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UNACCOMPANIED MINOR ASYLUM SEEKERS' AGGRESSIVE BEHAVIOUR
Operating model for preventive work approach for instructors in group-home

ABSTRACT

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Unaccompanied minor asylum seekers' aggressive behavior:

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The purpose of this thesis is the production of an operating model, giving instructors working with minor asylum seekers tool to a preventive work approach. The thesis report describes the data collection process, the method used, and the finding of the thesis.

The method used for data collection is a qualitative research method. Participants were interviewed individually by using the thematic or semi-structured interview method. The collected data was analyzed in thematic analysis, and by summarising the result of the interviews, one created a set of instructions on how to prevent and face service users' aggressive behavior, which is the main finding for the thesis

Besides the operating model on the preventive work approach, one addressed the reasons behind minor asylum seekers' aggressive behavior and also the impact and effect of religion and spirituality on the perception of psychological problems.

Keywords: aggressive behavior, equity and equality, group-home, instructors, unaccompanied minor asylum seekers, prevention, psychosocial support, spirituality.



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1 INTRODUCTION

This report is the final work of a product based thesis. The need for research on immigration and asylum-seeking process has been increased due to the growing number of asylum seekers and immigrants in Finland and Europe in general. Therefore, there are several works done on refugees and young asylum seekers' issues. However, it is challenging to find research that deals directly with minor asylum seekers' mental health challenges. This work will discuss the mental health challenges of minor asylum seekers, the reason behind their aggressive behavior and how can the instructors work preventively to avoid or to keep the behavior minimal. The work was conducted in collaboration with one of the group-home (housing for unaccompanied minor asylum seekers) in Finland. Details about the group-home will not be mentioned in this report due to ethical issues. The work is done from the workers' point of view with the contribution of 4 instructors from the organization, who were the participant for the interviews.

The work was conducted with the qualitative research method; by using the thematic interview approach, the participants were interviewed thematically. And the outcome of the interview was summarized into the instruction using other sources of the existing operating model on how to face service users' aggressiveness. As the work was conducted with a qualitative researched approach, therefore the method used for data analysis was the thematic research method.

Apart from the main goal which is the operating model for the preventive work approach, the reason behind minor asylum seekers' aggressive behavior is addressed. As a student with an option in diaconia, I searched how do religion and spirituality affect minor asylum seekers in the perception of mental health. and why the group-home should consider making use of the church provided integration and psychosocial support services for unaccompanied minor asylum seekers.

2 UNACCOMPANIED MINOR ASYLUM SEEKERS AGGRESSIVE BEHAVIOR

2.1 Working life partner

This thesis is done in collaboration with the group-home, which we decided to keep anonymous due to the sensitivity of the topic. The center offers all-day education, care, and treatment for unaccompanied minor asylum seekers. The organization has the capacity of housing 14 habitats from the age of 0 to 17-year old. The group-home consists of multicultural and educated staff members. The team consists of one senior manager, one manager, one administrative assistant, one social worker, one senior instructor, and about 16 instructors. The work is a multi-shift, and instructors are needed all day around; there are two permanent instructors only for the night shift, two in the morning, and two to three in the evening. The morning shift starts from 8 to 16, the evening shift starts either from 1 to 21 or 2 to 22, and shift starts from 20 or 21 to eight (Source: Organization database.)

The group-home is collaborating with many different authorities. Such as the aliens' police, Border Guard, and the Finnish Immigration Service in matters concerning accommodation and arrangement of asylum interviews for new residents. The director of the group-home also participates in the Ministry / Immigration Service official working group. The group home works in close collaboration with the authorities of the located city, as it is a part of the city's family and social units. The center also cooperates with service users' representatives, relatives, and lawyers (source: organization database.)

2.2 Unaccompanied minor asylum seekers in Finland

Unaccompanied minor asylum seekers are service users for the group-home. Asylum seekers in a global context is a person who is looking for protection from persecution or serious harm in another country that is not his/her country of origin. In the EU context, an asylum seeker is someone applying for protection under the Geneva convention with the hope to get refugee status. Either the person received or not

received refugee status will depend on the reliability of his/her telling (Eu Commission 2017.)

Finnish child protection law defined a minor or a child as an individual who is below the age of 18 and youth is between eighteen and 20 (A417/2007 Section 6). The unaccompanied refugee minor concept in this thesis will refer to the article of the EU council directive, which describes the term as non-EU nationals or stateless individuals below the age of eighteen who arrived in the EU territory without his or her parent or legal guardian (EU Council). More than half of the world's refugees are children and there are also unaccompanied children among asylum seekers. In the 2010s, 150–3,000 asylum seekers have arrived in Finland each year (Pakolaisneuvonta. Lapsi suojelua hakemassa).

In 2015 Finland received about 32476 asylum seekers, of about 80 percent were under the age of 35, and Ten percent of them were unaccompanied minors (Honkasalo et al. 2017, 7). Finland's refugee advice stated that an application for international protection for an unaccompanied minor seeking asylum should be processed in the same process as for an adult. However, under Article 6 of the Aliens Act, applications by minors must be dealt with urgent, and special attention must be paid to the best interests of the child, as well as to his or her development and health (Pakolaisneuvonta. Lapsi suojelua hakemassa.)

Before a decision is taken on a child over the age of 12, the child must be consulted unless it is unnecessary. The views of the child should be taken into account according to his or her age and level of development. A younger child can also be heard if he or she is so advanced that his or her views can be addressed. The asylum seeker has to contribute to the asylum procedure, meaning that he or she must facilitate the settlement of his or her case. The minor's obligation to contribute is proportionate to his or her age and in principle, may not be as extensive as that of an adult asylum seeker (pakolaisneuvonta. Lapsi suojelua hakemassa.)

Each unaccompanied minors seeking asylum in Finland shall be assigned a representative. The representative is the only legal representative of the child exercising parental authority. He/She has an important role to play in ensuring that the

best interests of the child are taken into account. (Pakolaisneuvonta Lapsi suojelua hakemassa.)

2.3 Minor asylum seekers' mental health challenges

The rate of mental health problem among asylum seekers and immigrants are higher compared to the local citizens. Approximately nine percent suffer from a traumatic stress disorder, and five percent suffer from severe depression. The future traumatic disturbance is much more common among those who are from the war zone, such as Syria and among unaccompanied young asylum seekers whose life situation has been forced to leave his country of origin and to integrate a new nation. Having to escape from one's country of origin to immigrate to another country usually comes with lots of physical and emotional trauma, loss, depression, and deprivation. It is estimated that about 35 percent of refugees have experienced some torture and post-traumatic stress symptoms such as nervousness, impatience, restlessness, alertness, anger management issues, sleeping, and concentration problems (Honkasalo et al. 2017, 44.) The adoption of a new lifestyle, culture and waiting for the decision makes the situation even worse (Suomen Mielenterveysseura 2018, 3.) The immigration traumas and the asylum-seeking process pressure is usually released on professionals who are in direct contact with them and on cohabitants in the housing unit (Piispa et al. 2017, 21).

According to research made by UNHCR, Syrian refugee children experience a wide range of psychosocial problem issues, which are the result of war and current living situation.

‘‘Problems include fears, difficulties sleeping, sadness, grieving and depression (including withdrawal from friends and family), aggression or temper tantrums (shouting, crying and throwing or breaking things), nervousness, hyperactivity and tension, speech problems and somatic symptoms. Violent and war-related play, regression and behavioral problems are also reported among children.’’ (UNHCR)

There are many ways of defining mental health challenges, nowadays mental disorder is seen as being physical as well as spiritual. WHO defines mental health as a state of

well-being in where the individual recognizes his/her potential, the ability to cope with everyday life stress and being productive and useful for the community. The mental state of a person is influenced by many factors; genetic, social behavior (education opportunities) and cultural values. The state of mental health depends on individual's life situations and experiences, and it can be affected by individual or people surrounding the person. In the case of refugees and asylum seekers, life experiences such as genocide and being exposed to war and other life stress situations can affect the mental health of an individual (Mumba-Martiskainen 2016, 20.)

2.4 Aggressive behavior of minor asylum seekers

The focus point of this thesis is unaccompanied minor asylum seekers' aggressive behavior from the instructor's point of view. Aggression is an emotional state in which the person feels the desire to harm the person next to him or the environment. Aggression may lead to inappropriate behavior; however, it does not directly mean violence or inappropriate behavior. A person with mental illness usually has difficulty to control aggression and has issues with self-control. Aggression is often released in the form of physical violence; yelling, cursing, complaining and bullying (Soisalo 2011, 27) Several theories define aggression and violence, and aggressive behavior is a result of many factors, and it can not be explained by one factor. According to Blohin et al (2010) aggressive or violent behavior of a person can be derived from the combination of both genetic and external factors (Blohin et al 2010, 10).

