

## Country Report Austria

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# 1. Country Information Austria

## The development of youth homes<sup>1</sup>

Already in the 1960s and 1970s movements to reform the RCF in Austria took place. A real change has been noticeable since the 1990s. The reform movements in Vienna provide a very good example. In 1995, the reform "Home 2000" was started (at this time Vienna housed 2.746 young people). The slogan of the reform was "Identify earlier – care for a shorter time – differentiate the support". One of their aims was achieved in the 2000s, when the last big RCF were closed and smaller facilities were established. The new idea of the youth welfare no longer includes the classic "youth home" (Kinder- und Jugendheim). Their abolition can be seen as the end of a reform movement.

The important basis for the improvement of youth welfare was the *Youth Welfare Act* (Jugendwohlfahrtsgesetz, JWG), passed by the parliament in 1989. Primary the Act standardized the principle to strengthen the educational competence of the family, especially the parents, and the basic principle of least possible interference. It was determined, that supportive measures are favoured over external placement outside the family.

## General information about child protection law and the status of children's rights

### The competences

The matters of maternity, infant and youth care are according to article 12 section 1 figure 1 of the federal constitution concerning the leading legislation duty of the federal republic. The federal states have to issue the implementing statutes and have to enforce them. The legal basis is on the one hand, the federal law e.g. the Federal Child and Youth Care Act 2013 (Bundes- Kinder- und Jugendhilfegesetz 2013, B-KJHG) which sets the frame for the whole state and the legal sources of all federal states, which concretize and adapt the frame on their specific conditions through implementation law on the other hand.<sup>2</sup>

### Children's rights

#### B-KJHG and StKJHG

The comments of the B-KJHG and the Styrian Child and Youth Care Act (Steiermärkisches Kinder- und Jugendhilfegesetz, StKJHG) clarify, that the Acts do not involve enforceable legal claims and that the conditions of the General Civil Code (Allgemeines Bürgerliches Gesetzbuch, ABGB) are applicable.<sup>3</sup>

The interference in family rights and duties on the part of the state is only allowed if it is necessary to guarantee the well-being of a child and if it is regulated in the civil code. According to the judicature, the well-being of a child is endangered e.g. through the violation of the prohibition of violence.<sup>4</sup>

#### UN-Convention on the Right of the Child (CRC)

Through the ratification of the Convention on the Right of the Child (CRC) in 1992, Austria has the obligation to acknowledge children and young persons as bearer of basic rights and to guarantee these rights. Some of the rights of the CRC have been transferred into the EMRK and into the national legal system.<sup>5</sup>

According to the CRC children and young persons have to be protected against violence and exploitation and the state has to take care of them. All contracting states are obligated to provide the essential protection and care, if the parents or other relatives cannot or do not

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<sup>1</sup> Josef Scheipl, Youth Welfare Act (JWG) 1989 – Introduction.

<sup>2</sup> Hubmer in Loderbauer (Hrsg.), Kinder- und Jugendrecht 211 (211)

<sup>3</sup> Comments StKJHG, § 1 Abs 5.

<sup>4</sup> Deixler-Hübner in Kletečka/Schauer, ABGB-ON<sup>1.03</sup> § 182 ABGB, Rz 7.

<sup>5</sup> Berka/Grabenwarter/Weber, Studien zur Kinderrechtskonvention und ihrer Umsetzung, 53.

look after their children in an appropriate way. The well-being of a child has to be valid in all their measures.<sup>6</sup>

If children are separated from their parents and are accommodated in establishments which are related to social education, these decisions represent serious interferences in the right of respect of the family life of the concerned persons. These interferences are only permitted based on reasons to protect the well-being of a child.<sup>7</sup>

#### *Constitutional Act on the Rights of Children (Bundesverfassungsgesetz über die Rechte von Kindern, BVG-KR)*

Article 1 of the Constitutional Act on the Rights of Children includes a claim for children and young persons to have extensive opportunity for individual development, to turn out to be a self-confident, social, good-natured and efficient member of society. The state has the duty to create appropriate general conditions. The duty contains the order for parental behaviour and protection of the rights of parents at the same time. It is difficult to create a justiciable right for love, care, security and all other essential elements for the development of the personality and the enforcement of such a right are not possible.<sup>8</sup>

#### *Bundes- Kinder- und Jugendhilfegesetz 2013 (B-KJHG)*

##### *Principles of children and youth welfare*

Primarily the parents or other persons, who are in charge of care and education for children or young persons, are responsible for their care and education. The state has to support them through services such as giving information and advice as well as the strengthening of the social sphere.<sup>9</sup>

If parents or other persons, who are in charge of care and education, are not able to take care of the children and young persons, the state has to provide the necessary protection and care. If the well-being of a child can not be guaranteed, the state has to grant assistance.<sup>10</sup>

##### *Help for "young adults"*

Children and young persons are defined as persons before their 18<sup>th</sup> birthday. Young adults are persons, who have accomplished their 18<sup>th</sup> year, but are before their 21<sup>st</sup> birthday.<sup>11</sup>

Young adults can receive help in RCF, if they have received help before their 18<sup>th</sup> birthday and if the allowance is necessary to achieve their aims. The approval of the young persons is essential. After the 21<sup>st</sup> birthday it cannot be extended anymore.<sup>12</sup>

##### *Structure of children and youth welfare*

The bearer of the youth welfare are the federal states.<sup>13</sup> Public as well as private child and youth welfare establishments can provide accomplishments.<sup>14</sup> The private child and youth welfare establishment has to file an application. The public child and youth welfare establishment decides about the qualification.<sup>15</sup> The private establishments are under supervision of the public establishments.<sup>16</sup>

##### *The individual works of the children and youth welfare*

The B-KJHG distinguishes between social service and social pedagogic establishments. The bearer of children and youth welfare has to provide social services for expecting parents,

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<sup>6</sup> Comments B-KJHG, Allgemeiner Teil.

<sup>7</sup> Berka/Grabenwarter/Weber, Studien zur Kinderrechtskonvention und ihrer Umsetzung, 79.

<sup>8</sup> Feik/Winkler, Festschrift für Walter Berka, 19.

<sup>9</sup> Berka/Grabenwarter/Weber, Studien zur Kinderrechtskonvention und ihrer Umsetzung, 101.

<sup>10</sup> Berka/Grabenwarter/Weber, Studien zur Kinderrechtskonvention und ihrer Umsetzung, 101.

<sup>11</sup> § 4 B-KJHG, ris

<sup>12</sup> § 29 B-KJHG, ris.

<sup>13</sup> Berka/Grabenwarter/Weber, Studien zur Kinderrechtskonvention und ihrer Umsetzung, 103f.

<sup>14</sup> Comments B-KJHG, zu § 11.

<sup>15</sup> Berka/Grabenwarter/Weber, Studien zur Kinderrechtskonvention und ihrer Umsetzung, 104.

<sup>16</sup> Comments B-KJHG, zu § 11.

families, children and adolescents in order to support their care and education and to manage the daily family life.<sup>17</sup> The beneficiaries can decide, if and how long they want to use the social service and which type of social service they want to choose. Examples for social services for children and adolescents are the offer of information and consultation, streetwork, emergency overnight accommodations and other comparable establishments.<sup>18</sup>

Social pedagogic establishments (RCF) comprise all offers, which require a temporary or long-term removal of children and adolescents of their social environment. These are primarily care facilities in emergencies, care facilities for long-term care of children and adolescents, assisted living forms for young persons and other non-stationary types of social services.<sup>19</sup> For the social pedagogic establishments an official approval is necessary.<sup>20</sup>

#### *Clarification of endangerment and planning of help*

If there is a concrete suspicion of threat of children and adolescents, the immediate initiation of a clarification of endangerment is necessary. This is important to establish, if the well-being of a child is endangered. Suitable measures have to be set. The principle of commensurability has to be taken into consideration. The balance between the interference in private and family life and the protection of the well-being of a child is essential.<sup>21</sup>

Is the well-being of a child is endangered, parenting support has to be provided. The foundation for these measures is the creation of a plan.<sup>22</sup>

#### Statistics

The statistic below gives information about the number of people, who have been accommodated at RCF in the year 2013. Therefore, the whole population of Austria (male and female) has been taken into consideration.<sup>23</sup> The table shows a higher rate of male children and youth in RCF in all age groups between 0 and 24 years.

**Bevölkerung insgesamt und in Anstaltshaushalten nach Alter und Geschlecht, 2013**

Alter	Insgesamt			Männer			Frauen		
	Bevölkerung insgesamt	Personen in Anstalten*)	in %	Bevölkerung insgesamt	Personen in Anstalten*)	in %	Bevölkerung insgesamt	Personen in Anstalten*)	in %
<b>Insgesamt</b>	<b>8.499.759</b>	<b>121.790</b>	<b>1,43</b>	<b>4.149.601</b>	<b>51.258</b>	<b>1,24</b>	<b>4.350.158</b>	<b>70.532</b>	<b>1,62</b>
0 bis 14 Jahre	1.220.088	6.049	0,50	625.756	3.227	0,52	594.332	2.822	0,47
15 bis 19 Jahre	470.795	4.865	1,03	241.634	3.065	1,27	229.161	1.800	0,79
20 bis 24 Jahre	541.878	9.736	1,80	275.756	5.652	2,05	266.122	4.084	1,53
25 bis 29 Jahre	557.972	7.756	1,39	281.354	5.073	1,80	276.618	2.683	0,97
30 bis 34 Jahre	568.808	5.361	0,94	285.697	3.706	1,30	283.111	1.655	0,58
35 bis 39 Jahre	545.311	4.087	0,75	271.853	2.906	1,07	273.458	1.181	0,43
40 bis 44 Jahre	633.458	3.767	0,59	314.778	2.606	0,83	318.680	1.161	0,36

Q: STATISTIK AUSTRIA, jährliche Anstaltenerhebung, Abgestimmte Erwerbsstatistik 2013. Erstellt am 10.03.2016. \*) Personen in Anstaltshaushalten in Österreich mit Hauptwohnsitz zum 31.10.2013.

The statistic of the year 2014 shows how many children and adolescents used the services of the child- and youth welfare. A distinction is made between parenting support and whole parenting and according to an agreement or a judicial direction.<sup>24</sup>

<sup>17</sup> § 16 B-KJHG, ris.

<sup>18</sup> Comments B-KJHG, zu § 16.

<sup>19</sup> § 17 B-KJHG, ris.

<sup>20</sup> Erläuterungen zum B-KJHG, zu § 17.

<sup>21</sup> Berka/Grabenwarter/Weber, Studien zur Kinderrechtskonvention und ihrer Umsetzung, 106.

<sup>22</sup> § 23 B-KJHG, ris.

<sup>23</sup> Statistik Austria, created on 10.3.2016

<sup>24</sup> Kinder- und Jugendhilfebericht 2014, Bundesministerium für Familien und Jugend, page 2f.

