Poor Children in Malaysia: Their Index of Objective Well-being
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Abstract
The Convention on the Rights of the Child (CRC) reaffirms the rights of every child to fulfil his/her basic needs. The fulfilment of the needs contributes to the subjective and objective well-being of children. This paper, however, focuses only on the objective well-being of children. The objective domains of children’s well-being are a tangible component of their well-being which refers mainly to the physical material requirements for their growth and development. Empirical data for the status of the objective well-being among poor children in Malaysia presented in this paper was derived from the Child Indicators Survey, 2013–2015. The study involved 200 poor children, with an age range of 9 to 17 years from two states in Malaysia, Kuala Lumpur and Kedah. The objective well-being of the children was measured based on the degree of fulfilment of four physical necessities: material, education, health, and access to social services. The findings indicate that poor children in Malaysia experience a satisfied level of objective well-being. The result implies that even though they are poor, their quality of life is on a par with the quality of life of children in some advanced countries. The result is valuable input to social initiatives meant for social policy reform, in particular, the National Child Policy and the child welfare system of the country. It is also of great importance for planning effective social intervention programmes to enhance the quality of life among Malaysian children.

Introduction
According to the Convention on the Right of the Child or CRC 1989, every child has the right to get sufficient basic needs to live. CRC is an international convention on the rights of civil, political, economic, social and cultural services to children from birth until they reach the age of 18 years old. The main objective of CRC is to ensure that children enjoy all human needs, are protected from all forms of threats and social danger and have the opportunity to develop their potential, so they can grow up to be productive adults socially and economically. In some developed countries such as Sweden, France and Britain, CRC provides a framework for all initiatives to improve the quality of life or well-being of children. Studies on the indicators of children’s well-being that have been made by researchers such as Bradshaw, Hoelscher and Richardson (2007), and Swords, Greene, Boyd and Kerrins (2012) show that the level of children’s well-being is good when all the basic needs and their rights are fulfilled.

From the social policy viewpoint, children’s well-being refers to the extent to which a child's welfare is fulfilled based on the indicators of quality of life (Ben-Arieh, 2006). From this viewpoint, children’s well-being refers to the extent to which the needs of children are fulfilled and the right set of services needed by children can be accessed (Richardson, 2009). Children’s well-being is also associated with welfare and justice for children besides concerning the agency responsible for their welfare.

Objective indicators of well-being are factors that can be observed, such as academic achievement, family income, family structure and health status (Haq & Zia, 2013; Statham & Chase, 2010; Thompson & Aked, 2009). The dimension of objective well-being involves measurable things (Camfield, Streuli, & Woodhead, 2008). In addition to the aforementioned, objective well-being also includes medical records and national statistics.
about things such as infant or child mortality, criminal records and drug abuse (Pollard & Lee, 2003; Thompson & Aked, 2009). The four indicators of objective well-being among children discussed in this paper are: material, education, health, and access to social services.

**Material**

In evaluating the well-being of children in terms of material, physical requirements to enable children to develop properly and possession of material, particularly essential items should be considered. These items include school equipment, personal reading materials, pocket money, own bed and bedroom, new clothes and sports equipment.

**Education**

Education is one of the requirements for development. Every child deserves the opportunity for education. Well-being in education is typically assessed by determining whether children are given the opportunity to attend school and receive training in life skills during their school age.

**Health**

Health in children’s well-being includes items related to a balanced diet, intake of nutritious food such as fruit, vitamin intake and the supply of medicines at home if they are sick.

**Access to social services**

According to Pedace (2008), well-being should also consider the extent to which children can enjoy services related to their daily lives. These services include transportation to school, health and dental care services, public libraries, children's activity centres, shops that are close to home, clean water and insurance scheme contributions.