Vahtera (2011, 8) defines violence as behavior involving physical force intended to hurt someone; it can also perform in the form of mental abuse. Offensive speeches and threats are also seen as an act of violence. Physical violence is released through shouting, hitting, snapping, kicks, spitting, biting, and scratching. Inappropriate language, such as naming, barking, solving, and varying degrees of intimidation are signs of mental violence as well (Leimulahti 2016, 6.)

Aggressive behavior is categorized in several types; *emotional or impulsive aggression*, which is the result of the extreme negative emotion one experiences at the moment of aggression, and it does not intend to positive outcomes. Instrumental or cognitive aggression is the type of aggression in where the action is planned and

intentional, the aim to hurt someone to gain something; monetary reward, attention, or political power. A good example of instrumental aggression is a bully who hits a child and steal his toys or a terrorist that kills a civilian to gain political exposure. Sometimes it is challenging to draw a line between emotional and instrumental aggression; however, in a deeper investigation, the emotional aggressive get less severe consequences. Aggression can either be physical or verbal. Insulting someone is seen as aggressive as hitting someone (Stangor 2014, 415.)

As mentioned before, physical aggression aims to harm someone physically by hitting, kicking, stabbing, and hitting them. Nonphysical aggression includes verbal aggression (for example yelling, screaming, swearing, calling names) and verbal relational or social aggression, which tend to harm another person's relationship by for example gossiping, exclusion or silent-treatment. Sexual, racial, homophobic jokes, and epithets, which are design to cause harm to others, are also seen as a form of nonverbal aggression (Stangor 2014, 415.) For the purpose of this study, one is going to focus on all forms of aggression (physical and nonphysical), paying much more attention to the physical aggression as instructors working with minor asylum seekers seem not to bother about the nonphysical aggression.

According to a study done by the Ministry of Social Affairs and Health, in 2008-2009, areas of higher than average risk of violence are security industries, healthcare patient care industries, and social services labor sectors. Women experience almost twice as much violence at their workplace than men. The organization has been a health professional since 2000 and noted a significant increase in violence. Not all incidents of violence are reflected in the statistics, as some are not reported (Leimulahti 2016, 17-18).

Unaccompanied minor asylum seekers in the housing unit I'm collaborating with show signs of emotional violence and shouting almost weekly. There is always a verbal fight about matters such as food, schedules, going to school, and so on. However, physical attacks such as hitting, snapping, kicks, spitting, biting, and scratching have been minimal, but whenever it happens, it always raises the need for new actions.

Service user's aggressive behavior in group-home has raised the need for the new operating model. The need for the research took origin from the workers; they find it essential for the topic to be studied and discussed. The manager of the unit is looking

forward to the results of how the phenomena has affected the instructors' working habits, environment and the causes behind this behavior.

3 PROVIDED SUPPORT FOR MINOR ASYLUM SEEKERS

3.1 Group home

When an unaccompanied minor asylum seeker arrives in to Finland, they will be placed in a group home or shelter accommodation. They can also be placed in an institute or private accommodation (Kotouttaminen.fi. unaccompanied minor). Group-homes are reception centers for unaccompanied minor asylum seekers or housing for the minor who has temporary protection. In group-homes, the emphasis is put on everyday care, education, and treatment. One of the aims of the group-homes is to ensure the integration and to prepare children independent living in Finnish society. group-homes are mainly run by health and social work field professionals. As unit group-homes are smaller and have more staff per client than in the adult reception centers. Group-homes in Finland have capacity of housing from 8 to 24 children and have the same number of staff as in child protection units (Migri 2017.)

Group-homes are run by the state, municipality and private organization, they are managed by the Ministry of Interior and directed by Finnish Immigration Services. The legislation of reception activities is developed by the Ministry of Interior. The same ministry also manages the budget the statement of revenue and expenditure on activities appropriation and directs them to the Immigration Services and further to the reception centers. Planning, directing, and monitoring group-home activities are left in the responsibility of the Immigration Service (Haavisto 2012, 19.)

Service users in group homes are unaccompanied minor asylum seekers from around the world. Depending on the group home, some are capable of housing children from 0 to 17 years old. In 2016 Finland received altogether (401), asylum-seeking applications from unaccompanied minor asylum seekers from Africa, the middle east, and Asia. Of which the biggest number was from Afghanistan, in total 109, Syria (97), Irak (65), and Somalia with 41 (Migri 2019.)

Children are given an environment that creates opportunities for hobbies, using a computer, watching TV, and enjoying the outdoors. Catering for children and adolescents is provided by either a cook or instructors. Dining is an important part of cohesion, eating is a social moment, which is also a teaching occasion. Children learn

Finnish eating habits and waste sorting. Eating together is a moment where the instructors can interact with group home's habits and share news. Regularly eating schedules creates security, and children in the group home are thought about Finnish people's ways of living and how to take care of their personal hygiene (Haavisto 2012, 20.)

There are about six group-homes in Finland, and one of them is a transit reception center for unaccompanied minor asylum seekers. The youth may stay in a transit group-home for two to eight weeks, after the asylum interview with the police and immigration office, the youth will be transferred to a permanent group home where one will stay until the end of the asylum process (Haavisto 2012, 20.)

The group home has to arrange a representative for the youth. The role of the representative is to ensure that the best interests of the child are taken into account in different situations. The Immigration Service pays a fee for the role of representative. The representative shall exercise the powers of attorney of the minor's guardian, assist the child or deal with the authorities on his or her behalf. The representative is involved, for example, in the asylum interview that is being processed in the asylum application (Migri 2020.)

3.2 Instructors

Instructors or counselors, not to confuse with the social instructor (counselor) or social worker. According to Finnish immigration, every reception center has instructors and either one social worker or a social counselor (Migri 2019).

The competencies required for the instructors is a bachelor's degree in social service sciences or healthcare. Instructors are the reception center's main workers. Their work is multitasked and shift, they are needed all day around. Even if they don't own social instructor titles, nevertheless, they should have the competence to give social instructions. The work of instructors consists mainly of basic care, education, and upbringing. Also, instructors work in tight collaboration with the authority, school, representatives, and families (Migri 2019.)

The instructors' professionalism requires the ability to adapt and develop flexibility, resilience, and good communication skills. Employee's good self-esteem, knowledge of one's own background, and experience as a valuable help in collaborative situations. These are the features also strengths in situations where a person who is stranger to us is encountered. According to Haavisto (2012) work of instructors are challenged by multiculturalism, interaction and by working with youths that need support to integrate a new society (Haavisto 2012, 22.)

The most important required skill for instructors is liberality and respect for cultural differences. It's also essential for the instructors to question their cultural norms, self-explanatory, and own function at work. Those qualities help the instructors to ethically assess service user manner and choices without seeing them as a nonconforming or as a problem. Respecting other people's opinions is something that the instructors need to be constantly practice with the youth. The survival of unaccompanied minor asylum seekers depend on adults' genuine tolerance and caring from the nearby person. The instructors need to have the courage to intervene to the youths' bad behavior and injustice against them (Haavisto 2012, 22.)

For many instructors who are the closest Finnish adult person they have, many don't have friends, and instructors are perceived as an important person. Even if the instructor can not replace the parents, they are still mother and father substudies and reliable to the youth. Group-home instructors support, hug, and comfort the youth if necessary. Children in a group-home have many adults around, and the youth pick up one to give more trust to (Haavisto 2012, 23.)

All children in the group have rights for one or two own instructors. The role of this one is to build a confidential relationship with the youth and to spend as much time as possible with him or her. The most important task is to support the service user in the integration process, according to his/her integration plan (Kettunen 2016). The relationship between the two is professional, conscious, and public. Instructors are committed to their role, and they don't get to pick up the youth they want to counsel. They are important adults to the youth and know the best all matters concerning the youth and represent the youth, for example in school. He/she arrange meetings and collaboration between different parties, if possible, he or she also can get in contact with the youth family members. Youth's responsible instructor is also responsible for a

service user's written care plan or independence plan. The instructors should also be able to support the service user in creating networking from the beginning until one will move to his or her own (Haavisto 2012, 23.)

In multicultural social work, workers are required to have a sense of cultural awareness, respect for differences, and communication skills. The work also require consideration of power relationships and understanding of minority perspectives. By listening, the worker may deepen one's understanding of service user background, life history, social situation, and future plan. Understanding service users' logic helps developing new views of the SU situation (Haavisto 2012, 24.)

3.3 The Occupational safety and health act

The Occupational Safety and Health Act obliges the employer to take into account all matters that may expose the employee to an accident. It is the employer's responsibility to ensure safety at work. By law, workplaces must have written occupational safety plans in which the threat of violence has also been taken into account. The written plan should include instructions for dealing with situations of violence. In work involving an obvious threat of violence, work and working conditions must be organized in such a way as to prevent as far as possible the threat of violence and situations of violence. In such cases, the workplace must have appropriate security arrangements or equipment to prevent or limit violence and the possibility of calling for external help (A 2002/738 section 27.)