Alter und Geschlecht der/des Minderjährigen	Unterstützung der Erziehung am 31.12.2014		Volle Erziehung (außer Pflegekinder) am 31.12.2014	
	aufgrund einer Vereinbarung	aufgrund einer gerichtlichen Verfügung	aufgrund einer Vereinbarung	aufgrund einer gerichtlichen Verfügung
<b>Steiermark</b>				
0 bis 5 Jahre				
weiblich	569	2	15	9
männlich	678	2	11	12
zusammen:	1.247	4	26	21
6 bis 13 Jahre				
weiblich	1.671	5	114	46
männlich	2.155	5	155	55
zusammen:	3.826	10	269	101
14 Jahre bis 18 Jahre				
weiblich	966	2	205	52
männlich	1.042	7	195	43
zusammen:	2.008	9	400	95
<b>Gesamtzahl d. Mj am 31.12.</b>	<b>7.081</b>	<b>23</b>	<b>695</b>	<b>217</b>
<b>Österreichweit</b>				
0 bis 5 Jahre				
weiblich	3.072	41	114	61
männlich	3.551	42	121	85
zusammen:	6.623	83	235	146
6 bis 13 Jahre				
weiblich	6.668	116	813	402
männlich	8.963	102	1.207	480
zusammen:	15.631	218	2.020	882
14 Jahre bis 18 Jahre				
weiblich	3.183	51	1.112	314
männlich	3.619	68	1.101	349
zusammen:	6.802	119	2.213	663
<b>Gesamtzahl d. Mj am 31.12.</b>	<b>29.056</b>	<b>420</b>	<b>4.468</b>	<b>1.691</b>

### General information about RCF in Styria

In Styria the B-KJHG was transferred through the Styrian KJHG and the Styrian KJHG Implementing Order.

### The types of assisted living forms in Styria

In the attachment of one of the Styrian KJHG Implementing Order, the descriptions of the individual offers of accomplishments of the federal state Styria can be find. In the Implementing Order, the following stationary offers of accomplishments are described:

#### *Social pedagogic community for children and adolescents<sup>25</sup>*

The target group of this type are children and young persons at the age between ten and eighteen years. In well-founded exceptions, the stay can be extended up to the age of twenty-one. These shared apartments are an establishment for children and adolescents, who require an external accommodation. Life in these shared apartments should include rules in their relationships, which are similar to a family. If possible, they should work on the reintegration in the family.

#### *Flat share of family resemblance<sup>26</sup>*

The age of admission of the children and adolescents is between zero and ten years. In the case of brothers and sisters, it is possible to exceed the age of admission. The children and adolescents are allowed to stay there until the end of their eighteenth year. In exceptions, their stay can be extended to the age of twenty-one.

The family group should create an environment, which is similar to a family. This is very important, as it leads to durability and reliability in daily life.

<sup>25</sup> Attachment 1, StKJHG-DVO, page 7.

<sup>26</sup> Attachment 1, StKJHG-DVO, page 17.

#### *Assisted living<sup>27</sup>*

The target group of this type are social disadvantaged adolescents and/or adolescents with displaying behavioural problems at the age of sixteen to eighteen years. In exceptions the stay can be extended to the age of twenty-one.

The purpose of this type is that the adolescents are accompanied through professional pedagogic employees in any situation. These situations concern housekeeping, structuring of daily life, occupational orientation and integration, learning how to assume responsibility as well as creation of future prospects.

#### *Assisted living group<sup>28</sup>*

The target group of this establishment are social disadvantaged adolescents and/or adolescents with displaying behavioural problems at the age of fifteen to eighteen years. In well-founded exceptions they can stay until the age of twenty-one.

Because of the living together with other adolescents and through the regular assistance of the whole group and the individuals, the adolescents have the possibility to deal with their own history, to work out strategies for solving conflicts and problems, as well as the development of future prospects and the security to manage daily life.

#### *Assisted living in crisis situations<sup>29</sup>*

Target group of this type of accommodation are adolescents between fifteen and eighteen years. Assisted-living accommodations offer secure places in crisis situations. The maximum duration of their stay is three months.

The purpose of the establishment is the short-term accommodation of adolescents in crisis situations. These are young persons, whose well-being cannot be guaranteed in the previous establishment and/or they cannot stay there for various reasons and therefore have to be accommodated for a short time until the clarification ends. The ability of self-sufficiency of the adolescents (shopping, cooking, washing and such) has to be given.

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<sup>27</sup> Attachment 1, StKJHG-DVO, page 32.

<sup>28</sup> Attachment 1, StKJHG-DVO, page 36.

<sup>29</sup> Attachment 1, StKJHG-DVO, page 41.



## 2. Qualitative Data Analysis

### 2a Sampling and Method

#### Sampling

Based on a first webresearch and already existing contacts with RCF (boys of some RCF took part in AMGI's gender and work orientation workshops) different RCF were contacted by AMGI. Supportive factors for the participation of RCF were:

- if violence was taken seriously in the RCF daily work
- the child-centred approach of AIF
- their chance to give input and participate in the capacity programme (tool of further education for their professionals)
- their possibility to take part in an international project and
- the national co-financing partner Province of Styria which is one of the federal public authorities for youth welfare.

Challenges were other ongoing restructuring projects in RCF, like security management programmes. Some RCF didn't want to take part in AIF, because they told the AIF team that they already negotiated with violence problems in their RCF in a good way. Some of them did not take part because they expected disturbance and irritation through such an external intervention (some were afraid, that the intervention could trigger difficult personal processes or unexceptable reactions in the groups).

Finally four RCF were chosen. All children/youth in these RCF were allotted by the local youth welfare authority, which is responsible for their care and education. Some of the children/youth in these RCF are orphans, but in most cases they still have families but they have experienced a childhood in neglect and/or abuse. The youth welfare service is responsible for their education and regulates contacts with parents (visiting intervalls e.g.).

Two facilities are operated by public regional governments:

- One RCF cares for female and male youth aged 11 – 18 who suffer alienation, eating disorders and/ or violence. They offer different forms of living (e.g. living communities with single rooms for about 40 children/youth (10 of them boys)) and assisted living, cared by approx. 30 professionals; internal or external schools, job coaching and apprenticeships in internal training companies or external companies.
- The second has a similar caring concept focused on male youth aged 15 – 18 (42 youth staying in this RCF, appr. 20 professionals). They offer regular and integrated vocational education in internal training companies in nine different skilled trades.

Two other RCF are run by different non-profit organisations:

- One RCF offers so-called 'familyhouses', assisted living communities for children/youth and assisted living for families. 75 children (approx. 2/3 girls) are aged 3 to 15. Approx. 80 professionals (only five of them male) offer middle and long-term stays (from one to ten years).
- One RCF is a short-term night shelter for up to 12 youth and young adults (2/3 male). Youth can stay there overnight (no more than 10 nights per month). Additionally assisted living is provided for 7 young adults. 8 professionals care for these youth.

Focus group interviews were conducted with professionals of all four selected RCF. In three of them youth workshops were possible as well. One RCF was a short term shelter and it was unpredictable how many youth could participate in the focus group with children/ youth (in the following chapters these youth focus groups are sometimes called „youth workshops“ as well). In one of the RCF professionals confirmed finding participating youth aged 12 or

older, but then it showed up that at least two of them were only 11 years old. During this workshop it became clear that they were definitely too young and could not deal with the movie sequences shown during the *traffic light* exercise.

## Methods

The project partner in Austria, the Research Department of the *Association for Men's and Gender Issues Styria (AMGI)* developed analysis instruments (guidelines, questionnaires) in close cooperation with *Dissens – Institute for Education and Research* (Berlin). The Letters of Agreement for professionals and youth were developed by *AMGI*. Special project information leaflets gave youth better insight into their role in the project.

The focus group interviews with professionals lasted between 68 minutes and 2 hours. Between 6 and 9 professionals participated in the focus group interviews. The questions of the guideline were an appropriate tool for these interviews. In all interviews there were some participants answering most questions (mainly the head of the RCF or the department), others added their opinions. Questions about the demand for the Capacity Building Programme (CBP) weren't answered directly. It can be assumed that professionals wanted to present their institution in the best possible way. Therefore it was methodically a good way to find out the demand for a CBP in triangulating the answers of professionals, the personal impressions of the AIF scientists and the answers and opinions of the children/youth themselves.

The children/youth workshops lasted between 54 minutes and 100 minutes, participated by 6 up to 10 children/youth (3 boys and 3 girls / 6 boys / 3 boys and 7 girls). Both methods, the traffic light method and the welcome exercise were very useful methods. The traffic light method was a kind of warm up method for the second part of the workshop, in which the welcome program exercise was conducted. This worked very well.

Traffic light methods overview: in one RCF one violence picture and three movie sequences (sexual abuse, cybermobbing, claspings by professional) were shown. In another RCF 6 movie sequences were used (Mobbing, verbal violence by father, sexual abuse, cybermobbing, boys' violence, partnership violence). In the third workshop movie sequences showing boys' violence, cybermobbing and sexual abuse were used. In this RCF these sequences led to very intensive discussions among the youth, and they talked about very personal experiences. In other RCF, youth were not able to talk or discuss that much.

All focus group discussions and youth workshops took place in seminar rooms of the RCF. Most locations were well suited in size (enough space for traffic light method), technical equipment (beamer, flipchart) and distance to daily rituals in the RCF. There were some exceptions: during one focus group interview a woman cleaning the room was quite noisy and disturbed the interview situation (the interviewer assumed that she was curious), and one youth workshop was held in the 2<sup>nd</sup> floor with very low kind of French Windows and two of the children opened the window. The workshop leaders had to care for them leaving this dangerous place.

During the youth workshops, professionals at the RCF were nearby/reachable for children if they wanted to leave the workshop earlier. In one case a girl left the workshop earlier and needed professional care, it seemed because the traffic-light method triggered violence experiences (in this RCF workshop one movie sequence with claspings by professional was shown e.g.).

## 2b Results from the focus groups with children/youth

Focus groups with children/youth were very different in these three RCF. In one RCF it just came out that many children/youth are affected by different forms of violence (physical, sexual) and that some of the youth can't deal with these experiences in a reflected way. These children/youth need a lot of protection, warmth and security by the RCF.

### How did they talk about violence?

#### *Physical vs. psychological violence*

Physical violence was immediately defined as violence by boys and girls. They distinguished different degrees of physical violence. Some totally refused physical violence. In average boys accepted a higher level of physical violence as "being tolerable" (green traffic light) than girls. E.g. one boy mentioned that a conflict without physical contact cannot be defined as violence: *"da ist ja noch keine Faust geflogen"* (by now no fist struck). This opinion was especially dominant among boys. When discussing possible solutions for violent sequences they mentioned that they consider physical violence as an important conflict solving method. E.g. some boys suggested *"Niederrollen"* (deck) as possible solution for physically violence between two boys.

*"In my company I have only one female colleague, all others are guys aged 15 to 17, there is no day without phrases like 'Shut your trap' but that is brotherly meant, that is usual language" (Girl, approx. 16)*

Two other youth agreed with that, for them it's common peer language. Another boy (also approx. 16) added: *"These phrases are in everyday life in our RCF too."*

#### *Known and self experienced forms of violence*

Physical violence and mobbing were forms of violence youth also new from their own experiences. Some talked about their own long history being bullied.