**Literature review: Objective well-being index of poor children**

The Convention on the Rights of the Child (CRC) provides a normative framework in understanding the well-being of children (Ben-Arieh, 2006; Bradshaw et al., 2007). According to this normative framework, the welfare of the child should be evaluated based on four principles. These principles are:

i. No discrimination (Article 2): all children should be treated equally and enjoy every opportunity to live without discrimination.

ii. Children’s best interest (Article 3): in all actions concerning children, the best interests of the child shall be a primary consideration.

iii. Life and healthy development (Article 6): every child has the inherent right to life, and to the maximum extent possible the healthy development of the child should be ensured.

iv. Respecting views and opinions of children (Article 12): the opinions and views of children are respected.

These four principles should be used as a foundation to enable children to enjoy their rights. The rights include being given an equal opportunity to participate in political, social, economic and cultural activities (Pathmanathan & Siti Hajar, 2013). The maintenance of these rights is important for the well-being of children, and they are closely related to the opportunity for children to grow properly.
In several developed countries such as Sweden, France and Britain, CRC provides a framework for all initiatives to improve the quality of life or well-being of children. Studies on the indicators of children’s well-being that have been made by researchers such as Bradshaw et al. (2007) and Swords et al. (2012) show that the level of children’s well-being is in a good condition when all their basic needs and rights are fulfilled.

In Britain, for instance, children’s well-being is linked with children who are healthy, grow up in a safe and comfortable social environment, enjoy a stable family, have good academic achievements and make positive contributions in their everyday life (Bradshaw et al., 2007). Meanwhile in Ireland, children’s well-being is linked with the children having their material needs fulfilled, being able to engage in recreational activities, having a good relationship with their family, being able to go to school, and having prosocial peers (Swords et al., 2012). UNICEF (2007) explains that children live well if they can grow up in a happy and loving family environment, get basic needs such as adequate food, beverage and clothing, stay in an appropriate home, are protected from any form of exploitation and physical or emotional violence, and obtain proper health, social and education services. If these aspects are not met, the children’s well-being can be seen as being affected or at a low level which is not good (Bradshaw et al., 2007; Swords et al., 2012; UNICEF, 2007).

Malaysia is not lagging behind in ratifying the CRC. Malaysia ratified the CRC in 1995 (Pathmanathan & Siti Hajar, 2013). This means that the country also recognises children's right to get their basic needs and every opportunity to live and grow well. However, unlike CRC member states such as Britain and Sweden which are keen to collect the well-being index of their children in ensuring that their quality of life is in line with the CRC’s recommendations, Malaysia has never done extensive research on the well-being of its children. Only Pathamanathan and Siti Hajar (2013) conducted a study at children's homes in Malaysia to examine the extent to which the children in institutional care have all the four rights of the children recommended by the CRC. This means that Malaysia still does not have a comprehensive index specifically about the well-being of its children which can be used as an indicator for each action concerning the welfare of children in the country.

Surveying and constructing a child well-being index in Malaysia will be in accordance with the legislative framework of the rights and needs of children as recommended by the CRC. Besides the CRC, the child well-being index in other countries is also built according to the theory of development recommended by UNICEF. UNICEF (2013) stated that the assessment and construction of a well-being index must consider the level of development of the country in which the child grows up. Based on these recommendations, the current study builds and measures a child well-being index based on the nation’s development.

**Research Methodology**

Malaysia still does not have a comprehensive specific index about the well-being of its children which can be used as an indicator for each aspect concerning the well-being of children in the country. The absence of a clear and comprehensive child well-being index in Malaysia hinders service executors or child welfare service agencies from taking appropriate actions and interventions to react to any form of social problems among children. The absence of a comprehensive database on the state of children’s well-being in Malaysia has prompted a group of researchers from the Department of Social Administration and Justice, University of Malaya, to conduct a national survey to build a child well-being index in the country. The most fundamental question to be answered by the study is: *What is the status of children’s well-being in Malaysia?* Data collection on the status of children’s well-being is then led to the construction of a comprehensive quality of life index of children in Malaysia. Just as in developed countries which have a complete
well-being index of their children, this index can be a master plan for action (blueprint) on social policy related to the well-being of children in Malaysia. However, this paper will only focus on one domain of well-being, which is objective well-being.

