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Research article

They ask for protection: An exploratory study into experiences with violence among unaccompanied refugee children in Dutch reception facilities

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ABSTRACT

Background: Children placed under governmental supervision and staying in residential or foster care are more vulnerable to violence than children who live with their own families. One specific group of children staying in reception facilities under governmental supervision comprises unaccompanied refugee children who have fled to a host country without their parents.

Objective: This qualitative study explores the experiences of unaccompanied children with regard to violence in reception facilities in the Netherlands from the perspective of the children.

Participants and setting: 183 unaccompanied children ($N = 183$) sheltered in a variety of reception facilities in the Netherlands.

Method: Semi-structured interviews were conducted focusing on several topics related to their perceived quality of life. The transcripts of the interviews were analyzed for experiences with violence occurring inside the reception facilities. The codebook that was used was based on the categorization of maltreatment in the fourth United States National Incidence Study (NIS-4) and the interpretation of violence by the Committee on the Rights of the Child in General Comment No. 13 (GC 13).

Results: A large share (66 %) of the unaccompanied children had experienced violence in various reception facilities. Most of the experiences reported had to do with either physical and emotional abuse and neglect or institutional violence.

Conclusion: The breadth of experiences of violence underlines the responsibility of the Dutch state to invest in the safe reception of unaccompanied children in order to protect their development, while also investing in further research on the prevalence of violence in the reception of unaccompanied children.

1. Introduction

In 2019, the Convention on the Rights of the Child (CRC) is celebrating its 30th anniversary: 30 years of a united promise to protect children against violence (Article 19, CRC) (United Nations, 1989). The compliance with this promise is closely monitored by the Special Representative of the UN Secretary-General on Violence against Children, whose mandate has existed for a decade in 2019. To endorse the importance of protecting children against violence, the UN included it in the 2030 Sustainable Development

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Goals (SDG 16.2) (UN, 2015). In his first progression report on the SDG in 2019, however, the UN Secretary General stated that violence against children persists and that “renewed efforts are essential” (UN, 2019, para. 37). As with all human rights, the existence of legislation does not prevent the violation of this right, although it does provide direction to states regarding their obligations to ensure human protection. One step to be taken in this regard involves addressing the lack of well-researched data on violence against children (UN, 2019, para. 90). This is also the aim of this study.

In General Comment No. 13 (GC 13), the Committee on the Rights of the Child defined violence as “all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse and all forms of harm to children” (Committee on the Rights of the Child, 2011, para. 4). Violence against children has been studied extensively throughout the world (e.g., Al-Eissa et al., 2016; Alink et al., 2011; Feng, Chang, Chang, Fetzer, & Wang, 2015; Krug et al., 2002; Sedlak et al., 2010; Stoltenborgh, Bakermans-Kranenburg, Van IJzendoorn, & Alink, 2013; Tran, Alink, Van Berkel, & Van IJzendoorn, 2017). Exposure to violence is associated with physical problems, mental health disorders, suicidal ideation, neurocognitive deficits, poorer educational outcomes, and intimate partner violence later in life (Fry, McCoy, & Swales, 2012; Fry et al., 2018; Kavanaugh, Dupont-Frechette, Jerskey, & Holler, 2017).

In recent decades, scholars have turned their attention to the investigation of violence against children living in out-of-home care under governmental supervision. Children in residential or foster care are more vulnerable to maltreatment than are those who reside with their own families. Various forms of maltreatment of children in out-of-home care have been reported, including neglect and sexual and physical abuse by professional caregivers and peers (2014, Attar-Schwartz & Khoury-Kassabri, 2015; Attar-Schwartz, 2011; Courtney, Piliavin, Grogan-Kaylor, & Nesmith, 2001; Gibbs & Sinclair, 2000; Havlicek & Courtney, 2016; Khoury-Kassabri & Attar-Schwartz, 2014; Timmerman & Schreuder, 2014).

Several factors are related to the likelihood of violence in residential and foster care. *Child* factors, including being male, experiencing emotional problems, and being hyperactive increase the risk of becoming a victim of violence (Attar-Schwartz, 2011). *Staff* characteristics, like inexperience, frustration (Powers, Mooney, & Nunno, 1990), and a lack of attachment between the child and caregivers are associated with the incidence of violence (Font, 2015), as are factors at the *institutional* level, like a large facility size, bureaucracy, institutional culture (Colton, 2002), unsafe accommodations, poorly trained staff, and a lack of adequate supervision (Colton, 2002; Lay & Papadopoulos, 2009). Van IJzendoorn et al. (2011) describe the occurrence of “structural neglect of children in institutional care, which may include minimum physical resources, unfavorable and unstable staffing patterns, and socially-emotionally inadequate caregiver-child interactions” (p. 8). *Societal* factors, like the low prioritization of these children on the part of the government, community attitudes, and societal beliefs concerning children’s rights may also increase the risk of maltreatment (Rus et al., 2017).

One specific group of children who have been placed under governmental supervision are unaccompanied under-age refugees and asylum-seekers. In EU legislation, an unaccompanied child is defined as “a minor who arrives on the territory of the Member States unaccompanied by an adult responsible for him or her whether by law or by the practice of the Member State concerned” (EU, 2011, Article 2, sub 1). Upon arrival in the Netherlands, unaccompanied children are placed under guardianship of Nidos (the Dutch guardianship institution for unaccompanied refugee children). The responsibilities of the guardian include the reception of unaccompanied children (Zijlstra et al., 2017).

In some European countries, unaccompanied refugee children are sheltered together with indigenous children who have been placed out-of-home (Sandermann, Husen, & Zeller, 2017). In the Netherlands, however, unaccompanied children are sheltered in a variety of reception facilities, separated from indigenous children. These facilities include foster care and small residential care provided in groups, units or facilities. Unaccompanied children can also be sheltered in detention centers upon arrival in the Netherlands or in case of a planned deportation to the country of origin. Until 2016, unaccompanied children were also sheltered in large care facilities (campuses). Small residential *groups* accommodate ten children, and they are supervised throughout the entire day and night. Small residential *units* accommodate four children, and supervision is available for a few hours each day. The small residential *facilities*, which have existed since 2016, accommodate 20 unaccompanied children who have no residence permits, with supervision available for a few hours each day. Large care facilities shelter around 100 children, with one or two supervisors available 24 h a day (Zijlstra et al., 2017). In the various types of reception facilities, unaccompanied children also face a variety of general risk factors that have been associated with a greater prevalence of violence in residential and foster care. As noted by various scholars, unaccompanied children often struggle with mental health problems (Fazel, Reed, Panter-Brick, & Stein, 2012; Vervliet et al., 2014), and the quality of the child-rearing environment in the residential facilities often does not meet their needs (Kalverboer et al., 2016). The few existing studies that have addressed experiences of violence of unaccompanied children present a troubling picture. For example, Lay and Papadopoulos (2009) report that almost three quarters of the unaccompanied children participating in their study ($N = 53$) had experienced sexual maltreatment two or more times in their host countries, ranging from sexual harassment (57 %) to rape (four out of 53 participants). The perpetrators included people with whom the children had shared accommodations, as well as neighbors, group care workers, and strangers. According to two other studies, between 19.6 % and 25 % of accompanied refugee children had been victimized, and between 24 % and 30.5 % of them had witnessed violence (Berthold, 1999; Montgomery, 2008). The studies do not clearly indicate where the violence took place. One Dutch study reports that unaccompanied children living in large reception centers with restrictive regimes tend to feel unsafe, due to the high number of violent incidents occurring in the centers (Reijneveld, de Boer, Bean, & Korfer, 2005).

