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Uvodnik

DR. MITJA KRAJNČAN

gostujoči urednik

Socialna pedagogika dobiva vse pomembnejše mesto tudi v izobraževalnem prostoru. V prispevkih avtorji in avtorice prikažejo široko paleto dejavnosti dokaj mlade discipline. Usmerjenost v delu z otroki in mladostniki z vedenjskimi in s čustvenimi težavami in motnjami predstavlja prevladujoče vsebine. Prispevki pomenijo pomemben znanstveni doprinos ob inflaciji raziskav in objav dokaj majhnega kroga raziskovalnega kadra. Tako **Krajnčan** proučuje vprašanje kvalitete dela v vzgojnih zavodih oziroma sedaj strokovnih centrih, ki zahtevajo posebej sistematičen, celosten in večplasten pristop, tj. poznavanje zahtevnosti populacije, profesionalnih zahtev, organizacijskih in sistemskih okvirov kakor tudi razumevanje do potankosti delovanja vsakokratne ustanove. Zahteva tudi kritično presojo in željo po vpogledu in uvidu v kakovost lastnega dela in dela ustanove. V primerjalni analizi ustvari shemo, ki omogoča tako strokovno orientacijo kot samorefleksijo in samooceno.

Avtorice **Gazilj, Borić** in **Ćosić** iščejo izziv razumevanja in izboljšanja vzgojnih ustanov v večdimenzionalni naravi obravnave in življenjskega okolja. Cilj te študije je zagotoviti globlji vpogled v izkušnje vzgojnih namestitev z vidika mladostnikov in vzgojiteljev. Tema raziskave je bila osredinjena na doživljanje in opisovanje vzgojnih namestitev ter na povezavo med vidikom mladostnikov in vzgojiteljev. V raziskavi je sodelovalo 14 mladostnikov in 7 strokovnjakov. Rezultati so pokazali, da imajo mladostniki in vzgojitelji negativni odnos do vzgojne namestitve. Vzgojitelji pa poudarjajo svoje razočaranje nad neustreznostjo sistema posredovanja in kompleksnostjo dela z otroki s številnimi tveganji in težavami. Z obeh vidikov je kakovost odnosa med mladostniki in vzgojitelji ključni element obravnave.

Ustvarjanje okolja, kjer mladostniki dosegajo pozitivne rezultate, varnost, odprtost in upoštevanje, so bistveni elementi izboljšanja obravnav.

Schwaiger v svojem prispevku analizira 25 evropskih projektov z vidika možnosti in omejitev poglobljene tehnologije, in sicer od virtualne (VR – ang. virtual reality) in obogatene (AR – ang. augmented reality) resničnosti do mešane (MR – ang. mixed reality) in razširjene (XR – ang. extended reality) resničnosti v izobraževalnem in vzgojnem (socialnopedagoškem) delu. Avtor ugotovi, da tehnične in infrastrukturne zahteve postajajo vse manjši problem (čeprav še vedno obstajajo), vsekakor pa najbolj primanjkuje celovitega poznavanja teh tehnologij in njihovega potenciala kot učnih orodij med vodji usposabljanj in učitelji.

Sledi prispevek **Berdajsa,** ki se usmerja v aktualno področje skrbi in dela s starejšim delom prebivalstva. Socialna pedagogika se umešča kot pomemben dejavnik v oblikovanje vključujočega socialnega okolja in pestrega vsakdana starejših. Socialni pedagog mora imeti znanja in kompetence, da lahko oceni psihične, emocionalne, kognitivne in socialne zmožnosti starejše osebe. Ugotoviti mora rang samostojnosti starejšega v različnih življenjskih situacijah ter najti vire pomoči v njem in njegovem okolju. Avtor v preglednem članku izpostavi, da socialni pedagog razume starostnikove probleme in išče rešitve v povezavi starostnikovih osebnih socialnih virov.

Naslednji prispevek avtorice **Bogdan Zupančič** je pomemben za razvoj teorije socialne pedagogike. Prinaša analizo radikalizacije kot del procesov novodobnega osvobajanja, ki jih prepoznamo v prepletu emancipacijskega potenciala v socialni pedagogiki in mobilizacijske dimenzije v teoriji razvoja skupnosti. Vzporedno problematizira notranje razcepljeno socialnopedagoško držo, ki po eni strani želi osvobajati, po drugi pa se vedno znova ujame v ohranjanje obstoječih razmerij. Socialna pedagogika za svoj razvoj potrebuje raziskovanje zgodovinskih, epistemoloških, kontekstulanih in funkcionalnih dimenzij, ki omogočajo, da pomembna načela lastnega profesionalnega delovanja – kritičnost, avtorefleksivnost, evalvacija, metaanalize oz. socioanalize – uporabijo same na sebi.

Vukovič v naslednjem prispevku evalvira tabore preživetja v naravi kot obliko treningov oziroma usposabljanja otrok in mladostnikov s socialnimi veščinami. Trening socialnih veščin ponuja orodja, s katerimi si lahko ljudje pomagajo dosegati cilje. Socialne veščine so ene od mnogih veščin, ki jih »učimo« na taborih preživetja. Doživljajski preživetveni tabori so namenjeni predvsem mladostnikom z vedenjskimi in čustvenimi težavami. Vključujejo bivanje v naravi, preživetje, solidarnost, psihofizične napore in aktivno participacijo.

Udeleženci se morajo torej naučiti, da rezultat transfera prenesejo, ga prevedejo, uporabijo pod različnimi pogoji, v drugačnih situacijah. Intenzivne, socialno izolirane projekte z atraktivnimi vsebinami in lokacijami ter usposobljenimi strokovnimi spremljevalci bi morali implementirati v sistem vzgoje in izobraževanja. Za otroke in mladostnike, ki se težko spoprijemajo z institucionalnimi pravili, bi bili tovrstni intenzivni programi zelo dobrodošli.

Zadnji članek, avtorice **Vrhunc Pfeifer,** zaključuje področje dela z otroki in mladostniki z vedenjskimi in čustvenimi težavami in/ali motnjami z analizo kriznih situacij v vzgojnih zavodih oziroma strokovnih centrov. Krizne situacije lahko eskalirajo do tako hudih oblik, da so strokovni delavci ob določenih situacijah brez ustreznih postopkov. Najpogosteje se spopadajo z različnimi vrstami nasilja, avtoagresijo, uporabo prepovedanih substanc ter zlorabami. Pogosti so tudi primeri otrok/mladostnikov, ki jim lahko pripisujemo težave v duševnem zdravju. Krizne intervencije se razlikujejo glede na zahtevnost situacije, vendar je ne glede na pristop pri vsaki rešitvi pomemben ustrezen odnos. Pregledni članek kriznih situacij in intervencij je tudi teoretična osnova ciljnega raziskovalnega projekta o izdelavi izhodišč za pripravo smernic za delo z omenjeno populacijo.

Editorial

DR. MITJA KRAJNČAN
Guest Editor

Also in the educational space, social pedagogy has been receiving an increasingly relevant position. In their contributions the authors display a wide array of activities of the rather young discipline, with orientation into work with children and adolescents with behavioural and emotional difficulties and disorders representing the dominant content. Confronted with an inflation of studies and publications of the quite small circle of research cadre, the papers represent an important scientific contribution. **Krajnčan** thus explores the issue of the quality of work in educational institutions - or now professional centres - that requires especially systematic, comprehensive, and multilayered approach, i.e. the knowledge of the demands of the population, of professional requirements, organisational and systemic frameworks, and understanding into detail the operation of each individual institution. It also requires critical assessment and desire for insight into both the quality of one's own work and the quality of the work of the institution. In a comparative analysis he creates a scheme that allows for both professional orientation and self-reflection and self-assessment.

In their paper the authors **Gazilj, Borić and Ćosić** seek the challenge of understanding and improving educational institutions in the multidimensional nature of treatment and the living environment. The objective of the study is to provide a deeper insight into experiencing educational placements from the perspective of adolescents and the educational staff. The topic of the research was focused on experiencing and describing educational placements as well as on the relationship between the perspectives of the adolescents and the staff.

In the research 14 adolescents and 7 professional staff were involved. The results indicate that both the adolescents and the staff have negative attitude toward educational placement. The teachers emphasise their disappointment with the inappropriateness of the system of intervention and the complexity of the work with children with a number of threats and difficulties. From both perspectives the quality of the relationship between the adolescents and the teachers is the key element of the treatment. Creating an environment where adolescents achieve positive outcomes, safety, openness, and recognition are the key elements of improving the treatment.

In his paper, **Schwaiger** analyses 25 European projects through the lens of opportunities and limitations of in-depth technologies, namely from virtual and augmented reality (VR and AR) to mixed (MR) and extended reality (XR) in educational (socio-pedagogical) work. The author finds that technical and infrastructure requirements have been becoming a minor - although still existing - problem, while comprehensive knowledge of these technologies and their potential as teaching tools is what trainers and teachers still lack the most.

The paper by **Berdajs** follows, focused on the topical area of care and work with the older part of the population. As a relevant factor, social pedagogy is involved in the shaping of an inclusive social environment and varied everyday of elderly citizens. Social pedagogues must possess the knowledge and competences needed for the assessment of psychological, emotional, cognitive, and social competences of elderly persons. They must identify the rank of the independence of elderly persons in diverse life situations and find the sources of support in them and in their environment. In the review paper the author points out that social pedagogues understand the problems of elderly persons and seek solutions in relation with their personal social resources.

In the following paper, relevant for the development of the theory of social pedagogy, **Bogdan Zupančič** analyses radicalisation as part of the modern-day liberation processes that can be identified in the interplay of the emancipatory potential in social pedagogy and mobilisation dimension in the community development theory. We problematise parallelly the internally split social-pedagogical stance that on the one hand wishes to liberate, while on the other hand it time and again finds itself trapped in the preservation of the existing relations.