For the work and workplace referred to in subsection (1) above, the employer shall draw up a code of conduct that draws attention in advance to the management of threatening situation and the procedure for preventing or limiting the effects of a violent situation on employee safety. It is the responsibility of the employer to organize occupational health care, th employer is also responsible for the content and implementation of occupational health care. The act aims to promote prevention of work-related illnesses and accidents. Health and safety at work and work environment, the health of employees, and the ability to work and function in different careers stages, both the work community and the promotion of these are the responsibility of the emplyer (A 1383/2001.)

3.4 Prevention

Individual freedom and prevention of all forms of violence is the principle of health care and any other workplace. The anticipation is the most important tool of prevention, as it effectively reduces difficult situations. When planning for a preventive work approach, risk should be analyzed from all components. The orientation, training and guidance of the staff are important in creating safe operations. The same safety instruction and procedure should be known by the staff, which will ensure their professionalism. Suitable items such as needles, glass bottles, scissors, etc, should be stored out of reach of service users. The workplace should have limited movement and locked doors, alarm systems and camera surveillance, All those are important factors in creating a safe environment (Leimulahti 2015, 10.)

The prevention of violence' risks can be influenced by the work community actions and control. In a good working atmosphere difficult issues become easier to handle. The incidents of violence and threats should be discussed openly by the employees. The emergence of violence and threats can be avoided, when probable threat of violence and ways of dealing with it, is jointly reflected in the work community. Also when common practices have been agreed upon, they are known to everyone, they have been practiced, and everyone is committed to abiding by them (Leimulahti 2015, 10.)

3.5 Operating models for preventive work approach

Violent situation can be substantially prevented, when the workers are aware of the factors that contribute to its' emergence. It is important for the workers to know factors that cause aggression and how the human body is affected by it. They should also be aware of and acknowledge the role of mental disorders in aggressive behavior. There are various methods developed around the world to combat workplaces' violence. AVEKKI, MAPA, HFR are the best-known methods (Leimulahti 2015, 11.)

The AVEKKI provides tools for violence management and prevention. The model has been developed by multidisciplinary institutes and organizations. It aims to creat

a safe work environment both for the workers as for the service users. The model also put emphasis on treating the service users professionally and painlessly. Anticipation, different shade of communication, the state of the work community, stressors, and how to handle threat and violence situation are the core themes of the model (Savonia. AVEKKI)

MAPA (Management of Actual or Potential Aggression) has been developed in England by Crisis Prevention Institute. It teaches violence prevention and safe treatment practices to those working in the care sector. The focus of the model is that learners should gain the essential knowledge, skills and confidence to prevent, decelerate and de-escalate crisis situations. Only MAPA-Finland trainers may provide training. MAPA has been developed at Pitkäniemi Hospital and Tampere University Hospital (Leimulahti 2015, 11.)

HFR (Controlled Physical Restraint) is an operating model desinged for socail and health care departement. The technique is used for difficult service users situation. It can limit uncontrolled and aggressive behavior. The model emphasis is put in service users' and staff's safety. The model does not focus on physical forces, instead the most important part of it is prevention and communication (Leimulahti 20115, 11.)

3.6 Diaconia and spirituality

Diaconal work is among the fundamental tasks of the Church purposely to offer help of Christian charity to those whose need is the greatest and who receive no other help. The diaconal work of the Church is accomplished in part through the local parishes and in the form of work done by professionally trained diaconal workers and by volunteers. However, diaconal is nowadays only one part of the extensive aid provided by officialdom and organizations (Finland's Evengelial Lutheran church.)

There is a significant list of services that the church offers for immigrants, asylum seekers, and refugees. The Finnish evangelical church recognizes the need for special guidance and activities for unaccompanied minor asylum seekers in their vulnerable life situations (Finland's Evengelial Lutheran church). According to the research made by UNHRC about Syrian refugee's mental health; Cultural heritage and religious

background contribute to individual identity and on the understanding of the environment one has integrated as well of all universe. Therefore, religion and social norms play a major role in the life of Syrians as well as in the Arab world in general (UNHCR 2015.)

3.7 Religiosity and spirituality

Although there is more interest in the phenomenon of religiosity and spiritual development, there is no consensus about what we mean by these concepts. One way to separate the concept of religion and spirituality is the tradition where religion is related more to the institutions, belief systems, and rituals, while spirituality relates to the more subjective and experiential aspects of religion. Some models even understand religiousness as a category within spirituality (see, for example, Macdonald 2000, Roehlkerpartain et al. 2006, 4). Spirituality has also been defined without explicit reference to a sacred or transcendent realm when it means mainly a set of human qualities (Porkka 2020.)

Some modern theorists have suggested that spiritual development is a core and universal dynamic in human development which should be moved to center stage in the developmental sciences alongside cognitive, social, emotional, and moral development. Spiritual development has been understood in these theories as a wellspring out of which emerges the pursuit of meaning, connectedness to others, and the sacred, purpose, and contributions, which can be addressed by religion or other systems of ideas and beliefs (Porkka 2020.)

Some researchers suggest that spirituality or religiosity has biological or physiological roots. Although the evidence on that is incomplete, the existing pieces of evidence seem to support the hypothesis that spiritual development is a dimension of human life and experience as significant as cognitive development, emotional development, or social development, and all of these dimensions are interrelated. Also, some support has received for the hypothesis that it is the spiritual dimension that is the most involved in a person's effort to integrate the many aspects of development. However, these results are not irrefutable (Porkka 2020.)

“Religious value systems also play a significant role in the perception and understanding of psychological problems and the methods of treatment. While many Syrians with mental problems seek help from health professionals, expecting medical or psychosocial treatment, some may also resort to religious or supernatural healing practice” (UNHCH 2015 28, 29.)

Therefore, the diaconal chapter of this thesis will discuss; how does minor asylum seekers' religious or spirituality affect their behavior and how it can be taking into consideration while planning for operating models. Also, why the group-home should consider making use of the church provided service for minor asylum seekers.

4 PROCESS DESCRIPTION

4.1 Goals and objectives

According to Rouillard 2003, goals are the general guidelines that explain what one wants to achieve. And the purpose is steps that one needs to take to attain the identified purposes. Objectives are measurable, specific, and time-bound. It outlines the who, what, when, where and how of achieving the goal (Rouillard 2003, 10-14.) This work aims to develop a set of instructions on how to face service users' aggressiveness and how to embrace preventive work approach to avoid or to keep minimal service users' aggressive behavior.

The work will be answering the following questions;

1. Why understanding the cause behind unaccompanied minor asylum seekers' aggressive behavior and how to work preventively to avoid or to keep minimal minor asylum seekers' aggressive behavior?
2. What is the influence of religion and spirituality on perception or understanding of psychological issues?
3. Why should the group-home consider making use of the church provided services to improve unaccompanied minor asylum seekers' integration and psychological well-being?

To answer the question how the goal was achieved, the final product will consist of the interviews and review of the already existing operating model on how to cope with aggressive service users in the social field. Therefore, four instructors were interviewed thematically and were supported through the interview to understand and to come out with a preventive working approach, which was edited to an operating model.

4.2 Stakeholders

Stakeholders are organizations or individuals that will directly or indirectly benefit from the project (final product). Stakeholders have the possibility of decision making, participation in activities, and they may as well as being affected by the project activities. Project or product base thesis may have primary and secondary stakeholders; Primary stakeholders are those directly involved and can be affected by the outcome of the project, and secondary stakeholders are those not in direct contact with the project, but maybe beneficial to the result. (Fataneh Zarinpoush 2006, 13.)

The product is design for the use of the instructors, helping them understanding service users' behavior and and how to embrace preventive work approach, which makes them a primary stakeholder. Secondary stakeholders are the habitats of group-home and everyone interesting in the topic, that will come across the final report. Children in the reception center will not be involved in the process, but they will for sure, benefit from the result. Hopefully, after the research instructors in the group home will gain a better understanding of service users' aggressive behavior and will develop an appropriate approach that will benefit young people in the housing unit.

4.3 Data Collection method

The work is mainly concentrated on instructors who are in direct contact with minor asylum seeker in a group-home. Qualitative research was used as a method for data collection. The qualitative approach aims to gain a deeper understanding of the social realities of individual, group, and cultural. It is used to explore behavior, experiences, perspectives, and feeling of people, finding out what matters in people's lives (Uwe Flick 2010, 3.)

The participative method was used to support instructors to gain more knowledge about the phenomena, and interview questions helped the worker to come up with a solution on how to work preventively to avoid physical aggressive contact with the service users. Four instructors were interviewed individually by using the thematic interview method. According to Hirsijärvi and Hurme (2009), the thematic interview method brings out the experiences of the interviewer rather than the researcher's owns

assumptions, as the method focus on the theme instead of detailed questions (Hirsijärvi and Hurme 2011, 48). Turvatoimija guideline on how to face aggressive client was used as a baseline for the operating model together with the summary of interviews.

