of respecting intellectual property rights and prevent illegal downloads Internet.</p> <p>3.7.2.- To promote the transmission of a positive image of the ICT use in children and adolescents and their families through education and the promotion of professional ethical codes.</p> <p>3.7.3.- Spread a proper social image of children with disabilities (and disability in general) avoiding stereotypes or preconceptions.</p>	MINETUR SETSI INTECO - OSI MP (SEC) MECD MSSSI (DGPAD)	OI CC.AA CORPORACIÓN RTVE FEMP ONG's

MEASURES	RELEVANT BODY	COLLABORATING BODY
3.8.- Children's participation in media: Promote the creation of child participated channels for the development of content in the media, with special emphasis on public media.	RTVE TV CCAA	ONG's CC.AA
3.9.- News on children compilation. - Continue the task of monitoring and compilation news regarding youth in the media and Internet (daily news bulletin) and at the same time, in direct contact with the media for the systematic dissemination of any information or documentation related to the interests and problems of the youth.	INJUVE	ONGs

OBJECTIVE 4: Protection and Social Inclusion

Promote social care and intervention to children and adolescents at risk, vulnerability, disability and/or social exclusion, establishing common quality criteria and shared practices capable of evaluation

MEASURES	RELEVANT BODY	COLLABORATING BODY	
4.1.- Elaborate the Draft Law on Updating of children's protection legislation	MJ	CC.AA	
	MSSSI (DGSFI)	ONG's	
4.2.- Promoting research on risk prevention and vulnerability of children and adolescents in Spain with a special effort to: 4.2.1.- Develop lines of research on domestic violence and in different environments against children (especially those belonging to vulnerable groups, such as children with disabilities, etc.), ill-treatment, sexual abuse and other forms of violence in parent-child relationships or any other asymmetrical power relationship, reflecting the reality of these phenomena nationwide. 4.2.2.- Exploit child abuse data and their types, from the results contained in the Unified Register of Child Abuse. 4.2.3.- Use the Information System of Social Services Users as a source of data. 4.2.4.- Establish uniform criteria for determining the risk, through standard protocols for intervention with children and families.	MSSSI (DGSFI)-OI (OEVN) (DGPAD)	INJUVE MEYSS (Inspectorate of Labour and Social Security)	
	MEYSS	FGE	
			CC.AA

MEASURES	RELEVANT BODY	COLLABORATING BODY
<p>4.2.5.- Conduct nationwide studies in order to assess the possible impact of child labor and its conditions in Spain.</p> <p>4.2.6.- Encourage lines of research on child poverty in Spain and, in particular, on their persistence and intergenerational transmission.</p>		ONG's
<p>4.3.- Quality management of protection services: promote and strengthen quality management systems, evaluation and best practices in programs and services specializing in the protection of minors</p>	CC.AA CC.LL (FEMP)	ONG's
<p>4.4.- Continue undertaking the necessary actions for prevention, detection, care and treatment of abused children</p> <p>4.4.1.- Provide specialized care to children and adolescents who are victims of any kind of violence and protection from their abusers including legal, psychological and social development in order to avoid double victimization.</p> <p>4.4.2.- Conduct awareness campaigns to encourage citizen cooperation in the detection and reporting of abuse situations and reinforce counseling and professional training.</p> <p>4.4.3.- Strengthen a unified national registry of cases, detection and reporting of child abuse and track and inform all agents on the extrapolation of the obtained data and evaluate its effectiveness.</p> <p>4.4.4.- Promote forums to share information on innovative and effective prevention, detection and treatment of child abuse and sexual abuse, with special attention to the situation of children and adolescents with disabilities.</p>	MSSSI (DGSFI-OI) (DGPAD) MJ CC.AA	ONG's CC.LL (FEMP)

MEASURES	RELEVANT BODY	COLLABORATING BODY
<p>4.5.- Develop measures of III PESI: Develop the measures agreed at the III PESI, conduct monitoring and evaluation of it, in collaboration with the Comprehensive Plan against Human Trafficking for sexual exploitation.</p>	<p>Entities Involved in III PESI and Plan against Human Being Trafficking MSSSI (DGVG) (DGSFI-OI) MINETUR (SET)</p>	<p>ONG's</p>
<p>4.6.- Transpose Directive 2011/92/EU of the European Parliament and the Council of 13 December 2011 on combating sexual abuse, sexual exploitation of children and child pornography, in all matters not covered by the legislation, and more specifically, those concerning possible attacks and harassment online, as well as the investigation and prosecution of offenses of alleged child abuse, sexual exploitation and child pornography.</p>	<p>MSSSI MI MJ</p>	<p>CCAA</p>
<p>4.7.- Strengthen the training of professionals and the adequacy of the qualifications of those who work in different areas of intervention services for children and adolescents at risk and social difficulties.</p>	<p>MSSSI (DGSFI) MECD (INTEF) CCAA CC.LL (FEMP)</p>	<p>MSSSI (DGVGI) OI ONG's CGCEES</p>

MEASURES	RELEVANT BODY	COLLABORATING BODY
<p>4.8.- Enhancing the figure of foster care over residential care giving priority, if necessary, to the extended family through the following actions:</p> <p>4.8.1.- Review and update legislation to eliminate the position of pre-adoption foster care.</p> <p>4.8.2.- Establish unified protocols in the treatment of this measure, especially in terms of the criteria for selection and training of foster families, creation of support and care networks for families, both biological and foster.</p> <p>4.8.3.- Encourage and promote specialized foster care (emergency and other) for situations in which because of the child's special circumstances, it is necessary that the person or foster family has a certain aptitude and availability.</p> <p>4.8.4.- Enhance professional foster care.</p> <p>4.8.5.- Promote social awareness to find foster care for families through campaigns in the media and other initiatives.</p> <p>4.8.6.- Harmonization of tax legislation to achieve that children in foster care may have the same tax treatment as biological and adopted children.</p> <p>4.8.7.- Encourage foster care within technical cooperation programs with the State Government, the Autonomous Communities and NGOs.</p>	<p>MSSSI (DGSFI)</p> <p>MJ</p> <p>CC.AA</p>	<p>ONG's</p>
<p>4.9.- Search families of origin: Promote and develop protocols of legislative mediation in the procedures of searching the origins of adopted children in order to ensure, under Spanish law, the right to know their identity.</p>	<p>MSSSI (DGSFI)</p> <p>MJ</p> <p>CC.AA</p>	<p>ECAIS</p> <p>ONG'S</p>
<p>4.10.- Adoption of children with special needs: promote measures for the adoption of children with special needs by raising awareness through campaigns and training professionals throughout the process: from its beginning phase, and monitoring phase to the post-adoption phase.</p>	<p>MSSSI (DGSFI)</p> <p>CC.AA</p>	<p>ONG's</p>