In a qualitative study, Van Os, Zijlstra, and Grietens (2017) studied the perspective of professionals to examine the occurrence of violence in the reception of unaccompanied children in the Netherlands in recent decades. The form of violence most commonly mentioned by the professionals occurred between peers in the reception facilities (e.g., fights and blackmail). According to the professionals, institutional elements and consequences of inadequate reception policies played an important role in the occurrence of

Table 1
Characteristics of participants ($N = 183$).

	N
<i>Gender</i>	
Male	122
Female	61
<i>Age</i>	
< 15	20
15	21
16	39
17	96
> 17	7
<i>Type of reception facility</i>	
Foster family	72
Small residential care	77
Small residential group	27
Small residential unit	46
Small residential facility	4
Large care facility (campus)	34
<i>Top 3 of countries of origin</i>	
Afghanistan	50
Somalia	26
Eritrea	22
<i>Duration of stay in The Netherlands</i>	
Up to 1 year	44
1 to 2 years	80
3 to 5 years	24
Up to 6 years	30
Unknown	5

violence in the reception facilities. Factors mentioned by the professionals include limited supervision by social workers (some inadequately trained), as well as insufficient contact with guardians, a lack of coordination between professionals, outsourcing of the support of children to volunteers and, more generally, migration and reception policies focused on discouraging immigration. As indicated by the professionals, these circumstances have created a breeding ground for violence in reception facilities for unaccompanied children (Van Os et al., 2017, pp. 105–107).

To help remediate the scarcity of scientific literature on this topic, especially from the perspective of unaccompanied children, this study aims to explore the experiences of unaccompanied children with regard to violence in reception facilities in the Netherlands. Given the Dutch state's responsibility for the reception of unaccompanied migrant children, we focus only on experiences of violence that took place inside reception facilities. We thus do not address those taking place outside of these facilities.

2. Method

This study is based on a qualitative research design. To gain insight into the experiences of unaccompanied children, we examined data from an annual monitor study initiated by the Dutch guardianship organization (Nidos) and conducted by the Study Centre for Children, Migration and Law at the University of Groningen. From 2010 until 2017, 183 unaccompanied children participated in the annual monitor. Each year, around 25 unaccompanied children were interviewed about their living circumstances and mental health situations. Some of the participants were also included in studies by Kalverboer et al. (2016) and Zijlstra et al. (2018).

2.1. Participants

The research group consisted of 183 unaccompanied children ($N = 183$; see Table 1). Most of them were boys ($n = 122$), and the average age was 16.3 years ($SD = 1.17$). At the time of the interviews, most of the children were living in small residential care ($n = 77$), with 72 children living in foster care, and the smallest group living in the large care facility ($n = 34$). The participants came from 37 different countries of origin, most from Afghanistan, Somalia, and Eritrea. The children had been residing in the Netherlands for an average of 37 months ($M = 37$, $Mdn = 18$, $Min = 4$, $Max = 204$).

2.2. Procedure

Interviews were conducted within the context of the aforementioned monitor study (Kalverboer et al., 2016). A random sample of unaccompanied children was taken by the guardianship organization Nidos. The guardians approached the selected unaccompanied children and provided them with written and oral information about the research. If a child decided to participate in the study, the guardian was also required to approve the child's participation. In some cases, the guardians did not grant such permission, due to the extreme vulnerability of the children. If the unaccompanied children and their guardians agreed to participate, appointments were

made to interview the children. Before the start of the semi-structured interviews, the children were informed that participation was voluntary, that all information obtained in the interview would be treated confidentially and anonymously, and that they were free to stop participating at any time. With permission from the children, audio recordings were made of the interviews and then transcribed verbatim. For children who did not grant permission for audio recording, notes were taken during the interview and subsequently used to write a report.

The semi-structured interviews were conducted by trained Master's students in the Department of Pedagogical Sciences at the University of Groningen. In most cases, the interviews took place at the reception facilities where the children were staying. The duration of the interviews ranged from 45 min to three hours. A translator was present for children without sufficient mastery of Dutch or English. Guardians or caregivers provided aftercare for children who had negative feelings after the interview. The research design was approved by the Ethics Committee Pedagogical and Educational Sciences of the University of Groningen.

2.3. Instruments

The semi-structured interviews were conducted according to an interview protocol based on a joint study by the European Union Agency for Fundamental Rights (FRA), which was conducted in 12 different European countries in 2009 (FRA, 2011). The interview protocol contains several topics relating to quality of life, including with regard to violence. The use of a semi-structured interview that includes a variety of topics has been shown to enhance disclosure when asking children questions on difficult topics like maltreatment (Kohli & Mather, 2003). Due to the semi-structured nature of the interview, experiences concerning violence were not necessarily limited to the specific topics included in the interview protocol. While talking about various aspects of daily life, experiences with violence could be mentioned across the entire interview. For this reason, the full transcripts of the interviews were used in the analysis.

2.4. Data analysis

We analyzed the transcripts of the interviews focusing on the experiences of unaccompanied children with regard to violence. The transcripts of the interviews with unaccompanied children were examined according to a theory-driven template analysis (Brooks, McCluskey, Turley, & King, 2015; King, 2012). Qualitative data analysis was performed using Atlas.ti, Version 8. The template used in the analysis is based on the categorization and subcategories for maltreatment, as developed for the fourth United States National Incidence Study (NIS-4). The following categories are distinguished: physical, emotional, and sexual abuse; physical, emotional, and educational neglect; other maltreatment; and maltreatment not countable by any NIS standard (Sedlak et al., 2010). We complemented the template with the interpretation of violence adopted by the Committee on the Rights of the Child, as described in General Comment No. 13. (GC 13) on the child's right to freedom from violence (Committee on the Rights of the Child, 2011). Based on GC 13, we added three categories (institutional and system violations of children's rights, self-harm, and violence in the mass media). In addition, based on the description of these categories of violence, we supplemented the NIS categories with thirteen codes (e.g., for forced marriage and substance use/abuse) and four descriptions.