4.4 Data analysis

The method used for this thesis is a qualitative data collection approach; the reason being the thematic analysis method was chosen as an approach of analysis. Braun and Clark's (2006) thematic analysis' 6 steps were used as a tool for data analysis. The thematic data analysis is used to find out people's views, opinions, experience, or value from a set of qualitative data, such as interview transcription (Braun & Clark 2006, 79.)

To get familiarized with the collected data, The interviews were transcribed and reviewed several times. The familiarization phase followed with the coding of the data, and the codes were combined and classified thematically. After the themes were reviewed and refined, this phase reveals that some of the themes were not themes at all and some of the themes were collapsed into one bigger theme, and some themes were broken into two new ones. The analysis was concluded with the production of the operating model and is documented in this report.

Prevention with the sub-themes;

- reason behind service users' aggressive behavior,
- facts that possibly provoke it,
- signs of starting aggressive behavior

How to face service users' aggressive behavior;

- what to do if the service user physically attacks you?
- the importance of teamwork on facing service users' aggressive behavior

What to do after;

- How do one should treat the service user afterward?
- How does one expecting the working community to treat the service user after?
- What kind of support one is expecting from the supervisor? Are the themes and sub-themes from the analysis.

4.5 Reliability and ethics of the thesis

According to Gothoni (2018), the ethics aim to prevent the researcher and the participants from doing wrong, improving good practices. Ethics need to be considered throughout the research process (Gothoni 2018). To start the research, research permission was applied and granted. However, before applying for the research permit, the plan was presented and approved by the supervisor(s) teachers from the university. An email was sent to the participants with all the necessary information about the research. As a leader of the research, I was required to be committed to the made agreement and worked according to the ethics, taking account of the legislation. The study was not conducted according to my personal views or prejudice.

The ethics were also paid attention throughout the data collection process; In the use of references, reporting and publishing and on how to keep the data after the research is done. Even though I have experience working with minor asylum seekers; however, for this thesis, I completely exclude myself from the process.

Children and youth are sensitive groups to work with, although this work mainly focuses on the workers, there is going to be still needed for the rule of confidentiality. Details about service users are not being mentioned. The interview with workers was anonymous. The recorded interview was secured in the computer behind the password. The name and background of the participant are not linked to the research materials and neither be mentioned in the final report. All the data and paper material will be destroyed after the research is done.

5 FINDINGS

The outcome for the thesis is the operating model, which is linked as an appendix. Also, the manager of the organization was looking for the reasons behind service users' aggressive behavior, which will be shortly addressed in the chapter below. As a student with an option in Diaconia, one needs to address the impact and effect of religion and spirituality on how minor asylum seekers' understand psychological issues.

5.1 Participants' background

Four instructors participated in the interview, all of them have more than three years of experience working with unaccompanied minor asylum seekers, and they all own at least a bachelor's degree in either social or health care. The participants have all experienced violence coming from a service user, some have experienced it happen physically to them, and some have seen it happen to others.

They define instructor work as multitasked work, which includes upbringing, care, and education. Instructors need to know everything; from cooking, driving to collaboration with health care professionals, schools and authorities. We are not a replacement for parents, however, we play a significant role in their life and with time some start to see us as an important person in their life, said participant. The work of instructors is multitasked and multicultural, therefore a degree in social or health care alone is not enough to complete the work of an instructor. Apart from degrees, instructors need to develop a sense of cultural sensitivity, flexibility, and good communication skills.

Haavisto (2012) stated that the work of instructors is challenged by multiculturalism and interaction. As their job is to facilitate and support the integration process of the youth. (Haavisto 2012, 22). Participants do not see their job being challenged by service users' aggressiveness, instead, language barriers and cultural differences were seen as facts that make their job challenging. Not having a common language sometimes leads to misunderstanding and may lead to aggressiveness. The fact that group-home is a changing environment; some of the children stay at the camp, some are sent to other group-homes. Those who stay, they only stay for some time. When the asylum process ends, those with the positive decision are placed forwards to the

family group-home (perheryhmäkoti) and those with a negative decision may stay longer or maybe deported, some even escape before the staff finds out. Instructors' work is also challenged by the rules, and regulations of the workplace, which require that all habitats should be treated equally.

5.2 Prevention

This subchapter will discuss, the importance of prevention and the method used for prevention in group-home. Do participants recognize facts that provoke service user aggressive behavior and it is importance in preventing aggressiveness. And why should the instructor have the background information of the service user and does it help in preventing service users' aggressive behavior?

Participants recognized the need for a preventive work approach. According to the participants, anticipation is an essential tool for preventive work approach. Even if you can't predict everything, it's important to build trust and get to know service users. It will help in recognizing if there are any changes in their behavior. Good anticipation will happen through a good reporting system. Participants all agreed that good reporting is key to prevention; a group-home is a changing environment; every shift has different workers. Even instructors in the same shift may sometimes lost track as the work includes cooking and driving children to activities and appointments. Once there are gaps in reporting, the information may not necessarily pass, which may lead to misunderstanding and conflict afterward. The reason being all the events during the shift must be informed to those coming to the next shift, especially if there is something divergent that happened or will happen. Unfortunately, the information in the group-home does not always pass. The lack of information contributes a lot to service user behavior.

When creating a safe work environment, it is important to pay attention to sharp items such as needles, glass bottles, scissors, etc. Those items should be stored out of reach of service users. Alarm systems and camera surveillance, as well as limiting movement with locked doors, are also important factors in a safe working environment (see chapter 3). According to the participant method used for prevention in the group-home

are; Regular discussion with the youth, consultation with health care professionals such as a psychologist, activities in where youth can release their tensions and teamwork. Also, all the sharp instruments are kept behind locked doors. The workplace has an alarm system, which according to the participants does not work well and many don't bother to use it at all.

The instructors need to know the facts that provoke service users' aggressive behavior, as it helps in prevention. The stress and tension of bad news often release through a misunderstanding about matters such as food and schedules; Regular contact with the youth, talking, and being interested and showing signs of appreciation may lower the rate of the aggressive encounter. Recognizing the signs of the starting aggressive behavior may help in preventing the actual aggression from happening. Therefore the participant all share the same opinion on knowing and building trust with the service user. Only then one will know when service users are in a bad mood or not. Sometimes you see it coming, and sometimes you don't. However, people may unconsciously show how they feel, even without words. One of the skills that the instructor needs to learn, is to read people's reactions. The worker must be able to evaluate the risk of violence realistically without prejudice affecting one's behavior (see chapter 3.2). Changes in mood and behavior are one of the signs that should ring a bell.

“A youth who has been talkative and chatting throughout the life living here, all of a sudden they start being quiet and not even keeping contact with anybody, not with the workers. Staying for a long time in their room for long hours and not participating in activities that we arrange here. You can see in a way as if they are becoming a little bit...they will draw, and they become reserved. Then I start to worry and see it as a red flag.”

Provocation from the instructors, bad news from home, the asylum process and language barriers are the facts that possibly provoke service users' aggressive behavior. The instructor provokes the service user by being disrespectful or by treating wrong the youth. Expectation not met is also one of the things that provoke aggressiveness. According to one of the instructors, some of the asylum seekers pay a significant amount of money to enter a safe country, believing that the money they paid will serve them in a new country, and it confuses them when they don't get everything they require from the group home. Some of the asylum seekers or refugees

think, that once they have entered a safe country, their problems will be wiped away (Mumba-Martiskainen 2016, 48).

“... We had a boy here, who was very demanding, and later on, we find out the reason he was demanding is that the father of this boy has paid lots of money for him to be in Finland. So for him, he thought that the father has also paid for him to get everything he wants. May through the disappointment of what they find, they are filled with anger and maybe the way of expressing that is through violence.”

In a multicultural social work, professionals are required to be culturally aware, they should pay attention to the differences and should have good interaction skills. As mentioned before, by listening to the service user, the instructor may deepen their knowledge about the background, life history, social situation, and plan of the youths. Experience, documents, and background of the service user help in anticipating aggressive behavior (see chapter 3.2).

There was disagreement about should or should not the instructors have service user background information; some find it important to have reliable background information about the service user, which can be used in preventing aggression. According to one of the participants having reliable background information about the service user will give them more opportunities to prevent the incident from happening; it will help them to be more aware and will make them take more precautions. For other participants, having background information of the service user beforehand may lead to prejudice, which may pose obstacles in knowing or building trust with the service user.

“... On the other hand, background information about the client can lead the instructor to treat the youth in a certain way. For example, if the instructors put in their mind that, that youth is going to be a problem, then he/she will be a problem because it is considered that way. I'm trying to avoid that until the very last, that the service user noticed from your face that you're a little alert.”