MEASURES	RELEVANT BODY	COLLABORATING BODY
<p>4.11.- Promotion of personal autonomy:</p> <p>4.11.1.- Strengthen programs aimed at the promotion of personal autonomy and provide a context of coexistence and social integration for young people leaving foster care in the process of emancipation, and disseminate good practice and conduct studies to determine the situation of the young population at risk of social exclusion.</p> <p>4.11.2.- Continue with the research on young people at risk of social exclusion, particularly on young people in situations of unemployment and lack of education.</p>	<p>INJUVE</p> <p>CC.AA</p> <p>CC.LL (FEMP)</p> <p>MSSSI (DGSFI)</p>	<p>OI</p> <p>ONG's</p> <p>MEYSS</p>
<p>4.12.- Encourage programs and resources for foreign minors from an intercultural perspective, with special attention to unaccompanied children and children in situations of vulnerability.</p>	<p>MEYSS (SGIE)</p> <p>CC.AA</p>	<p>ONG's</p>
<p>4.13.- Promoting prevention actions of migration of MENAS (Non-accompanied Foreign Minors, by its Spanish initials) in their countries of origin, increasing collaboration and promoting action and bilateral agreements with countries of origin.</p>	<p>MEYSS (SGIE)</p> <p>MI</p> <p>CC.AA</p>	<p>OI</p> <p>MAEC (AECID)</p> <p>ONG's</p>
<p>4.14.- Framework Protocol for Unaccompanied Foreign Minors (MENAS): Develop an Action Protocol, as set out in the Immigration Regulations, Article 190.2 (BOE 30.4.2011)</p> <p>4.14.1.- Working with Security Forces. Strengthen coordination mechanisms between public administrations to improve the functioning OF the MENAS Registry.</p>	<p>MEYSS (SGIE)</p> <p>MI</p>	<p>MSSSI (DGSFI –OI)</p> <p>CC.AA</p> <p>OI</p>

MEASURES	RELEVANT BODY	COLLABORATING BODY
<p>4.15.- Programs for temporary stays of foreign minors in Spain: Consistent with the provisions of the Immigration Regulations, ensure the nature of the programs for a temporary stay of foreign minors in Spain giving them a uniform monitoring and evaluation.</p>	<p>MEYSS (DGM) MI MAEC (Directorate General for Spaniards residing abroad and Consular and Migration Affairs)</p>	<p>CC.AA ONG's</p>
<p>4.16.- Programs for families with children with social difficulties. - Promoting positive parenting programs aimed at providing guidance to these families through skills training and parenting skills to facilitate the preservation and reintegration of children into the family home.</p>	<p>MSSSI (DGSFI) CC.AA</p>	<p>ONG's</p>
<p>4.17.- Care for children with behavioral problems. Regulate, standardize and improve treatment, intervention criteria and agreed procedures with guarantees.</p> <p>4.17.1.- Promote the creation of multidisciplinary teams of professionals specialized in infant mental health and create grants for youth for care and prevention.</p> <p>4.17.2.- Consider measures to improve the care of children with hyperactivity or conduct disorders, both at school and in other areas, by action or intervention protocols with those who have greater difficulties for integration and applying them according to the characteristics of the child or young person to avoid exclusion or expulsion from the compulsory and non-compulsory education system.</p> <p>4.17.3.- Definition of special education centers and legal regulation of protection centers for minors with behavioral disorders.</p>	<p>MSSSI (DGSFI) - OI (DGSPCI) MECD CC.AA</p>	<p>ONG's MJ FGE</p>

MEASURES	RELEVANT BODY	COLLABORATING BODY
4.18.- Residential resources for children: They will be optimized and the quality of residential protection resources for children and adolescents will be increased, strengthening the expertise of these centers and strengthening the leading figure of educators, implementing unified criteria for these quality standards.	MSSSI (DGSFI) CC.AA	ONG's
4.19.- Care for child abuse cases: Encourage the application of protocols and other measures to improve care and intervention in cases of child abuse, including the children of women victims of gender violence.	MSSSI (DGVG) (DGSFI) - OI	MSSSI (OVDG) CC.AA
4.20.- Propose models of intervention to combat child poverty: Develop a practical tool, with the participation of children and adolescents and key actors, to define models of intervention with the excluded child population.	MSSSI (DGSFI) CC.AA	ONG's
4.21.- Incorporate child poverty as a key strategic objective in the National Action Plans for Social Inclusion, considering the annual National Reform Programs under the Europe 2020 Strategy.	MSSSI (DGSFI)	ONG's

OBJECTIVE 5: Prevention and rehabilitation in situations of social conflict

Intensify prevention and rehabilitation activities of children and adolescents associations in situations of social conflict

MEASURES	RELEVANT BODY	COLLABORATING BODY
5.1.- Knowledge about children in social conflict: Promote studies on the situation of the childhood social conflict in Spain and on the analysis of the many factors that influence the occurrence of criminal behavior by encouraging participation and synergy between agents and institutions involved in the intervention process.	MSSSI (DGSFI) CC.AA	MI (General Secretariat of Penitentiary Institutions) MSSSI (DGPAD) ONG's
5.2.- Research on potential legislative changes that can respond to particular behaviors of special severity, with enough amplitude and duration of the measures for the rehabilitation of young offenders.	MJ	MSSSI
5.3.- Increase Technical Cooperation with Autonomous Communities: Promote collaboration with technicians of Autonomous Communities for the exchange of information, data and best practices through spaces for horizontal cooperation, seminars and conferences.	MSSSI (DGSFI) CC.AA	
5.4.- Development of standards and quality requirements: Progress in the development of standards and quality requirements, assessment, monitoring and best practices in the intervention to childhood in situation of social conflict, applicable to specialized services in the implementation of detention, open environment, mediation and extra-judicial correction measures as well as the competent institutions in the criminal liability for minors, by setting guidelines for specific intervention with young offenders, foreign offenders based upon their age, real chances of insertion and access to labor market or preliminary training.	MSSSI (DGSFI) CC.AA	FGE ONG's