For its development, social pedagogy needs research in historical, epistemological, contextual, and functional dimensions that allow it to apply the important principles of professional operation - critical attitude, self-reflexivity, evaluation, meta analyses or social analyses - on their own.

The paper follows, in which **Vukovič** evaluates survival camps in the wild as a form of exercise, training children and adolescents in social skills. Training social skills offers tools which people can avail themselves of to meet their objectives. Social skills belong to the many skills "learnt" at survival camps. Experiential survival camps are primarily targeted at adolescents with behavioural and emotional difficulties. They include staying in the wild, survival, solidarity, psycho-physical efforts, and active participation. The participants must thus learn to sustain the result of the transfer, to translate it, to use it under various conditions, in various situations. Intensive, socially isolated projects with attractive content and locations and qualified professional staff should be implemented into the education system. For children and adolescents who find it difficult to cope with institutional rules, such intensive programmes would be extremely welcome.

The last paper, by **Vrhunc Pfeifer**, concludes the area of working with children and adolescents with behavioural and emotional difficulties and/or with disorders with an analysis of crisis situations in educational institutions or in professional centres. Crisis situations can escalate to so severe forms that in certain situations leave the professional staff without adequate procedures. The most often they must cope with diverse forms of violence, self-aggressivity, use of illegal substances, and with abuse. Cases of children and adolescents are also common to whom mental health issues can be attributed. Crisis interventions differ according to the complexity of the situation; regardless of the approach, however, attitude is crucial for any kind of intervention. The review article on crisis situations and interventions is also a theoretical basis of the target research project about the production of baselines for the preparation of guidelines for working with the population discussed above.

Indicators of The Quality of Work in Residential Treatment Centres

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Abstract/Izvleček In the last year, residential treatment centres in Slovenia have made a significant shift from traditional approaches to programs for young people which are adapted to their needs within the entire continuum of help: from preventive work to early detection, a range of support programs, various programs in out-of-home care, and intensive treatment, up to the most difficult cases.
It is therefore important that the work be properly reflected through quality settings. These concern all aspects of an institution's operation. Using a comparative method of comparing sources and analytical synthesis, we have shown all the important areas of operation of such a system. Orientation towards the areas of work quality represents a modern and current discourse, while simultaneously providing starting points for development.

Kazalniki kvalitete dela v vzgojnem zavodu
Vzgojni zavodi v Sloveniji so v zadnjem letu naredili pomemben premik iz tradicionalnih pristopov k programom za mlade prilagojenim glede na njihove potrebe in sicer v celotnem kontinuumu pomoči. Od preventivnega dela do zgodnje detekcije, različnim podpornim programom, različnim programom v izvendružinski vzgoji, intenzivnih obravnav, vse do najtežjih primerov.
Zato je pomembno, da se delo ustrezno reflektira skozi postavke kvalitete. Le te zadevajo vse pore delovanja ustanove. S komparativno metodo primerjave virov in analitične sinteze, smo prikazali vsa pomembna področja delovanja takšnega sistema. Orientacija v področja kvalitete dela predstavlja sodoben in aktualen diskurz ter hkrati daje izhodišča za razvoj.

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Introduction to the problem

Residential treatment centres perform an extremely demanding and socially important mission. They are intended for the population whose development is endangered and for whom living in the home environment poses too great a risk. The work presents specific psychosocially stressful situations. We seek to emphasize the importance of professionalization of and cooperation among all services that are important for the child or adolescent, and the participation of the child/adolescent and parents in question. In Slovenia, we have 9 residential treatment centres: Veržej, Maribor, Ljubljana - Malči Beličeve, Ljubljana - Jarše, Smlednik, Kranj, Višnja gora, Logatec and Planina. Their organizational forms are differentiated from educational groups, residential groups, intensive educational and residential groups, farms, independent living residences, mobile services, etc. The term residential treatment centre therefore includes all the above-mentioned forms, which in accordance with the forthcoming legislation will be renamed professional centres.

In this article, we will analyse important starting points that contribute to defining and focusing on the quality of work in a residential treatment centre. We will review which knowledge and competences, related to both theoretical and practical knowledge, professionals should possess and will illuminate the areas of quality and (self)reflection in more detail.

Method

Critical reflection and analysis, as well as comparison of similar concepts represent the research methods. It is a combination of analytically descriptive and analytically interpretive and comparative methods, analysis and synthesis.

We will compare sources which have a design for the system of care in residential treatment centres that is theoretically and practically similar to that in our country, with the purpose of designing indicators of work quality. This field is new in our country; therefore, we have set the goal of designing important indicators to function as a measure in the reflection and evaluation of social pedagogical work in residential treatment centres.

Results and discussion

Socio-pedagogical starting points

The question of what is best for residential treatment centres offers the thesis that residential treatment centres are based on the paradigm of upbringing, education, along with the paradigm of therapy. This practical theoretical approach is presented as a challenge to residential treatment centres in the orientation towards living space, which moves the issue of a more appropriate, better life towards the centre of social pedagogical activity. Therefore, it is important to review and properly place the various discourses on which the concepts of residential treatment centres' operation are based (Krajnčan, 2019a, Krajnčan, 2019b).

The discourse of deinstitutionalization

The process of deinstitutionalization is complex. Deinstitutionalization in the strict sense of the word has all the characteristics of a large organization. This structure is composed of the division of labour, highly formalized application of rules, and complex hierarchies. A similar discourse is decentralization, which we understand according to Wolff (2020) as the distribution of functions, authorities, influences and housing relations into several centres. Decentralization is the intention with which we wish to avoid or reduce non-independence, stigmatization, institutional-specific subculture and hierarchical structures. Deinstitutionalization in the broader sense of the word is presented as a humanistic process containing discourses from normalization to the social pedagogical help oriented towards the life world of an individual (Wolf, 1999). Normalization is the orientation toward living, relational, and ecological conditions comparable to those of peers in a corresponding, average environment (Wolfensberger, 1989). Regionalization is aimed at helping within the environment in which the child or adolescent lives, so that he or she is able to maintain social relationships and correcting the inappropriate ones within the living space itself (Peters, 2008, Knuth and Koch, 2010). Professionalization is extremely important and requires social pedagogical workers to be broadly educated and have a personally stable professional profile (Müller, 2008). Participation is presented as a basic premise of human rights (Marovič, 2016, p. 235). It contributes to more successful socio-pedagogical intervention and significantly correlates with the effectiveness of treatment for children and adolescents with behavioural and emotional disorders in the process of institutional help.

Figure 1: Participation in residential treatment centres (Pluto, L. 2007, p.53)

Empowerment is focused on the individual's resources and achieves optimal results when the social pedagogical help in his/her living space is directed in a timely manner (Hamberger, Koch, Lenz, Peters, 2006, Wolf, 1999). The intertwining of discourses requires a networked and coordinated operation of all the entities involved (Krajnčan, Šoln Vrbinc, 2015).

We will show how to develop change strategies in order to achieve actual deinstitutionalization (Falk, 2016, p. 233).

The results will be summarized in five points (Falk, 2016, pp. 232 - 235):

1. The existence of institutions for people with behavioural and emotional disorders is not questionable. The organizational approach puts at the forefront those spatial and organizational conditions which are seen as those that need to be changed. The overall nature of the organization is only partially explained. Namely, all accommodation, care and support are still provided by the organization. Opening to the social space and cooperating with other services are not mandatory but remain quite limited and difficult. It is important to be aware in the shaping of spatial proximity of general infrastructure and other social pedagogical services.

2. Children and adolescents are not decisively involved in decisions about change. They are only informed about the changes and can choose from various options offered by the organization. Thus, resident-centered intervention pathways do not affect the formation of awareness of the anticipated changes at the interactive level. In addition, there is no formal change for them. Active change in the population's own role is encouragedinsufficiently. The position of power

or powerlessness of the residents does not change; intentional change in the relationship between employees and residents has no formal equivalence (Wolf, 1999).

3. Employees focus on the abilities of residents, to which the main thoughts about change are related. The aims of change are considered feasible, which depends on the ability of the residents. Thus, it can be concluded that the employees distinguish which residents are subject to the principles. This means that the institution with its principles has not fully examined its acceptance of change, only partially. Consequently, some important modes of operation remain in use and unchallenged.

4. If children and adolescents do not get involved responsibly, it could be concluded from the employee's point of view that they alone are competent (with knowledge and skills) to speak and act on behalf of children and adolescents. Therefore, strengthening the role of employees affects the residents, who are used to being kept safe and guided.

5. Whenever we take a deficit as the starting point of optics and define obstacles as personal characteristics, the feasibility of the principles is already in question at the starting point. The aim is for all residents to be able to live anywhere. The aims of self-determination, cooperation, individual orientation, and social space orientation, on the other hand, do not seem self-evident.

Deinstitutionalisation means moving away from exclusionary structures and deficit-related optics. It is a matter of complete deinstitutionalisation, which calls into question the legitimacy of the existence of special institutions. This is especially true of their totalitarian claims. The current institution needs to be directed from its core to understanding the needs of children and adolescents with behavioural and emotional problems and disorders. The path to this result is consequently reasonably called deinstitutionalization (Falk, 2016).

Structural changes lead to changes in interpersonal relationships and can lead to gradual institutional change. They are a break from the familiar and disrupt routine. In this way, they provoke and cause us to question the modes of operation, to treat them consciously and change them, if necessary. Barley and Tolbert (1997, p. 93) argue that even contextual change is needed for professionals to successfully change their approach. If the contexts do not change, they correspond to previous institutionalized principles and thus act so as to be preserved (Wolf, 1999).