The fact is that they don't get as much information about the service user as they should get. Their source of information is the Border Police and the Immigration Office through the supervisor, social worker, and health care professionals. Also, youths themselves with time they start to be open about their lives. The information that instructors get cannot be fully trusted, as they may change over time. One of the instructors stated;

“Well here we go by the information we are given, but some information through the time has been investigated to be not true. For example, when you are told about the underage youngster who is coming here, some of them have been later proved by may be testing them that they are overage. You professionally you are dealing with somebody underage, but practically they are not...”

5.3 Teamwork

A team is a group of people who work together. Team members have common goals and work collaboratively to achieve common objectives. Teamwork facilitates professionals from different disciplines to work together. In a social or health care team consist of multidisciplinary members, which are professionals from a different discipline, each of the professionals has something specific to offer to service users. In group-home I collaborated with, the team consist of health care professionals such as a nurse, psychiatrist and social care professionals; instructors, social instructors, social workers, and others. They all work together to ensure the wellbeing of service users (Unit HSC 2032, 2.)

Teamwork aims to encourage and help the team to do well. Teamwork is an important part of social work as it is beneficial for the service users when colleagues work well together to ensure support and care that the service users need. It will be problematic if the team can not find a way to work in harmony and collaboratively (Unit HSC 2032, 2.) As said before in group-home teamwork is challenged by the changing environment, which seems to be the case for the group-home I worked with.

Teamwork is important in preventing, facing and dealing with post aggression situations. For the instructors that participate in the research, teamwork plays a

significant role in planning a preventive work approach, and when facing an aggressive service user. Good reporting is a result of good teamwork, also having the same baseline, working according to rules and regulations of the workplace help and keep minimal service users' aggressive behavior.

“It’s very important, in this job we have the same rules for everybody. I have heard the statement, whereby a youngster said, that ‘but so and so worker said it is okay.’” You wonder where did that come from? Yet maybe in our meeting, we said it should not be allowed, or it should be allowed, you know? Have the same rules for everybody and then stick to that, it’s very important. Because when you have the baseline, it even makes their life easier. Other than getting different information from everybody.”

When a youth starts to act aggressively, the colleagues should help with the situation, by calming down the youth or by calling an external help, if the situation so required. Leaving one alone may consciously cause serious trauma and may be seen as a crime as well. The participants recognized the importance of teamwork in prevention, facing aggressive service users, and in dealing or healing from the incident.

5.4 Reasons behind service users' aggressive behavior

The participant shared the same opinion as the below statement about the cause behind unaccompanied minor asylum seekers aggressiveness; It is challenging to conclude how the past experiences had affected minor asylum seekers' new life, as they are not open to everybody about their past and their arrival in Finland (Björklund 2015, 40). However, an unaccompanied minor asylum seeker has experienced more in life than many mainstream Finns by the time they are fifty. Many go through traumatic life situations and suffer from hunger; back home some have been street kids and lived in poverty; some of them have experienced kidnapping and served in the army. And some have been abused by human smugglers (Honkasalo et al 2016, 44.)

Asylum seekers' psychological challenges have built up gradually; Before escaping from their country of origin due to violence, conflict and other life-threatening

situation, during extreme threatening life situations and trials while escaping from their country of origin. And due to the oppressive asylum process, negative experience, and integration pressure upon entering a safe country (Finland's Evangelical Lutheran church).

Being separated from the parent and family members, in combination with other traumatic experiences, may also be the cause of somatic and psychological symptoms (Björklund 2015, 40). Mental health disorder is much more common among male asylum seekers than in women as men are luckily more prone to abuse and torture than women. In general, men are the ones that are forced to leave their country, the reason being male refugees and young boys are the majority compared to women (Mumba-Martiskainen 2016, 37.)

Instructors working with children of immigrant background should acknowledge that service users' behavior is affected by many factors. Unaccompanied minor asylum seekers' behavior is affected by one's personality, culture, and life situation. Instructors should pay attention to one's prejudice and stereotype as in a difficult life situation, bad behavior is not necessarily cultural (Haavisto 2012, 22.) However mental illness, past violence, intimidation, and intoxication may increase the risk of violent behavior (Leimulahti 2016, 9).

“The youths here are prone to aggression because there are in a situation where they are waiting, and there is not much they can do about it. They are dependent on others. In such a situation, one easily react with aggression. A frustrated person gets angry pretty easily...”

5.5 How to face service users' aggressive behavior;

Although the goal is to work as preventive as possible, no matter all the prevention methods the organization may have, sometimes you can not predict or prevent the aggressive situation from happening. That why workers need to have all measurements on how to face service users in an aggressive situation. Of course, you can fight the service user back, however, one needs to know one's right and should not lead oneself into a situation, that may cause serious harm. As mentioned before the participants

seem not to be bothered much about the verbal aggression, as they understand that youths in the group-home are living a challenging life situation; away from family, with everything new around them, and on top of that, they are also dealing with the stress, that brings the asylum-seeking process. It is when talking about physical aggression, that instructors seem to be a bit lost. Although violence is common in the social care field (see chapter 2.4) however, no one is fully prepared to be physically attacked, especially in a workplace by a service user.

“If it is coming to me, I never mind about the verbal attacks, I supposed to act professionally, of course, I don’t curse them back. In my opinion, I let them express themselves, but it is different if it gets physical, then in that case, of course, we are not allowed to fight back or something, so I will walk away and go to a safe place, but if it gets beyond that, then, of course, we have ways of asking help from outside.”

Instructors are not allowed to use physical force against service users, the best thing to do is to try to calm down the situation by being calm and talking it through without annoying the one in a bad mood. If the situation can’t be calmed by talking, instructors need to know how to protect themselves and other youths around them. The group-home located city provides an operating model and the employer arranges regularly the AVEKKI course, however, it seems not to be enough. It was obvious that the instructors are not fully trained to face aggressive service user and they all wished for more education on how to handle a situation where the service user react aggressively.

“Well, I will try to assess the situation; if it gets beyond my ability, then I try to protect others and myself. And I will alert the security guard or, in this case, the police because the security guard doesn't help if you're really in a hurry. But if it's kind of aggressiveness that you can intervene, then I will try to talk the situation through. I've never touched anyone in such a situation. At least I don't know how I would handle such a situation. I'd like some education or a course.”

5.6 What to do after

How do one should treat the service user afterward, How does one expect the working community to treat the service user after and what kind of support one is expecting from the supervisor, are the themes covered in this subchapter.

The worker needs to treat the youth right before, during, and after they have been behaving aggressively. Being fair and professional will prevent lots of harm from happening. All the participants shared the same opinion when talking about how to treat the youth after; The instructor should be able to behave as normal as before, because if the instructor shows anger at the client, then a similar situation may occur again later. But if the instructor behaves normally with the client, the young person may think this is a good person and does not want any more problems stated on of the participant. The survival of unaccompanied minor asylum seekers depend on adults' genuine tolerance and caring from the nearby person. The instructors need to have the courage to intervene to the youth's bad behavior and injustice against them (Haavisto 2012, 22).

The prevention of violence risks can be influenced by the working community through its actions and control. A good working atmosphere helps make difficult issues easier to handle. In the work community, it is possible to jointly reflect on the probable threat of violence and ways of dealing with it (see chapter 3). In this case, there should not be any changes in the way that the youth is treated. The work community should remain professional. Of course, the youth need to know that, that kind of behavior is not accepted. The work community needs to help the youth get all the support that one need.

“I wish the youth to get the treatment one needs as intense as possible. I don't want my colleagues to start fearing him, but of course, we need to be more careful with him, and we should think about whether this is the right place for him. We've youth who were sent to child protection institute for different reasons. I think this would probably be the reason to send such youth to the child protection department too.”

They all wished that the supervisor would be there for them and should be able to provide all the support that they may need after such incidents. The experienced aggressive situation may cause physical, emotional, and social development damages

(Soisalo 2011, 17-18, Takkunen 2015, 8). To avoid post-traumatic damages and self-blame, the worker that experienced an aggressive situation needs to feel honestly trusted and supported by his coworkers and supervisor. Arranging health support alone is not enough; however, the supervisor needs to take the case very seriously and support the instructor involved to the fullest. The concerned youth need to be educated and advised that such behavior is not accepted in any cases. The employer should also be able to organize regular workshops and courses on how to face aggressive service users. The employer should be able to discuss the incidents of violence and threats openly (See chapter 3.3).

“I want my supervisor to listen to me, especially to listen to my point of view, That is very important and of course to be on my side, and then together we find a solution, but not in a way that the leadership sit on the other side of the table and I’m alone on the other side of the table as if the whole thing I’m being blamed of.”