MEASURES	RELEVANT BODY	COLLABORATING BODY
5.5.- Judges and prosecutors training: Enhance training actions for judges and prosecutors regarding minors in situations of social conflict and good professional practices, using the most appropriate methodology and tools, including Internet training.	CGPJ FGE	MSSSI (DGSFI)
5.6.- Alternative measures to internment: Promote the development of programs of implementation of measures for minors as an alternative to internment issued by the children's judge and continue with the professional training in Autonomous Communities such as cohabitation as a family, an educational countermeasure non-custodial that is proving big efficiency in the intervention of minors due to ancestor maltreatment.	MSSSI (DGSFI) CC.AA.	MJ CGPJ ONG's FGE
5.7.- Residential equipment program: Promote and develop residential equipment programs for minors in situations of special difficulty or social conflict as well as experimental programs for the application of alternative measures to internment.	MSSSI (DGSFI) CC.AA	ONG's
5.8.- Family support: 5.8.1.- Promote programs to support families with minors in situation of social conflict. 5.8.2.- Promote programs to support families victim of crimes committed by minors. 5.8.3.- Promote programs to support families victim of filio-parental mistreatment committed by minors.	MSSSI (DGSFI) CC.AA	ONG's
5.9.- Crime against sexual liberty: Promote specific programs to treat minors who have committed any kind of crime against the sexual liberty similar to some measures included in the III PESI.	MSSSI (DGSFI)-OI CC.AA	ONG's
5.10.- Prevention of violent groups: Promote actions to prevent and impede the creation of violent and/or organized groups (gangs).	MI CC.AA	ONG's

MEASURES	RELEVANT BODY	COLLABORATING BODY
5.11.- Prevention of risk of social disruption: Develop programs of prevention of risk of social disruption for minors (such as vandalism), as well as socio educational programs and early attention to social difficulties, reinforcing the role of families, school and social educators in order to avoid it causes.	MI MSSSI (DGSFI) CC.AA	MECD ONG's
5.12.- Make use of performing arts, music and sports as a path for education, awareness and formation in values, promoting them in the leisure of adolescent offenders and encouraging educational projects in centers for reeducation and integration.	MECD (S.E CULTURA) (CSD)	CC.AA ONG's

OBJECTIVE 6: Quality education

Ensure a quality education for all children and adolescents characterized by the instruction in values, attention to diversity, progress in equal opportunities, multiculturalism, respect for minorities, promoting equity and compensation of inequalities and helping by a continuous attention, the development of children's potential from the first years of life

MEASURES	RELEVANT BODY	COLLABORATING BODY
6.1.- Early childhood education: Consolidate the free of charge in the second cycle of the early childhood education from three years old and the early attention to minors with any disability to develop their capabilities to the maximum.	MECD MSSSI (DGPAD) CC.AA	
6.2.- Prevention of school failure: Study in depth the measures to prevent school failure and promote success through educational support, supply of resources or research of new organizational solutions as well as the promotion of territorial cooperation programs that are being positive.	MECD CC.AA	ONG'S
6.3.- Student diversity: Elaborate curricular and organizational proposals that deal with the different characteristics of the students and facilitate their improvement and school success.	MECD CC.AA MSSSI (DGAD)	MSSSI (DGSFI) (DGIO) ONG's

MEASURES	RELEVANT BODY	COLLABORATING BODY
<p>6.9.- Reduction of truancy: Collect and analyze best practices experiences related to constant attendance to school and to the reduction of truancy and dropout rates. Disseminate the results and promote its application by implementing preventing and supporting actions in order to avoid early dropout. Also, promote formal education in disadvantaged populations.</p> <p>6.9.1.- Promote actions towards Roma students with high level of truancy and focus its reduction in primary and secondary school. Additionally, promote educational support and school support according to what was established in the National Strategy for the Social Inclusion of the Roma Population in Spain 2012-2020.</p>	MECD	CC.LL (FEMP)
	MSSSI (DGSFI)	ONG's
	CC.AA	
<p>6.10.- Facilitate young people access to any profession without gender discrimination: Implement specific programs to facilitate young people the access to professions that have traditionally been related to a concrete gender and practice a social education regarding the inclusion of this idea. Specially, promote awareness actions as well as education in equity of opportunities between women and men targeted to mothers, fathers, associations and teaching staff in kindergarten, primary and secondary school.</p>	MECD	CC.LL. (FEMP)
	MSSSI (IM)	ONG's
	CC.AA	
<p>6.11.- Integration of diversity: Increase actions that promote and facilitate the inclusion of the foreign students in our system.</p>	MECD	MSSSI
	MSSSI (DGIO)	(DGPAD)
	CC.AA.	CC.LL (FEMP)
		ONG's
<p>6.12.- Integration of the Attention deficit hyperactivity disorder (ADHD) students: Develop actions and programs intended to guarantee the adaption of ADHD students or students with behavior problems, as well as to provide teachers and families tools to support them.</p>	MECD	MSSSI (DGSPCI)
	CC.AA	
		CC.LL (FEMP) ONG's

MEASURES	RELEVANT BODY	COLLABORATING BODY
6.13.- Participation in schools: Encourage process with child participation in schools from primary school with special interest on secondary school.	MECD	ONG's
	CC.AA	
6.14.- Rights curriculum: Promote and create curricular contents in terms of childhood rights for every educational stage as well as duties and responsibilities for children in the educational area. Initial and permanent training programs for teachers will be created and promoted based on the CRC (Convention on the Rights of the Child), and childhood rights and needs.	MECD	ONG'S
	MSSSI (DGSFI)-OI	
	CC.AA	
6.15.- Exchanges programs: Support exchange programs (both for students and for faculty) within the European Union area.	MECD	ONG's
	CC.AA	
6.16.- Non-formal education: Develop non formal education actions in order to favor multiculturalism and the education in values (Program Youth in Action, Program Young Researchers...).	MECD	MSSSI
	INJUVE	(DGIO)
	CC.AA	
	CC.LL (FEMP)	ONG's
6.17.- Gender violence: Prevention of gender violence will be promoted in the educational area by making programs of awareness in schools.	MECD	OI
	MSSSI (DGVG) (IM)	CC.LL (FEMP)
	CC.AA.	