Fundamental rights of young people

Children and adolescents are persons with their own dignity and rights. In treating them, inviolability of dignity is a priority. Children and adolescents have the fundamental right of their development to be supported and to be educated as independent and socially competent individuals. These fundamental rights must be guaranteed to children and young people in residential treatment centres without restrictions, regardless of their age, gender, origin, ethnicity or level of development. In addition, children and adolescents who are unable to live with their families are entitled to special protection and help from the state. The rights of children and young people apply unconditionally. In fact, individual rights find their limits where other people's rights begin. In residential treatment centres, it is therefore the task of all involved to ensure that the individual rights of all children, adolescents, young adults and employees are protected and that the well-being of everyone is respected and not jeopardized (Abels, 2020, Günder and Nowacki, 2020, Recht der Kinder- und Jugendhilfe, 2013).

Duties of young people

Rights and duties are connected. Children and adolescents should take responsibility for themselves and for society. They should assume the tasks they need in their daily lives in terms of their way of life, social relationships and coping with age-specific tasks. In particular, they should be actively involved in their own upbringing and the promotion of their own development (Abels, 2020, Günder and Nowacki, 2020).

Rights and duties of parents

With out-of-home care, the rights and obligations of parental care remain unchanged. As far as there are no judicial restrictions, it is the parents' right and duty - albeit under special conditions - to continue fulfilling their parental responsibility. This especially includes their active participation in the structure and updating of care plans, constructive support of cooperatively constructed development goals, confidential cooperation with the institution and educators, clarification of inconsistencies and the will to question their previous educational activities and duties (Abels, 2020, Günder and Nowacki, 2020,).

Planning principle

Groups and other forms of residential care should be planned so as to offer the most efficient, diverse and coordinated range of services in out-of-home care to young people on site.

In accordance with the principle of regular accommodation close to home, the planning of regional infrastructure and the planning of help in individual cases must be designed to allow children and young people to maintain contact with their families and the social environment. It is possible to deviate from this principle if the desired development goals can only be achieved by accommodation further from home (Peters, U. 2010, Günder and Nowacki, 2020).

Working with the family

Parents are legally bound to participate in cooperation. Close cooperation and regular exchange between all involved are especially important for the success of the residential treatment centre help and/or return to the family of origin. All existing guardianships should be included in this work relationship according to their role and function. In the interdependence of young people - family - social work centre - guardian / guardian - residential treatment centre, interconnectedness should be expressed, since this decisively affects the successful course of help. It is the task of everyone involved to strengthen the family of origin and, if possible, to involve the parents in managing educational tasks. If there is a possibility of return, it is necessary to ensure cooperation with the family to change the educational approaches and requirements. Information on this should be recorded in the care plan, as well as the duties (Sponagl, 2002).

A written agreement between the legal guardian and the institution regarding decisions about everyday life and the arrangement of related roles and tasks is recommended. In this context, clarification of mutual expectations among young people, parents, the institution and the social work centre also plays an important role (Clark, Ziegler, 2020, Günder and Nowacki, 2020).

The meaning of a group

Residential treatment centre education usually takes place in different groups (educational group, residential group, intensive group, farm, day-care centres, youth housing, etc.) for children and adolescents of different age and gender. For certain target groups and in certain cases, a homogeneous formation of groups by gender can provide the necessary protection and privacy. A group forms a frame of reference, which also communicates the affiliation of young people to a certain social structure on an emotional basis. In a structured and informal form, it offers a social place that enables life and learning in the broader sense of the word.

This framework must provide security and be rich with resources, thus providing preconditions for successful identity formation and social integration, as well as for the testing, learning and use of independent, autonomous and socially oriented ways of operation.

That is why it is important to work consciously and professionally with smaller groups and guide them all the way to independence. However, some individuals, for various reasons (developmental problems, biological influences, traumatic events, etc.) are unable to deal even with small groups. Such individuals may be specifically burdened by unfavourable experiences and may overwhelm the group with their dynamics, which has a detrimental effect on themselves and others and should therefore have flexible and more comprehensive support offers available within the context of the assistance offered. For such individuals, it is necessary to organize programs of individual care, or special foster care. The meaning of educational group in socialization is multifaceted, from learning, thinking, memory, identification, emotional behaviour, motivation (in types of motivation and understanding, social motives, motives for achieving goals, affiliate motives, moral consciousness, etc.).
Nevertheless, given the dynamics of the arrival of children and adolescents practically throughout the year, it is extremely difficult to influence the formation of groups. Except by gender and age, the formation of groups according to issues, specifics, abilities, etc. is already an extremely unpredictable variable (Behnisch, 2020).

Networking
For residential treatment centre help to be successful, interdisciplinary cooperation and communication in planning, implementation and evaluation among all professionals involved in the help process must be defined in advance. In addition, reciprocal accessibility must be ensured (Günder and Nowacki, 2020; Haug and Voß, 2000; Peters, 2008).
School or training intermediary
Most young people in residential treatment centres or out-of-home care programs attend school. This fact binds residential treatment centres and schools to close cooperation. In addition, teachers and social pedagogical workers must develop individual strategies and solutions for the implementation of education together with the young person.

Involving teachers in the help is useful and necessary, as is involving the competent staff of residential treatment centres in school decisions. It is recommended that the curriculum be aligned with the educational plan. Alleged limitations with regards to the requirements of the data protection law need to be eliminated and clarified on the spot (Günder and Nowacki, 2020, Haug and Voß 2000).

The transition from school to work is a joint task of the residential treatment centre, the school and the social work centre. Through close cooperation and coordinated professional moves, they contribute to the safety of the individual, the necessary structure and the prevention of unemployment in the phases of vocational guidance, vocational training or employment (Fachliche Empfehlungen zur Heimerziehung, 2014, Fromm, 2013, Günder and Nowacki, 2000).

Child and adolescent psychiatric intermediary

The diverse emotional, mental, and psychological stresses faced by young people in residential treatment centres often require supplementary educational help, along with child and adolescent psychiatric help (Bosselmann, 2000; Fegert, Wiethoff, & Dippold, 2000).

The health care system has different tasks, bases and structures than institutions for behavioural and emotionally difficult/disturbed children and adolescents. The main tasks of child and adolescent psychiatry are based on the medical-psychiatric field and include diagnosis, treatment and therapy. For successful cooperation, it is necessary to develop a mutual understanding of tasks, work and organizational processes, as well as trust. There are often misunderstandings between the health care system and the institutional education system for children and adolescents, as a result of their divergent definitions of emergency situations, different assessments of indications, time and duration of admission, and different expectations regarding forms of therapy and further measures. Therefore, it is necessary to respect the relevant competences, findings and assessments and constructively coordinate these on a regular basis (Bosselmann, 2000; Fegert, Wiethoff and Dippold, 2000).

In the German state of Bavaria, during psychiatric treatment of children and adolescents, they claim that it is necessary to make a declaration of exemption from the obligation to protect confidentiality, to allow cooperation between the child and adolescent psychiatry, the social work centre, residential treatment centre, institutions and parents. Upon placement in child and adolescent psychiatry during the measure of placement in a residential treatment centre, the centre is usually the first point of contact between the child and adolescent psychiatry.

Their employees are in regular contact with the child or adolescent in the form of visits and phone calls. This should strengthen their bond with the centre's staff and ensure continuity of education and care. The competent person from the social work centre remains responsible for the child or adolescent during the psychiatric stay. Child and youth psychiatry must present the needs for help in a descriptive form for the residential treatment centre to be able to take them into consideration as part of the care plan. Methods of determining the forms of help should not be given without consulting the residential treatment centre and the social work centre (Bosselmann, 2000; Fachliche Empfehlungen zur Heimerziehung, 2014; Fegert, Wiethoff and Dippold, 2000).

Judicial system intermediary

The placement procedure is regulated in accordance with the Family Code regulating family relations, or the law regulating the treatment of juvenile offenders. In accordance with the Family Code, children and adolescents are placed on the basis of a court decision, in cases of interim injunction (Article 162), by performing an emergency removal by the social work centre (Article 167) and by a court decision on the removal of a child (Article 174), decisions on placement in a residential treatment centre because of the child's psychosocial problems (Article 175) or in accordance with the Criminal Code and the Enforcement of Criminal Sanctions Act (Article 170). Since the legislation has been in force only a short period of time (since April 2019), a systematic analysis of the functionality of implementation, its advantages and disadvantages would be necessary. The German Law on Child and Juvenile Educational Help conducts an in-depth analysis for each calendar year. We believe that similar practices should be implemented in our country, as well. It would also be necessary to clearly define the competences and responsibilities upon the decision to place a child or adolescent in a residential treatment centre (Fachliche Empfehlungen zur Heimerziehung, 2014, Günder and Nowacki, 2020).

Social work centre intermediary

In 2003, a survey on the criteria for placing children in residential treatment centres included all professionals in Slovenian social work centres. The findings show that the level of cooperation between professionals in residential treatment centres and social work centres is low, but there are examples of good practice.

The course of placing children into residential treatment centres through social work centres shows great differences among the strategies of placement as well as the process of placing children into residential treatment centres itself (Krajnčan, 2006). Educators and professionals at social work centres work without a functional connection and without clear, specifically set guidelines, with an insufficient level of cooperation among everyone involved and the subjects important for the child (Krajnčan, 2006).

The level of cooperation and especially trust among professionals should be much higher, which should also be taken care of by the two ministries. We are aware that the research is 18 years old; however, through intensive work with residential treatment centres and our experience, we can conclude that the situation has not changed significantly. In addition, the transfer of competences to family courts has offered the social work centres a new intermediary, but its work does not yet run smoothly (Fachliche Empfehlungen zur Heimerziehung, 2014, Günder and Nowacki, 2020, Krajnčan, 2006, Krause, 2013).