6 EVALUATION OF THE PRODUCT

6.1 Operating model contents

The operating model was made base on the outcome of the interviews and sources of already existing guides on how to face aggressive service users. Innokyl.fi describes an operating model as follows; The operating model is generalized and clear modeling for a local solution that defines the practical purpose, the core idea the component, and the process (Innokyla. Toimintamalli.)

The operating model has composed of three parts; the first part discusses the pre-aggression situation, talking about the reason behind service users' aggressive behavior and facts that possibly provoke it. The second covers the situation where the service user physically attacks the workers, how should one protect oneself, and the importance of teamwork. The third section addresses what one needs to do after the aggression, where to get support, how does one treat the service user after, how do one want the work community to treat the service user, what kind of support one is expecting from the supervisor and how does one protect oneself from self blem as described in the chart down below. The language for the final product is in English, and the final product is published online in an e-format.

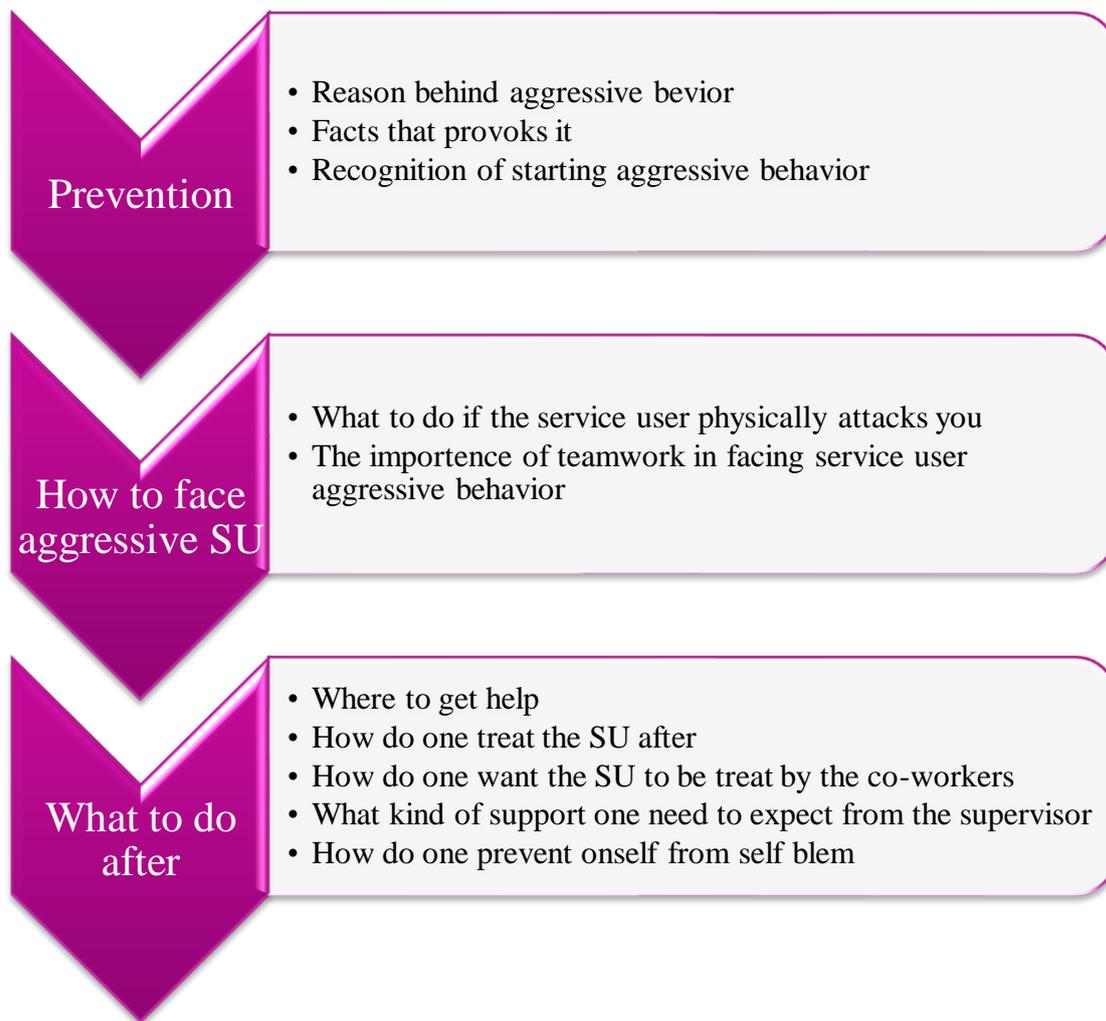


FIGURE 2. Operating model overview

6.2 Evaluation type

The aim was to evaluate the achievement of the final goal, which is the operating model and all processes in general. The evaluation of the goal will help for the improvement of future project and hopefully, it will produce development recommendations for further research. Therefore, the summative evaluation was used as an evaluation type. By using the summative and process evaluation methods, I assessed the effectiveness and achievement of the project, finding out either the goal or objective of the project was achieved. The evaluation was done before, during and after the project. (Fataneh Zarinpoush 2006, 15.)

To ensure the successful compilation of a project or its impact, effectiveness, and achievements, the evaluation question needs to be addressed, as it will indicate what project element need to be assessed. It also helps in determining the correct evaluation type, which will lead to useful evaluation result (Fataneh Zarinpoush 2006, 17.)

The evaluation process responded to the following questions; either the activities were performing as planned. In general, everything went on smoothly, even though we did not stick on the schedule, due to legislation delays and on the arrangement on interviews. I plan on having five, but we end up with four instead, because the tree of the interview was in Finnish and about 1hour long. The transcriptions and translations of the interview would have been too much for a bachelor's degree thesis, and all four interviews were very comprehensive and covered well all the topics and gave the outcome we were looking for, there weren't need for the fifth interview.

The second phase of the evaluation is to assess either the project meet the need, what could have been done differently and what are the lessons learned for future planning; According to feedback received from the participant, I concluded that the project meets its goals. The participants were all pleased by the way the interview was conducted. The topic of the research and interview questions were very relevant. It was interesting and raised thoughts about the topic. *The interviewer was nice and there were nice conversations. It was very professionally conducted; questions were very relevant to the topic.* Said the participant.

I should have been more prepared and practice the interview question carefully beforehand. One of the participants said: *There were to question that sound the same at the beginning.* The questions were clear to me, and I was expecting different answers, but it was not clear to the participant; however, I manage to clarify and the awkward moment was avoided.

Interviews took place in the participant's workplace (Group-home), which made the process challenging, as I was required to be flexible and to adapt to the changing environment. The participants were very "passioned" about the topic, which contributed positively to the research. However, it was challenging to keep some of them on the question, some of the questions were answered before being asked.

According to Zarinpoush (2006), the evaluation tools can be either formal or informal; examples of the formal evaluation tools are interviews, focus groups, survey questionnaires, and knowledge tests. Observation, informal conversations, and site visits are informal evaluation tools (Zarinpoush 2006, 20.) For the evaluation of this project, informal discussion, observation, and feedback form were used as a tool for evaluation.

7 CONCLUSION AND RECOMMENDATION

The participants are very aware of the service user aggressive behavior, the reason behind and facts that possibly provoke it, and they are trying their very best to work as preventively as possible, however, the lack of a proper education on how to face aggressive service user and enough background information about the service user, make their job a little bit challenging. Their job is also challenged by the rules and regulations of the group-home, which is the most common fact that provokes service users' aggressiveness. The group-home focus on minor asylum seekers education and upbringing. Having to raise them all with the same rules and regulation make instructors' job a bit problematic, as youth are individuals from different countries, background, culture, and religion. Therefore, the group home needs to find room for flexibility and equity without offending other youth.

7.1 Equality and equity

All asylum seekers cannot be treated equally as they are coming from different backgrounds, Professionals working with them need to be client-oriented, to have proper education, knowledge and all background information of the client. They also need to work preventively without prejudice or assumption. The development of a sense of observation and realistic conclusion about the service user and of the situation is very crucial. Everyone should be on the same page and have the same baseline as an approach to prevention. The operating model about how to face an aggressive service user needs to be memorized and practiced so that the instructors will not be caught off guard. A good example of equality and equity were brought out during the interviews, to answer the question about prevention, one of the instructors stated that;

When you offer the same service to everybody and treat them equally, of course, some need extra care, but be fair. What you do to one do it to all. For example, I have this thing when I'm working here when I'm giving something to somebody, I always as myself if I have enough to give others, even if they don't ask. Is there enough in storage, for example, so that when others will come to ask, I will have some to give. Unfairness is something that can lead to aggressiveness.

Instructors working with minor asylum seekers should acknowledge that personal norms and rules may add injustice. Equality may seem unfair to someone of another culture. Other cultural need and norms may differ from the Finnish culture. Meeting the need for all equally and fairly may provoke contradictory thoughts in work (Räty 2002, 219 - 221.)