MEASURES	RELEVANT BODY	COLLABORATING BODY
<p>6.18.- Complementary cultural activities: Enable museums and other cultural institutions offer activities to support and complement formal education and that they share their objectives and values in terms of diversity and equity by offering free of charge access to their educative programs.</p>	<p>MECD (SEC)</p>	<p>CC.AA ONG's</p>
<p>6.19.- Promote the transmission of Olympic values as a legacy for the youth. Promote the development and teaching of the values that entails the Olympic spirit such as mutual understanding, friendship, solidarity and fair play, as well as the cultural and humanistic area of sports.</p>	<p>MECD COE</p>	<p>CCAA CCLL</p>

OBJECTIVE 7: Comprehensive health

Promote actions to achieve the maximum development of right to health for children and adolescents, from health promotion to rehabilitation, giving priority to the most vulnerable groups

MEASURES	RELEVANT BODY	COLLABORATING BODY
7.1.- Diagnosis of children and adolescent's health status in Spain: Promote knowledge from a public health perspective taking into account social determinants of health by analyzing inequity in age groups, social level, sex, country of origin and others, trying to establish a base of common indicators.	MSSSI (DGSPCI)	MSSSI (DGPND) CC.AA
7.2.- Prevention of diseases and protection and promotion of health: Promote the development of measures to promote and protect minors' health. 7.2.1.- Promote the coordination of the actions of promoting health and preventing children and adolescent's diseases by paying special attention to the most vulnerable population (early stimulation in minors with any incapability, socially disadvantages families, people with mental health problems, foreign minors not accompanied and ethnic minorities) in the framework of the National Strategy of Promotion of Health and Prevention of Disease. 7.2.2.- Develop actions and educational campaigns directed to prevent risk behaviors and to promote gender equity and non-violent relationships instead. 7.2.3.- Promote the use of children restraint device, helmets, child chairs, elevator cushions, belts in school buses and other security devices in order to prevent car accident injures. Promote the Health Council in this area. 7.2.4.- Promote safety environments in every area and every stage of the child's development. 7.2.5.- Collaborate with the European Child Safety Alliance.	MSSSI (DGSPCI) (DGPND) CC.AA MSSSI (DGSPCI) (DGPND) (IM) MI (DGT)	MSSSI (DGPAD) MECD ONG'S

MEASURES	RELEVANT BODY	COLLABORATING BODY
<p>7.2.6.- Develop actions directed to prevent the consumption of tobacco, alcohol and other psychoactive substances as well as to reduce harms and risks among adolescents that consume them.</p> <p>7.2.6.1.- Establish the field to prevent and the measures to implement in every area to ensure the involvement of other factors in the development of preventive actions facing the start and the consumption of addictive substances.</p> <p>7.2.6.2.- Establish basic mechanisms to confirm the preventive actions that have to be develop in the State so as to guarantee scientific evidence, its efficiency and so as to avoid potential antipreventive actions.</p> <p>7.2.7.- Coordinate actions directed to prevent unwanted pregnancies, HIV infection and other sexually transmitted infections.</p> <p>7.2.8.- Promote the use of the child vaccination schedule and its follow up.</p>		<p>CC.LL. (FEMP) MECD ONG's</p>
<p>7.3.- Prevent over prescriptions and accidental poisoning. Correct diagnosis and treatments, especially those related to ADHD and other difficulties of behavior in order to prevent the abuse on the consumption of substances. Ensure preventive measures in order to avoid accidental poisoning.</p>	<p>MSSSI (DGPND)</p>	<p>MSSSI (DGSPCI) CC.AA.</p>
<p>7.4.- Promoting health at school:</p> <p>7.4.1.- Develop actions that allow to implement policies to prevent addictions in the school environment within a wider strategy that pays attention to the problematic in educative centers, because there are common bases that are underneath facts, apparently unrelated, such as violence in the adolescent stage, consumption of addictive substances and the abuse of new technologies, communication and game.</p> <p>7.4.2.- Promote the creation of school roads in order to develop safety costumes and to favor the acquisition of healthy habits promoting the autonomy of students in their usual route.</p>	<p>MSSSI (DGSPCI) (DGPND)</p> <p>MECD (CSD)</p> <p>MI (DGT) CC.AA</p>	<p>MSSSI (DGPAD)</p> <p>ONG's</p>

MEASURES	RELEVANT BODY	COLLABORATING BODY
<p>7.5.- Promote healthy lifestyles in terms of diet and physical activity:</p> <p>7.5.1.- Healthy diet: Promote a healthy and complete diet in order to prevent childhood obesity and to prevent eating disorders.</p> <p>7.5.2.- Physical activity and Sports for everyone: Promote physical activity and sports practice and leisure as a source of physical and mental health as well as a way to acquire positive values related to that practice such as teamwork, discipline and respect.</p>	<p>MSSSI (AESAN)</p> <p>MECD (CSD)</p> <p>CC.AA</p>	<p>MSSSI (DGSPCI) (IM)</p> <p>ONG's</p> <p>CC.LL. (FEMP)</p>
<p>7.6.- Education for consumption: Promote the development of measures directed to education for consumption of minors, promoting reflexing and sustainable consumption.</p> <p>7.6.1.- Create a school context every year for primary and secondary students.</p> <p>7.6.2.- Collaborate with the ADESE (Spanish Association of Entertainment Software producers and distributors) and with the NGO that protects childhood in order to spread information to video game players.</p> <p>7.6.3.- Create conferences for adolescents to favor a sustainable consumption.</p> <p>7.6.4.- Support the work done by the training team of every Autonomous Community along with the INC (Institute of National Consumption) that aims to educate minors and young consumers.</p>	<p>MSSSI (INC)</p> <p>CC.AA.</p>	<p>MSSSI (DGSFI) - OI</p> <p>CC.LL. (FEMP)</p> <p>ONG's</p>
<p>7.7.- Preventing disease and promotion of health during pregnancy and postpartum period:</p> <p>7.7.1.- Promote a multidimensional attention to pregnant women, healthy lifestyles in women and their families from the beginning of the pregnancy, providing quality information about the process and supporting the development of different skills and attitudes in order to improve costumes, taking into account particular needs and circumstances in every women, preventing risks for the child's health (balanced diet, avoid consumption of tobacco, alcohol, and other toxics...) as well as access to adequate resources both social and economic.</p>	<p>MSSSI (DGSPCI) (DGPND)</p> <p>CC.AA</p>	<p>MSSSI (DGPND) (DGSFI)</p> <p>CC.LL (FEMP)</p>