**Research location, research samples and sampling techniques**

For the objective domain, the study in 2013–2015 examined the relationship between social participation and quality of life of poor children in Malaysia. The survey was conducted between June and October 2014, and it selected children from families participating in the public housing project because they had been identified as being poor or having a low socioeconomic status, based on qualifications to inhabit housing. Low socioeconomic status can expose children to risks that may affect their well-being. A total of 200 children respondents (44% male and 56% female) were selected in this study. Their age range was between 9 to 17 years with the average age 13.5 (s.d. 2.71).

There were two types of sampling involved in the process of data collection. The first sampling technique used was simple random sampling. This technique was used to choose the PPR (Projek Perumahan Rakyat, ‘Citizen’s Housing Project’) to be involved. The PPR lists were divided into two groups namely rural and urban areas. Then, the researchers selected a location representing a city and a rural area respectively. The selected locations were PPR Lembah Pantai in Kuala Lumpur (urban) and PPR Paya Nahu in Kedah (rural). The second step was to select families with children aged between 9 and 17 years old from the lists of PPR Lembah Pantai and Paya Nahu. In this situation, systematic random sampling was used. The researchers obtained the household information from respective operation offices or resident representatives in the involved locations. From that list, the researchers chose families that were in the even number list which had children aged 9 to 17 years old. If the selected families did not have children aged 9 to 17 years old, the researchers chose the next even number until there were 100 families for each location. Thus, 200 families were selected as the samples for those two areas, and a child who was between the age of 9 to 17 years from the families was chosen to be the respondent.

**Ethics and procedures**

Before conducting the questionnaire, the researchers obtained written permission from the parents. The respondent’s mother/father had to complete and sign a consent form as an agreement that they allowed their children to be the respondents.

**Instrumentation**

This study built the Child Well-being Index on its own. In order to produce a comprehensive measurement, this study was inspired by seven existing instruments concerning the well-being of children, namely: Ireland Child Deprivation Index, Child Well-being Index, UNICEF Child Well-being Index, South Africa Index of Multiple Deprivation for Children, Child Deprivation Index, Child Maltreatment Risk Inventory and America’s Children Key National Indicator of Well-being. The researchers combined and adapted some of the components and indicators in these standardised instruments according to the appropriate socio-cultural context in Malaysia to produce a comprehensive instrument to measure the well-being of children in this country. There are six well-being components in the index that was built, but this paper focuses only on four components that represent the objective well-being: material, education, health, and access to social services. The number of items for the objective domain is 59.
A fully structured questionnaire was given directly to the respondents. The trained field workers who were supervised by the researchers sat together with the respondents until the questionnaire was completed. For respondents who had limitations in reading and/or to understanding the questions in the instruments, field workers read the questions one by one and the respondents gave their answers respectively until all the questions were answered.

**Data analysis**

All quantitative data were analysed using Statistical Package for Social Sciences (SPSS) version 21. There were several descriptive analysis involved in the analysis of data in this study.

**Research findings and discussion**

Children’s well-being must consider all the objective (tangible) and subjective (intangible) aspects that overlap and affect their daily living conditions. On this basis, measures or indicators of child well-being can be classified into two types: objective indicators and subjective indicators. Children’s well-being measurement covering both types of indicators can create a comprehensive child well-being index. However, this paper focuses on the objective aspect only.

The method of calculating the percentage of children’s well-being in this study was as used in previous studies by Bradshaw et al. (2007), McLaren (2007), UNICEF (2013), UNICEF (2007), OECD (2009) and Pedace (2008). Based on these studies, the well-being of children is arranged as follows (Table 1).

<table>
<thead>
<tr>
<th>Score (%)</th>
<th>Well-being level</th>
</tr>
</thead>
<tbody>
<tr>
<td>≥ 81%</td>
<td>Very high</td>
</tr>
<tr>
<td>75% – 80%</td>
<td>High</td>
</tr>
<tr>
<td>41% – 74%</td>
<td>Moderate</td>
</tr>
<tr>
<td>20% – 40%</td>
<td>Low</td>
</tr>
<tr>
<td>≤ 19%</td>
<td>Very low</td>
</tr>
</tbody>
</table>

**Table 1: Scale of Child Well-being Level**

Overall, the percentage of child well-being in this study was 75.5% (Table 2). Based on the determinants of levels, records and assessment in the studies that have been mentioned in the paragraph above, we can conclude that the well-being level of children in Malaysia is at a high level.