7.2 Religion and spirituality

As mentioned in the diaconia chapter religion and spirituality play a meaningful role in the perception and understanding of psychological problems, whereas many Syrians call for the help of a medical or psychosocial professional for mental illness, some recourse to religion, spirituality, and supernatural forces. In the Islamic belief, the soul and the body are interdependent with physical and psychological aspects of experience closely intertwined. Churches and community support are used among Syrian Christians for spiritual healing and management of stress. The priest is consulted to counsel a distressed family member. It is also common for Syrians to use supernatural power for healing illness (UNHCR 2015, 28-29.) The previous statements may be the case for many other refugees and asylum seekers.

7.3 Church provided services for refugees and asylum seekers

Apart from spiritual support, the EVL church also provides integration and psychosocial help for refugees and asylum seekers. The church provided integration support an all packages, which includes different groups, such as friend and support person actions, Finnish language courses, and free-time activities. The church is open for collaboration with the reception centers to support asylum seekers' and refugees' integration process and well-being in general. The church doors are open for everybody regardless of religion (Finland's Evengelical Lutheran church.)

The groups are very beneficial for immigrants and refugees as they get to connect with local people and learn the language and why not learn about the culture in general, which is something that youth in group home need. The Finnish language courses provided by the municipality it mainly happened between the youth of immigrant

background, they don't get the chance to interact with the locals and learn about the culture from a real example. According to Honkasalo et al. (2016), in school and other study places, minor asylum seekers usually spend time with youth from the same group-home even though, that they would like to meet other youth (Honkasalo et al. 2016, 45). Therefore, the group home should consider making use of the church provided services and why not of the other religious groups, which can be valuable for youths' wellbeing.

Psychosocial support is among the services that the Ev. Lut church provides for immigrants and refugees. Psychosocial support is about comforting people in a different situation, in which surviving alone is difficult. It is a support that can be provided by church staff as well as volunteers in meeting situations. The support is about helping individuals and families recover and caught up with everyday life and activities. Psychosocial support is built out of social networking and through active inclusion. A recovered person will be able to cope with a challenging situation and will gain skills to take positive steps in life (Finland's Evangelical Lutheran church.)

Asylum seekers and quota refugees have been through a challenging situation and need mental support. The EVL church congregation' workers and volunteers want to improve their wellbeing (Finland's Evangelical Lutheran church). Though the church is doing its best to minimize stress and prevent post-traumatic disorder, through human rights support and watchfulness, self-help support, empowerment and sharing, small camps and freedom of cultural practices. However, the church recognizes the importance and need for psychosocial services and multi professionalism in supporting immigrants and refugees with mental health challenges (Mumba-Martiskainen 2016, 36.)

The reception centers provide all health-related support to all service users, including psychosocial support. Children in group homes have the same right to health care services as children residing permanently in Finland (Honkasalo et al. 2017, 45); however, not everyone believes that mental illness is a psychological problem that can be cured by a health professional. A diaconia worker stated in Mumba Martiskainen (2016) thesis, that service user who usually come for family-related matters also ask for prayer support (Mumba-Martiskainen 2016, 36). Therefore, the group-home should also consider offering their youths the opportunity to discuss their issue with

someone that can give them options to reflect their behavior from a spiritual perspective.

7.4 Discussion topics

The majority of the asylum seekers are from a culture where gender equality does not exist, or culture is male dominant, and women are not respected at all. During interviews, this topic was brought out, either always to have a male worker on each shift or not. I also got different views about having client background information beforehand. For some, having background information of service users is crucial for prevention, others though it is going to affect the workers in a way that they may have lots of prejudice about the service users.

7.5 Further research recommendation

The research was made mainly from the professional point of view; it would be interesting to hear from the minor asylum seekers' perspective, in future research can be done from the service user point of view. The reception center is a non-religion organization, and another research recommendation would be how to incorporate the church offered service to a non-religion organization. Can the church collaborate with a non-religious organization without the need for "winning service users' souls"?

7.6 Professional development

Even though I'm very passionate about the topic, I manage to exclude myself from the process, and I let the participants take over. I'm more of a practical person, conducting activity-based research is my strength. Although Managing a product-based thesis was new to me, I manage to do it effortlessly. All the process went on smoothly and I learned a lot along the process as well.

The research process allowed me to gain a deeper understanding of the data collection process; how to define the proper research method to use, different options for the

interview, data analysis methods, and writing reports about the findings. Through this research, I deepen my understanding of young asylum seekers' mental health challenges. As my goal is to continue to work with youth, this experience helped me to better understand minor asylum seekers' aggressive behavior and has equipped me with tools to better deal with it.

It's also important that one should know his/her right. Even if I can't fight the service users back, I still need to protect myself from physical and mental harms. I still need to deepen my understanding of the occupational act in practice and know more about what I can and can not do as a professional. Overall, it was a great experience and I will do it again, but this time with lots more knowledge and maturities. Conducting interviews was one of the best parts of the research, and one still needs to improve one's academic writing skills. Empowerment and giving people a voice is my passion and working with youths has always been the field of my interest, especially youths of immigrants' backgrounds and I want to improve in that as well.

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APPENDICES

Appendix 1 information about the research

Diaconia university of applied sciences

Bachelor's degree in social service sciences

Christelle Kizola

Email: -

Dear Participant,

As part of my studies at Diaconia University of Applied Sciences, I would like to invite you to a study related to my thesis.

The study is about minor asylum seekers' aggressive behavior toward instructors in the reception center. The final aim of the thesis is to come out with the operating model on how to understand and work preventively to avoid or to keep minimal client's aggressive behavior

The research is conducted by interviewing the participants one by one. An analysis of all interviews will lead to recommendations for good practices that will require feedback from participants. Then the final recommendations will be formed.

All responses will be treated confidentially, both in final recommendations, and in the thesis, the participant's identity will only be known by the researcher. Participation is completely voluntary, and it is possible to withdraw at any point from the process. The interviews will take place in the autumn of 2019 and will be recorded for later analysis.

Thus, we are asking you to share your expertise, so that it can be more widely utilized!

Sincerely,

Christelle Kizola

Tietoa tutkimuksesta

Diakonia AMK

Christelle Kizola

S-posti:

Arvoisa vastaanottaja,

Osana opintojani Diakonia AMK:ssa haluaisin kutsua teidät mukaan opinnäytetyöhöni liittyvään tutkimukseen.

Työn tarkoituksena on tutkia, Ohjaajien kohdistuva väkivalta alaikäisten vastaanotto-keskuksessa. Miten ohjaajat voivat jatkossa toimia ennalta ehkäisevästi estääkseen tai vähentämään nuorten väkivaltaista käyttäytymistä.

Tutkimus tehdään haastattelemalla osallistujia yksitellen kerran. Analyysi kaikkien haastattelujen perusteella muodostetaan suositukset hyviksi käytännöiksi, joihin osallistujilta pyydetään palautetta. Tämän jälkeen lopulliset suositukset muodostetaan.

Kaikkia vastauksia käsitellään luottamuksellisesti, sekä lopullisissa suosituksissa että opinnäytetyössä. Osallistujien henkilöllisyys jää vain tutkimuksen tekijän tietoon. Osallistuminen on täysin vapaaehtoista ja prosessista voi vetäytyä milloin tahansa.

Haastattelut ovat syksyllä 2019 ja ne nauhoitetaan myöhempää analyysiä varten. Pyydämmekin siis teitä jakamaan ammattitaitosi kanssamme, jotta sitä voidaan laajemmin hyödyntää!

Ystävällisin terveisin,

Christelle Kizola

APPENDIX 2 Informed consent

I give my consent to participate in this study and to use the results of my interview in a bachelor's degree 's final thesis for publication. The interviews will be recorded for later analysis, and my identity will be kept secret.

Signature and date

Print name

Tietoinen suostumus

Annan suostumukseni osallistua tähän tutkimukseen ja luvan käyttää haastattelun tuloksia ammattikorkeakoulututkinnon lopputyössä julkaistavaksi. Haastattelut nauhoitetaan myöhempää analyysiä varten ja henkilöllisyyteni pidetään salassa.

Allekirjoitus ja päivämäärä

Nimenselvennys

APPENDIX 3 Interview questions

Background information

Description of instructors works

- Describe the work of an instructor (counselor)
- Challenges of instructors
- Have you experienced an aggressive situation?

Definition

- How does one define aggressive behavior?
- What is aggressive behavior for you?
- What are the reasons behind client Ab?
- What are the facts that provoke the client's aggressive behavior (causes of service user aggressive behavior)?
- How do you recognize the signs of the starting AB of the client?
- Do you have enough information about the client?
- If yes, what are your sources of information, and how reliable is it?