Crisis intervention

As part of the measure placing children and adolescents in residential treatment centres, potentially high levels of emotional and psychological stress on caregivers may lead to crises. Such situations place very high professional and personal demands on the staff of the residential treatment centres dealing with them.

In addition to rapid and targeted intervention and action in acute and sometimes risky situations, i. e., crisis intervention, it requires above all, a respectful attitude towards the young person. This also applies in cases of endangerment of oneself or others, in which the duty of supervision can only be achieved through measures which can be carried out without voluntary cooperation by the young person concerned. Such an attitude is a precondition and a necessary part of the relationship to be able to respond and act appropriately in individual situations and crises. Institutional education respects the right to non-violent education. Corporal punishment, emotional injuries, etc. are not allowed in any case. Institutions, services and people who accept children and adolescents with distinctive dissocial behaviour must be able to provide education based on social and curative principles, even in crisis situations (Kremke, 2011, Kunz, Scheuermann and Schürmann, 2009, Peters, 2013a, Peters, 2013b).

Conditions of institutional operation

Location

The choice of location must be based on the purpose and tasks of the institution or type of program. In choosing the location and size of the facility, proximity to home, group size, transport links, existing infrastructure, school options, vocational training options, medical-therapeutic care and the adequacy of architecture play an important role for and easier integration of the group into the society (Hamberger, Koch, Lenz, Peters, 2006, Wolf, 1999).

Buildings, structure of the premises and equipment

The premises, equipment and other facilities must be structurally and functionally designed to meet the needs of young people and educational purposes. Sufficient outdoor space must be created or made accessible for leisure and sport. It is necessary to be involved in the lifeworld and at the same time understand the importance of structures. These should open and increase at the moment when the child or adolescent is ready for it. It is also important that the preparation of food and taking care of clothing, etc. be shifted to the level of self-care. Therefore, it is also necessary to have sufficient knowledge of and insight into the structure of the housing units.

Each program for children and adolescents with behavioural and emotional problems/disorders must adapt to changing requirements. Modern media equipment is needed, including a personal computer and internet connection that children and adolescents can actually use. In this context, the institution's duty to make young people aware of the use of internet, especially regarding compliance with the law and protection of minors needs to be complied with on a regular basis. Written documentation on the performance of the duty to provide information is recommended. Certainly, the trend is towards deinstitutionalization processes, where help is channelled into small, transparent, personal units with various ranges of structure (Hamberger, Koch, Lenz, Peters, 2006, Wolf, 1999).

Phases in the quality of work in residential treatment centres in the process of treatment

Preparation phase

The decision of the child and adolescent or family judges for placement in an appropriate institution is very important for the children and adolescents in question (the period from the beginning of the search for appropriate placement, according to the experience of German institutions, should not exceed 4 weeks).

Certainly, there are very few facilities in our area, but in the hope that professional centres will come to life, which will focus on regional help, i.e., focus on living space for an individual with a varied range of programs, this request will also have a more realistic starting point (Peters, 2013b).

The wish is to include the young person in this process in an appropriate way, along with the legal guardian, a professional from the social work centre and from the professional centre, as well as the head of the institution. The interview takes place at the institution in question. Krause (2013) says that the content of the conversation is an exchange of basic expectations of everyone involved and determining educational goals by the professional centre, guardians, child or adolescent and the responsible professional from the social work centre. In addition, comprehensible information is needed about life in the institution, the group, the program type, the structure of the group, opportunities for cooperation and the professionals' educational measures regarding daily routine and regulations in group life (e.g., group rules, group activities and activities in the area, pocket money, going home). In this context, the regulations for school attendance, forms of cooperation with parents and, if necessary, the scope of therapy for the child or adolescent are also discussed. Visiting the living rooms and surroundings and possibly talking to other young people in the facility are a welcome addition (Eger and Hensen, 2013; Peters, 2013b). The result at the end of the introductory phase is that the child or adolescent, caregivers and professionals from the social work centre and the professional centre prepare an appropriate offer of help. The individual, social and cultural needs of the young person and his/her family are taken into account (Eifler, Hipke, Kurtz, 2020, Günder and Nowacki, 2020, Peters, 2013b).

Orientation phase

The duration of the orientation phase depends on the individual needs of the case and the concepts of the institution's work. As a rule, this period lasts from three to six months. Professionals at the institution make use of an acclimatization period to build trust between those involved and to set the rules of daily life and group life. Important information for planning can be found both in the update of the care plan and in the related concrete education planning. Children and young people need time to gradually get used to the change in everyday conditions. The family of origin must cope with the changed home situation and the decision that the child should temporarily live in the institution.

First day impressions, including the reception itself, have an almost lasting impact on children and adolescents (Eger and Hensen, 2013; Günder and Nowacki, 2020; Eifler, Hipke, Kurtz, 2020).

Social pedagogical activity and common life in a residential group

Professionals follow not only life space-oriented forms of help, but also the approach that helps people to help themselves. In particular, the available resources of the child, his/her family, the residential group and the social environment outside the home are used (Hinte and Tress, 2007; Wolf, 1999).

In coexistence within a group, there are clearly identifiable structures, norms, rules, and duties. Time for personal and group conversation, opportunities for practical life activities and projects such as cooking, shopping, room design and joint activities are key factors in the success of the educational mission (Eifler, Hipke, Kurtz, 2020, Wolf, 1999).

Cooperation with the family of origin

For cooperation with parents, it is important that a social pedagogical worker be appointed as a permanent contact person in the group, who is responsible for them and the child. In the framework of working with parents, topics such as potential conflict of the child's loyalty to the parents vs. educators, or ways of dealing with feelings of guilt are addressed in the orientation phase. Parents are actively involved in raising their child according to their abilities. The parents' responsibility for upbringing should be respected and promoted, regardless of the transfer of partial custody to the institution. Leisure activities are supported and promoted according to the inclinations and desires of the young person, if they are useful for his/her development (Eifler, Hipke, Kurtz, 2020, Günder and Nowacki, 2020).

Planning requirements

The success of familiarization during the orientation phase of a young person is assessed on the basis of the following criteria: personal well-being, practical life skills, school situation, inclusion in the group and the new living environment, contacts in the social environment, leisure activities, cooperation and coping with agreed milestones in the educational plan (Eger and Hensen, 2013).

The first update to the care plan must be performed by the end of the orientation phase at the latest. Given the age and level of development of the adolescent and the possibility of improving educational conditions in the family of origin, it is advisable to choose a course according to the content of the help: does he/she want to return to the family? Is education possible in another family? And is he/she prepared for a long-term independent lifestyle? (Peters, 2013b).

This decision determines the likely timeframe within which help will be needed in the short, medium or long term.

It is important to watch and determine the end of the orientation phase. The youth has found his/her place in the "live" group. A basis of trust has formed among everyone involved, which strengthens their readiness for change and enables a sustainable alliance. The quality of the first networking contacts of important participants is checked (e.g., school, vocational training, therapy, social work centre, etc.). Young people, as well as social pedagogical workers, parents and other important participants remain with the decision to place the young person in a group, in an institution (Eifler, Hipke, Kurtz, 2020, Günder and Nowacki, 2020, Peters, 2013b).

Middle phase

The duration of the middle phase depends on the individual needs of the case and the potential for returning to the home environment. If the upbringing in the environment from which one originates is assessed as too harmful and impossible for the return of the child or adolescent, the time perspective can be extended until independence, in which case it can be assumed that the intensity of care will gradually decrease with the increasing independence of the young person, while considering other forms of living that help the individual (Eger and Hensen, 2013).

The main emphasis requires targeted work on the skills of young people in various areas of life towards reducing risk. Standard social pedagogical care provides a framework for the implementation of developmental tasks, and all social pedagogical measures should be included in the everyday group life of a child or adolescent as much as possible (Krause, 2013).

Events in the day-to-day life of the institution do not always follow the logic and structure of the care plan. Any setbacks and crises need to be addressed, analysed and treated. If necessary, they are a reason for checking the adequacy of the goals (Eifler, Hipke, Kurtz, 2020, Fachliche Empfehlungen zur Heimerziehung, 2014).

Final phase

Qualified completion of help in the institution requires the experiential fact of providing clarity about the time and structure of discharge as soon as possible, and about further living conditions of the young person. It is necessary to ensure transition to a new life situation and, if necessary, to clarify further opportunities for support and help, for example in the form of other forms of help, such as an independent living residence or other institutions, services, self-help groups or therapy (Eger and Hensen, 2013).

Indicators for success and lifestyle stability are especially realistic life planning, successful coping with everyday life, constructive strategies for action and conflict resolution, sustainable social ties and compliance with social norms and rules. The emphasis is mainly on respecting agreements, reliable acceptance of agreed domestic duties, regular and accurate attendance at school, consistent attendance of agreed additional activities, maintaining stable contacts with important friends, relationships and an active free time. If necessary, parents accept support for strengthening their educational tasks and everyday family life and take agreed steps. Since we know that completion requires space and time, we decide together on the end of the measure and the right time for leaving. Everyday tasks are under control, and the amount of care required is gradually reduced. The youth's leaving of the group must be tangible, active and instructive for everyone. A conscious farewell from important people connected with the group allows the adolescent to experience changes in his/her life situation. A planned farewell with the group again reflects respect and attitudes toward the young person (Eifler, Hipke, Kurtz, 2020).

Versions of leaving

If a return to the family of origin is planned, the contact between parents and child should be strengthened and combined with targeted assumption of basic tasks, such as basic care, homework supervision and family life during the weekends. The time spent at home is extended. At the same time, it can be combined with a trial visit to school from home. Parents may receive advice and support from the institution as needed. Spending free time in the place of residence of the family of origin is established according to the child's interests and inclinations. Additional care may be offered, such as day care for children, youth work, learning assistance and, if necessary, further counselling or therapeutic offers which could help cope with everyday life. These activities are on an ever-increasing scale and need to be developed with quality.