The template was further supplemented to address the relationship within which the maltreatment occurred. In addition to professionals and caregivers, maltreatment by peers was included in the template. Experiences that had occurred before the child came under the guardianship of Nidos (e.g., human trafficking) and experiences that had taken place outside the reception facilities were not included in this study, nor were incidents in which the location of the violence was unclear. Because Zijlstra et al. (2018) reported separately on the health and healthcare of unaccompanied children in the Netherlands, the codes from the NIS standard concerning healthcare were not used in this study.

The initial analysis was carried out by two researchers, in order to enhance reliability (Hill et al., 2005). The researchers performed preliminary coding independently on 20 interviews, after which they further developed the template and coding rules through a process of reflective discussion. The researchers reached consensus about the fragments. This process resulted in the addition of 11 codes to the template. Using the adjusted version of the template, the two researchers coded 30 interviews independently and again engaged in reflective discussion to adjust the template and fine-tune the coding rules. After this phase, one researcher continued to code all of the transcripts of the interviews ($N = 183$) with regard to experiences of violence according to the template maintaining frequent consultation with the second researcher on coding issues. This phase also included re-coding the data, in line with the cyclical nature of coding (Saldaña, 2013). After the changes made in this process, the final template consisted of 12 categories and 95 codes (11 categories for classifying violence and one category for classifying the relationship within which the violence occurred).²

Not all forms of violence were reported in the interviews. The unaccompanied children mentioned 8 of the 11 categories of violence addressed in the template. The code "violence in the mass media" was not identified in the interviews. Although codes "general maltreatment, unspecified/other" and "general neglect – other/unspecified neglect allegations" were coded 13 times, they are not included in the results, due to the unclear, non-specified nature of the incidents (e.g., not specified what the meaning is of a 'poor foster home').

The experiences of violence reported by the unaccompanied children that related to the eight categories included in the final template are presented in the results. Consistent with our objective of exploring the experiences of unaccompanied children, we

² The final coding template is available on request.

Table 2

Number of children that reported violence per type of violence and per type of reception facility they lived in at the time of the interview.

Type of violence	Foster family* (n = 72)	Small residential group* (n = 27)	Small residential unit* (n = 46)	Small residential facility* (n = 4)	Large care facility* (n = 34)
Total	34 (47 %)	20 (74 %)	33 (72 %)	4 (100 %)	30 (88 %)
Total (excl. institutional violence)	22 (31 %)	19 (70 %)	26 (57 %)	3 (75 %)	27 (79 %)
Physical abuse	4 (5 %)	4 (15 %)	6 (13 %)	1 (25 %)	5 (15 %)
Physical neglect	0 (0 %)	7 (26 %)	6 (13 %)	0 (0%)	10 (29 %)
Sexual abuse	1 (1 %)	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Emotional abuse	11 (15 %)	14 (52 %)	9 (20 %)	0 (0%)	9 (26 %)
Emotional neglect	14 (19 %)	10 (37 %)	15 (33 %)	2 (50 %)	23 (68 %)
Educational neglect	5 (7 %)	2 (7%)	5 (11 %)	1 (25 %)	12 (35 %)
Self-harm	1 (1 %)	3 (11 %)	3 (7%)	1 (25 %)	5 (15 %)
Institutional violence	20 (28 %)	14 (52 %)	18 (39 %)	4 (100 %)	24 (71 %)

* The column percentages are presented.

report the number of children who had experienced each specific form of violence. Some of the children had been exposed to multiple forms of violence.

3. Results

3.1. Total number of unaccompanied children with experiences of violence (n = 121)

More than two thirds of the unaccompanied children participating in this study reported experiences with violence in the reception facilities (n = 121). Most of these children had experiences relating to institutional violence, emotional abuse, and neglect. If we exclude the children who reported experiences of institutional violence – a unique form of violence – then the number of children reporting experiences of violence is lower (n = 97).

The experiences of violence are presented in Table 2, broken down by the type of reception facility in which the unaccompanied child was staying at the time of the interview. Children in foster care reported the lowest number of experiences of violence (47 %), with 74 % of the children in residential groups and 72 % of the children in residential units reporting experiences of violence. All four of the children who were staying in a residential facility and 88 % of the children who were staying on a campus reported experiences of violence. Of those children reporting experiences of violence, 84 were boys and 37 were girls (total, excluding institutional violence: boys n = 74; girls n = 23).

3.2. Physical abuse (n = 20)

Some of the children reported having been physically abused in the form of hitting, pushing, kicking, or grabbing. Although physical abuse by a social worker or foster parent did occur, physical abuse was most likely to have occurred in fights between children living in the same facility. Some of the children had reported the abuse to the police. As explained by one child:

I got into a fight on the campus. We were playing basketball when a [nationality] boy biked across the field. I said something, and then I got hit in the face by the boy. It became a massive fight. I was beaten up, and I tried to defend myself. That was very hard, because multiple [nationality] boys were hitting me. I had to go to the hospital by ambulance.

3.3. Physical neglect (n = 23)

Some children reported having received inadequate nutrition, clothing, or shelter. They explained that the allowance that they had received in the reception facilities for clothing, food, and/or other expenses had not been sufficient. One boy reported that allowances for food and clothing were sometimes cut as part of punishment (e.g., for being late to the daily attendance check). The sanitary facilities in the reception facilities were unclean, and the large care facilities were over-crowded. Only a few children mentioned inadequate supervision in the residential facilities. These children reported that social workers had not seemed to notice their absence.

Sometimes I have enough money to buy clothing and food, but sometimes I don't. If I don't have money, I skip a meal.

3.4. Sexual abuse (n = 1)

Sexual abuse was mentioned only once. One girl reported having been sexually abused by a mentor in the care facility. According to her account, the mentor had touched her abdomen and breasts, and he had done similar things to other girls in the reception facility. She was distressed and wondered whether such behavior was considered normal in Europe.

3.5. Emotional abuse ($n = 43$)

The unaccompanied children participating in this study reported incidents like scolding, threatening, bullying, stealing, and discrimination. Most of these incidents had occurred in relation to other peers, although some incidents had involved social workers, foster parents, and (in a few cases) guardians. The children also mentioned having experienced fights or problems with others, although they did not elaborate on these incidents or their severity. One girl reported having been forced to work.

I've only had four fights in my 17 years of life: twice in the Netherlands, and twice in [country]. Once, somebody stole my clothes and started to scold my family. People shouldn't do that.