One boy (approx. 16) distinguished between violent peer language and bullying: *"In this single case verbal violence is ok, but if someone is bulled the whole time in school ... selfconfidence goes down ... deeper than into the cellar [swings his arms down]. Then you don't dare to do anything."*

*"If someone says 'Shut your mouth' - it is not vicious. But if it becomes everyday language and everyday you hear this - and I know from my own experiences, how it is to be bullied. And I experienced that for a very long time, sometimes as one who stands beside and can't say anything and sometimes as the one that is in the victim role. And if this is bullying where each word is meant the way it is sayed - that is not ok."*

*"When watching this very short movie it flashed me back to my time when I started living in this RCF. And I felt much aggression. I thought about the time [spoke with a stammer here] when I was in secondary modern school, where I was beaten. My mother could not do anything and my father hasn't been present since I was four. And then I went to the police but that didn't help either. My mother went to school but everyone controverted it. And the teachers didn't recognise it most of the time. Sometimes they saw something and then they sayed something but most of the times they didn't notice anything ... When I was 14, 15 I began fighting back. (...) I would have needed people who stand behind me. (...) It is like in our kitchen [where this boy works]. No, during school it was really bulled. In the kitchen it is also there but in another way. It is the social climate. I don't know how to say it but in another work place I was able to work better. If climate is not good I can't perform well." (boy, approx. 16)*

### Cyberbullying

Girl (approx. 16): *"You should denounce perpetrators at the police office. If you are 15 you get a punishment that is at least 45 social hours."* Boy (approx. 16): *"Oh wow! I got 15 and that was slaying."*

### *Sexual Abuse*

Some girls personally suffered sexual abuse as well. Sexual abuse was refused by all children/youth. When talking about the movie sequence about sexual abuse, reactions of children/youth in different RCF were totally different. In one RCF boys and girls frankly spoke about rape and some girls shared parts of their own experiences and reflected about it.

Boy (approx. 16): *"The perpetrator must not wonder if he lies in the grave very soon. I would never allow it, even if he were my best friend. I would strike him."*

Another girl (approx. 14) about sexual abuse of children: *"You know if one rapes a child that later on recognizes what happens. (...) The whole life of the child is destroyed. There is no need to kill yourself because of that but it is always like a heavy burden or heavy bag you have to carry."*

Girl (approx. 16): *"Before I came to this RCF I attended a monastery school. There was a pater in our school who raped girls in our school. He was wanted in Germany. He organized pilgrimages during which these rapes happened. When I heard about these rapes I was so terrified because I knew him well. He was always kind and friendly. But when I look back he always wanted to have close contact. He hugged us. And afterwards I thought: 'Shit! I didn't recognize how dangerous the situations were and everybody would have done it.'"*

Girl (16): *"Recently the best friend of my father, aged 28, who was always like a big brother for me since I was a little child, met me. He actually had problems with his girl friend who was inhibited. And when we met he suddenly touched me snuggled up to me. He made compliments about my body, and then he touched me on my arse. And then I asked him: 'How late is it? I have to go.' And I never saw him again. I promptly told my father. He told me that he appreciates it that I told him what has happened. Then he talked with his friend. Afterwards his friend called me and apologized for what has happened. But I will never call him, it was an absolute betrayal of confidence."*

Within the workshops, children/youth talked about their active and effective reactions on these situations and how they got help. Boys in another RCF resolutely refused sexual abuse too, but they didn't want to discuss this topic after the movie sequence at all. It was like they were kind of frozen and that they couldn't find words discussing the topic.

### *Violence in entrance phase*

The entrance phase seems to be very critical. One boy talked about his bullying experiences at the beginning in the RCF:

Boy (appr. 16): *"During the first three month I was bulleyd."* Girl (approx. 16): *"You were bulleyd in our RCF? I didn't know such things happen here. Because we are protected here."* Answer: *"Yes, that happened. During my first time they threw eggs onto my window. Very fierce. One boy kicked in my door. That were the older boys of my group. On my 3rd or 4th day five of them seeked me, one of them with a knife in his hand. They surrounded me and did not let me escape. I ran towards the RCF-living community where my sister lived and digged myself in there. The professional of one RCF group was hurt by these boys, she finally had two broken ribs. And a girl was stroken until her mouth bled. All of this violence should have come over me."* Workshop leader: *"What happened with these boys?"* Boy: *"Three of them were picked up by the police and sent to psychiatry. During the following night this went on. They spilled extremely spicy chilly-water over me."*

### *Feeling stigmatized and locked in - deal with abuse in the history of a RCF*

In one of the RCF three years ago a massive case of abuse came out and was in local and regional media. This case hasn't been completely clarified by now. The only consequence which went public was that the accused head retired. Nothing was mentioned about conviction. Afterwards one of the professionals working in this RCF became the new head. The RCF changed its name and was restructured under the new head. The image of the RCF improved as well (organizing open houses and positive press releases). The (public) owner of the RCF forced security and protection in the RCF. Therefore all its conducted RCF take part in a security management programme which is still going on. The workshops with children/youth showed that this programme may have improved the situation – but it couldn't solve it. The security management programme seemed not to be understood and accepted by all professionals of two RCF AIF worked with. One indicator for this was that no interviewed professional of the two RCF could give AIF-researches a short summary on goals and methods of this security management project.

Focus group interviews showed that the consequences and reactions of the RCF on this case of violence by a professional did not improve their caring methods and image. Concerning name and educational concepts in the RCF there was a big difference between the view of the head of the institution and its professionals and the view of the children/youth. Though the RCF was renamed three years ago and the head tried to improve its structure towards protection (locked doors for kids) and its image (open doors for the public and media work) - the word "asylum" should not be linked with the RCF – in daily life and language the old name still seems very present. All children/youth participating in the workshop called their own institution a "Heim" (asylum) and they used this full old name of the institution during the whole workshop.

The history of abuse, the still ongoing and not totally replaced image and a kind of "old structures from that time" still dominating pedagogical methods of the house – all this seems to still have effects on the self-esteem of children/youth at the RCF (lacking self-esteem of youth and feeling of being locked). The interviewed youth accentuated that they felt locked in, that they felt they had no other chance in life, that the RCF was the last option for them to live in. They said that it is very difficult for them, and that other children/youth recognize them as 'dregs' ("Abschaum") of society, even if these others never have seen them before. They feel stigmatised.

Boy (appr. 16): *"Every boy should avoid coming into this RCF, because we are the dregs of the society."*

### *Not being able to talk about violence*

Youth in another RCF developed communication tools to express themselves and also to talk about their violence experiences. Younger children in the third RCF were not able to express their demands and feelings during the AIF workshop verbally. They either showed a sexualized language or showed provoking actions like climbing on not protected window sills. In one RCF, youth were totally speechless and silent during the AIF workshop when it came to the topic sexual abuse.

### *What did they say about the needs of victims of violence (in RCF)?*

#### *Trust in professionals*

It was also a great difference between children/youth in different RCF when talking about their contact with professionals of the RCF. Children/youth in one RCF talked about them as controllers, from whom they wanted to hide. Children/youth in another RCF have overtaken methods, like very mature communication rules and respectful conversation culture from their professionals and their experiences in their living communities. They sometimes criticized



their professionals as well, but their criticism was sophisticated and contentwise reflected and their trust to and appreciation for their professionals clearly visible.

#### *Meeting point "village square"*

Boy (appr. 16): "Our village square is like a family gathering. Many of us meet there." Girl (appr. 16): "It is a special place in the garden of our RCF with a table and benches. We meet there in evenings, smoke together, talk with each other, play hide and seek or twisting bottles." Workshop leader: "Is it a good place for newcomers?" Girl (appr. 16): "Yes. And there we talk about everything. We get up to nonsense together. We are like a family there." Boy (appr. 16): "You can talk about everything there. There is a rule: 'Privacy things stay there in this square.' If someone blows these secrets out we are against him. That is like a conspiracy."

In one RCF, children/youth seemed to be in anger with their professionals. In this RCF youth had the impression that complaining is useless, e.g. against professionals who neglect privacy in their personal sleeping rooms by immediate access to their chamber, just two seconds after knocking on the door and asking whether they could come in. Even if youth say "No", professional open the doors just two seconds later. Children/youth of this RCF said that they tried to talk to the head and to the psychologist about this place of insecurity (not having privacy). But neither the psychologist nor the head seemed to have helped them.

Not only one but a pool of multi-professional experts should work together in the RCF. The children/youth should be able to choose a professional himself or herself which he/she trusts most. This professional should be reachable and reliable for the children/youth in different situations. Here the researchers experienced a big variety between the RCF and at least in one of them children/youth did not seem to find professionals to whom they trusted in.

#### *Develop communication skills*

AIF workshops with youth clearly showed the demand to develop communication skills from their professionals. It is necessary to find time slots during their daily work to communicate personally with children/youth (like cooking evening meals together, eat together, have time after dinner where the professional can talk individually with one youth).

#### *Welcome package from peers and professionals*

In all AIF workshops with children/youth the first nights or the first days were discussed as very sensitive period for newcomers. Assistance by peer mentoring and special care and signals from professionals (like bringing warm tea to bed) seemed to have helped youth to feel welcome in the RCF, to get friends there, to know its rules and daily schedules.

#### *Gender Differences*

Physical violence was defined as form of violence by girls and boys. Some boys shared the opinion that physical violence is an accepted conflict solving method. These boys in general showed much fewer communication skills and they had a sparse language and much more difficulties to express themselves verbally than other children/youth. It may have to be linked to a 'male only' structure in one of the RCF.

#### *Right of privacy, own opinion and freedom*

In one of the RCF youth knew their rights and rules of the institution well. The rules in the institution are based on the national Protection of Young Persons Act. They have a right of privacy, e.g. in their own lockable room. In contrary in another RCF youth told us that complaining e.g. against punishments or sanctions is useless, e.g. against professionals who neglect privacy in their rooms by immediately opening chamber doors. They tried this many times but didn't succeed, they have no idea whom to ask for help.

Girl (16): "The psychologist and one's own room are privacy areas. After dinner you can ask a professional to talk alone with her/ him."

Boy of another RCF (appr. 16): *"There is privacy, he has his own room. But it is not very private. Professionals knock on the door, then you have two seconds time, then they unlock the door and enter the private room of the youth, even if you say 'No' to them."*

*RCF as an asylum or assisted living community?*

Boy (appr. 16): *"It depends on the new youth how he recognizes the RCF - as an asylum or as an assisted living community. - We always say that it is an asylum."* Workshop leader: *"What is the difference between living community and asylum?"* Boy (appr. 16): *"In the living community you have much more freedom than here. My cousin lives in a living community, he can go out every day. And here you have 4 hours per week."*

### **Youth protection act**

Children/youth of all RCF know very well about their legal rights. In three RCF children/youth felt supported by professionals in difficult situations where they were not able to assert themselves and to get justice. In one RCF youth did not feel supported by professionals – in contrary, they pointed out to their experience, that professionals don't protect children's/youth' legal rights, like the right of privacy. Rights like times to go out or drinking alcohol seemed to not be valid for youth in this RCF, alcohol is totally forbidden and permissions to go out are limited to twice two hours per week plus weekends with parents.

## **2c Results from the focus groups with professionals**

How did professionals recognise violence in their daily work? Did they see any signals? How are processes of disclosure structured (signals, person addressed, supportive factors)?

### **Evidence of violence and its signals in RCF**

Most of the children suffered violence before entering RCF. In some cases, the experienced violence and their biography was disclosed before entering the RCF, because the kids already had contact with the care system.

They also clarify their backgrounds during the intake interviews. In these facilities, professionals already know a lot about the kids from the beginning and so they can start working on the special needs that reveal out of this background.

In other facilities it's part of their work to find out what happened to the kid and to support the disclosure process. They start their work with conversations with the kids and discovering and interpreting the behaviour.

The professionals reported that there are many signals that can be connected with experiences of violence, but this is no proof of violence. This is just their interpretation, which can be a base for further actions.

Many residents use verbal violence and threats against other residents or professionals, having problems with boundaries and showing a lack of emotional detachment.