Special attention should be given to increased establishment of skills acquired in everyday family and school life, as well as during free time and in the social environment (Eifler, Hipke, Kurtz, 2020).

Becoming independent

For young people to become independent, it is necessary to consolidate the practical life skills necessary for independent living. Activities related to the planning and organization of everyday life such as shopping, cooking, tidying up, cleaning, personal hygiene, clothes shopping, doing the laundry, managing money, handling the media, contacts with formal supervision and leisure activities.

An adolescent or young adult must actively seek accommodation. In doing so, they shall be supported and guided in accordance with the provisions of the care plan in terms of time frame, financing and, where appropriate, care for equipment based on the needs, location, infrastructure and financial capacity of an individual. In each individual case, it is necessary to consider whether it makes sense to end the stay at the institution at the same time as starting vocational training or entering the world of work. If the adolescent is unable to take full or partial care of his or her affairs because of mental health problems, timely appointment of a legal guardian for areas such as financial affairs, housing, or health care should be considered (Eifler, Hipke, Kurtz, 2020).

Support outside institutional help

As a rule, the measure is concluded when the young person leaves the institution. Depending on needs, they can arrange for accompanying offers outside the institution, activities for coping with everyday life, and provision of support to the family or adolescent for a certain period of time beyond the accommodation at home. In addition to establishing contact with a new school, training, or job, offers form counselling centres, youth work, or even homework or afternoon care are welcome (Eifler, Hipke, Kurtz, 2020).

Suspension of a measure differing from the care plan

Certain young people are unable to accept the requirements of the institution. In any case, with the conceptual design of professional centres in Slovenia, which should take care of the entire continuum of needs of children and adolescents with behavioural and emotional problems/disorders, this way of thinking would obtain a different connotation, but there is always an individual child or adolescent who does not fit in any framework offered.

This challenging case absolutely needs imperative attention, even if there are only one or two cases per year, and an appropriate form of help for them must be found (Eifler, Hipke, Kurtz, 2020).

Staff

It is necessary to define the importance of staff competences, at the level of both skills and theoretical knowledge, as well as specific affinities which probably derive from certain characteristics of the individual that should be recommended for this profession (Eifler, Hipke, Kurtz, 2020). That is, a profession is a calling. Here, we definitely feel that we are at a disadvantage compared to those fields of study which can choose their candidates with entrance exams. We also believe that positive discrimination on the grounds of gender balance would be welcome. Some important professional areas in the process of assessing the quality of work in a residential treatment centre:

Files, reports and documentation

Children and young people have the right to review their files, except for those parts which contain information about third parties. The content of the reports prepared by the institution should be discussed with the child or adolescent. The institution shall provide the adolescent with a copy of the protocols of the care plan. If necessary, the child or adolescent should be able to add to the documents a description of him/herself. Children and young people are people with their own dignity and rights. In treating them, the inviolability of human dignity is a priority. Children and adolescents have a fundamental right to understand their development. In addition, children and adolescents who are unable to live with their own families are entitled to special protection and help from the state (see Article 20 of the UNCRC). Children and young people have the right (depending on their level of development) to be involved in all decisions that affect them (e.g., Article 12 of the UNCRC and Article 8 of the SGB VIII Sozialgesetzbuch). The rights of children and young people apply unconditionally. In essence, individual rights find their limits where other people's rights begin. In residential treatment centres for children and adolescents, it is therefore the task of everyone involved to ensure that the individual rights of all children, young people and employees are respected (Fachliche Empfehlungen zur Heimerziehung, 2014).

Protection and prevention

Children and adolescents have the right to protection from violence, whether physical, psychological or sexual (Article 34 of the UNCRC). They all have the right to participate in education, care and support. The guiding principle is the best interest of the child (see also Articles 3, 6, 19 and 36 of the Convention for the Protection of Human Rights). Children and adolescents have the right to protection and the right to a confidant. They also have the right to the best health care and health prevention (Articles 24 and 33 of the UNCRC), including the right to free choice of doctors (Fachliche Empfehlungen zur Heimerziehung, 2014).

Assistance in planning

Children and young people have the right to participate in and co-influence the planning of their help. Their willingness in terms of location and help structure must also be taken into account. Institutional education does not start in the group, but in the planning phase.

Children and adolescents have the right to be involved in the choice of program. They have the right to regular assistance in educational planning, as well as in discussion of the care plan by a third party, for example, when they feel that those present do not support them (parents, educators, social work centre) (Fachliche Empfehlungen zur Heimerziehung, 2014).

Participation

Children and young people have the right to participate. The institution in which they live is obliged to develop and apply appropriate procedures for cooperation. Inclusion is the central principle of democracy. Modern education guided by this principle supports the greatest possible self-determination of young people. In the institution, young people are involved in decisions about the design and equipment of the premises, respect for privacy and intimacy, taking responsibility in the group and the institution, free time, contacts inside and outside of home, regulations on visits, holidays, relocations, etc. (Special recommendations for health care, 2014).

Counselling

Appropriate cooperation and complaint procedures include counselling models. The appropriate form of interest representation must be connected to the size and structure of the institution and the age of the children and young people living therein and must regularly be developed with the participation of children and young people (cf. UNCRC Article 15) (Fachliche Empfehlungen zur Heimerziehung, 2014).

Conditions for success of institutional forms of cooperation

Transparency means information on the forms of participation and the decisive precondition for the implementation of all forms of residence in the institution. This means that all children, young people and employees must be properly informed about opportunities for participation (e.g., even children who cannot read yet, the severely disadvantaged, etc.). Therefore, different methods need to be used. Written information is important because it creates a binding character and enables everyone involved to learn more about the possibilities and to have choice. Studies show that people understand information very differently and, especially in crisis situations, accept them differently than in less stressful life periods. It is therefore an important task for professionals to repeatedly check with children and young people whether they are sufficiently informed and which missing pieces must be filled in. Children and adolescents in particular need information not only on how to contribute, but also on how to complain if they feel they are not being treated properly.

It is especially important that children and young people develop confidence in these procedures. The institution can achieve this in several ways. The key is always an open, trusting and friendly relationship with professionals and the management (Fachliche Empfehlungen zur Heimerziehung, 2014, Fromm, 2013, Peters, 2013a).

In the best case, children and adolescents try these procedures to see if it will help them in individual cases. Precisely because children and young people, as well as the staff in the institution are constantly changing, it is necessary to ensure that new children and young people coming to the institution receive all the information necessary. This also applies to new employees. Children and adolescents often experience that they can only say and participate in small things and are trusted only regarding certain topics. Which topics they can attend is usually the decision of the adults. However, there is no reason to exclude the participation of children and young people in certain topics. Thus, it is an important task of social pedagogical workers to organize the decision-making processes so that children and young people can appropriately participate in them (Fachliche Empfehlungen zur Heimerziehung, 2014).

Some professionals fear that children and young people cannot (yet) participate; however, when they genuinely dare to take a step towards collaboration, they often discover unsuspected resources and new perspectives in children and young people. Children and adolescents sometimes also surprise themselves.

And because the work is based on collaboration, a new quality – the sense of community-- emerges within the institution, from which everyone benefits (Eifler, Hipke, Kurtz, 2020).

Children and young people need to be convinced that the employees take them seriously and also confront them actively. This does not mean that final solutions have to be created in a short time. Children and young people distinguish very well which topics need time and where quick decisions are possible. A precondition is that the institution discuss this with them, explain it to them, and be open and focused on finding solutions (Fromm, 2013).

Enforcing forms of cooperation within the institution is an ongoing process. They should always be adapted to the development of the institution and to the living conditions of children and adolescents. It is important to find authentic forms of collaboration. Everyone should have the opportunity to participate and the means of participating should be flexible. In any case, this flexibility must not lead to arbitrariness. The realization that the forms of cooperation need to be developed together shows that it cannot happen all at once.

Development and coordination processes take time. They need to be checked repeatedly. Some things work immediately, and some do not and need to be adjusted, changed, or even rejected. This process approach can sometimes be exhausting and even frustrating for those involved. Therefore, it must be moderated and supported by both social pedagogical workers and the management, which promotes trust in the solutions found for everyone involved (Fromm, 2013).

If institutions create opportunities for collaboration, they can expect children and adolescents to take advantage of these. This also means that you cannot plan ahead what the exact outcome of the participation process will be. This requires a certain openness to results and the ability to engage in new things. Experience to date shows that some professionals are sceptical of institutions that introduce a participatory culture. This is understandable because some procedures could also be used to monitor employees and to identify errors. Understanding it this way would not make them willing to participate. However, if they have a reason to look for common solutions, they support further development of the entire institution. Among other things, the culture of the institution's mistakes changes as a result.

Mistakes are no longer a shameful expression of human weakness that must be avoided at all costs, but inevitable components of everyday interaction, where it is important to be able to correct them without reproach and learn from them (Fachliche Empfehlungen zur Heimerziehung, 2014, Peters, 2013a).

Cooperation first and foremost denotes communication. Young people in particular use the possibilities of the internet and social networks. In the current debate it is often pointed out that new media offer new opportunities for cooperation. Knowledge of the effects of the new media is still in its infancy, but experience shows that the web helps reach certain target groups and facilitates self-organization processes. Of course, these communication processes must also be monitored and moderated by social pedagogical workers and leaders (Peters, 2013a). In all organizations such as schools, as well as in the field of educational help, it is obvious that participation becomes a natural part of everyday life. Concrete interaction between formal procedures and pedagogical practice shows whether and how cooperation can be filled with life (Fachliche Empfehlungen zur Heimerziehung, 2014).