One specific form of emotional abuse that was reported involved the placement of unaccompanied children in detention centers or police cells in relation to their migration status ($n = 16$). In most cases, the detention had occurred upon arrival in the Netherlands or before a planned deportation. Being detained was difficult for most children, who reported having felt afraid and alone, and not knowing why they had been detained or when they would be released.

Here in the Netherlands, I was in a police cell for one day. It was horrible: a bed and a toilet. I had to cry. I didn't know Europe was also like this, and I got really scared.

3.6. Emotional neglect ($n = 64$)

Most of the incidents that were reported by the unaccompanied children were related to various types of emotional neglect.

Some of the children mentioned incidents involving inadequate nurturing and affection. They recounted having had no one to turn to, not being listened to, and not being taken seriously. In addition, one child reported overprotective treatment. According to their accounts, social workers had not had enough time to pay attention to them, and they had not been cared for when they were ill. Similar experiences were reported for some foster parents. The children mentioned strongly missing practical and/or emotional support from a guardian. They reported that their guardians had not responded to or come to see them, as they had not seemed to have time, had failed to make arrangements (e.g., concerning finances or school), or had not taken them seriously. One boy indicated that he had not had a guardian for three months after being transferred to a different facility.

I'm not happy with her [the guardian], because she doesn't help with my adoption procedure, while that is important for me. I don't see her that often. She often takes a long time before responding: when I ask something, I will receive an answer three days later or something. I don't need her that much. She drops by once every two months. I rarely see her. She could visit me more often, but the guardian tells me that I have the fewest problems, and that's why she drops by so little. I think that's unfortunate, because when I do need her, she doesn't visit me.

Children reported incidents related to a lack of structure and witnessed maladaptive behavior by peers. The reception facilities were over-crowded, and the noise kept children from sleeping and doing their homework. Some of the participants reported that their peers did not obey the rules concerning daily life (e.g., cleaning). Reported maladaptive behavior on the part of peers included stealing, truancy, use of drugs and alcohol, and fighting. Some children recounted that social workers did not intervene when peers acted out, and a few speculated that the social workers were afraid as well.

Almost all of the incidents concerning witnessing domestic violence occurred between peers in reception facilities. Children reported that they had tried to stop their peers from fighting, sought help, or left the scene and gone to their rooms. Social workers had tried to stop the fight, had called the police, or had not intervened at all. Children expressed their views on the close relationship between emotional neglect and violence. On the one hand, they mentioned being very angry, throwing or punching things, and hitting peers or social workers. On the other hand, they explained that they had engaged in such behaviors due to feelings of being misunderstood or not taken seriously, to stress, to drugs, or to a lack of respect from peers.

When I was new here, a lot of children did not show respect. I'm fed up with that, if you keep on doing it, I'll hit you, you'll get hit. Back then I had to deal with stress.

Other children recounted arguments or just mentioned fights, although it was not clear whether any physical violence had occurred. The children reported that these incidents were frequent and that, in some cases, a child would be transferred to a different reception facility as a result.

When something happens, I can sometimes call my social worker. Sometimes they have time, and sometimes they don't. Some are afraid as well, and don't dare to come. They then say that we should call the police. Sometimes, I'm afraid of the boys, especially when they've been drinking a lot.

3.7. Educational neglect ($n = 25$)

Children missed school due to considerable truancy, failure of a guardian to enroll them in education, or for unknown reasons. Children who wanted to go to school but could not expressed feelings of disappointment and boredom. The reasons for truancy mentioned by the children were the use of drugs and alcohol, feeling tired due to lack of sleep, preoccupation with the lack of a residence permit or pending deportation to the country of origin, not feeling well emotionally, and language issues. It is not clear

whether or how social workers and guardians addressed truancy. One boy explained that he had been waiting to go to school for a long time and felt that his guardian was not helping him.

I'm very disappointed that I can't go to school. I'm in a difficult position because I am a minor without parents in the Netherlands and because I'm a foreigner. I see the asylum-seeking children go to school at the asylum-seekers' center every day. They have parents who sign off on them going to school. I don't have that. That's why I had to wait for such a long time.

3.8. Self-harm ($n = 13$)

Some of the children reported that they had harmed themselves. Incidents included hitting the head against the wall, using drugs and alcohol, and one suicide attempt. Children saw peers in the reception facility using drugs and alcohol, and they saw this as an example of a way to stop thinking about their problems and feel better. Children reported being forgetful, not being able to concentrate, and skipping school as a result.

I'm very disappointed in life. I had very negative thoughts when I was in the hospital. When I think about my life, I get very sad. When I drink alcohol, everything becomes easier. Since I've been in the Netherlands, I've sniffed drugs six times, including two or three times with cocaine. I drank a lot. I drank approximately 35 bottles of liquor in four weeks. I drink so much because some problems won't get out of my head and cannot be fixed. Then all I can do is forget, and alcohol makes this happen.

3.9. Institutional violence ($n = 80$)

Children referred to the negative consequences of protracted judicial procedures. Insecurity about the possibility of deportation to the country of origin and the lack of future prospects led to stress, fatigue, a sense of alienation, fear, anger, concentration problems, nightmares, and insomnia. Children reported that crowding, a lack of structure, and common problems (e.g., related to not having a residence permit) had created an environment for conflicts between peers. Children described life on a campus as a bad environment that felt like prison.

Life is really hard in an asylum-seekers' center – too many minors with too many problems; they all come from countries with many problems, they think too much. Minors are going crazy, really. All the problems here are caused by problems in the head.

Children referred to the instability of living arrangements and frequent changes of social workers and guardians. Many expressed sadness about having to move often, sometimes with little notice or explanation. They were forced to leave friends and, in a few cases, siblings. Children in the residential facilities found it hard to be confronted with many different social workers, who sometimes applied different rules. They mentioned having many different guardians for short periods of time. Due to the distant location of campuses, the lack of a residence permit, and insufficient mastery of the Dutch language, many children felt as if they were not part of society and could not come into contact with Dutch people.

They just placed me here. They picked me up at home without saying anything, and they brought me here, and I didn't know where I was, so I had no other choice. I was very disappointed to be here now. I used to be a motivated boy, but now I've given up hope. I've got no hope left here.

Children without residence permits were worried about the restrictions inherent to life as an undocumented alien, and they were concerned about the future. These children expressed the desire to have a job, which was not allowed, and some did not attend school because they were not enrolled. A few said that the combination of insufficient allowances and no possibility of employment had led some children to work illegally or steal. Children were worried about turning 18, because they feared they would no longer have a right to education and a guardian.

I've had different guardians, and they were all really good. Now that I've turned 18, I no longer have a Nidos. My guardian was like a mother to me, I really want her to remain my Nidos. I need her help.