<table>
<thead>
<tr>
<th>Well-being component</th>
<th>Well-being Level (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Overall</td>
<td>75.5</td>
</tr>
<tr>
<td>2 Objective</td>
<td>77.2</td>
</tr>
<tr>
<td>3 Subjective</td>
<td>72.3</td>
</tr>
</tbody>
</table>

**Table 2: Well-being Level of Children participated in the Study**

Data from UNICEF (2013) and Bradshaw et al. (2007) show the well-being level of children in the world (Table 3). Although Malaysia is not included in their study, the findings of this study illustrate that the well-being of children in Malaysia is on a par with children in the countries listed in the top five in Table 3.
### Table 3: Well-being Level of Children at the International Level
(Source: UNICEF (2013) & Bradshaw et al. (2007))

This study found that the level of objective well-being of children involved was high: 77.2% (Table 2). These findings directly demonstrate that Malaysian children enjoy all the needs of material, education, health and access to services that they require. In other words, there is no deficit in fulfilling the basic material/physical needs of Malaysian children.

Table 4 shows the position of Malaysia for objective well-being (for material, health and education) among countries in the Asia Pacific region. Data in 2009 showed that Malaysia is in the range of the eighth to eleventh position for all three aspects of the objectives. The data, however, was taken from data the OECD and UNICEF, and there were a few limitations such as not evaluating all aspects of well-being, bias towards the older child/adult, involving small samples and including states where their children’s stage of development are not the same (Bradshaw, 2009).

### Table 4: Objective Well-being Level of Children in Asia Pacific Countries
(source: Bradshaw (2009))

However, compared to backward countries such as Laos, Cambodia, Mongolia and the Philippines, the situation in Malaysia in the context of this study is much better for objective well-being. Children in such countries suffer from various shortcomings such as food, health, education and information, and their well-being is at risk of being affected (UNICEF, 2011). In Cambodia, for example, 64% of children experience serious shortages of clean water, 21% of children do not get vaccinated, only 10.8% of them finish primary school, and 8% have never attended school (UNICEF, 2011). In contrast to children in Malaysia, the findings of this study indicate that all (100%) of the respondents have a supply of clean water and complete their primary school, and 87% gain immunisation from the Ministry of Health Malaysia.
Components of objective well-being in this study were classified into four components; material, education, health, and access to services. Items included that can be observed include: having school supplies, attending school, eating breakfast in the morning, and getting help (Haq & Zia, 2013; Statham & Chase, 2010; Thompson & Aked, 2009). Items also involved things that can be measured numerically (Camfield et al., 2008). In addition, objective well-being can also be identified based on records or written reports (Pollard & Lee, 2003; Thompson & Aked, 2009).

As mentioned, the overall percentage of objective well-being in this study is 77.2%, which is high. This illustrates that the children in this study have sufficient physical and material needs that enable them to reach a high level of well-being. The following section will detail the components of objective well-being.

According to Maslow’s Hierarchy of Human Needs Theory, material is one of the fundamental needs that is essential to an individual’s well-being. Sufficient material needs promotes a condition of good well-being for children (Bradshaw et al., 2007). Material well-being is measured by the extent to which the respondents receive their daily physical needs adequately. Indicators for the material aspect include school supplies, physical facilities at home, and daily use goods that help their development or allow them to live comfortably.

Malaysia’s Education Policy stipulates that the age of 7 to 17 years is the age of compulsory schooling for all children in Malaysia (Ministry of Education, 1999). Determination of nine years as a period for children to have the opportunity of basic education is one of the implementation strategies adopted by the Ministry of Education (Ministry of Education, 1999). Whether in government or private schools, children who are in that age range have the right to education.