Conclusion

The quality of work in residential treatment centres requires a particularly systematic, comprehensive and multifaceted assessment of work. This means knowledge of the complexity of the population, professional requirements, organizational and systemic frameworks, as well as understanding the details of the operation of each institution. It also requires critical judgment and a wish to gain insight into the quality of one's own work as part of the institution. Self-reflection, intervision and supervision are important categories of any institution. We would advise that at the end of each year or every three years, the institution should have an in-depth and detailed analysis of the quality of its work in all departments, even the most sensitive and delicate corners of the operation. From a review of various surveys and available quality analysis criteria, the following model would be proposed.

The scheme represents an example of the complexity of assessing the quality of work in residential treatment centres, at the centre of which is the child or adolescent. The effect of quality, complex, connected and conscious professional work was a more appropriate integration into the social environment compared to the level it reached earlier. Therefore, it is necessary to monitor the system.

The new Act on the Emotional and Behavioural Problems/Disorders of Children in Education has taken a major step which could enable such a platform for institutions to be formed autonomously, according to the needs of the population in the region. Alongside these systemic changes, it will nevertheless be necessary to make a clear and obligatory agreement with the social work centres to move from office work into the field, where they will be able to draw sources from real life, which the help system desperately needs. Psychiatry will have to step up to the level of cooperation as well, and family judges realize that they are responsible in the process of placing children and adolescents and are not only the executors of social workers' proposals. The system is still connected with the general social climate, the humanization of society, which has been declining in recent times, exposing marginalized groups to greater attack. The police and the local community are also important segments and need to be well integrated into the system. Thus, interdepartmental cooperation and coherence are essential. The system also encompasses flexible management of an institution, which is aware of the risks such total institutions can bring, regardless of how they have differentiated and decentralized. The ratios between clear autonomy and suitable cooperation are an important key to success.

Participation by children and adolescents is a step related to the postmodernist understanding of the importance of understanding that it is all about their lives, and our professional duty to appropriately include them at the highest possible level according to their understanding and ability to participate at the time. Closely connected to it is normalization, which implies creating space, surroundings, group (and all the sources and traps it offers) and privacy, from the choice of location to the establishment of functional, non-rigid rules. The regional approach will thus also enable the child or adolescent to receive space-oriented social pedagogical help on the entire continuum of help, i.e., from prevention to the most demanding children and adolescents, regardless of age or gender. The process of deinstitutionalization also offers an orientation for the institution, to see at what stage it is located and how it envisions this process in the future.

For such a demanding profession, we would also like to propose that the legislation include compulsory permanent supervision and continuous professional development, every seven years, which means that every seventh year the professional staff would undergo additional training and not work directly with children and adolescents.

Introduction of new programs will bring additional freshness, as well as monitoring, making their offers more contemporary with regards to the needs of children and adolescents and societal reality. Therefore, in all respects, a reflective attitude towards one's own practice, the practice of the institution and the system in general is extremely important.

The list is not final, since the specifics and culture of each institution are special and unique. There should, however, be a common demand for everyone to invest more effort in realistic assessment, in understanding the fact that working with behaviourally and emotionally difficult children and adolescents in residential treatment centres is exposed to many factors needing to be critically evaluated. Quality can never be taken for granted, nor is it ever at such a high level that it could not be improved. This fact alone can be a motivator in demanding work. Cooperation between theory and practice, research work and the development of the identity of a social pedagogical worker are challenges that are important for the development of the profession in residential treatment centres and thus the quality of work.

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THE EXPERIENCE OF RESIDENTIAL CARE FROM THE PERSPECTIVE OF ADOLESCENTS AND CAREGIVERS

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Abstract/Izvleček
Aim of the study is to provide an insight into the experience of residential care from the perspective of beneficiaries and experts. The data was collected in two male residential units. The results show that adolescents and caregivers tend to have a negative attitude toward residential care. Adolescents are even more skeptical about the purpose of treatment since they experience shortcomings in the activities and the methods of treatment, as well as monotony and stigmatization by the local community. Caregivers highlight their disappointment regarding the inadequate intervention system and the complexity of working with children with multiple risks and problems.

Izkušnje stanovanjske oskrbe skozi perspektivo mladostnikov in vzgojiteljev
Cilj študije je zagotoviti vpogled v izkušnje obravnav v vzgojnih zavodih z vidika bivajočih otrok in mladostnikov ter strokovnjakov. Podatki so bili zbrani v dveh mladostniških vzgojnih zavodih. Rezultati kažejo, da so mladostniki in vzgojitelji negativno naravnani do obravnav v vzgojnih zavodih. Mladostniki so še bolj dvomljivi glede namena obravnav v vzgojnih zavodih, saj je v dejavnostih in poteku obravnave preveč monotonost, kakor tudi stigmatiziranje s strani lokalne skupnosti. Vzgojitelji poudarjajo svoje razočaranje zaradi neustreznega sistema intervenc in kompleksnosti dela z otroki z večplastnimi tveganji in težavami.

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Introduction

Separating a child from its family and placing it in institutional care is, in most cases, an intervention at the very end of the intervention spectrum, which happens only after various other opportunities and services in the community have been exhausted. Institutional placement over a specified period is designed to effect a reduction in behavioural problems, to provide care for everyday needs, and to encourage positive changes in the lives of children and adolescents (Harder, Knorth, 2014). Such a multidimensional therapeutic approach is intended for children and adolescents aged between 12 and 21 years who exhibit multiple emotional and behavioural problems, and have complex risks and needs, particularly regarding family, social relationships and personality (Attar-Schwartz, 2008; Žižak, Koller-Trbović, 2013; Harder, Knorth, Kalverboer, 2017; González-García et. al., 2017). The overlapping of life and the treatment context in residential institutions is a continuous challenge in terms of understanding its elements, quality, and efficiency. Each institution is a unique, dynamic social system, and institutional treatment should carefully integrate elements such as the theoretical foundation, respect for the psychological and social needs of children and adolescents, and creation of a supportive social and physical environment (Daly et. al. 2018). These elements are logically imposed in almost all therapeutic environments; however, research on the effectiveness of residential care is often expressed by the "black box" metaphor, as it is not yet entirely clear how positive outcomes for children and adolescents occur (Harder, Knorth, 2014; Leipoldt et. al. 2019). The quality and efficiency of residential care are a continuous challenge for researchers and practitioners (Leipoldt et. al. 2019; Wesenberg, et. al. 2020). It is therefore crucial to deepen the understanding of this form of care through different perspectives.

Previous research into the experiences of adolescents in residential care suggests that they have a generally positive experience of care, and primarily emphasize the quality of relationships with their caregivers and peers, as well as the feeling of purpose while staying in the institution. For example, Moore et. al. (2017) report that adolescents consider a good relationship with the caregiver to be the most important element of treatment. In other words, having an influential adult person to whom they can turn at any time while staying in the institution is of utmost importance to them.

Furthermore, adolescents consider residential care a safe place if it provides a sense of stability and predictability through consistent rules, routines and rituals, as well as a sense of control through involvement with the environment (Moore et. al., 2017). In a qualitative study conducted by Soenen, D'Oosterlinck and Broekaert (2013) regarding the quality elements of treatment, adolescents emphasized the availability and involvement of staff as key elements, as well as clearly defined rules and boundaries, and the existence of personal space and private time. Moreover, authors Palareti and Berti (2009) found that adolescents in residential care in Italy have a generally positive experience of care and treatment, show satisfaction with the opportunities that their institution provides and perceive it as a place to reflect on their own life goals. Research conducted by Lanctôt, Lemieux and Mathys (2016) on girls in institutional treatment, showed that the girls describe the quality of care by emphasizing the dimension of personal space during their stay, and the quality of relationships with the staff, which includes support and understanding of trauma, and active participation in the life of the institution. Furthermore, the research results suggest that emotionally involved, approachable and reliable experts who show interest in adolescents contribute to the general satisfaction of adolescents during institutional placement and their verbalization of the progress in understanding their own behaviour (Carter, 2011). Sellers (2020) obtained similar self-reported results from children and adolescents who pointed out a strong correlation between the sense of security and a good relationship with the caregiver. More specifically, the children and adolescents who had a greater perception of quality relationships also perceived the institution as a safer living space. A positive perception of institutional relationships encourages adolescents to feel involved in the treatment, to report greater support from the caregivers and other beneficiaries, and to describe at least one meaningful relationship with one of the caregivers (Leipoldt et. al., 2019). Johansson and Andresson (2006) interviewed adolescents and found that they consider their relationship with the caregiver as the crucial element in treatment, while the caregiver's sensitivity to their previous experiences is especially valued, as well as their sensitivity to how adolescents perceive the conditions, treatment and specific events at the institution (such as experiencing or perpetrating violence) and the hard work that the caregivers put into providing a sense of normalcy and belonging in the institution.

Comparing the perspective of adolescents from residential care and other forms of care, Pérez-García et. al. (2019) found that adolescents from residential care report the lowest general satisfaction with treatment, which the authors link to the severity of problems within this group of adolescents. At the same time, the most positive aspects for adolescents are the resources, available activities (such as regular meals and workshops for skill development), positive relationships with caregivers, and the opportunities offered by the institution to bring about positive changes in their behaviour, while the negative experiences are associated with conflicts with peers, the inconsistency of caregivers and the closed nature of the institution. The research clearly points to certain difficulties and negative experiences that adolescents experience in institutional care. Studies show that adolescents are very competent and critical in reflecting on their life in the institution, and that their inclusion as partners is crucial in improving care and treatment. For example, in a study conducted by Moore et al. (2017), when asked about improving the treatment, the adolescents pointed out the need for better differentiation between programs based on the level of risk, better compliance of staff regarding discipline, and provision of a space for adolescents to contribute to life in the institution through active participation.