4. Discussion

This qualitative exploratory study provides insight into the experiences of unaccompanied children with regard to violence in their reception in the Netherlands. Our results suggest that a large share of the unaccompanied children have experienced violence in the various reception facilities in the Netherlands. The experiences of violence reported by the participants in this study varied from physical and emotional abuse and neglect to institutional violence. Our results show a distinction between experiences that unaccompanied children have at specific times and those of a more structural nature (e.g., institutional violence and emotional neglect). In most cases, experiences of neglect among unaccompanied children manifest themselves in an inadequate child-rearing environment, a lack of supervision, and the unavailability of social workers. In contrast, incidences of abuse were more likely to occur between unaccompanied children. Incidents of violence between peers are likely to arise due to the inadequate living environments in the various residential facilities in the Netherlands and the insufficient support available for managing interactions between unaccompanied children (Kalverboer et al., 2016).

The less commonly reported experiences of sexual violence are remarkable, given the findings of other studies, which indicate

that unaccompanied children are at increased risk of becoming victims of sexual violence (Lay & Papadopoulos, 2009; Mason-Jones & Nicholson, 2018). Various reasons (e.g., shame, fear of not being believed, migration status, cultural background, and communication difficulties) might play a role. Another explanation could be that the children did not feel safe sharing these types of experiences during the interviews. Additional time is needed in order to establish trust (Lay & Papadopoulos, 2009; Van Os, Zijlstra, Post, Knorth, & Kalverboer, 2018).

Despite the fact that this study did not include an inventory with regard to the specific risk factors for violence in reception facilities of unaccompanied children, in the results some risk factors are reflected. Children's experiences with a lack of supervision and the unavailability of social workers are known to have the potential to increase the likelihood that children experience violence in residential care (Powers et al., 1990). Some of these experiences might be in line with the observations of professionals in the study by Van Os et al. (2017), p. 105), who expressed concern about the inexperience of staff working in Dutch residential facilities for unaccompanied children. Furthermore, feelings of unaccompanied children of insecurity and instability due to the Dutch policies on asylum and reception, over-crowding in reception facilities, a lack of structure, frequent replacement of children, and the lack of access to education could generate a lack of sufficient conditions for providing a safe living environment for unaccompanied children. Lastly, the joint reception of unaccompanied children with a burdened past, mental health problems, and potentially conflicting cultural backgrounds could also be a factor that encourages violence in residential facilities (Attar-Schwartz, 2011).

Given that the protection of unaccompanied children is a direct responsibility of the state because their natural protectors – the parents – are not available, the fact that unaccompanied children have experiences with violence is even more troubling. Like other children in out-of-home care, the vulnerable situations of these children entitle them to *special and appropriate* protection (Art 19. jo. Art. 20 jo. 22 CRC). Like their counterparts in residential care, children with a refugee background have often experienced traumatic events and loss before finding refuge in a host country, and they are in need of a safe place to recover from these adversities (Moore, McArthur, Death, Tilbury, & Roche, 2017; Van Os, Zijlstra, Post, Knorth, & Kalverboer, 2018). As noted by one of the participants in the study by Moore et al. (2017), p. 216) on young people's views on safety in residential care, "It's got to be better than home." For unaccompanied children who have escaped from war or other forms of violence "at home," this should be self-evident.

4.1. Strengths and limitations

This study is subject to several limitations that should be taken into account when interpreting the results. The exploratory nature of the study offers only an initial overview of the experiences of unaccompanied children with regard to violence in their reception facilities, as we know only where the children were staying during the interviews. We do not have any information with which to identify the reception facilities in which the experiences of violence took place. This study is not intended as a thorough prevalence study that can distinguish between the various forms of reception facilities and we are unable to draw any conclusions concerning the relative frequency of experiences of violence in the various types of facilities. A recent nationwide Dutch study on experiences of violence among children in various types of institutions under governmental supervision made a first attempt to find reliable prevalence figures on violence against children, and our research shows that a more comprehensive research is needed (Commission De Winter et al., 2019).

There are several reasons to assume that the experiences of violence of the children participating in this study have been underestimated. In our research, we focused only on experiences of violence occurring inside the reception facilities. Such experiences could also occur outside of these facilities. Furthermore, in the process of selecting participants, guardians excluded some children whom they considered too vulnerable to participate, primarily due to mental health problems. This is not surprising, given the existing evidence that disclosing traumatic (or other) experiences might be particularly difficult for refugee children (Van Os et al., 2018a). Even when they feel free to tell their stories, they might not mention all of their experiences with violence, as their understanding of violence might have been colored by previous experiences (Majumder, O'Reilly, Karim, & Vostanis, 2015).

This study focuses on violence in the daily lives of unaccompanied children. As a result, it does not address the positive experiences of unaccompanied children in the reception facilities. The addition of a resilience perspective would have made it possible to learn more about the coping mechanisms of unaccompanied children who have experienced violence (Sleijpen, Boeijs, Kleber, & Mooren, 2016).

A further limitation of this study is that it does not consider the counter-experiences of others who were involved in the incidents described by the participants. The insights provided by this study are restricted to the experiences of unaccompanied children as victims. As demonstrated in previous studies, the experiences of perpetrators and victims could be different (Davies & Rogers, 2009). At the same time, however, one of the strengths of this study is its full focus on the views of unaccompanied children, due to the researchers' choice to design a participative, children's-rights-based approach to the subject of violence (Committee on the Rights of the Child, 2011, para. 63).

Another strength of this study is the solid theoretical framework that was used for the analysis, which is based on a combination of the social psychological perspective developed for the National Incidence Study and a children's-rights perspective based on General Comment No. 13 of the UN Committee on the Rights of the Child concerning the child's right to freedom of violence, as laid down in Art. 19 of the CRC. This study thus provides an initial, exploratory overview of a sensitive subject that requires more attention from authorities, professionals, and researchers.