When children experienced massive physical violence in the past, they are often scared, withdrawn into themselves and don't allow being touched and winced. Some kids show symptoms like sleeping with their clothes or locking up the bathroom when taking a shower, these could be symptoms of sexual abuse.

Professionals also become aware of violence experiences of a child/youth through their poise of body and language. *"It's just the way they are standing in the door, how they move, how they talk – that affects my way to deal with them. For one of them it's normal to express oneself that way and to throw one's fist in the air. He/she doesn't recognize that at this place it is a little bit inappropriate."* (professional, men).

This professional mentioned, that some youth were reported to the police or were sentenced because of duress or dangerous threat. However violent language (*"I kill you"*) can be a part of the casual conversation of special peer groups and then it is no direct hint to personally experienced violence.

## Violence in the RCF

In some of the RCF, there is a high level of violence, while in others is a low level. This is connected to the type of the facility and the whole system. For example, there is one RCF, where youth can stay overnight spontaneously. There is no need for them to book in advance and youth can stay there a whole month per year. Low threshold individual casework without the necessity to book in advance is offered as well. There is only one condition for youth to stay at this RCF: obeying their 10 house rules. There are no other requirements like attending school, and this RCF does not offer a day structure. Youth don't need to show special performance. Professionals trace low level of violence back to their low-threshold offers: because there is no pressure on youth, there is a low level of violence and that helps youth to become calm and feel comfortable. No youth is forced to stay in this RCF. Professionals believe that the low-threshold of this RCF is - in contrary to other RCF with high-threshold offers - one of the main reasons for the low violence potential.

Their third service is mobile assisted living, which requires somewhat higher requirements from the children/youth. But all in all professionals believe that their assisted living is in comparison to other RCF of low-threshold, because here children/youth only have to learn living there and aren't forced to attend school or apprenticeship as well. Professionals believe that the low-threshold makes it easier for the kids to get calm.

Professionals report violence in all RCF. Most of the time it is verbal violence, while physical violence happens not that often. All RCF offer residents psychological support and other opportunities like different sports to deal with their violent feelings.

In one RCF they reported a higher level of all kinds of violence. In this RCF kids are typically younger when entering the RCF and they start their process of disclosure together with the professionals. The professionals mentioned, that they expect this level of violence, because this is a part of the strategy of the residents to deal with their history and part of their everyday life.

## Violence as everyday habit

It is important to distinguish between physical and psychological violence children/youth have gone through. Many youth experienced physical violence (strokes) and almost everybody faced psychological violence in terms of neglect. Mostly children/youth are not aware of these violence experiences because they have not seen anything else throughout their life. They experienced this violence as everyday habit (normality).

## Processes of disclosure

There are a lot of influencing factors on the processes of disclosure. There is a big difference if the kid blames itself for what happened or not, there is a difference between physical and psychological violence and non-sexualized and sexualized violence.

Depending on the background of the resident, some of them disclose very fast and without shame, while others need a lot of time and privacy.

It is often not easy to find out, who was/is the perpetrator, because some kids – or their families - tend to modify their stories or they try to keep secrets.

The professionals mentioned that it's easier for the kids to disclose foreign perpetrators than perpetrators who are close to them, like family members. Often they make hints and do not blame them directly.

Mostly it needs a lot of time and work to complete the biography of the kids.

## Structures of disclosure in the facilities

All facilities, where children/youth stay permanently, have a high level of structures for everyday life and offer different opportunities for disclosure. At the beginning, there is an



intake interview, where there is an opportunity to disclose violence experiences and after that there is permanent contact between psychologists and pedagogues. They keep the residents under review and at the same time there is space to talk about their experiences. One facility has a structure that involves a person of trust for every resident who is spending time alone with them, gives them a feeling of security and confidence and is a contact person for every need.

### **What challenges do professionals recognise?**

Professionals are facing a lot of challenges in their work with the children/youth. The children/youth often come to the facilities with a lack of trust and have problems dealing with their emotions, especially with feelings of frustration.

Many children/youth experience further problems like unserved prison sentences, pending lawsuits, health problems like drug abuses and some youth with migrant background faced violence during wars.

### **What solutions do RCF already have?**

The facilities have guidelines and rules, which are structuring the day and every action of the residents and the professionals. They have defined quality criteria and success criteria, which depend on their specific focus.

While in some RCF, where the kids stay permanently, there are a lot of rules, opportunities and criteria, in others are less.

#### *Rules in short time facilities*

In the RCF, where the kids just stay overnight, they have to accept the house rules. Professionals point to these rules when they have their first contact with the kids. Just after their arrival these rules are discussed as being necessary for living together. One of these rules says that any form of violence, physical, verbal or self-damaging behaviour, is forbidden. Professionals pointed out, that it is necessary to address this topic directly. The intake interview is conducted individually with each youth and it depends on their reason for staying overnight as well (it makes a difference if someone living on the countryside has missed the last bus or if the person got into troubles with others).

Professionals directly mention, that violent language or poise of body is not appropriate in this RCF. By directly mentioning this violence ban, also self-damaging violence, some youth open up and show professionals their traces of self-damaging scarifying on their arms. From the point of view of the manager this direct addressing of different forms of violence by professionals motivates many youth to stay violent-free in the RCF indeed. Youth do not only consider these rules as warning signs but also as shelter for themselves. If rules are not obeyed the only sanction is withdrawal from their offers. Such wide-range sanctions are decided by the whole team of professionals and are outlined team decisions. If a child/youth shows compliance (that he/she understands these rules and is willing to follow them), he/ she can stay overnight at the RCF after the end of the withdrawal time.

#### *De-escalation*

Professionals recognize de-escalation during the preliminary stages as a very important instrument preventing violence. E.g. they directly and frankly talk to youth when youth use violent language or behaviour and they point out that this is not appropriate and not appreciated in the RCF. Sometimes violence potential can be mitigated by a humorous comment of the professionals.

Youth who have tensions or might have tensions between each other are not allocated in the same sleeping room.

The presence of the professionals is another de-escalation method.

### *Rules in long time facilities*

In other RCF the structure is more complex, as the kids stay for a long time and there is a need for implementing a lot of rules and criteria for every possible case. The rules are clearly defined and violence is not tolerated. This is important to prevent violence and negative behaviour.

In one RCF for example, there is a guideline for every action. There are rules that are discussed at the first day in the facility and then they talk about them regularly. There are places, persons and actions available, which are helping the residents to deal with their feelings in a non-violent way.

If violence occurs, the first approach for a solution is always to talk with the residents and to encourage them, to find their own solutions.

When strong border violations like sexual violence or assault happen, this needs to get clarified with the resident and at the same time they get in touch with the kids- and youth help and the child protection centre.

### *Action fields – Strategies, solutions and instruments*

#### *Long time RCF*

##### *Relationships and guardians*

In all interviews with professionals in long-term RCF, they mentioned, that trustful relationships are necessary for the prevention of violence. Without building an appreciative bond and giving the resident a secure feeling, it's not possible to work with them. This can be difficult, especially with children/youth with traumata and traumata of relationships and needs a lot of time. Often it works in the end because the provided relationship differs from those, they have experienced before.

In one of the RCF, they offer every kid a guardian of trust to start a positive relationship with someone. These guardians have time for them exclusively and they can tell them everything, if they want to.

##### *Prevention*

In all RCF the professionals try to create a liveable environment, with a non-violent atmosphere, where conflicts can be processed, before they escalate. The behaviour of the professionals is very important, because they are role models for the residents.

##### *Possibility of retreat*

To create a non-violent environment it is essential to offer the possibility of retreat. On one hand this provides the opportunity to leave the situation, if the residents realize, they are shortly before losing their rag. On the other hand this is necessary as a room for protection, if someone feels threatened.

A lot of older youth like it to seclude themselves and lock the door of their rooms for more privacy. The AIF-team noticed that the professionals and the kids' perspective differ in some RCF (e.g. some professionals enter the private room of youth even if the kids say 'no').

##### *Therapy*

In all of the long-term facilities external therapy is a permanent element for every resident to support and help them. Beside the other positive impacts of therapy, this is an opportunity for the residents to open up to someone who is not part of the RCF.

##### *Dealing with emotions*

In one RCF the kids can choose between different possibilities to relieve their aggressions like using a punch bag, tear apart newspapers or going in the woods to scream out their frustration. The kids have access to a gym, a sport place and the woods to live it up. These options enable the residents to find their own way of dealing with their emotions in a constructive way.

In another RCF they offer the residents workshops and trainings like anti-violence trainings, to learn ways to deal with and reflect their feelings and behaviour.

### *Short time facility*

In the short time facility we find a totally different situation.

Professionals don't claim to build bonding with their youth. Children/youth can seclude themselves - there is enough privacy and room for that. This room is softly lit. If they don't want to get into relationship with professionals, nobody will force them to do so. According to the professionals, children/youth don't only recognize the 10 rules of the facility as warning but as shelter as well. Professionals already tell children/youth at the intake interview that this RCF is considered as shelter for youth. Recognizing the RCF as shelter gives youth safety and prevents them showing their usual behaviour and their habitual reaction on experienced violence. The habitual reaction on experienced violence would be conspicuous behaviour, but in this RCF they recognize that this is not necessary. In the manager's word: *„it's not necessary for youth to puff up a lot what they usually would do because that were their experiences from at home or wherever: the more I work against it and the more violent I am the less violence I suffer.“*

If a youth is seeked namely professionals do not repudiate him/her. But he/she has to leave the RCF if there is a criminal complaint against him/her. The youth can stay in the RCF if there is only a missing person report. If the youth is in the RCF the missing person's report can be filed by the police.

### *Facility as recreation room from their own biography*

Violence mostly is not the immediate reason for youth to enter the RCF - mainly it is missing accommodation, a 'roof over their head', the possibility to take a shower and to clean clothes. *„Many youth want to let their own biography out when entering the facility“*. In the manager's view youth consider their stay at the RCF more as a possibility to *„rest, arrive and take breath“*.

### *Presence and responsiveness of professionals*

Professionals are present and responsive. They are aware, but they don't impose themselves on youth. Presence of professionals is a core function in the house. This reduces violence potentials as well. E.g. professionals are permanently present in the central-welcome-space or in the incoming room, all doors excluding house entrance door and sleeping rooms for kids – stay open all time.

If someone comes from an acute crisis (violence, loss of accommodation or the like) this youth usually wants to talk about it at the intake interview spontaneously.

### *Spatial conditions*

From the professionals' view the house itself appears de-escalating and it helps youth to feel welcome – due to its friendly effect, its colours, soft light and its architecture. It is open but it still offers a leisure time room where youth can seclude themselves a bit. But nevertheless youth know that the professionals are nearby and through a window professionals can at least look into one minor part of the leisure time room.

If two youth enter the RCF who had troubles outside the RCF, professionals de-escalate the situation by keeping the two of them in spatial distance.

### *Voluntariness*

Professionals of this RCF do not want to limit youth's freedom and they outlined that they normally appeal on it. Nobody is forced coming into this RCF, it is the voluntary decision of each youth and of the RCF. Everybody makes his free decision for staying in the RCF and therefore accepts the house rules. In the end of each intake interview and after explaining the house rules each youth is directly asked whether he/she agrees with the house rules or not. If yes they sign in the rules, otherwise they are free to leave the house.

The manager and her employee make youth aware of their rights. Nobody could force them to follow their families when they are full-aged.