MEASURES	RELEVANT BODY	COLLABORATING BODY
<p>7.7.2.- Establish measures to support pregnant adolescents and mothers, especially to women and couples in the most vulnerable situation.</p> <p>7.7.3.- Promote the pregnant women's protection facing labor and environmental risks (contact with toxics, postures, lack of iodine..) that may have a negative influence on the pregnancy, the labor or the child's health.</p> <p>7.7.4.- Promote and collaborate with programs that prevent congenital deficiencies.</p> <p>7.7.5.- Early report and identification of women with risk factors, health problems, pregnancy difficulties or fetal symptoms in order to minimize its consequences, facilitate additional prenatal cares in women who need them.</p> <p>7.7.6.- Include measures related to maternity support.</p> <p>7.7.7.- Promote health and wellbeing of women in the postpartum period, facilitating advices and cares, exploring their needs, emotional and psychological changes as well as their situation, breastfeeding and the partner's support.</p>	MEYSS (DGITSS)	ONG's
<p>7.8.- Minors autonomy: Develop measures to promote and protect children and adolescent's health by developing their progressive autonomy and their joint responsibility about their health with proper information for their age and development in an accessible language.</p>	MSSSI (DGSPCI) CC.AA.	MSSSI (DGSFI) -OI CC.LL (FEMP) ONG's

MEASURES	RELEVANT BODY	COLLABORATING BODY
<p>7.9.- Health Strategies: Mental Health and other child and youth population health problems:</p> <p>7.9.1.- Design a Mental Health Plan for Children and Youth aiming to promote positive mental health, prevent mental health problems in the school and in primary care services and to promote the creation of professional teams to take care of childhood mental health problems both out patient and internment.</p> <p>7.9.2.- Improve and amplify services and programs directed to mental health and psychological orientation for children and adolescents, especially for those more vulnerable.</p> <p>7.9.3.- Cancer Strategy of the Spanish National Health System: promote that the attention goes to multidisciplinary areas of oncology. Promote psychological and educational attention from the moment of the diagnosis until its recovery, including the rehabilitation process, if needed. Promote and stimulate integral attention to children and adolescents suffering from cancer in the Spanish National Health System.</p> <p>7.9.4.- Promote the identification of relevant aspects in order to improve the attention to children and adolescents suffering from rheumatic and musculoskeletal diseases as well as their efficient transition to adult life.</p> <p>7.9.5.- Provide young population suffering from large-stage progression of illness and provide their families a valuation and integral attention adapted to every situation, to any existential level and all along its evaluative process.</p> <p>7.9.6.- Include children and young people as a target for the actions directed to stratify the population depending on their sanitary and social needs as a previous step to the design of cost-effective intervention for the different groups of patients adapted to the already mentioned needs.</p> <p>7.9.7.- Develop a project to improve the way to tackle chronic pain in the Spanish National Health System that includes the pediatric age group.</p>	<p>MSSSI (DGSPCI)</p>	<p>MECD</p> <p>MSSSI (DGSFI) -OI</p> <p>CC.AA</p> <p>ONG's</p>
<p>7.10.- Training: Spread CRC (Convention on the Rights of the Children) principles among healthcare professionals as well as the European Chart for hospitalized children and children rights and needs.</p> <p>7.10.1.- Spread knowledge regarding health determinants all along the vital cycle, both to professionals related to children and to population in general.</p>	<p>MSSSI (DGSPCI) (DGPND) CC.AA</p>	<p>ONG's</p>

MEASURES	RELEVANT BODY	COLLABORATING BODY
<p>7.11.- Health equity from birth guaranteeing the best start in children lives in order to maximize their health potential.</p> <p>7.11.1.- Redirect the health system into health equity including promoting and preventing services, guaranteeing equity both in the access and in the quality of health services starting by pregnancy and childhood.</p> <p>7.11.2.- Start the training in health equity by raising awareness in society and in the health area regarding the important of social determining factors in health.</p> <p>7.11.3.- Promote actions related with social health determining factors along the social gradient.</p> <p>7.11.4.- Prioritize prevention and early detection of those conditions highly linked with health inequalities.</p> <p>7.11.5.- Promote literacy and health capacity building in children and adolescents. Strengthen the creation of a health inequity commission in the Interterritorial Council of the National Health System.</p> <p>7.11.6.- Promote childhood equity through a specific group work within the Spanish Health Cities Network that addresses intervention strategies in the short run that can be introduced in the health plans in municipalities in order to provide comprehensive support to children and promote the best start in life.</p>	<p>MSSSI (DGSPCI) (DGPND)</p> <p>CC.AA</p> <p>CC.LL (FEMP)</p>	<p>MECD</p> <p>ONG's</p>
<p>7.12.- Promote education in affective sexual and reproductive health in young people:</p> <p>7.12.1.- Promote educational programs related to affective sexual health adapted to every educational level.</p> <p>7.12.2.- Promote specific programs related to affective sexual education as well as attention and support to pregnant adolescents.</p>	<p>MSSSI (DGSPCI)</p> <p>CC.AA</p>	<p>MECD</p> <p>ONG's</p> <p>CC.LL (FEMP)</p>
<p>7.13.- Improve quality of healthcare in pediatric inpatient units.</p> <p>7.13.1.- Promote attention to minors until 18 years old in pediatric inpatient units.</p> <p>7.13.2.- Promote mother, father or any other relative accompaniment, their active participation in cares and collaboration with professionals in the realization of diagnostic tests or therapeutic interventions in any care modality, unless medically restricted.</p>	<p>MSSSI (DGSPCI)</p> <p>CC.AA</p>	

OBJECTIVE 8: Child participation and appropriate environments

Promoting children’s participation by encouraging appropriate ecological and social environments that allow the development of their skills, defending the right to play, leisure, free time in safe environments, and promoting responsible consumption, both in urban and in rural areas in the interests of sustainable development

MEASURES	RELEVANT BODY	COLLABORATING BODY
<p>8.1.- Children’s opinion surveys:</p> <p>8.1.1.- Make surveys that collect children’s opinion where they express their points of view regarding childhood and adolescents’ situation, the decisions that are taken and that affect them and create specific and efficient tools to strictly evaluate the quality of actions addressed to promote children and adolescents’ participation without any kind of discrimination and guaranteeing that disabled children are able to express their opinions regarding matters that affect them.</p>	<p>MSSSI (DGSFI) - OI (DGPAD)</p>	<p>CC.LL (FEMP) UNIVERSIDADES ONG’s</p>
<p>8.2.- Establishment of participation indicators:</p> <p>8.2.1.- Implement participation indicators systems for children and adolescents in their closest areas that hold variables such as incapability, immigration and ethnic minorities that should be complemented with other broader areas related to childhood and adolescence.</p>	<p>MSSSI (DGSFI- OI) (DGPAD)</p> <p>CC.LL (FEMP)</p>	<p>ONG’s</p>