4.2. Implications for practice and research

Violence against children who have been placed under the supervision of the national government has gained societal and

scientific attention in the past decades, in the Netherlands as well as in the rest of the world (Commission De Winter 2019; Commission Samson, 2012; Moore et al., 2017). Governments assign high priority to protecting these children against violence, as they have been entrusted to the care and responsibility of the state (Committee on the Rights of the Child, 2005). Gathering insight from the children's perspective with regard to the forms of violence that occur is a first step towards building knowledge on the incidence of violence and the forms of violence with which children are confronted. Further, more in-depth research on the experiences of unaccompanied children with regard to violence in reception facilities is needed, in order to assess risk factors, causes, consequences, and contexts relating to experiences with violence. These elements are necessary in order to obtain a full understanding of such experiences and to address the problems associated with them. Such research should also address various forms of institutional violence that emerge from policies on migration and reception. Institutional violence is a less obvious form of violence (Uliando & Mellor, 2012), and also in this study it has proved a complex construct, specifically in relation to the vulnerable situation of unaccompanied children. At the same time, however, insight is also needed with regard to the experiences of children with racism and other forms of exclusion, exposure to survival sex, delinquency, and other high-risk situations. Knowing the living environments of children outside the context of care facilities would enhance the possibility of addressing issues of violence within reception centres (Theocharidou, 2016). In light of the institutional risk factors that might be associated with the occurrence of violence in reception facilities, it would seem important to invest in reception policies and practices that prioritize the needs of unaccompanied children. Social policy should therefore focus on protecting children from violence by sheltering them in safe reception facilities that offer a highly supportive, stable, and affective environment, as well as quick access to appropriate education (Kalverboer et al., 2016; Zijlstra et al., 2018). Children should not be moved from facility to facility during the asylum procedure, as this is harmful to their mental health (Goosen, Stronks, & Kunst, 2014; Nielsen et al., 2008), in addition to increasing the risk that they will experience violence. It is also important to identify children who are at risk for violence, children who have had previous experiences of violence (Lay & Papadopoulos, 2009), and children who have unmet needs for mental healthcare (Zijlstra et al., 2018), in order to prevent victimization (or re-victimization) and perpetration among unaccompanied children. The results of our study also indicate that violence also occurs between peers. The identification of unaccompanied children who are particularly vulnerable to violence requires time and stability on the part of the qualified professionals who respond to the needs of these children (Colucci, Minas, Szwarc, Guerra, & Paxton, 2015; Zijlstra et al., 2018).

At the societal level, far more could be done to address community attitudes and beliefs concerning the rights and needs of unaccompanied children. Negative societal sentiments concerning children in residential care have been identified as a risk factor for the increased prevalence of violence (Rus et al., 2017). As in other host countries, the general political climate in Netherlands is hostile towards asylum-seekers, including children (Zijlstra et al., 2017). The public representation of unaccompanied children in Europe sometimes borders on criminalization, beginning subtly by replacing the word "child" by "minor" (McLaughlin, 2018). In the Netherlands, these children are referred to as "unaccompanied foreign minors," or simply by the acronym for that term. Given that the people who work with unaccompanied children in the reception facilities are part of that same society, there is a risk that the presence of violence in reception facilities could become normalized (Van Os et al., 2017, p. 107).

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Appendix A. Supplementary data

Supplementary material related to this article can be found, in the online version, at doi:<https://doi.org/10.1016/j.chiabu.2020.104442>.

References

- Al-Eissa, M. A., Saleheen, H. N., AlMadani, S., AlBuhairan, F. S., Weber, A., Fluke, J. D., et al. (2016). Determining prevalence of maltreatment among children in the kingdom of Saudi Arabia. *Child: Care, Health and Development*, 42(4), 565–571. <https://doi.org/10.1111/cch.12325>.
- Alink, L., Van IJzendoorn, R., Bakermans-Kranenburg, M., Pannebakker, F., Vogels, T., & Euser, S. (2011). *Kindermishandeling in Nederland anno 2010: De tweede nationale prevalentiestudie mishandeling van kinderen en jeugdigen (NPM-2010)*. Oegstgeest, The Netherlands: Casimir.
- Attar-Schwartz, S. (2011). Maltreatment by staff in residential care facilities: The adolescents' perspectives. *Social Service Review*, 85(4), 635–664. <https://doi.org/10.1086/664009>.
- Attar-Schwartz, S. (2014). Experiences of sexual victimization by peers among adolescents in residential care settings. *Social Service Review*, 88(4), 594–629.
- Attar-Schwartz, S., & Khoury-Kassabri, M. (2015). Indirect and verbal victimization by peers among at-risk youth in residential care. *Child Abuse & Neglect*, 42, 84–98. <https://doi.org/10.1016/j.chiabu.2014.12.007>.
- Berthold, S. M. (1999). The effects of exposure to community violence on Khmer refugee adolescents. *Journal of Traumatic Stress*, 12(3), 455–471. <https://doi.org/10.1023/A:1024715003442>.
- Brooks, J., McCluskey, S., Turley, E., & King, N. (2015). The utility of template analysis in qualitative psychology research. *Qualitative Research In Psychology*, 12(2), 202–222.
- Colton, M. (2002). Factors associated with abuse in residential child care institutions. *Children & Society*, 16(1), 33–44. <https://doi.org/10.1002/CHI.683>.
- Colucci, E., Minas, H., Szwarc, J., Guerra, C., & Paxton, G. (2015). In or out? Barriers and facilitators to refugee-background young people accessing mental health services. *Transcultural Psychiatry*, 52(6), 766–790. <https://doi.org/10.1177/1363461515571624>.
- Commission De Winter, et al. (2019). *Onvoldoende beschermd. Geweld in de Nederlandse jeugdzorg van 1945 tot heden [Insufficiently protected. Violence in Dutch youth care from 1945 till now]*. Retrieved from The Hague, the Netherlands: Commission research violence in youth care. <https://www.commissiegeweldjeugdzorg.nl/>