### **Quality Standards and criteria for good work**

All facilities work with specific quality standards to try to guarantee good and helpful work for the residents. They all have guidelines for the professionals to support them and to provide tools, which should solve all kinds of problems.

#### *Documentation*

All professionals need to do everyday documentations for transparency, comparability and an overall view. Transgressions of limits get an extra documentation.

#### *Teamwork and reflexion*

Exchange of experiences, reflections in the team, team-supervisions and single supervisions are very important parts of the work in the facilities. Beside the formal meetings it is important and supportive for the professionals to have possibilities for informal communication with other professionals. Often the informal talks are very helpful, because they offer new and important perspectives.

For working in this field it's important to have a whole group behind you, to have the opportunity to share knowledge and support each other.

In the end important decisions need to be done in the whole team, so teamwork is very important.

#### *Professional development*

Professional development like trainings about de-escalation, new authority or sexual education is important to train methods and giving helpful input.

### **Different styles of working standards in long time facilities**

#### *Support in urgent situations*

In one RCF the professional is able to leave a situation and get support from other professionals in the facility, if it escalates and the professional feels overchallenged. They created this network for situations, when someone can't find a solution. The professionals mentioned, that this is very helpful.

#### *Children meetings and team meetings*

In one RCF they have a lot of meetings that everyone is informed and everything can be discussed in different settings. There is one children meeting every week, where the professionals and the youth of every living community sit together to discuss actual themes and wishes. They have team meetings of all professionals of every living community, work meetings of all professionals of all living communities and a forum for all children/youth of all living communities.

With this structure everyone is informed about everything and when you are new, you get to know everyone in a short period of time.

The professionals mentioned, that the residents honour and like these meetings, because it gives them the feeling of having an influence on their daily life.

#### *Stabilising and support*

In the facilities the residents get admission to special help, which fits to their specific problems. Living in a RCF is stabilising the daily routine of the residents.

### *Using older youth as help*

In one facility, older children/youth act as role models and peer-mentors, who support younger residents and others, who are newcomers. This system gives the older residents the feeling of responsibility and helps in kind of self-regulation between the residents.

### *A familiar surrounding*

One of the long-time RCF creates a familiar environment. In all RCF every living community is cooking and eating dinner together on at least on evenings, which creates time to bond and to communicate.

### *Contact to parents*

In one RCF professionals said, that they try to have regular communication with the parents, if the resident is ok with that. Some residents broke with their parents and then there is no communication at all. But most of the time they have contact and inform the parents about the situation of their kids. Concerning visiting weekends and coordination about school or vocal education RCF try to cooperate with parents and work together with the youth welfare authority.

### *Development goals*

In one RCF they have a concept with development goals and positive reinforcement, for example rewards. Two times a year they meet with the guardian for a development discussion and select reachable goals like *“the kid is able to stop beating other kids, the kid is doing good homework...”* after the 10<sup>th</sup> birthday of the kid. The professionals of this RCF mentioned, that big goals just frustrate the kids, while small ones can push their self-esteem.

### *Trust graphs*

In another RCF they have “trust graphs”, where they express the person in graphic manner. At dinner-time they reflect every day in public how to score the behaviour of every resident. All youth participate in this process. If the behaviour wasn’t as expected, the trust graph sinks and residents lose privileges. If they want to get them back, they have to work for it.

The professionals mentioned, that this system is advantageous for them, because they do not need to set consequences directly. The consequences out of the behaviour are understandable and logic for everyone. They define this trust graphs as a method of a neutral feedback where they reflect together how they experienced the behaviour of others.

There are single conversations with every resident afterwards to talk about their feelings during their public reflection and scoring, what could have been better and what the child/youth needs to feel better. For this they often create an affectivity score. Depending on the specific living community they select goals – goals for a week, a month and/or general goals, which includes low-level goals and high-level goals. In one living community with children with special needs they modified the trust graphs so that there is no possibility to sink, but to reach or to be stuck at one place. The professionals mentioned, that for the youth the graphs have a big meaning.

### **Short time RCF**

In the short time RCF there are some specifics that don’t fit to the others.

With only a few exceptions this RCF is a night shelter for up to 10 nights per month. If youth are under 18 years old the RCF cooperates with the youth public welfare authority caring for accommodation during other nights and finding long term solutions. The younger the children are the faster the responsible social workers try to find another age-appropriate institution.

If clients are full-aged the RCF itself suggests other counselling and caring facilities, like night shelters for adults, e.g. women’s shelters. But the manager has no insight if youth definitely show up in these suggested institutions. The assisted living team of this RCF also cooperates with prison to ease youth their way into autonomy.

Professionals offer assisted living, but there are no statistics about how many youth definitely take use of these suggested institutions. The reason for this is that they offer no outreach social

work. Some clients move from one night shelter to another night shelter or to friends. It's the aim of this RCF to keep stays here as short as possible and to provide a bridge into long-term care or into independent ways of living. The RCF considers itself as a well-networking point of intersection.

Police has no insight into the continuous text documentation, but they can check the register. The RCF doesn't hide anybody. If parents, police or other public offices ask for the name of a specific youth and if there is a missing person report, professionals tell them if this named youth is or was in the RCF or not. If parents of a youth up to 14 don't want their kid staying in the RCF police is consulted and clarifies this case. Very seldom children immediately have to come with their parents.

For the short term RCF it is a success if youth who suffered a lot of violence in their biography manage staying in the RCF 10 days without breaking their house rules or if they manage assisted living one year long without being fired due to destruction of his/ her flat or due to massive disputes with neighbours.

### **What needs do professionals mention?**

General:

- special care in welcome phase, helping them finding friends and building confidence with colleagues, with professionals and the RCF institution
- guidelines, rules
- private room for the kids that can be locked up – possibility of retreat
- trust, relationships and familiar atmosphere
- system of (self)regulation for the kids
- offer for therapy, room to handle their feelings; e.g. helping youth becoming aware of suffered violence, neglect in their biography, care for them after disclosure
- stabilising daily routine for the kids
- alternatives to violent behaviour, alternative role models
- transparent structures
- advanced training for the professionals
- network/ teamwork

#### *System of information transfer*

The system of information transfer and circulation is rather important. All professionals should be informed about everything that was going on in the RCF while they weren't working. That guarantees, that they can start working at the point, where the last one stopped and no information gets lost. To build a system like that – that is effective and doesn't need too much time – is a big challenge.

#### *Transparency and its challenges*

Transparency is a very important factor in RCF. At the same time a lot of information is confident. It is a challenge to switch between these two poles.

#### *Need for further offers for youth – short time facility*

In the opinion of the manager of the RCF there is need of low-threshold offers for work within the RCF. That means, that youth can do easy works very spontaneously and unbureaucratically and earn some money for that work, e.g. filling or labelling envelopes.

### **Aspects of gender and children's rights**



### *Gender aspects*

The professionals couldn't find a difference between girls and boys talking about their violent experiences. They said, that acting in a violent way is not a characteristic of a certain gender, but a characteristic of the personality.

In one of the RCF there is a lack of male professionals. In the interviews they said, that they are trying to find more, but that is difficult to do so. From 85 employees just 8 are male. They also mentioned, that the residents like to spend time with the male professionals and that they think it would be good to have more of them as positive male role models.

In two other RCF the situation is completely different. There are enough male professionals and male teachers. They said, that this helps to change the image of men, because the male professionals embody a different style of masculinity, which is non-traditional and non-violent. Single parent mothers raised a lot of the residents while fathers weren't on the spot and at the same time most of the perpetrators were men. As a result the kids have a certain idea of masculinity, that can be changed with the caring, providing and supervising male professionals. At the beginning it is often very difficult for the youth to accept the new role idea, because it means, their old idea was wrong. To change their opinion is hard work for the professionals.

In one facility with separated boys and girls living communities the professionals mentioned differences between the behaviour of the boys and the girls. They noted that the inhibition level from a threat to the realisation of the threat is lower. Boys are more quickly aggressive in a physical way and have more problems to stop the physical violence. They report, that in this RCF the girls tend to use psychical violence like using threats, mobbing or insults. The psychical violence lasts longer and is often worse than the physical violence.

The professionals noticed, that it is more difficult for them to uncover psychical violence and often they find out (too) late.

In the short time RCF professionals share the opinion that boys rather use expletives, more than girls. Most girls are more restrained, but there are some girls using fierce languages, which is heavier than that of most boys.

### *Children rights*

In one RCF there is a training course about children rights. The professionals thought, that this is important because this helps to strengthen their self-esteem and gives them the feeling, that they are of worth.

In the RCF the residents can find material to inform themselves about human rights and information about consulting centres, they could attend. If the residents want to, they can be counselled every time about their opportunities. Sometimes they get specific counselling, because there is a need to do so.

In another RCF the professionals noted, that the kids are well aware about their rights, but sometimes they don't use these rights, because of loyalty conflicts. Sometimes they keep secrets because they are afraid, that they are not allowed to go home at the weekend or that the mother gets angry if they reveal something.

### *Other aspects: migration and being affected by violence*

In the short time RCF the professionals reported two cases in which family associations with migrant background used violence. In both cases the whole family association including some brothers stood in front of the door of the RCF and wanted to force the youth to join them by threatening him/her with violence. In these cases it was the mother as well who applied violence by threatening with suicide or by launching other threats via text messages. In both cases police was called. Family members usually are not allowed to enter the RCF. In one of these two cases professionals made an exception and considered it a better option to let the

mother in and to discuss only with her and leaving the brothers outside the house. In both cases the youth finally left the RCF and went home with their family associations. In both cases the professionals in the RCF explained the children and youth protection rights, when they talked to the kids. Nobody can force someone to join one's family associations, because they are full-aged.

The manager pointed out that youth with migrant background faced violence during wars. This becomes evident in the RCF.

From her point of view xenophobia has not raised within the last years. In her opinion xenophobia wouldn't fit to youth who have migrant background themselves. Sometimes youth criticise that asylum seekers are publicly supported. But many of them don't have any information about public supports they could ask for after attaining full-age. Most of these youth hasn't ever had work or accomodation by that age.

#### *Body size*

From the point of view of the professionals taller body size of a youth means being recognized more threatening.

## 3 Quantitative Data Analysis

### 3a Sampling and Method

In April 2016 the quantitative survey took place, supported by one of the Austrian federal welfare authority. The questionnaire was sent to 44 RCF. Additionally the survey was conducted in the four RCF who already took part in the qualitative interviews (who care for about 170 children/youth). These four RCF are financed by the federal welfare authority as well. All in all the total population was 48 RCF who care for about 550 youth. Four of them are crisis management centers or night shelters, the others are middle or long term caring institutions. There are 15 different provider organisations, but each of the 48 RCF has its own head/manager. There was no information available for the AIF-team of how many experts totally work in these institutions. According to the four RCF who took part in the qualitative analysis at least 300 professionals working in these 48 RCF can be estimated.

The fact that the federal Austrian welfare authority, which finances the work of the RCF, supported the survey by providing addresses and is interested in results of the survey may have been one motivating factor for professionals to fill in the questionnaire. For sure, anonymity is guaranteed by AMGI and the survey method.

Via e-mail the survey was sent personally to the heads of the RCF. The heads were asked to forward it to all professionals working in this RCF. Professionals were asked to print the questionnaire and return it via paper post to AMGI. Some RCF had an anonymous collecting box for these completed questionnaires and sent them all together to AMGI. One answer was sent via e-mail. By the end of May all in all 37 questionnaires were returned.