The Convention on the Rights of the Child (CRC) 1989 also states that all children have the right to develop their potentials physically, mentally and socially (UNICEF, 2009). This right is vital for them to reach their high potential. The opportunity for education is one of the things that need to be fulfilled to enable children to achieve that right. Article 28 of the CRC declares:

> children have the right for educational opportunities. Primary education shall be compulsory and available free to all children. Children also have the right to access to different forms of secondary education, including general and vocational education.

As a result of the fact that education is one of the fundamental needs for children’s self-development, education has become one of measures for their well-being. Children’s ability and accessibility to the opportunity of going to school at their age for school are often measured to assess their well-being. In addition, there are three other items for education well-being: the accessibility of children to life skills training, tuition (paid) and classes on religion. Adequate educational needs will lead to the well-being of children (Bradshaw et al., 2007). Educational needs in this study were measured by determining whether the child is still in school (formal) or not while in the age for school. A total of 190 respondents (95%) in this study were still continuing their school when the study was conducted, and a total of 10 respondents (5%) were not in school due to several reasons such as not being interested in education and wanting to go out to work.

Health is also one of the objective indicators for the well-being of children. Health is also the basis for the development of social well-being concept (Statham & Chase, 2010). Well-being from the health aspect in this study was measured by the extent to which respondents get the needs that are related to health care such as health screening, access to clean water, eating breakfast, and getting a balanced diet.
Well-being from the aspect of access to social services is measured by the extent to which children can enjoy services that are related to their daily lives. From social policy, children’s well-being in this aspect refers to the extent to which the children can access a series of services that they deserve (Richardson, 2009).

Generally, services for children focus on two things: improving the function of families and children, and services delivered to meet special needs (Dolgoff & Feldstein, 2000). Examples of services that can improve the function of family and children are tuition and counselling. Examples of services that can fulfil children’s special needs are shuttle services to their school and a free milk programme.

Child welfare services in this country include care and protection from all types of hazards including abuse, torture, violence, discrimination and exploitation (Pathmanathan & Siti Hajar, 2013). In the context of this study, examples of suitable welfare services for children of primary and secondary schools are: insurance contributions, counselling services, and the provision of transport services to schools. In addition, services for children also focus on the development of children’s physical, emotional and mental health (Pathmanathan & Siti Hajar, 2013). Examples include children’s activity centres and libraries for children.

According to Maslow’s Hierarchy of Human Needs Theory, objective well-being is a component that represents the fundamental need for children to live well. Overall, the study found that the level of objective well-being of participating children is at a high level (77.2%). This means that these children can enjoy basic physical needs such as material, education, health and access to social services that they require. Even though the children who participated in this study come from families of low socioeconomic status, their objective well-being is high. Therefore, they can survive comfortably.

Proposed Intervention Plan
Risk factors that may threaten the objective well-being of poor children can be alleviated through the three following interventions:

i. Poverty alleviation programme for children
ii. Diversification of social assistance for children
iii. Improving the system of child welfare services

Poverty alleviation programme for children
Poverty is one of the risks that hinder children’s well-being. Poverty can be eliminated with effective anti-poverty programmes. The existing anti-poverty programmes in Malaysia refer to programmes which were targeted in the New Economic Policy (1970-1990) and the National Development Policy (1991-2000). Poverty alleviation programmes are important to ensure that the well-being of community members is in a good condition because these programmes can increase income and employment opportunities, and they also provide educational opportunities and job training for people in need.

The researchers would like to highlight the example of efforts in some developed countries in overcoming poverty and at the same time preserving the well-being of children. Britain, for example, provides financial and material assistance to citizens to help them get out of poverty. This is because they want their children to live well. In Britain, a total of 30% of children lived in poverty in the 1970s (Social Mobility and Child Poverty Commission, 2013). Since then, the number of children living with families earning less than half of the national average income has doubled (Social Mobility and Child Poverty Commission, 2013). To respond to this problem, the British government has made various
efforts to safeguard these children. Four important efforts made in the past were improving education and health services, providing a support system for working mothers, addressing youth crime, and creating The Child Act 1989 (Fauth, Renton & Solomon, 2013). The British government also strengthened the system of children's services by providing some essential services such as early childhood education, children's social care, adoption, family support, support for children with special needs, and services to eradicate child poverty (Fauth et al., 2013).