Experts, more specifically caregivers, are the key element in creating the treatment environment in residential care. Their task is primarily to provide security, to respond to a whole range of adolescent needs and to actively work on their resocialization and return to the family and the community (Silva, Gaspar, 2014). The caregiver profession is one of the most challenging and demanding professions in working with children and adolescents with behavioural problems (Knorth et. al., 2010). Therefore, the caregivers' experience of residential care, their relationships with adolescents and colleagues, the clarity of roles and job satisfaction must be understood, since these elements largely affect their daily work (Glisson, Hemmelgarn, 1998). A review of research on the role of caregivers in residential care shows that the most frequently explored topics are those related to the importance of their role in treatment (e.g., Knorth et. al., 2010), their relationship with the adolescents, as well as the interventions they provide (e.g., Bastiaanssen et. al., 2012; McLean, 2013), the organizational aspects of residential care (e.g., Minor, Wells, Jones, 2004), job satisfaction (e.g., Van der Ploeg, Scholte, 1998), and evaluation of the level of stress and burnout (e.g., Fernandez Del Valle, López López, Bravo Arteaga, 2007).

The results of certain studies indicate low job satisfaction among caregivers in residential care, which is associated with factors such as difficulty in establishing relationships with children with behavioural problems, a low level of support from the staff at the institution, a lack of organizational resources, emotional exhaustion and overload in terms of work and administration (Gibbs, Sinclair, 1998; Van der Ploeg, Scholte, 1998; Whitaker, Archer, Hicks, 1998). When it comes to the experience of treatment, a study conducted by Andersson and Johansson (2008) shows that caregivers in residential care use varied approaches in working with adolescents, pointing out good communication and good relationships as the most important elements, along with support from the system and colleagues at work.

Studies comparing the perspective of caregivers and adolescents regarding individual elements of care and treatment show certain differences in experiences. The studies on the perception of the treatment environment in residential care show that the staff has a more positive attitude than adolescents when it comes to the treatment environment (e. g. Langdon, Cosgrave, Tranah, 2004; Smith, Maume, Reiner, 1997). Unlike the staff, adolescents feel that the staff gives them insufficient encouragement regarding independence, learning practical skills, taking initiative, and openly expressing opinions (Langdon, Cosgrave, Tranah, 2004). A study conducted by Harder, Knorth and Kalverboer (2017) on the experience of elements that contribute to behavioural changes in care, shows that adolescents and experts have different views on therapeutic methods and goals. The authors also point out that adolescents associate the change in their behaviour exclusively with the treatment environment (security and good relationships in the institution), while caregivers attribute changes in behaviour to the treatment methods used (for example, individual conversation, structure and clarity of treatment). Furthermore, studies have shown differences in the perception of specific behaviours in the institution, for example bullying among peers in the institution. Caregivers report a rate of bullying among beneficiaries which is much lower than the rate experienced and reported by adolescents in care (Sekol, Farrington, 2020). When comparing the difference in the perception of caregivers and adolescents, it is important to state that there is a logic behind their differing perspectives, since these are two separate subcultures within an institution. Quality treatment, however, should be aimed at aligning the interests and perspectives of the beneficiaries and the staff, as it would increase the motivation of staff and contribute to the beneficiaries achieving their personal goals (Moos, Moon, 1998).

This paper focuses on the residential care experience of adolescents and caregivers in the Republic of Croatia. It is therefore important to refer specifically to the Croatian context. Children and young people with behavioural problems can be removed from the family when their behavioural problems are manifested intensely and are endangering the psychosocial functioning of the child, his/her family and surroundings over a longer period of time. After the removal, children can be placed in institutional care based on social-protective, family-legal, or educational measures. The aim of direction to an institution is to achieve positive and pro-social changes in the child, as well as to work with the family and the social surroundings. Across Croatia, there are currently ten residential care institutions of this type, that provide care and specialized intervention for children and young people with behaviour problems, aged 7 to 21. There are seven centre-based homes in Osijek, Karlovac, Rijeka, Pula, Zadar, Split and Zagreb. Besides those seven institutions there are three residential care homes located in Bedekovčina, Ivanec, and Mali Lošinj. All these institutions are open and, to an extent, differentiated by age and sex. At any point, there are around 350 children and young people in these homes (Annual Statistical Report of the Ministry of Demographics, Family, Youth and Social Policy, 2019). Apart from these institutions, institutional care for children and young people is also partly provided in two more establishments: Children's Home Zagreb (as part of small groups for intense treatment for boys up to 14 years of age), and the Educational Centre Lug, through the treatment measure for boys with intellectual difficulties.

The indicators of research in Croatia over the past decade show general dissatisfaction with educational-correctional institutions among both the adolescents and the experts. The adolescents mention the problem of numerous shortcomings related to the inconsistent behaviour of caregivers and the organization of life in the institution (Kusturin, 2002), a lack of activities and content of treatment (Kusturin, 2002; Oreb, Majdak, 2013), inadequate living conditions (Kovačiček 2017; Koller-Trbović, Jeđud Borić and Mirosavljević, 2015; Sklepić, 2011) and the feeling of futility and inefficiency of living in an institution (Kovačiček, 2017; Ratkajec Gašević, Maurović, 2015). The adolescents sometimes perceive their life in an educational-correctional institution as an additional risk factor, owing to stigmatization by the local population, but also because placement in such an institution can mean, for some adolescents, an introduction to even riskier behaviours practiced by their peers (Jeđud, 2011).

Inadequate, poor relationships with the experts, who often ignore the problem of violence and use it as a means of controlling and sanctioning beneficiaries, is another element of dissatisfaction among adolescents (Sekol, 2012). Furthermore, the research conducted by Ratkajec Gašević and Maurović (2015) regarding escapes from institutions shows that the most common reasons for escaping are poor living conditions and poor relationships in the institution, feelings of not belonging there, as well as antisocial aspirations among adolescents. The experts also report general dissatisfaction with treatment (Ajduković, Sladović Franz, Kamenov, 2005; Herceg Babić, 2014; Koller-Trbović, 1996; Žižak, Koller-Trbović 1999). They primarily mention their dissatisfaction with the quality of working conditions and organization, as well as the challenges of working with children who have complex emotional and behavioural problems (Herceg Babić, 2014; Ratkajec, Jeđud, 2009; Žižak-Koller Trbović, 1999). The experts argue that the care and treatment could be improved through increasing the quality of interpersonal relationships and expertise among caregivers, achieving good relationships with the children, and creating a comfortable physical space (Vejmelka, Sabolić, 2015). The current state of residential care for adolescents with behavioural problems clearly indicates the need for a deeper understanding and redefining of key conceptual and value elements of institutional care.

Methods

The Aim and Research Questions

This paper aims to gain a deeper insight into the experience of residential care from the perspective of beneficiaries (adolescents) and experts (caregivers). Therefore, the following research questions were explored:

- How do beneficiaries and experts experience and describe residential care?
- What is the relation between the perspective of beneficiaries and experts regarding the experience of residential care?

Participants and Data Collection Procedure

The sample was relevant and included adolescents and caregivers from two residential care units for adolescent males in Croatia. In that sense, the sample was gender-restricted only to male institutions, since the majority of beneficiaries of residential care in Croatia are males (approximately 70%).

There is a need to explore the perspective of adolescent females in residential care in further research, since their perspective on residential care is expected to be different, owing to specific needs related to their gender.

In order to get a broader perspective from both the adolescents and the caregivers, the principle of heterogeneity was applied in the sampling procedure. Therefore, the sample included adolescents of different age, level of risk and duration of placement. Ultimately, 14 adolescents participated in the study, eight of whom came from *Residential Care Unit 1* and six from *Residential Care Unit 2*. The average age of the adolescents was 16.6 (the youngest participant was 14 years old and the oldest was 19). The average duration of placement was a little over 12 months (from 6 months to more than 2 years of placement in the residential care unit). Eight participants had experienced multiple placements prior to the current one (other residential care units, foster care). All adolescent participants had complex etiologies of high-risk behaviour (truancy, behavioural disorders, criminal acts) and multiple problems in their families.

In the sample of caregivers, a total of seven experts participated in the research, of which four were males and three females. Most caregivers were experts educated to provide care to children and adolescents with behavioural problems (psychologists, social pedagogical workers and social workers), while two caregivers had a teaching degree. On average, the caregivers had 13 years of working experience in the residential care institution of their current employment, ranging from 2.5 years to more than 20 years of working experience.

The data was collected through focus groups in the residential care units (two focus groups in each unit). The focus groups were conducted by one of the authors of this paper following the protocol for focus groups (a set of questions and follow-up questions related to the aim of the research, recorded and transcribed). The transcripts from the focus groups were used as units in the analysis.

Ethical Issues

Participation in this research was voluntary. In accordance with the National Code of Ethics for Research with Children (Ajduković, Kolesarić, 2003), adolescent participants were able to independently decide if they wanted to participate in the study, as they were all 14 years of age or older. The principles of privacy and confidentiality were applied. The participants had the freedom to quit the research at any time.

One of the adolescent participants decided not to participate after the first set of questions in the focus group. His answers were later excluded from the analysis.

Data Analysis

The data collected in the focus groups was transcribed, anonymized, and analysed using qualitative analysis. The analysis included the following phases: careful reading and identification of code units; generation of initial codes; redefining initial codes and grouping codes into categories; clustering categories into major themes. The process of analysis was iterative. The data was analysed by two independent persons (two authors of this paper) and later validated and discussed within the team in order to reduce bias.

Initially, a separate analysis was applied for the groups of adolescents and caregivers in order to gain insight into the specifics of their perspectives. In later analysis, the two perspectives were compared, the similarities and the differences were extracted and later discussed in the interpretation of results.