### 3b The quantitative results



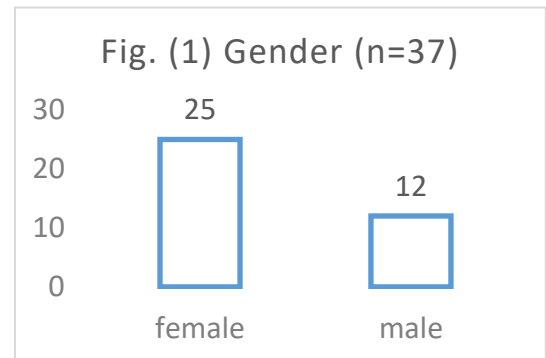
### Social characteristics and occupational background

In Austria, 37 professionals working in RCF have returned the questionnaire.

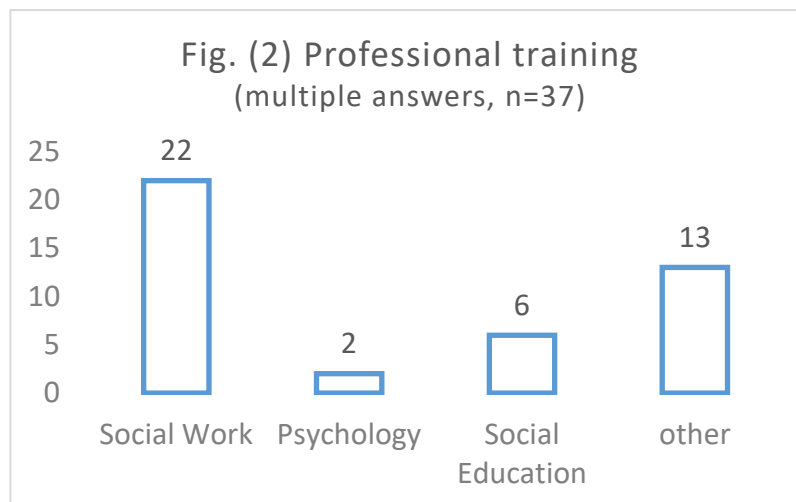
Age: The average age is 40 years.

Gender: 25 women and 12 men took part at the survey (Fig. 1).

Two of the male professionals in RCF have been born or have parents who have been born in another country than Austria. The country of birth is Germany in both cases.



In which area have the professionals working in RCF received **professional training**?



Most of the professionals were trained in social work and in other professional education, such as

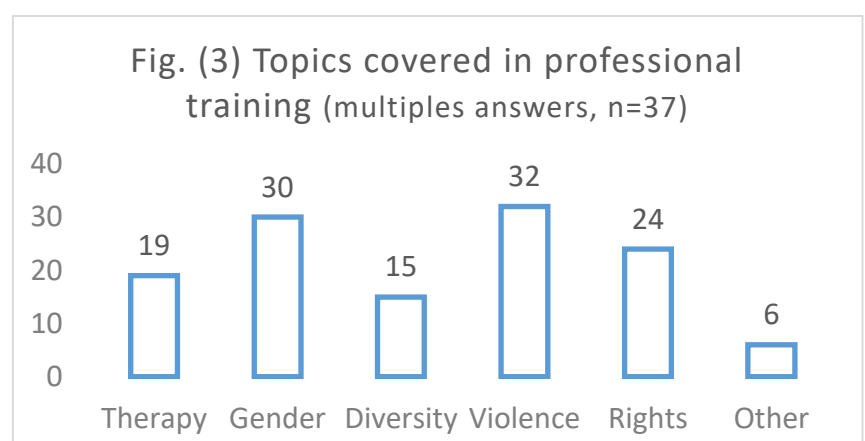
- education studies,
- psychotherapie,
- teacher,
- curative education,
- sociology,
- kindergarten pedagogue,
- after school care education,
- children assistant,
- teacher for woodwork,
- and mototherapist.

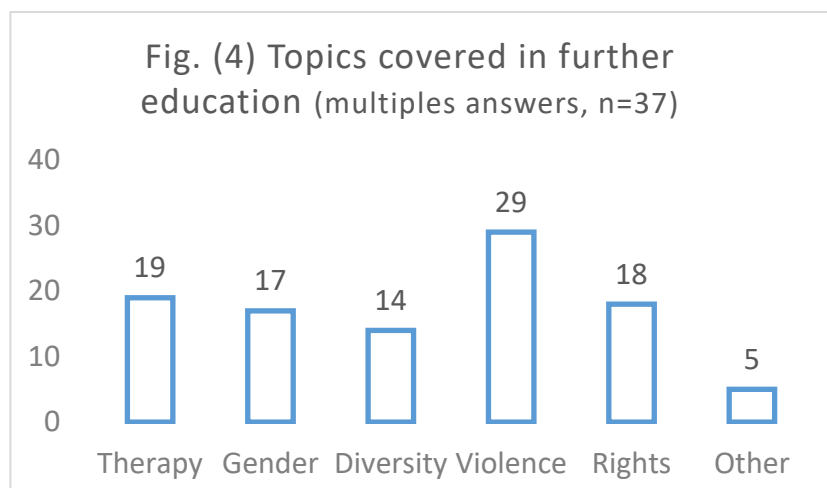
Which topics were covered in their professional training?

Violence and gender were the topics most frequently mentioned by the respondents. Other topics included crisis intervention, orthopaedagogy, special needs education and abuse.

Violence seems to be one of the most important topics in professional training, but also in further education, as the topic was most frequently addressed.

Especially knowledge, skills and competences in trauma-education, violence prevention, sexualised violence and de-escalation are the main issues related to violence in further education. Respondents also took part in further education related to intercultural competence, gender & diversity, conversation management, adventure-based learning, legal security, self-awareness or special issues related to mental illness and dislexia, but also related to burnout prevention or counseling.





### The institutional context

Most of the respondents work in fulltime RCF with one group and with five to 13 young people. The second largest group (12 professionals) works in fulltime RCF with multiple groups and with 6 to 40 young people. Four respondents work in different kinds of RCF at the same time.

Some respondents did not mention the number of young people they work with (blank).

Table (1)

Professionals in fulltime RCF (one group)	4	4	4	5	1	1	
Number of young people	12	8	5	13	5		
Professionals in fulltime RCF (multiple groups)	2	3	2	1	1	1	2
Number of young people	40	18	6	12		9	8
Professionals in crisis home	1	2					
Number of young people	8						
Professionals in semi-RCF/assisted living	2	1	2	1			
Number of young people		6	7	4			
Professionals in family-type RCF	1						
Number of young people							
Professionals in 'other' RCF: emergency over-night stay	2						
Number of young people	12						

Two third (the vast majority) of the respondents work with colleagues who are educators (on average approx. 9 colleagues are educators) and more than half of the respondents work with colleagues with other professions than the one mentioned in the survey (e.g. pedagogues, youth worker, teacher, supervisor, sociologists, kindergarten pedagogue, after school care pedagogue, personal assistant or trainer). Half of the respondents work with psychologist and quarter of the respondents work with social worker, which is not a common profession in Austrian RCF. All respondent work with children/youth with an average number of 27 weekly working hours. The vast majority of the respondents is in exchange with

colleagues and takes the possibility of supervision, although the average weekly hours are on a low grade (one hour).

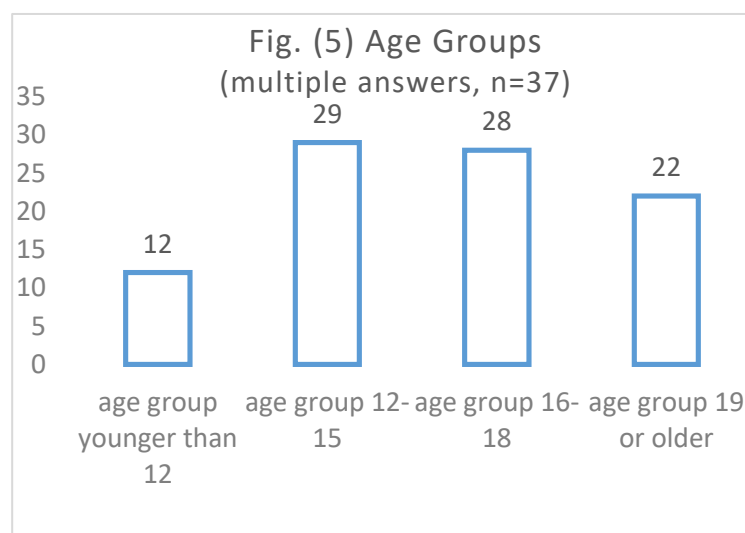
Table (2)

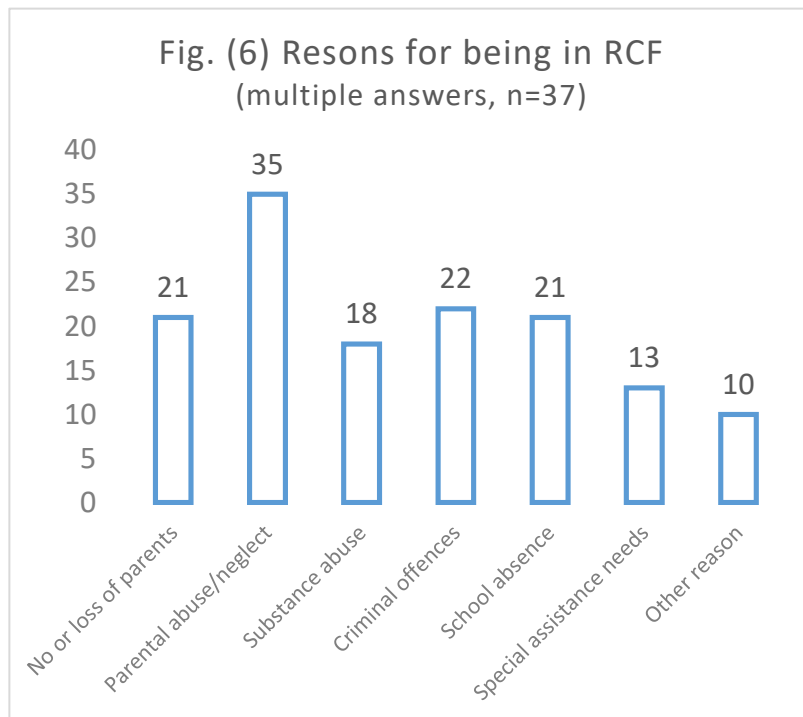
	Number professionals	Hours/week	Average
Managing facility	8	8	1
Managing staff	6	85	14
Work with young people	37	983	27
Exchange with staff	34	135	4
Supervision	35	37	1
Professional development	20	77	4

#### Who are the children/youth?

Most of the respondents work with children in the age between 12 and 18 years.

Concerning Gender, 33 respondents pointed to male children and youth they work with, 29 respondents pointed to female children and youth they work with, some respondents referred to transgender (4) and some to intersex (4) children and/or youth. 'Other' gender were outlined as identically identified and one statement referred to 'all persons', which may reflect an anticategorical approach (but not sure).





As the following figure shows, the vast majority of the children/youth experienced parental abuse and/or neglect by their (foster) parents before entering the RCF. Criminal offences, substance abuse and school absence are also prevalent, but can be rather described as strategies to cope with neglect and insecure environments. Under 'other reasons' some of the professional got more in detail, when they describe violence and the lack of protection in the actual environment (e.g. 'subjective experience of crises without other possibilities of solution at the present time

out'); 'mentally unbalanced parents'; 'no other possibility to be well cared for'; 'homelessness'; 'psychological stress').