MEASURES	RELEVANT BODY	COLLABORATING BODY
<p>8.3.- Awareness and training for European citizens:</p> <p>8.3.1.- Realize training initiatives involving awareness in the local area, specially focused on the childhood participation, regarding the situation of child rights and International Cooperation, Development Cooperation and the importance of Decentralized Cooperation as tools to reach the Millennium Development Goals. (MDG)</p> <p>8.3.2.- Create a child participation network aiming to coordinate and launch actions in the state area, in the European area and in other international institutions.</p> <p>8.3.3.- Strengthen the program Youth in Action: Action 1: Youth with Europe, supporting participative democracy projects and youth exchanges in the international level.</p> <p>8.3.4.- Promote trips through the European Youth Card and hostelling networks that have an impact in mobility, culture, participation and communication among young people.</p>	<p>MAEC (AECID)</p> <p>INJUVE CC.AA</p>	<p>MECD</p> <p>MINETUR (SET)</p> <p>ONG's CC.LL (FEMP)</p>
<p>8.4.- Child participation in municipalities and common strategies: Promote that the involvement of citizens is a cross-cutting component in child attention programs, promoting the creation of Councils, child clubs and meeting spaces with other groups in order to optimize dialogue spaces, by informing and spreading its influence to children and adolescents and developing common strategies through local authorities with special mention in rural areas and vulnerable groups such as disabled minors, who usually face more barriers to social participation.</p> <p>8.4.1.- Insist on actions of an alternative leisure to consumption of addictive substances, prioritizing on those addressed to groups suffering a big risk of exclusion. They should be made in problematic areas that tend to accumulate risk factors to the start or the consolidation of consumptions.</p> <p>8.4.2.- Promote training programs for intervention agents in free time and environment with children, insisting on those that develop skills to act with vulnerable populations.</p>	<p>MSSSI (DGPND) (DGPAD) (DGSFI) -OI</p> <p>CC.LL (FEMP)</p>	<p>ONG's UNICEF</p>

MEASURES	RELEVANT BODY	COLLABORATING BODY
<p>8.5.- Sports for everyone:</p> <p>8.5.1.- Promote programs to favor the education in positive values related to sports such as respect, team work and comradeship, mixing therefore the access to “sports for everyone” and the right to play in safety environments without distinctions on grounds on incapability or any other.</p> <p>8.5.2.- Optimize infrastructure for sports practice.</p> <p>8.5.3.- Promote, foster and make use of the resources available and offer maximum chances for sport practice during school days, complementary and extracurricular through the School Network that promotes Physical Education and Sports.</p>	<p>MECD (CSD)</p> <p>CC.AA</p>	<p>MSSSI (AESAN)</p> <p>CC.LL (FEMP)</p> <p>ONG's</p>
<p>8.6.- Development of play center and other educational centers:</p> <p>8.6.1.- Promote the creation and the use of play centers and other spaces so they are accessible to the development of child's skills and that they help to stimulate cohabitation relationships and favor child participation.</p> <p>8.6.2.- Promote websites addressed to people in charge of play centers and to families in order to share the right to play, leisure, free time, and experiences of best practices.</p>	<p>CC.AA</p> <p>CC.LL (FEMP)</p>	<p>ONG's</p> <p>CGCEES</p>
<p>8.7.- Barriers elimination, traffic regulation and pollution control:</p> <p>8.7.1.- Promote barriers elimination in order to favor full accessibility for children and adolescents who are disabled or in a situation of dependence as well as its full integration in their neighborhood, including supervision of traffic rules in urban areas that allow safe movements for everyone and identifying conflictive or dangerous points for them in the urban framework.</p> <p>8.7.2.- Improve security and quality in playgrounds and other public infrastructures for children.</p> <p>8.7.3.- Insist on municipal policies to promote a less polluting environment.</p> <p>8.7.4.- Improve aspects related to road safety favoring that every action in this area lead to a sustainable mobility.</p>	<p>CC.AA</p> <p>CC.LL (FEMP)</p> <p>MI (D.G.T)</p>	<p>MSSSI (DGPAD)</p> <p>ONG's</p>

MEASURES	RELEVANT BODY	COLLABORATING BODY
<p>8.8.- Promotion of reading: Strengthen actions to promote the reading as a tool of personal development, construction of opinion, knowledge and social integration. Actions that imply the family and the educational community and other environments and favor the supply of books of child and young literature as well as the activities in public libraries.</p>	<p>MECD CC.AA.</p>	<p>CC.LL (FEMP) ONG's</p>
<p>8.9.- Promotion of arts:</p> <p>8.9.1.- Progress in the promotion of arts addressed to the active incorporation of children and adolescents, with no distinction, as a tool for their personal development and enrichment facilitating the ways so disabled children can also enjoy participation of cultural assets.</p> <p>8.9.2.- Promote the creation and maintenance of areas and specific services for the attention of children and adolescents in museums, archives, libraries, theatres, auditoriums and other cultural institutions, either by adding routes or adequate tours for them or by offering activities and services that contribute to the enjoyment of their leisure time.</p> <p>8.9.3.- Design a plan of theatre plays for adolescents and young people in the National Company of Classic Theatre.</p> <p>8.9.4.- Establish plans to spread scenic arts and music for childhood and youth through specific cycles and didactic programs in centers of creation and artistic management such as INAEM or in the Almagro International Festival of Classic Theatre.</p> <p>8.9.5.- Promote cultural actions (music, theatre, painting...) taking into account ethnic, linguistic and social diversity, as well as physical, sensitive and intellectual disability in children and adolescents in every level, neighborhoods, districts, municipalities, schools and high schools...</p>	<p>MECD (INAEM) CC.AA MSSSI (DGPAD)</p>	<p>CC.LL (FEMP) ONG's International Festival Foundation of Almagro Classic Theatre</p>