Poverty eradication strategy among children in Britain does not focus on the children alone. Besides focusing on the child as an asset to the community, the British government also gives attention to external sources, which are the family and the surrounding community. This is because, according to the ecological perspective, children should grow up in a loving family environment, safe and free from persecution, and this is important for their well-being. In addition to a supportive social environment, children also require the individuals who take care of them to provide basic needs such as food, clothing and shelter. Thus, besides providing various forms of assistance and services to children, a focus is also given to efforts in raising the living standards of families and various preventive measures are taken to avoid poor children becoming poor adults. One of the aids is Employment Support Allowance, which is the allowance for assistance to less fortunate mothers/fathers/guardians who are just starting a job. In addition, the Universal Credit provides help to families at risk because the head of the family is unemployed or does not have a fixed job. On the other hand, the Job Seekers' Allowance is an allowance which is given to individuals who are actively seeking jobs and go to employment centres in search of work. The implementation of programmes and provision of such assistance has contributed to a decline in relative child poverty from 21% in 2004/2005 to 17% in 2011/2012.

Just like the rest of Britain, Scotland makes continuous efforts to eradicate child poverty. This is because between 19% and 22% of children in Scotland were classified as poor in 2013 (Clackmannanshire Council, 2015). Just as in the rest of Britain, the eradication strategy of child poverty in Scotland is not focused on the children alone. The Scottish government adopts various strategies to address the problem (Clackmannanshire Council, 2015). The first strategy is to increase job security and ensure that workers receive an appropriate income. In this strategy, the Scottish government has recognized that a low income and poor job insecurity are two of the main causes of poverty. Therefore, the government introduced some forms of assistance such as the Child Tax Credit and the In-work Emergency Fund Payment. The Child Tax Credit is the provision of cash benefits to families with children under 16 years old or 20 years old if the children continue their studies or receive vocational training. The In-work Emergency Fund Payment is an incentive given to parents who are just starting a job, starting a business, or switching from salaried employment to self-employment.

The second strategy is to provide adequate social security benefits to ensure that children do not suffer from poverty. The aid introduced is Child Benefit (cash benefits to caregivers who live with the child and care for them), Child's Special Allowance (cash benefits to mothers/parents who are divorced but keeping the child as long as the guardian has not remarried), Maternity Allowance (an allowance for pregnant women who do not work, are self-employed or employed but do not receive any form of benefits as a mother), Guardian's Allowance (an allowance to caregivers who are raising children after the mother/father of the child has passed away), Back to Work Bonus (an allowance to parents who return to work) and Housing Benefit (providing residential areas equipped with basic amenities).
The third strategy is to provide affordable child care services since many women are involved in the formal employment sector. As support for children’s care needs, the government also introduced Free Early Education and Child Care for children aged 3 to 4 years old for 15 hours a week for 38 weeks a year. In addition, there is the Child Care Grant for students who have children studying in higher education institutions, totalling £150 for one child and £257 for two or more children.

The fourth strategy is to eliminate financial barriers to education. Among the schemes offered through this strategy are Free School Meals offered in schools, and the School Clothing Grant, which is assistance for buying school uniforms for low-income families (Clackmannanshire Council, 2015).

In short, the government plays an important role in helping families to fulfil the needs of children so that their welfare is maintained. However, continued effort and meticulous planning is required to ensure that children can continue to prosper.

In the Malaysian context, among the anti-poverty programmes aimed specifically for poor children are Assistance for Children, the Poor Students Trust Fund and the Supplementary Food Programme. Meanwhile a programme focused on poor families is the Public Housing Program. However, there are some limitations in the programme. For instance, not all qualified children have the opportunity to obtain the assistance offered. Several reasons for such limitations are inadequate provision, the information does not reach the applicants, and the application is not processed due to inefficiency in the service.