- binaries/121512_Eindrapport-Geweld-Deel1_TG2_tcm18-393482.pdf.
- Commission Samson (2012). *Seksueel misbruik van door de overheid uit huis geplaatste kinderen, 1945 tot heden [Sexual abuse of children placed in out-home-care by the Government]*. Amsterdam, the Netherlands: Boom.
- Committee on the Rights of the Child (2005). *General Comment No. 6 (2005) Treatment of unaccompanied and separated children outside their country of origin*. UN docs: CRC/C/GC/6.
- Committee on the Rights of the Child (2011). *General Comment No. 13 (2011) The right of the child to freedom from all forms of violence (art.19)*. UN docs: CRC/C/GC/13.
- Courtney, M. E., Piliavin, I., Grogan-Kaylor, A., & Nesmith, A. (2001). Foster youth transitions to adulthood: A longitudinal view of youth leaving care. *Child Welfare*, 80(6), 685–717.
- Davies, M., & Rogers, P. (2009). Perceptions of Blame and Credibility Toward Victims of Childhood Sexual Abuse: Differences Across Victim Age, Victim-Perpetrator Relationship, and Respondent Gender in a Depicted Case. *Journal of Child Sexual Abuse*, 18(1), 78–92. <https://doi.org/10.1080/10538710802584668>.
- EU (2011). *Directive 2011/95/EU of the European Parliament and of the Council of 13 December 2011 on standards for the qualification of third-country nationals or stateless persons as beneficiaries of international protection, for a uniform status for refugees or for persons eligible for subsidiary protection, and for the content of the protection granted*. Retrieved from <http://data.europa.eu/eli/dir/2011/95/oj>.
- Fazel, M., Reed, R. V., Panter-Brick, C., & Stein, A. (2012). Mental health of displaced and refugee children resettled in high-income countries: Risk and protective factors. *The Lancet*, 379(9812), 266–282. [https://doi.org/10.1016/S0140-6736\(11\)60051-2](https://doi.org/10.1016/S0140-6736(11)60051-2).
- Feng, J., Chang, Y., Chang, H., Fetzter, S., & Wang, J. (2015). Prevalence of different forms of child maltreatment among Taiwanese adolescents: A population-based study. *Child Abuse & Neglect*, 37(10), 4210–4219. <https://doi.org/10.1016/j.chiabu.2014.11.010>.
- Font, S. A. (2015). Are children safer with kin? A comparison of maltreatment risk in out-of-home care. *Children and Youth Services Review*, 5420–5429. <https://doi.org/10.1016/j.childyouth.2015.04.012>.
- FRA (2011). *Separated, asylum-seeking children in european union member states, comparative report*. Luxembourg, Luxembourg: Publications Office of the European Union.
- Fry, D., Fang, X., Elliott, S., Casey, T., Zheng, X., Li, J., et al. (2018). The relationships between violence in childhood and educational outcomes: A global systematic review and meta-analysis. *Child Abuse & Neglect*, 75, 6–28. <https://doi.org/10.1016/j.chiabu.2017.06.021>.
- Fry, D., McCoy, A., & Swales, D. (2012). The consequences of maltreatment on children's lives: A systematic review of data from the East Asia and Pacific region. *Trauma, Violence, & Abuse*, 13(4), 209–233. <https://doi.org/10.1177/1524838012455873>.
- Gibbs, I., & Sinclair, I. (2000). Bullying, sexual harassment and happiness in residential children's homes. *Child Abuse Review*, 9(4), 247–256. [https://doi.org/10.1002/1099-0852\(200007/08\)9:4<247::AID-CAR619>3.0.CO;2-Q](https://doi.org/10.1002/1099-0852(200007/08)9:4<247::AID-CAR619>3.0.CO;2-Q).
- Goosen, S., Stronks, K., & Kunst, A. E. (2014). Frequent relocations between asylum-seeker centres are associated with mental distress in asylum-seeking children: a longitudinal medical record study. *International Journal of Epidemiology*, 43(1), 94–104.
- Havlicek, J., & Courtney, M. E. (2016). Maltreatment histories of aging out foster youth: A comparison of official investigated reports and self-reports of maltreatment prior to and during out-of-home care. *Child Abuse & Neglect*, 52, 110–122. <https://doi.org/10.1016/j.chiabu.2015.12.006>.
- Hill, C. E., Knox, S., Thompson, B. J., Hess, S. A., Williams, E. N., & Ladany, N. (2005). Consensual qualitative research: An update. *Journal of Counseling Psychology*, 52(2), 196–203. <https://doi.org/10.1037/0022-0167.52.2.196>.
- Kalverboer, M., Zijlstra, E., Os, C., Zevulun, D., Brummelaar, M., & Beltman, D. (2016). Unaccompanied minors in the Netherlands and the care facility in which they flourish best. *Child & Family Social Work*. <https://doi.org/10.1111/cfs.12272>.
- Kavanaugh, C., Dupont-Frechette, J. A., Jersey, B. A., & Holler, K. A. (2017). Neurocognitive deficits in children and adolescents following maltreatment: Neurodevelopmental consequences and neuropsychological implications of traumatic stress. *Applied Neuropsychology: Child*, 6(1), 64–78. <https://doi.org/10.1080/21622965.2015.1079712>.
- Khoury-Kassabri, M., & Attar-Schwartz, S. (2014). Adolescents' reports of physical violence by peers in residential care settings: An ecological examination. *Journal of Interpersonal Violence*, 29(4), 659–682. <https://doi.org/10.1177/0886260513505208>.
- King, N. (2012). Doing template analysis. In G. Symon, & C. Cassell (Eds.). *Qualitative organizational research*. London, United Kingdom: Sage.
- Kohli, R., & Mather, R. (2003). Promoting psychosocial well-being in unaccompanied asylum seeking young people in the United Kingdom. *Child & Family Social Work*, 8(3), 201–212.
- Krug, E. G., Dahlberg, L. L., Mercy, J. A., Zwi, A. B., & Lozano, R. (Eds.). (2002). *World report on violence and health*. Geneva, Switzerland: World Health Organization.
- Lay, M., & Papadopoulos, I. (2009). Sexual maltreatment of unaccompanied asylum-seeking minors from the Horn of Africa: A mixed method study focusing on vulnerability and prevention. *Child Abuse & Neglect*, 33(10), 728–738. <https://doi.org/10.1016/j.chiabu.2009.05.003>.
- Majumder, P., O'Reilly, M., Karim, K., & Vostanis, P. (2015). 'This doctor, I not trust him, I'm not safe': The perceptions of mental health and services by unaccompanied refugee adolescents. *International Journal of Social Psychiatry*, 61(2), 129–136. <https://doi.org/10.1177/0020764014537236>.
- Mason-Jones, A. J., & Nicholson, P. (2018). Structural violence and marginalisation: the sexual and reproductive health experiences of separated young people on the move. A rapid review with relevance to the European humanitarian crisis. *Public Health*, 158, 156–162. <https://doi.org/10.1016/j.puhe.2018.03.009>.
- McLaughlin, C. (2018). 'They don't look like children': Child asylum-seekers, the Dubs amendment and the politics of childhood. *Journal of Ethnic and Migration Studies*, 44(11), 1757–1773. <https://doi.org/10.1080/1369183X.2017.1417027>.
- Montgomery, E. (2008). Long-term effects of organized violence on young Middle Eastern refugees' mental health. *Social Science & Medicine*, 67(10), 1596–1603. <https://doi.org/10.1016/j.socscimed.2008.07.020>.
- Moore, T., McArthur, M., Death, J., Tilbury, C., & Roche, S. (2017). Young people's views on safety and preventing abuse and harm in residential care: 'It's got to be better than home'. *Children and Youth Services Review*, 81, 212–219. <https://doi.org/10.1016/j.childyouth.2017.08.010>.
- Nielsen, S. S., Norredam, M., Christiansen, K. L., Obel, C., Hilden, J., & Krasnik, A. (2008). Mental health among children seeking asylum in Denmark – The effect of length of stay and number of relocations: A cross-sectional study. *BMC Public Health*, 2008(8), 293.
- Powers, J. L., Mooney, A., & Nunno, M. (1990). *Institutional abuse: A review of the literature*. *Journal of Child & Youth Care*, 4(6), 81–95.
- Reijneveld, S. A., de Boer, J. B., Bean, T., & Korfer, D. G. (2005). Unaccompanied adolescents seeking asylum: Poorer mental health under a restrictive reception. *The Journal of Nervous and Mental Disease*, 193(11), 759–761.
- Rus, A. V., Parris, S. R., Stativa, E., Bejenaru, A., Webster, R. D., Wente, J., & Cojocaru, S. (2017). An introduction to maltreatment of institutionalized children. In A. V. Rus, S. R. Parris, & E. Stativa (Eds.). *Child maltreatment in residential care. History, research and current practice*. Cham, Switzerland: Springer International Publishing.
- Saldana, J. (2013). *The coding manual for qualitative researchers* (second edition). Los Angeles, United States: SAGE Publications.
- Sandermann, P., Hussen, O., & Zeller, M. (2017). European welfare states constructing 'unaccompanied minors': A comparative analysis of existing research on 13 European countries. *Social Work & Society*, 15(2).
- Sedlak, A. J., Mettenburg, J., Basena, M., Petta, L., McPherson, K., Greene, A., et al. (2010). *Fourth national incidence study of child abuse and neglect (NIS-4): Report to congress*. Washington, DC, United States: Department of Health and Human Services, Administration for Children and Families.
- Sleijpen, M., Boeije, H. R., Kleber, R. J., & Mooren, T. (2016). Between power and powerlessness: A meta-ethnography of sources of resilience in young refugees. *Ethnicity & Health*, 21(2), 158–180. <https://doi.org/10.1080/13557858.2015.1044946>.
- Stoltenborgh, M., Bakermans-Kranenburg, M. J., Van IJzendoorn, M. H., & Alink, L. R. A. (2013). Cultural-geographical differences in the occurrence of child physical abuse? A meta-analysis of global prevalence. *International Journal of Psychology*, 48, 81–94. <https://doi.org/10.1080/00207594.2012.697165>.
- Theocharidou, V. (2016). *Lost in transition? Lived experiences of unaccompanied Afghan minors in Greece*. (Accessed 8 November 2019) <http://search.ebscohost.com/login.aspx?direct=true&db=ddu&AN=8953314DDF10E265&site=ehost-live&scope=site>.
- Timmerman, M. C., & Schreuder, P. R. (2014). Sexual abuse of children and youth in residential care: An international review. *Aggression and Violent Behavior*, 19(6), 715–720. <https://doi.org/10.1016/j.avb.2014.09.001>.
- Tran, N. K., Alink, L. A., Van Berckel, S. R., & Van IJzendoorn, M. H. (2017). Child maltreatment in Vietnam: Prevalence and cross-cultural comparison. *Journal of Aggression, Maltreatment & Trauma*, 26(3), 211–230. <https://doi.org/10.1080/10926771.2016.1250851>.
- Uliando, A., & Mellor, D. (2012). Maltreatment of children in out-of-home care: A review of associated factors and outcomes. *Children & Youth Services Review*, 34(12),