## Work with young people who experienced violence

### Which support is needed?

32 respondents gave answer to the question, what they think about young peoples needs (physical, emotional, spiritual, care, support), who experienced violence. All the given answers were systematised in the following way:

The vast majority of answers covered aspects of **protection, stability and security**, a setting with stable relations based on trust in which protection from any form of violence can be guaranteed. In a stable well-structured environment and a safe space characterized by violence free communication (violence-free role-models), children/youth should be able to develop a feeling of security. A space for communication needs time but also listeners ('trusting', 'respectful', 'empathic', 'stable').

At the same time, a **culture of care** is needed, characterized by recognition and acknowledgment, but also patience and transparency and the possibility to get into a relation, in which children/youth can talk about their thoughts and troubles in a violent-free space. A person to whom the child is related, a reliable supportive contact person is described as necessary in order overcome crisis situations but also doing undertakings together and experience positive life-events. If a situation of trust is provided, but also limits are set in a clear and transparent way, children/youth get the possibility to learn that problems can be solved without violence. Therefore other ways of solving conflicts have to be shown.

**Professional help** like psychotherapy, individualized therapy approaches especially focused on children, anti-violence-therapy and psychological support, but also trauma therapy, animal based or relaxation therapy, group trainings and body image trainings are mentioned as supportive strategies for children/youth who experienced violence.

In order to provide such services for children/youth, some of the respondents referred to **professional needs** such as exchange and cooperation with staff as well as interdisciplinary exchange, further trainings, supervision and critical reflection of daily practices.

### Does gender have an impact?

More than half of the respondents think, that gender has an impact on the ways in which children/youth experience violence and the kind of help they need.

A (very) few of them assume *biological differences* (*genetic predisposition generate gender gaps [hidden vs. open violence] / it depends on the nature, either aggressive or secluded, girls are more introverted, boys are more aggressive*) through which a deterministic causal link between gender and violence is reproduced.

The majority of the respondents in this group points to *gender differences* which they experience in their daily practice: while male children/youth are described as those who more likely react in a way through which violence is physically externalized against others or against material around them, the professionals describe violence from female children/youth more as an internalised pattern (e.g. depressive tendencies):

- ,girls: more verbal violence, mobbing; boys: more physical violence‘
- ,girls are psychological violent (mobbing); boys set confrontation actions (fights)‘
- ,boys: they have often much aggression in themselves, which are realized or rather assimilated in a wrong way; girls: withdraw‘.

Furthermore different assumptions about violence and gender are addressed, such as the following statement shows: *,boys: more brutal, but girls: more devious, more spiteful*. Gendered assumptions of professionals surely influence the daily practice working with children/youth. This has also been mentioned by some of the respondents.

Gender difference approaches lead to different support and professional help strategies: *,female youth are still more accessible for offers of assistance (conversations), male young persons - more access through body therapy‘*.

Some professionals point to gender differences with a causal link to the concept of ,doing gender‘ (*,different social role images: you are a boy, you have to be tough‘*), while others don't think that gender is an appropriate concept for their institution (*,because there are only male clients in this establishment, a comparison is not possible‘*).

Around a quarter of all respondents answering this question referred to the individual character of violence experiences (*,I think that every form of violence is experienced differently from every person‘*) and help (*,it is only acceptable among girls/boys‘*). They don't point out to gender as a social category with a relevant impact on violence experience and help. Some of them pointed towards the necessity to acknowledge the diversity of children and their life circumstances in order to be able to understand and support them. Some point to factors of resilience, which are important conditional aspects in order to strengthen and support children/youth.

### How can children's rights be realised?

The respondents pointed to several aspects and strategies, through which they see children's rights realised when children/youth with violence experience get support:

- Information about children's rights (e.g. flyer in schools and youth centres)
- Offer of training for children, through which they learn about their rights and get support concerning legal questions
- Information about social services and access on a low-threshold (no costs for therapy)
- Clarification and transparency in the work approach
- Work with the parents
- Well-working networks of cooperation (e.g. Weißer Ring)

- Appropriate number of qualified staff (support ratio)
- Provision and regulation of safe places (shelters, RCF)
- Participation in the implementation of personal aims;
- Immediate help through child-oriented consultation and psychological support for children and parents in the case of suspicion
- Intensified checks and strict penalties
- Sensitivity workshops for professionals (self-reflexion, to recognise how people feel, if they are victims of violence)
- Paradigm shift in public discussions (freedom from violence as social dogma)

#### *Does the institution provide the support that is needed?*

31 respondents said 'yes' to this question, three respondents were sure, that the institution does not provide the support that is needed and two said, in some ways the institution does provide support, in other ways it does not.

What kind of support is provided on institutional level for children/youth who experience violence?

In general, again four main dimensions appear in the answers of respondents:

Some professional pointed out that the institution provides a **safe place** and offers protection. It can mean that the institution offers access on a low-threshold (e.g. 24 hour access, a first place to go to) with a clear statement on violence ('at our RCF is no place for violence'), that the institution has set clear rules related to perpetrators ('the entrance is prohibited for offenders/perpetrators') and serves as a 'shelter' in which security from further violence is provided.

Support for children/youth is furthermore provided through a **culture of care**, in which offers for talking with professionals but also among kids are usually provided. Based on the answer of some of the professionals, the culture of care is based on 'trust' and individualized support within the bounds of possibilities in different RCF. Some of the RCF offer family-like accommodation for children/youth on a long-term base, some offer short-term accommodation and first-help offers. Especially within long-term care facilities, work on the relationship seems to be an important aspect within a culture of care. Within short-term facilities, clear limits and rules seem to be important, through which a space of freedom and recreation can be provided.

Professionals especially mentioned different **therapies and methods**, through which support for children/youth is provided in RCF. Some mentioned special trained pedagogues and other staff members who provide social educational assistance and who are able to initiate specific therapies in order to overcome negative experiences through psychological and psychotherapeutic support. Some professionals pointed out, that the development of new perspectives, the strengthening of resilient actions and sometimes alternative behaviour are worked out together with the children/youth. Furthermore some pointed out, that therefore therapies outside the RCF are looked out for (organise psychotherapy if necessary).

The provision of support is based on 'current further education' for the **staff**, multi-professional teams in some RCF, specialised staff members and sensitised personnel.

Respondents who were sure, that the institution does not (or partly) provide the support that is needed mentioned a 'too rigid system', the fact that special provision has 'to be bought' or that the support of the head as well as an action plan in the RCF are missing. Therefore staff members are not prepared for the needs of children/youth.

Where **gender issues** are been taken into consideration, a gender difference approach is pointed out ('what is typical and adequate for males and females', 'different handling of boys and girls'). Some professionals pointed to the necessity that both genders should be present

on staff level in order to provide good conditions for freedom of choices for children. The majority of statements was directed towards individual needs and problems, which should be centred in the pedagogical work and which was seen in endangered through a special focus on gender.

### Challenges working with children/youth who experienced violence

The vast majority of professionals pointed to challenges, which they experienced when working with young people who were/are affected by violence.

The fact that violence experiences are not disclosed by the affected children/youth is the most frequent challenge, mentioned in the questionnaire survey, followed by the fact that victims also perpetrate violence.

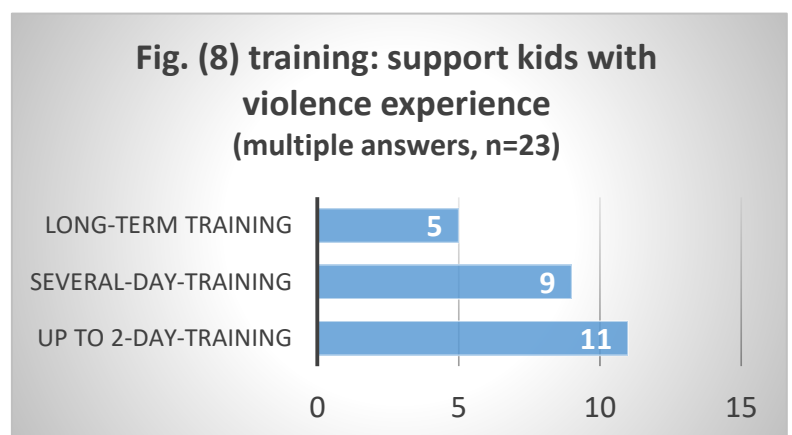
'Other' challenges to which the respondents pointed to, include aggressions against social pedagogues, unreasonable behavior of perpetrators, children's/youth' lack of trust in the establishment as well as lack of willingness of the children/youth to reappraise their experiences with violence.



### Professional Training

23 of the professionals have received further training in order to support children/youth with violence experiences. In almost half of the cases it was a further training up to two days.

For most of the professionals further training meant Traumaeducation, especially focused on the impacts of traumatization, trigger, retraumatization, the role of bodies, the impacts of violence, children and youth on the run, sexualized violence and behaviour as well as children as witnesses of violence.



Related to Traumaeducation, some of the respondents especially mentioned strategies for the solution of conflicts, de-escalation strategies and crisis intervention as important topics.

Furthermore some mentioned creativity trainings, which focused on disclosure of violence through creative techniques. This is of special importance if children/youth remain silent.

Others took part in education settings, in which police operations were trained (security for pedagogues): handling of physical violence, simulation of stress, legal security, handling of dangerous situations.

In all training settings, special attention was put on violence: different types of violence, the handling of violence, background of violence, "break the cycle of violence", pathological use



of the media, suicidal behaviour, violence in the establishments, prevention of sexualized violence, conditions for the increase of the willingness to use violence.

In almost all cases, trainings related to violence also focused on protective conditions (,how to avoid aggression?' ,how to reduce frustration?') as well as on the necessity to set limits and provide a safe space for children.

A very small group - seven out of 23 respondents - has taken part in further education, in which gender issues were given a particular focus. All other respondents negated this question.

Those who were trained in gender issues point to very different approaches in the perception of gender. While ,gender sensibility', mention ones, leads into the direction of critical reflection of gender assumptions and approaches in working with children/youth, ,different frequency scale in perception, behaviour, cognition' lead more into the direction of a gender difference approach . The same is true for ,*different types of violence for girls and boys*', while a short reference to sexualised violence does not allow any assumptions about the gender approach embedded into the topic addressed.

Six out of 23 respondents pointet out, that children's view and rights were given a particular focus within trainings related to support children/youth with violence experience. Rights in the context of sexuality, sexual human rights in consideration of age and the youth welfare act were the issues addressed in further education.

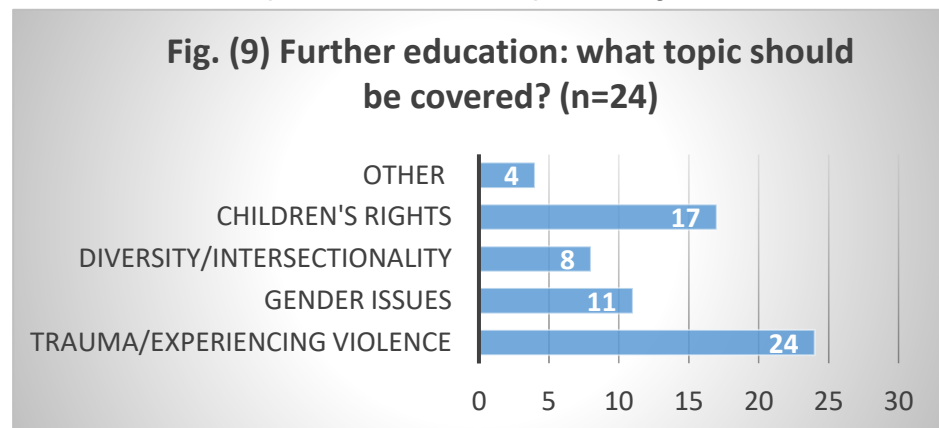
In which way helped the training to improve the work at the RCF?