MEASURES	RELEVANT BODY	COLLABORATING BODY
8.10.- Promotion of volunteerism: Promote solidarity attitudes in children and adolescents and their participation in order to favor volunteerism, especially in associations from 14 years old on.	MSSSI (DGSFI) CC.AA	CC.LL (FEMP) ONG's
8.11.- Associationism between adolescents and young people: Promote associationism and adolescent and young participation, especially insisting on it from 14 years old.	INJUVE CC.AA	CC.LL (FEMP) ONG's
8.12.- Program Child Friendly Cities: Continue spreading and implementing the program Child Friendly Cities in order to keep adding cities and autonomous communities to the network. Continue with the evaluation and sustainability of those that have achieved their grade, rewarding those that add a right approach to their municipal policies.	MSSSI (DGSFI) - OI CC.LL (FEMP)	CC.AA MINETUR (SET) UNICEF
8.13.- Responsible consumption: Promote the development of measures addressed to educate for a responsible consumption. Organize annual scholar contest for students in the last years of primary school and the last for years of high school.	MSSSI INC	CC.AA
8.14.- Accessible toys: Promote that every toy is accessible for children with disability through collaboration with manufacturers and raise awareness among distributors of those products.	MSSSI (DGPAD)	MSSSI (DGSFI) CCAA

VII. Monitoring and evaluation of II PENIA

Monitoring and Evaluation Body of II PENIA

One of the key aspects of PENIA II is setting more precise monitoring and evaluation mechanisms of the policies developed in order to assess progresses made in the defense and promotion of the rights of the children.

Once underway, there will be a monitoring about the level of implementation achieved by the objectives and measures to analyze its relevance, efficiency, effectiveness, impact and sustainability. These evaluation criteria will allow us to rationalize the use of resources, to improve quality in services and to have a better view of the transparency of its actions.

Another evaluation axis is to facilitate the involvement of all public institutions and civil society entities, especially the Platform of Childhood Association in order to achieve coherence in child policies as well as consistency between the goals and the identified needs. In this regard, it is essential to listen to children's voices and opinions as active and participative citizens.

This type of continuous evaluation is of vital importance since it will allow implementing the corrective measures needed from potential deviations that may be detected in its implementation. For this reason a Monitoring Committee of II PENIA will be created and it will hold the mid-term and final evaluation. Plan indicators and information provided by every entity involved in its implementation will be taken into account.

Since this type of evaluations are complex due to the amount of factors that influence the promotion achievement and the application of rights, the most appropriate methodology consists on the determination of some specific indicators that provide us the most accurate information regarding its positive impact on children population, especially on children with a vulnerable situation.

Due to that complexity, it would be very useful that the final evaluation was educational and that there were conferences and workshop of information of results that would reach as soon as possible those people who have been part of PENIA as actors, operators or beneficiaries through the most appropriated channels.

Reports will be held in the Childhood Observatory.

Indicators on children situation in Spain

General Indicators

- Population from 0 to 17 years old by sex and age.
- Population from 0 to 17 years old by sex, age and type of disability of limitation (the latter only for minors under 6 years old).
- Births and birth rate.
- Births by the age of the mother.
- Births by mother's place of birth.
- Deaths and children mortality rate by sex and age.
- Main causes of children mortality by sex and age.
- Percentage of children born from foreign mothers by mother's birth place (total and by autonomous community).
- Percentage of foreign population from 0 to 17 years old by sex over the total population (total and by autonomous community).
- Population from 0 to 17 years old by sex and age and type of family nucleus.
- Houses with a population from 0 to 17 years old by number of people that cohabitates and have a familiar relationship.
- Single-parent families with children from 0 to 17 years old by sex from the parent and age of him/her.
- Public expenditure in compensations depending on the family and children as a GDP's percentage.
- Population from 0 to 17 years old assisted by primary social services by age, sex and origin (total and by autonomous community).
- Total expenditure in public and state education regarding GDP.
- Education expenditure by student.
- Quantity of money intended for grants on personal income tax system for programs addressed to childhood sorted by areas.

Indicators by Strategic Objectives

PENIA Objective	Specific indicators by objectives
<p style="text-align: center;">Objective 1:</p> <p>Promote knowledge of the situation of children and adolescents, the impact of childhood policies, making the population aware and mobilize social actors.</p>	<ul style="list-style-type: none"> • Number of coordination or information agents at the state level, in autonomous communities or in local networks. • Number of childhood plans evaluated or in implementation in autonomous communities or in local corporations. • Number of research done and disseminated at the state level addressed to the knowledge of childhood reality in Spain. • Number of awareness campaigns on children's rights. • Instruments or information systems created for monitoring statistics and for collecting data. • Presentation of reports within the deadline to the Committee of the Rights of the Child of the UN. • Number of resolutions and other relevant UN documents where Spain has participated in their negotiation process or for those that some specific answers have been developed.
<p style="text-align: center;">Objective 2: Support families</p> <p>Make progress in the promotion of policies to support families in the exercise of their responsibilities in the care, education and comprehensive development of children, and facilitate reconciliation of work and family life.</p>	<ul style="list-style-type: none"> • Education rate in the first cycle of early education (average school 0.1-2 years). • Number of enterprises holding a responsible family business certification. • Number of training activities and number of professionals that have participated in those activities, regarding the support to the application of familiar responsibilities. • Number of programs and entities funded under the call for grants personal income tax for social purposes in the field of family.

PENIA Objective	Specific indicators by objectives
<p style="text-align: center;">Objective 3: Media and communication technologies</p> <p>Promote children's rights and children protection regarding the media and information technology in general.</p>	<ul style="list-style-type: none"> • Percentage of children in houses without computer. • Percentage of children from 1 to 18 years old users of Internet at least two hours a day during week days. • Percentage of children from 1 to 18 years old consumers of television at least two hours a day during week days. • Percentage of children with a mobile phone from 10 to 15 years old.
<p style="text-align: center;">Objective 4: Protection and social inclusion</p> <p>Promote social care and intervention for children and adolescents at risk because of vulnerability, disability and/or social exclusion, establishing common quality criteria and shared practices capable of evaluation.</p>	<ul style="list-style-type: none"> • Population from 0 to 17 years old with protective measures by autonomous community. • Population from 0 to 17 years old with measures of protection of family care by typology of care (by autonomous community). • Percentage of children in family care in relation to the total of children cared. • Population from 0 to 17 years old in residential care (by autonomous community). • National and international adoptions (by autonomous community). • Number of children from 0 to 17 years old victims of violence (identified by police) in the family area. • Number of complaints by sexual assault to minors under 18 years old by age. • Number of complaints by violence against women with children under 18 years old by age of the child. • Number of complaints by assaults to minors under 18 years old with any type of disability. • Number of children (from 0 to 17 years old) in risk of poverty or social exclusion (according to the EU 2020 definition). • Number of children (from 0 to 17 years old) living in houses where none of the members has a remunerated job.