- 2280–2286. <https://doi.org/10.1016/j.childyouth.2012.08.003>.
- UN (2015). *Toward a world free from violence. Global survey on violence against children*. Retrieved from New York, United States: United Nations Publications. https://violenceagainstchildren.un.org/sites/violenceagainstchildren.un.org/files/documents/publications/towards_a_world_free_from_violence_global_survey_low_res_fa.pdf.
- UN (2019). *Economic and social council. Special edition: Progress towards the sustainable development goals. Report of the secretary-general, 8 may 2019* UNdocs. E/2019/68. Retrieved from <https://undocs.org/E/2019/68>.
- United Nations (1989). *Convention on the rights of the child*. Retrieved from <http://www.ohchr.org/EN/ProfessionalInterest/Pages/CRC.aspx>.
- Van IJzendoorn, M. H., Palacios, J., Sonuga-Barke, E. S., Gunnar, M. R., Vorria, P., & McCall, J. F. (2011). Children without permanent parents: Research, practice, and policy: I. Children in institutional care: Delayed development and resilience. *Monographs of the Society for Research in Child Development*, 76(4), 8–30. <https://doi.org/10.1111/j.1540-5834.2011.00626.x>.
- Van Os, C., Zijlstra, E., & Grietens, H. (2017). Haalbaarheidsonderzoek Geweld in de Jeugdzorg alleenstaande minderjarige vreemdelingen. [Feasibility study into experiences of violence in care with unaccompanied minors]. In Commissie Geweld in de Jeugdzorg (Ed.). *Aanvullend vooronderzoek* (pp. 79–141). The Hague, The Netherlands: Commissie Geweld in de Jeugdzorg. Retrieved from: https://www.commissiegeweldjeugdzorg.nl/binaries/Aanvullend%20vooronderzoek%20Commissie%20Geweld%20Jeugdzorg_tcm18-269213.pdf.
- Van Os, E. C. C., Zijlstra, A. E., Post, W. J., Knorth, E. J., & Kalverboer, M. E. (2018a). Finding keys: A systematic review of barriers and facilitators for refugee children's disclosure of their life stories. *Trauma, Violence, & Abuse*, 1–19. <https://doi.org/10.1177/1524838018757748>.
- Van Os, E. C. C., Zijlstra, A. E., Post, W. J., Knorth, E. J., & Kalverboer, M. E. (2018b). Recently arrived refugee children: The quality and outcomes of Best Interests of the Child-Assessments. *International Journal of Law and Psychiatry*, 59, 20–30. <https://doi.org/10.1016/j.ijlp.2018.05.005>.
- Vervliet, M., Meyer Demott, M. A., Jakobsen, M., Broekaert, E., Heir, T., & Derluyn, I. (2014). The mental health of unaccompanied refugee minors on arrival in the host country. *Scandinavian Journal of Psychology*, 55(1), 33–37. <https://doi.org/10.1111/sjop.12094>.
- Zijlstra, A. E., Menninga, M. C., Van Os, E. C. C., Rip, J. A., Knorth, E. J., & Kalverboer, M. E. (2018). There is no mother to take care of you. Views of unaccompanied children on health care, their mental health and rearing environment. *Residential Treatment for Children and Youth*, 36(2), 118–136. <https://doi.org/10.1080/0886571X.2018.1559118>.
- Zijlstra, E., Rip, J. A., Beltman, D., Van Os, C., Knorth, E. J., & Kalverboer, M. E. (2017). Unaccompanied minors in the Netherlands: Legislation, policy and care. *Social Work and Society*, 15(2), 1–20.