Undeniably, both programmes of poverty alleviation and socio-economic development clearly help to reduce the poverty rate and improve the economy of the country. As evidence, the poverty rate of 49.3% in 1970 was reduced to 17.1% in 1990 and then to 1.7% in 2012 (Department of Statistics, 2012a). Real per capita income of Malaysians has increased from RM13753 in 2001 to RM18294 in 2010 (EPU, 2011). The reduction of poverty rate and expansion in the economy have helped improve people's standards of living as well as improve the well-being of children.

After almost 45 years (1970–2015) since Malaysia implemented poverty eradication programmes and socio-economic development, poverty as one of the risks that hinder children’s well-being has been reduced. This shows that the programmes are effective. However, poverty still occurs in the country due to various factors such as the impact of the global economy and increasing living standards that shrink the value of currency and constrains citizens from fulfilling their needs. There is also a large gap between the poverty line (RM860 in 2012) and the mean household income (RM5000 in 2012). The gap clearly shows that the problem of poverty in the country should still be addressed despite rising living standards among some citizens (Department of Statistics, 2012b).

Therefore, the researchers recommend that the government should continue both poverty eradication and socio-economic development programmes for the benefit and well-being of its people. This is because developed countries such as the United Kingdom are still continuing their anti-poverty programmes. The researchers suggest that the government should shift the focus to programmes that are in the form of skills training and education investment because these forms of aid are more effective in helping people to survive. In other words, the government should help the poor families to do productive work. For example, skills training received by the participants of entrepreneurship programmes can improve their knowledge, capabilities and competencies to engage in business. Their expertise can also help them to survive no matter where they are. With that, they can be independent without relying on government assistance. It can simultaneously move them away from poverty. Education investment programmes such as school scholarships and school supplies assistance are also highly beneficial for the needy. If poverty can be controlled, the threat to the well-being of children can be reduced.
Diversifying forms of social assistance for children

The Malaysian government is always trying to improve the well-being of its citizens. For instance in, the 2015 Budget the government provided various forms of financial assistance. Among them are to raise the 1Malaysia People's Aid (BR1M) from RM650 (2014) to RM950 (2015) for families with a monthly income of less than RM3000 per month which coincides with an increase in the cost of living. In addition, the government is also continuing its aid in 2015 of RM100 to all children who attend primary and secondary schools with a total allocation of RM540 million. The government has allocated RM1.2 billion for assistance to poor families, children, the disabled and the elderly.

However, the researchers argue that the annual form of financial aid is not very effective in helping these people to get out from poverty. Instead, the researchers suggest that Malaysia should focus on non-financial aids as practiced in developed countries, such as free daily meals in the school canteen, free school uniforms, tuition subsidies and support for parents to look for jobs or increase the family income. Such forms of assistance are more beneficial to children, especially in an economy where inflation is high. In addition, the government should control the prices of goods and reduce the sales and service taxes to boost consumers’ purchasing power. The increase in the purchasing power of consumers can also enhance the ability of families to meet the needs of their children. By implementing these measures, the researchers believe that the threat to the well-being of children can be reduced.

Undeniably, Malaysia also provides some financial assistance to poor children. The researchers would like to take the practices in some developed countries as examples in providing comprehensive public social assistance to poor children. Britain, for instance, introduced the Healthy Start Vouchers which includes objective and subjective needs such as financial, material, skills training and support services for parents. The United States also introduced the Food Stamp Program, a program supplying nutritious meals to children of low-income families and Temporary Assistance for Needy Families (TANF), which is a living assistance to families in which the mother/father has lost their job, or the children experience deprivation in the family or the absence of parents. Scotland also implemented the Free School Meals programme, which offers free meals at school and the School Clothing Grants, which gives assistance in the form of school uniforms to low-income families.

Considering the current economic situation in Malaysia, the researchers argue that the variation of financial assistance offered by the government so far is sufficient to meet the minimum needs of children who come from underprivileged families. However, the aid package can be improved by combining assistance in the form of financial, material, education, health and skills training. Children from poor families are qualified for scholarships, school uniforms aid, free meals at school canteens and a high chance to get skills training. This method can reduce the financial burden on families and prevent children from experiencing inadequacy that may affect their well-being.