PENIA Objective	Specific indicators by objectives
<p>Objective 5: Prevention and rehabilitation in situations of social conflict</p> <p>Intensify prevention and rehabilitation activities of children and adolescents associations in situations of social conflict.</p>	<ul style="list-style-type: none"> • Rate of imposed measures (by applying the Law of Criminal Liability of Minors) to children from 14 to 17 years old by every 100.000 children from 14 to 17 years old. • Percentage of interments of young offenders with regard to the total of the imposed measures by applying the Law of Criminal Liability of Minors.
<p>Objective 6: Quality education</p> <p>Ensuring a quality education for all children and adolescents characterized by the instruction in values, attention to diversity, progress in equal opportunities, multiculturalism, respect for minorities, promoting equity, compensation of inequalities and helping by a continuous attention, the development of children's potential from the first years of life.</p>	<ul style="list-style-type: none"> • Percentage of students that have completed primary school at the age of 12. • Percentage of students graduating of Secondary Education. • Percentage of students that finishes the baccalaureate. • Percentage of population from 18 to 24 years old that has completed no more than the first stage of secondary and that does not keep any study or training. • Scholar rate in the first cycle of early education (average school 0.1-2). • Number of children (from 16 to 18 years old) currently working. • Number of children (from 16 to 18 years old) who have worked at least once. • Number of children with special educational needs and percentage of those who are attending special education and integration centers. • Percentage of schools with computer equipment available for students by cycles. • Number of children by educational cycles (Early education, primary school, secondary education, baccalaureate, Training Cycles, Programs of professional qualification and programs of professional qualification for special education) by sex and autonomous communities with support measures for learning by type of measure.

PENIA Objective	Specific indicators by objectives
<p>Objective 7: Comprehensive health</p> <p>Promoting actions to achieve the maximum development of right to health for children and adolescents, from health promotion to rehabilitation, giving priority to the most vulnerable groups.</p>	<ul style="list-style-type: none"> • Number of births for every 1000 girls from 15 to 17 years old. • Percentage of children from 11 to 17 years old with an excellent or good health status. • Percentage of babies that with 6 months are fed by exclusive or mix breastfeeding. • Percentage of children from 6 to 9 years old suffering from obesity or overweight. • Percentage of children from 11 to 17 years old that has suffered or is still suffering any eating disorder. • Number of voluntary terminations of pregnancy in minors under 15 years old and from 15 to 19 years old. • Percentage of children from 14 to 17 years old declaring they have consumed alcohol in the last 30 days. • Percentage of students in secondary schools (from 14 to 18 years old) thinking that consuming alcohol everyday may cause some or a lot of problems. • Percentage of children from 11 to 17 years old declaring that they have felt down at least some time every week during the last 6 months. • Percentage of children from 0 to 4 years old that has suffered an accident at home. • Prevalence of tobacco consumption among students from 14 to 18 years old in the last 30 days: daily smokers, weekly, occasional (less than once a week), non-smokers. • Average consumption of daily cigarettes among students from 14 to 18 years old. • Average consumption of the first cigarette: Age where a young says he/she has consumed a cigarette for the first time.

PENIA Objective	Specific indicators by objectives
<p>Objective 8: Child participation and appropriate environments</p> <p>Promoting children's participation by encouraging appropriate ecological and social environments that allow the development of their skills, defending the right to play, leisure, free time in equal opportunities and in safe environments, and promoting responsible consumption, both in urban and in rural areas in the interests of sustainable development.</p>	<ul style="list-style-type: none"> • Percentage of scholar population that practices any physical activity or sport in an organized manner, apart from school schedule. • Percentage of scholar population that practices any physical activity or sport in an unorganized manner, apart from school schedule. • Percentage of children from 11 to 17 years old who declare to feel good with themselves. • Percentage of children from 11 to 17 years old who declare to agree with the statement "I feel I am free to express my ideas and opinions during my activities in my free time". • Percentage of children from 11 to 17 years old who declare to read books at least once a week. • Number of libraries for every 10.000 children from 0 to 17 years old. • Percentage of early education students who do any extracurricular cultural activity (no a sportive one: theatre, arts, drawing, painting, music, and dance). • Percentage of children from 0 to 15 years old living in areas where green zones are scarce. • Percentage of children from 11 to 17 years old who declare to spend time with parents "just chatting". • Percentage of children from 11 to 17 years old who declare to have a "special friend, someone to trust, someone who makes them feel good and who helps them when they need it". • Number of programs intended to favor children and adolescent participation funded by public administration. • Number of municipal councils intended for children participation. • Number of minors under 14 years old belonging to any association by any activity. • Number of associations created by minors under 14 years old. • Number of Km of cycle paths for every 100.000 inhabitants. • Surface for sports in scholar centers.

VIII. Budget estimate

The characteristics of the measures contemplated in this II PENIA, that pretend to strengthen above all the cooperation among every public administration and the association movement in order to incentive and to improve the situation of the children, make it hard to quantify its costs during its execution process.

Nevertheless the estimation of the cost has been effected based on the information facilitated by Ministries and Autonomous Communities. The already stated estimation, for all the PENIA's contract period, breakdown by objectives is the following:

OBJECTIVES	CENTRAL STATE ADMINISTRATION	AUTONOMOUS COMMUNITIES	TOTAL (*)
1	43.402,46	114.851,63	158.254,09
2	47.892,21	99.508,13	147.400,34
3	18.900,81	3.266,43	22.167,24
4	31.035,15	1.739.502,68	1.770.537,83
5	45.717,50	414.570,19	460.287,69
6	420.700,01	470.534,72	891.234,73
7	55.216,78	1.397,65	56.614,43
8	59.107,67	1.593.472,39	1.652.580,06
TOTAL (*)	721.972,61	4.437.103,82	5.159.076,43

(*) In thousand of euros.

Execution of these measures will be carried out and will be charged to the different public administrations responsible for its implementation. It will be conditioned, in any case, to the achievement of the objectives of the "stability budget" and "financial sustainability". Eventually the development of the measures will be subject to the budget availability and the achievement of these mentioned objectives.

The II National Strategic Plan for Childhood and Adolescence 2013-2016 constitutes a comprehensive instrument for childhood and adolescence policies in Spain and a fundamental tool to apply the Convention of the Rights of the Child. Moreover, this Plan represents a cooperation framework for all the Public Administrations and other social actors involved in the rights of the child.



GOBIERNO
DE ESPAÑA

MINISTERIO
DE SANIDAD, SERVICIOS SOCIALES
E IGUALDAD

www.msssi.gob.es