Prevention

- How does the background information of the client help with dealing with the AB?
- How can one predict the AB of the client?
- How does workers' behavior affect client AB?
- How can it be prevented or avoid (Body language, speech)?
- What is the importance of teamwork in preventing AB?
- What kind of approach does one need to take to prevent AB?

How to face client's AB

- How do one face client AB?

- In any aggression situation, how do you protect yourself and another client around you?
- If the client physically attacks you, how does one protect and defend oneself? (Use of physical forces)?
- How would you like your colleague to help you with the situation?

Post aggression

- How to deal with the post-AB situation?
- How do you personally treat the client after?
- How would you like the client to be treated after by co-workers?
- How do you prevent yourself from self-blame?
- What kind of support did one need from colleagues?
- What kind of support one is expecting from the supervisor?
- Do you have an idea of where to get help?

Operating model:

- Do you already have an operating model on how to face an aggressive client?
- How accessible Is the current operating model for all instructors?
- Is there anything you would like to change, correct, add, or remove from the current operating model?
- What kind of change would you like to bring to the current operating model?
- What kind of an operating model would you like to have in the future?

APPENDIX 4 Palaute/ Feedback

Mitä mieltä olit haastattelusta/ what are your thoughts regarding the interview?

Vastasiko se odotuksia? / Did it respond to your expectations?

Mitä mieltä olet aiheesta/tutkimuksesta? What do you think about the topic/ research?

Minkälaisia lopputuloksia odostat/ What kind of outcome are you waiting/looking for?

Parannusehdotuksia tutkimuksesta ja haastattelusta./ -Any suggestions about the interview and the research?

Onko jotain muuta lisättävä / anything else you would like to add?

APPENDIX 5 Operating model contents

Definition

Aggression Is an emotional state, in which the person feels the desire to harm the environment or the person next to him.. Aggression may lead to an inappropriate behavior; however, it does not directly mean violence or inappropriate behavior. A person with mental illness usually has difficult to control aggression and have issues with self-control.

Aggression is often released in a form of physical violence; complaining, yelling, cursing, bullying, shouting, hitting, snapping, kicks, spitting, biting and scratching. Aggression can also be performed in a form of mental abuse; Inappropriate language, such as naming, barking, solving, and varying degree of intimidation are signs of mental violence.

Aggression and violence are defined by several theories and the aggressive behavior is a result of many factors and cannot be explained by one factor. According to Blohin et al 2010, 10, aggressive or violent behavior of a person can be derived from the combination of both genetic and external factors (Leimulahti 2016, 6-7.)

UNDERSTANDING MINOR ASYLUM SEEKERS AGGRESSIVE BEHAVIOUR AGAINST INSTRUCTOR(S) IN RECEPTION CENTRE

~ Operating model for preventive working approach ~

Reasons behind service user aggressive behavior

- ❖ Environmental and cultural factors

- ❖ Experienced trauma from home and during the journey to enter a safe country (some go through abusive process)

- ❖ Frustration due to the asylum seeking process (having to wait for the decision and being depend to other)

Facts that possibly provoke SU AB:

- ❖ Disagreement about the rules of the house
 - ❖ Misunderstanding
 - ❖ Language barrier
 - ❖ Expectations not met
- ❖ Bad news (asylum process related, concern about family members)
- ❖ Provocations from the instructors (Unconsciously or consciously)

**UNDERSTANDING MINOR ASYLUM SEEKERS AGGRESSIVE BEHAVIOUR AGAINST
INSTRUCTOR(S) IN RECEPTION CENTRE**
~ Operating model for preventive working approach ~

Signs of starting aggressive behavior

- ❖ From the facial expression (some may turn pale)

- ❖ Changing behavior and mood (someone talkative and open can suddenly start to be reserved and quiet)

- ❖ People show it differently; you must know the youth to know when they are on the bad mood)

- ❖ Sometimes you don't see it coming

UNDERSTANDING MINOR ASYLUM SEEKERS AGGRESSIVE BEHAVIOUR AGAINST INSTRUCTOR(S) IN RECEPTION CENTRE

- Operating model for preventive working approach -

Preventive working approach

- ❖ Instructors need to have relevant background info about the service user (it should not be used as a barrier)
 - ❖ Knowing and building trust with the service user
 - ❖ Regular dialogue and conversation with the youth
- ❖ Good reporting and teamwork (from the social workers and health professionals as well)
- ❖ Instructors need to be educated and have regular training on how to face aggressive service user (nonviolence self-defense course)
- ❖ Instructors should always treat service users fairly and equally (paying attention to those who need special care (equity))
 - ❖ Activities for the youth where they can release their tension
 - ❖ Be patience
- ❖ Service users need Support from different professional (Psychologist, nurse, representative, "omaohjaaja" ect..)
- ❖ They should also be given a chance to reflect their issues on a spiritual or religious point of view (with a healthy spiritual or religious organization of their choice)

**UNDERSTANDING MINOR ASYLUM SEEKERS AGGRESSIVE BEHAVIOUR AGAINST
INSTRUCTOR(S) IN RECEPTION CENTRE**

-- Operating model for preventive working approach --

When service user physically attacks you

- ❖ Protect your head with your arm

- ❖ Stay on your feet do not, in any case, lay down on the floor

- ❖ Use your voice, scream " Help, stop it"

- ❖ Do not block your vision with your hand

- ❖ Use self-defense if you can

- ❖ Use furniture close to you to protect yourself: Bring the chair in front of you for protection, use the door as a block, etc...

Teamwork

Co-work should help with the situation or call for external help (Security, police etc...)

**UNDERSTANDING MINOR ASYLUM SEEKERS AGGRESSIVE BEHAVIOUR AGAINST
INSTRUCTOR(S) IN RECEPTION CENTRE**

· Operating model for preventive working approach ·

What to do after

- ❖ If you manage to escape from the situation or the service user have gone from the scene; check yourself as soon as possible if there is any physical injury

- ❖ Don't wash out your bloody injury, Picture them before cleansing yourself (It is evidence for later investigation)

- ❖ Make sure you get the support that you need, don't stay alone

- ❖ Fill the accident/ threat notification form with your supervisor and send to the labor inspector/safety officer

- ❖ Contact the occupational health care

- ❖ Review the event in your working community and see how you can avoid such incidents from happening again

**UNDERSTANDING MINOR ASYLUM SEEKERS AGGRESSIVE BEHAVIOUR AGAINST
INSTRUCTOR(S) IN RECEPTION CENTRE**

~ Operating model for preventive working approach ~

How should the supervisor support the instructor involve

- ❖ The supervisor should talk with the youth

- ❖ Listen to the instructor(s) involved and should try to fix the situation (together)

- ❖ He/She should be able to arrange all the professional support that the instructor(s) need

- ❖ He/She should be able to understand the situation and takes the incidence very seriously (feeling neglected can cause emotional trauma)

- ❖ He/She should be aware of all the steps that need to be taken after such an incidence

UNDERSTANDING MINOR ASYLUM SEEKERS AGGRESSIVE BEHAVIOUR AGAINST INSTRUCTOR(S) IN RECEPTION CENTRE

~ Operating model for preventive working approach ~

Importance of Teamwork

- ❖ All should be on the same page about what is going on (everybody should know the same thing)
 - ❖ Inform others if the service user starts to behave aggressively
 - ❖ Never go to the situation alone
- ❖ Have the same baseline and stick to the agreed rules and regulations (helps you and service user)
 - ❖ Know your colleague (their reaction with the aggressive situation)

After aggression

- ❖ Do not feel sorry about the victim
- ❖ Talk to her or him about the incidence
- ❖ Be on his or her side and show him/her that he /she is trusted
- ❖ Have the same baseline with your colleague

UNDERSTANDING MINOR ASYLUM SEEKERS AGGRESSIVE BEHAVIOUR AGAINST INSTRUCTOR(S) IN RECEPTION CENTRE

~ Operating model for preventive working approach ~

How to treat the youth after:

- ❖ Instructor(s) need to stay professional
- ❖ Should never take anything personally
- ❖ Instructor(s) should be able to comfort the youth again
- ❖ Instructor (s) should continue to treat the youth fairly and equally

How should the youth be treated by the working community:

- ❖ The youth should get the help one needs
- ❖ Instructor(s) should not start to fear the service user after
- ❖ The youth should continue to be treated Professionally
- ❖ Instructor(s) should let the kid know that that kind of behavior is not acceptable

You prevent yourself from self-blame by:

- ❖ Working according to the rules
- ❖ Getting the help and support you need
- ❖ Talking the situation through, with professionals
 - ❖ Staying professional
- ❖ Don't intentionally provoke Service users

Sources:

Interviews

Occupational act

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AVI

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Link to the final version

https://docs.google.com/document/d/10rVZM4eEGmnyvYw-cpFg1EiIqQ6Q4nYvBChj7_0QSu8/edit?usp=sharing