Improving the system of child welfare services

Based on the findings, the researchers argue that the child welfare system as a whole must be monitored to reduce risks that could threaten the well-being of children. This is because the researchers have found that there are some types of public social assistance which is not received by the children in the study even though in terms of the eligibility rules they deserve it. In addition, there are also respondents who did not know about the types of public social assistance offered by the government. The child welfare system needs to be implemented effectively and efficiently to enable all the aid to reach the recipients. In other words, the supply of information and assistance should be efficient, transparent and
systematic to enable all qualified poor children to receive aid, whether in urban or rural areas. This is to avoid risks that could threaten the well-being of children.

In other cases, there is also overlapping assistance. In other words, there are poor children who receive various types of assistance from various parties, while there is another group of poor children who do not receive any assistance. To overcome such a problem, the researchers recommend that the aid channels be integrated. Thus, corporations, NGOs and donors who wish to provide assistance to children in need can deal with respective coordinators to avoid overlapping of assistance and to enable the assistance to be comprehensive and equal. In the Malaysian context, it would be ideal to select the Department of Social Welfare Malaysia to be the coordinator of this assistance.

The researchers believe that the child welfare system in the country should be improved. Based on the researchers’ study of some welfare systems in countries such as Sweden, Denmark, the United Kingdom, Australia and the United States, the child welfare system should have following three main features:

i. provide adequate financial resources

Government authorities should provide sufficient funds to build physical infrastructure to fulfil the needs of children, such as child care centres, schools, libraries, playgrounds and activity centres (European Union, 2012; Nordfeldt & Larsson, 2013). In addition, the government also needs to be prepared with an efficient social investment plan that will provide a brighter future for children besides giving benefits to the government itself (European Union, 2012).

ii. provide high quality services

Services for children should also be of high quality and child-friendly (European Union, 2012). For example, in the cases of abuse and abandonment, efficient and quick child protection services are essential to protect the child from trauma, injury or loss of life (Bragdon, 2012; New South Wales Government, 2009). In a good child welfare system, the number of children residing in shelters and foster families should not be too many (Bragdon, 2012). It consequently illustrates that an efficient service in the child welfare system has succeeded in making family a secure, stable, harmonious and conducive ecology to the child's life (Bragdon, 2012). However, for children who need to be saved and have to stay in shelters, the government should ensure that these shelters provide a supportive environment for the children and the children get a high quality of care (Bragdon, 2012).

iii. children are given equal opportunities to live in accordance with the CRC

A good child welfare system should ensure that all children have living rights as stated by the Convention on the Rights of the Child (CRC) (Bragdon, 2012; European Union, 2012). Therefore, services that involve the basic needs of children, such as education and health should be universal (New South Wales Government, 2009). In other words, all children in the country are entitled to get them regardless of their family background. For example, in Denmark, all children aged 26 weeks to 6 years old are entitled to a day care centre facility (European Union, 2012). In Sweden as well, all children are qualified to enter preschool regardless of whether their mothers are engaged in work or not (Nordfeldt & Larsson, 2013). The Danish government prepares Youth Guidance Centres to provide opportunities for young people to get information on opportunities for further education and career opportunities so that they are better prepared to enter the labour market in the future (European Union, 2012). In Australia, the health care system and early childhood education are
provided universally to all children (New South Wales Government, 2009). For health care, Malaysia has a system of services that it can be proud of. Antenatal care, including vaccinations, is provided free at government clinics and it is eligible for all children.

The ultimate goal of the child welfare system is to ensure that children can live well and in peace (Nordfeldt & Larsson, 2013). Therefore, the better the welfare system, the better the well-being of children. The three features described above should be considered in improving the system of child welfare services in the country.

Conclusion
The objective well-being for poor children in Malaysia is at a satisfactory level. However, efforts of maintenance and enhancement should be taken to ensure that their well-being is at a good level. Children’s well-being depends on the families, institutions and systems which shelter and protect them, since children are not able to meet all their needs on their own. Children who live well can produce future generations who have a good character and are productive, innovative and competitive, and so can continue the development agenda and realise the country’s vision for the future.

References