- *to create the consciousness for the topic "trauma and violence" - to take up a position as well in the team... to develop a basic attitude, if necessary to be able to use the methods of de-escalation*
- *better cooperation with unaccompanied minor refugees, cooperation with child and youth psychiatry and psychotherapy*
- *through trainings more understanding for the behaviour of the children*
- *the more knowledge, the more understanding for the children and better strategies to handle it*
- *possible effects of sexualized violence, mental violence... have been discussed in detail.*
- *legal information and experiences of experts*
- *all age-based aspects*
- *"consequently damages" – effects*
- *supervision once a month*
- *to understand trauma better*
- *new ideas, to renew the development stages*
- *function as voluntary probation officer, the know-how of experts and/or colleagues*
- *careful look at the symptoms*
- *responsibility of pedagogues for children and youth, self-protection and foreign protection, self-assurance training*
- *simulation of stress, legal security, theory to practice*
- *the exchange with the lecturer, case studies and the exchange with staff have been useful.*
- *sensitization for the topic; self-awareness in situation trainings; ability to act in crisis situations; inner calming; ability to act*



### Need for further education

24 out of 37 professionals would like to get further training on supporting young people who experienced violence. For all of them, the topic of trauma and experiencing violence should be covered. Special needs were mentioned for the client group of unaccompanied minor asylum seekers. Question around legal security and children's rights ('what rights do children have?') but also around perpetrators and victims (e.g. cybermobbing) should also be relevant topics in further training for multipliers.



## 4 Summary and Recommendations

The used quantitative and qualitative methods: a synopsis of questionnaire survey, focus group interviews with professionals of four RCF in Austria, three of them middle- or long-term ones, one a short-term night shelter, and workshops with children/youth of the three middle/long term RCF was very fruitful.

The interviews have typical biases to deal with, like social desirability effects and the wish of an institution to present itself favourable (see e.g. Diekmann 2002: 403)<sup>30</sup>. But by interviewing both sides, professionals and youth, different perspectives were integrated.

### Forms of suffered violence before entering the RCF

Mostly all youth suffered violence before coming to the RCF. That is one of the big challenges for personal development and professional work: how can youth overcome this, how can they develop competences to protect themselves against further violence, e.g. by developing other communication strategies and non-violent conflict solving methods? Neglect is a typical form of violence almost all children and youth suffered before coming to the RCF. Other mentioned forms like physical violence, bullying, sexualized violence. Cybermobbing is a kind of violence some of the youth didn't experience themselves but were aware of it.

Many professionals said that they are aware of signals of violence in their daily work, like very scared and withdrawn youth, poise of body and inappropriate violent language. Young children were not able to talk about own suffered violence during the AIF workshops but older youth described different examples of personal suffered violence. It became very evident whether they were able to reflect suffered violence, talk about it, declare methods to overcome or avoid violence. But it was also very present during youth workshops in some RCF that the professionals perspective during the focus group discussion did not in all cases fit to the experiences of the youth.

<sup>30</sup> Diekmann Andreas (2002), Empirische Sozialforschung. Hamburg: Rowohlt.

## Violence in RCF

In this respect presentations of professionals and feedback of youth as shown in AIF youth workshops sometimes showed a different view. Some professionals pointed to their experience in dealing with children/youth, who suffered from violence. They presented methods and pedagogical standards, which are in their opinion sufficient for avoiding violence within the RCF and for helping kids and youth overcoming suffered violence. At the same time, for children/youth violence in the RCF was much more a present topic in their every day life.

When listening to individual statements of professionals it was difficult to detect demands for RCF. But in comparison with other interviewed RCF and in the general view with behaviour and statements of youth/children during their AIF workshops it became clear, that there are main factors helping youth to overcome suffered violence or patterns of perpetrators, to de-escalate daily living in RCF. Sometimes the view of children/youth differ from that of professionals (e.g. feeling safe in the RCF). Another evident difference between professionals' and youth' concerned rules. In the view of professionals of one RCF rules are clear for children/youth and help them feeling safe – but in the youth workshop it became evident that youth felt totally insecure about rules and sanctions. They can't rely on their professionals respecting and fostering their children's or youth' rights.

## Crucial phases and strategies

Some crucial phases and methods, which were detected for fostering resilience against violence:

- Disclosure phase: support children/youth in this phase and raise awareness
- Crucial other phases: welcome phase, exit phase, these phases have influences on group situations as well
- Sensitivity for suffered violence and signals
- Feeling safe and help children/youth being aware of their rights and possibilities - by setting rules and live them in the RCF – not only by threaten children/youth with sanctions but showing them rules as an instrument of feeling safe
- Support youth overcoming wounds of violence
- Building reliable relationships with professionals
- Develop communication skills and non violent conflict solving methods with children/youth
- Professionals and peers as role models for overcoming violent patterns
- Work in a multiprofessional team and with quality standards
- Trust in the institution and image of institution, possibility for youth to assert their rights; e.g. public image of the RCF – dealing with violence history in RCF as important factor for not feeling stigmatized

Specific structural and personal needs were detected in these exploring phase of AIF. On the structural phase: rules and guidelines, networks and multiprofessional gender sensitive team, quality standards, advanced training and supervision, architecture and the possibility to get in touch with nature, to offer suitable education, leisure and sports.

Factors that were not mentioned as a demand by professionals or children/youth directly but came out in a general view on it, were gender and intersectional aspects: RCF showed few awareness about this. A CBP should raise intersectional awareness. It should help professionals reflecting their own stereotypes and implementing these results in their offers and used pedagogical methods.

## What needs did professionals mention?

Professionals in the RCF in Austria mentioned that mostly all youth suffered violence before entering residential care facilities. They help with the process of disclosure and provide supporting structures. In the RCF residents should learn to find ways to deal with their emotions in non-violent ways. The facilities developed strategies on a structural and personal level for

residents and professionals to optimize conditions of work and living. They differ from focus and type of the facility. The professionals spoke about good practice examples, problems in the facilities and formulated needs to improve their work.

## Structural needs

- *Rules and guidelines*

It is important to have rules and guidelines, to have an objective and transparent system. This helps residents to learn a stabilising daily routine, they know their rights and in case of problems they know what to expect as consequences. The rules and guidelines are very important for the professionals too, because it provides a basis for the solution of problems and allows them to act in a comparable way. The guideline transfers responsibility from the single professionals to the RCF as institution.

- *Network and team*

The professionals need to work in a strong network, where everyone supports and informs each other. There is a need for the possibility to leave a situation and get replaced, when someone gets the feeling, something is overcharging. There is a need for face-to-face informal and formal communication.

- *System of information transfer*

The system of information transfer and circulation is very important. All professionals should be informed about everything that is going on in the RCF. That guarantees the work flow and no information gets lost. To build a system like that – that is effective and doesn't need too much time – is a big challenge.

- *Transparency and its challenges*

Transparency is a very important factor in RCF. At the same time a lot of information is confident. It is a challenge to switch between these two poles and there is a need to provide a helpful and transparent structure.

- *Architecture: Privacy and familiar atmosphere*

The architecture of a facility should offer privacy and places to retreat for all residents. The places should offer a liveable, familiar atmosphere with enough space and possibilities (sport places, garden, woods, meeting rooms...) for every need. Some professionals pointed to the necessity of every-day access to nature like woods and gardens, because of its general positive impacts on stress and negative emotions.

- *Advanced training and supervision*

Professionals need routinely supervision and advanced training.

## Personal needs

- *Welcome phase*

There is a need for special care in the welcome phase, where professionals and peers are supporting children/youth finding friends and building confidence with colleagues, with professionals and the RCF institution.

- *Relationships*

The residents need positive, trustworthy and stable relationships and a familiar atmosphere.

- *System of (self) regulation*  
The kids need stabilising daily routines with opportunities to learn to regulate their emotions. This includes relationships as well as structures and places.
- *Therapy*  
There is a need to offer (external) therapy and room to handle their feelings; e.g. helping youth becoming aware of suffered violence, neglect in their biography and care for them after disclosure.
- *Alternatives*  
The RCF needs to offer the kids alternatives to violent behaviour and alternative role models.
- *Participation*  
The residents need the possibility to participate in decision-making processes and be informed about every essential part of their life in the RCF.
- *Need for further offers for youth – short time facility*  
There seems to be a need for low-threshold offers for work within some RCF. That means, that youth can do easy works very spontaneously and unbureaucratically and earn some money for it.

#### What needs did children/youth mention?

- *Deal with abuse history of RCF and improving image*  
In one RCF old structures and pedagogical methods still seem to have an enormous impact on the self-esteem of children/youth. The children/youth tried to hide a lot: they are not proud of their RCF because this RCF had a massive case of abuse and renaming it and image work couldn't improve it's image by now. Maybe one consequence would be a total restart of the institution (e.g. new professional impulse, other pedagogical concepts focussing on violence protection, another location).
- *Strengthen self-esteem of youth*  
Professionals should deal with children/youth in a respect way, paying attention to privacy and free will. They should accept a „no“ from a child/youth and look for other ways dealing with them instead of forbidding things (e.g. bans for leaving the RCF). The way youth talked with each other and about rules reflected the way professionals deal with them.
- *Gender approach in RCF*  
When discussing with heads, professionals and children/youth, no distinct reflective gender approach in the work of some of the RCF was visible. With some exceptions job trainings seemed to follow traditional gender roles. Some boys showed big deficits in communication skills, which seems to have plastered the way towards vocational education in male dominated professions. Some of the boys don't have much possibilities to get into relation with girls. E.g. four hours maximum time to move out of the RCF (except from weekends at home) do not provide a necessary condition to get into a relation with others outside the RCF.
- *Rules and sanctions*  
Clear rules and information about sanctions seem to be very important for youth to feel safe in some RCF. One RCF gave a positive example with it's 10 rules and

consequences. Consequences are given immediately and appropriate to the trespass of the children/youth. All professionals have the same system and way to react on it, and they communicate about this regularly in team meetings. Another RCF showed that self-esteem of youth severely suffers if youth can't rely on such rules. They felt helpless and irritated, their „no“ was not accepted by professionals. The vast majority of the children/youth at this RCF had no adults they could rely on and trust in. One way to deal with the system was hiding themselves. In another RCF children/youth set their own rules in their own spaces in the RCF – but their rules reflected the rules they learned in the facility in a very positive way.

- *Freedom*

In some RCF, children/youth had the chance to go out the campus after asking and informing professionals during the whole week. In one of the RCF, children/youth pointed out that they made use of this possibility but it was not a big topic at all, compared to youth in another RCF where this was not possible. Those children/youth, who were able to decide if they want to go out or not, seemed to be more satisfied with their living than those who could not decide. For those who were able to move in and out the campus in a free and self-esteemed way, the RCF seems to be kind of a ‚homebase‘. In contrary youth in a more restricted RCF felt isolated and locked in, more like living in a ghetto. Permissions to leave the RCF campus are strongly restricted and a common punishment and sanction tool is to ban this permission to leave the RCF.