Results

The results and the major themes for each group of participants (Figure 1) will be presented, including by comparing the two perspectives. The results will be illustrated by providing original quotations *(All transcripts were anonymized. The quotations will be presented in the following way: FGAX- stands for the focus group with adolescents; X stands for the code number of a particular participant; FGCX- stands for the focus group with the caregivers; and X stands for the code number of a particular participant.)* from the participants.
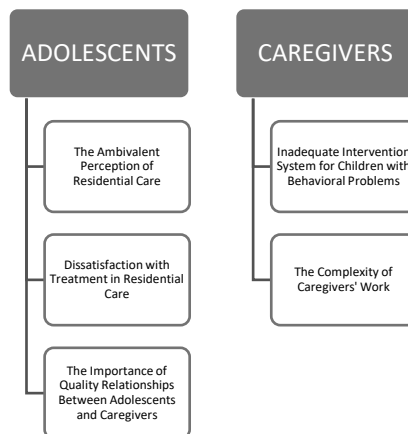
Figure 1 - Major themes for the two groups of participants

Adolescents

The Ambivalent Perception of Residential Care

Even though adolescents point out certain benefits of residential care, a negative perception of care is more evident. The adolescents, when asked to describe the institution of their residence, provide mostly negative metaphors such as *"psychiatric ward"* and *"juvenile correctional institution"*. They also state that placement in open-type educational-correctional institutions is a *"lesser sanction"*, i. e., in their own words, *"I think all of this...in parenthesis...is one big joke... You do whatever you want here, nobody can stop you"* (FGA6). The adolescents are also sceptical about the purpose and effectiveness of institutional placement, and often return to this subject in focus group discussions. In that sense, the adolescents had a very lively discussion on the advantages and disadvantages of living in an educational-correctional institution, while some mentioned the generally insufficient quality of institutional care. What seems to be a current advantage for them (e. g., freedom, an undemanding school environment and educational programs) is also perceived as negative in the future context. Another negative aspect of residential care for the adolescents is the inflexibility of institutions in adapting to the beneficiaries, as well as non-involvement of beneficiaries in treatment planning, where adolescents have the feeling that the caregivers have the power to make decisions about their lives. The adolescents express a fatalistic attitude toward the system of care, as they believe that *"all institutions are the same"* and that institutional placement does not benefit adolescents. In terms of behavioural change, the adolescents argue that institutions have a minor (or no) influence and that they themselves have sole responsibility for and control over positive changes.

The adolescents also mention the problem regarding the lack of differentiation between institutions based on the level of risk, and the fact that the same institution houses adolescents with very different characteristics, which leads to a higher incidence of bullying among peers. The adolescent research participants pointed out that *"some people don't belong here"*, and even mentioned *"intentional violence"* of the system toward the adolescents: *"This is intentional violence* (FGA6); *Well yes, this is inciting intentional violence. So, this guy is paired up with such a fool, it's like pairing up a mobster and a nerd, literally"* (FGA2).

Education is seen as the biggest advantage of institutional placement, with the adolescents verbalizing that the institution provides them with stability and security of education: *"I am glad I ended up in a juvenile facility as a child, because if I hadn't, I might be with my mom or dad, or anywhere, and I wouldn't have gotten any education, I just wouldn't know basic things"* (FGA4). Furthermore, the participants point out other benefits of institutional placement, such as developing independence, meeting new people, experiencing new things, and having the support of their peers. The element of peer support is particularly important for adolescents, and they point out that despite their disagreements, all beneficiaries *"stick together"*. The presence of peers who have had similar lives, who can be trusted and consulted for advice, is seen as a great advantage of institutional placement: *"There are a couple of guys I'm friends with, sort of. I give them a cigarette out of respect, we talk, umm…just like now. Some also give me advice and things like that. They tell me a hundred times not to do certain things. They are more experienced than I am and tell me how things are supposed to be done and how they're not supposed to be done"* (FGA8).

Dissatisfaction with Treatment in Residential Care

There are many aspects of dissatisfaction among adolescents when it comes to treatment and care: inadequate living conditions, strict rules and sanctions, unstructured time, monotony, inadequate behaviour by caregivers and stigmatization in the local community of educational-correctional institutions.

When describing their placement in educational-correctional institutions, the adolescents clearly point out the lack of treatment orientation in everyday work. The participants describe the daily routine of treatment, which includes school, meals and chores: *"I wake up in the morning, eat something before I leave, then go to school, eat lunch, wait for the teacher to come into his office, we talk sometimes and then I ask him, you know, to buy me some cigarettes. I sit down, light a cigarette, check my phone, and watch something on YouTube, Instagram etc., I call my sister. Then I watch TV, go for a walk and then I come back, and I'm bored in my room again. You know, I go for a walk again and come back and that's it, I go to sleep"* (FGA4), or *"We get up, we eat, we go to school, I come back and we clean, take our phones and eat (FGA12)"*. The adolescents also mention the monotony of everyday life when describing their daily routine. The following passage describes it well: *"So, each day here is like a TV show, and each day is a rerun of an episode. One episode is repeated throughout the year"* (FGA6). The adolescents point out that they lack professionally guided leisure activities and feel that they are left to themselves.

They also say that the organization of daily life is the job of the caregivers, and not solely the responsibility of the adolescents. They also make it clear that too much freedom and boredom contribute to the risk, while boredom goes along with unstructured free time: *"You don't know what to do, you do something stupid because you don't know what to do, you simply have nothing to do. All the caregivers, every single one of them, should try to give us as little free time as possible during the day"* (FGA11). Furthermore, the adolescent research participants mention the inadequate living conditions that create an inadequate treatment environment: *"The living conditions here are very bad. This living room is not a living room. But there's this couch and that's what makes it a living room… I say that only because I have seen other facilities as well, that is why. That facility looks different, everything is different, and here it's like, almost like a real prison"* (FGA11). The adolescents express intense dissatisfaction with strict rules, such as confiscation of their cell phones, being forbidden to go to the city, and the fact that there is no reward system. The adolescents give the impression that various forms of positive reinforcement are not applied, while there is an abundance of negative reinforcement. Furthermore, it is troubling that the adolescents perceive the treatment work of the caregivers mainly through sanctions, such as cleaning and various deprivations (e. g., confiscating their cell phones, the right to go out, or money). This is well reflected in the following statement: *"For example, when I came here, I lit a joint, and when the caregiver saw it, I was forbidden from going out, I had to do the cleaning up. And that happened many times until I reached some sort of normalcy. Their treatment"* (FGA2).

One of the negative aspects of staying in educational-correctional institutions, which also adversely affects the quality of treatment, is the stigmatization of the beneficiaries of such institutions in the local community. The adolescents state that the local population sees them as *"gangsters, mobsters or thieves"*. What is interesting is their impression that the caregivers do not protect them from the accusations of the local population and the negative image in the local community, partly because the caregivers live in the same community: *"Some (locals) cause trouble, steal something, they know that the beneficiaries will be blamed first. And for example, that kid comes to the caregiver and the caregiver knows his parents, and the caregiver blames the kid from the facility just to protect the other one"* (FGA6).

The Importance of Quality Relationships Between Adolescents and Caregivers

A good relationship with the caregivers is highly valued by the adolescents, as they argue it is the key to a successful treatment. The adolescents mention various aspects of quality relationships and clearly recognize a lack of such relationships in their educational-correctional institutions. Thus, the adolescents report various problems in their relationships with the caregivers. They state the distressing fact that some caregivers are often absent from work (both physically and metaphorically – *"as if they're not here"*), and that their private lives impact their work in a negative way. The adolescents have the impression that some caregivers are just doing their job to get paid, showing no interest in the beneficiaries: *"Well, I think the guys who come here really need to talk to the caregivers, but they come to an institution and the caregiver, for example, goes out for coffee and is gone all day, you can't make any progress with them. They can only end up in an even worse place"* (FGA3). Caregivers are important to these adolescents, who are bothered when they are not doing their job, i. e., when they are not available or interested in having a relationship with the adolescents. It is interesting that some adolescent participants prefer a more distant relationship with the caregivers and state that it is *"just a job"* that does not require a close relationship. However, such statements also point to a potential problem, i. e., it is questionable whether the treatment can be successful if there is no relationship between the caregivers and the adolescents as a key element in the treatment. For lack of a quality relationship, the success of the treatment falls entirely on the individual adolescents and their desire to change. As the adolescents describe, the ideal caregiver takes care of the beneficiaries, helps them, and makes an effort. The adolescents claim that quality relationships are directly related to the progress of the beneficiaries: *"If you are a caregiver, your job should be to observe the kids, see what's wrong and try to solve it. And to try and solve the bad things, and not just keep an eye on a certain kid"* (FGM4). One positive aspect is that adolescents verbalize that there is at least one caregiver in the institution with whom they are friends and to whom they can turn in difficult times. Some adolescents perceive the caregivers as surrogate parents: *"Yes, that's my other dad. We can agree on everything, he's always there when I need him. I can call him even after his shift is done, and he'll lend me money for cigarettes and stuff"* (FGA3). It is also interesting that adolescents prefer female caregivers. They say male caregivers can sometimes *"play tough"*, and that they are more likely to experience violent behaviour coming from male caregivers.

Caregivers

Inadequate Intervention System for Children with Behavioural Problems
The experts in focus groups expressed a wide range of criticisms regarding the social welfare system. The discussion focused on the uneven criteria for placement of adolescents into educational-correctional institutions, as well as on the lack of an adequate institution for adolescents with mental issues. The experts argue that poor quality of differentiation between treatments and inadequate recognition of various behavioural problems lead to institutional placement of persons who do not belong in such institutions: *"We see a child who shows no progress, and who doesn't benefit from being here, but here he is, today and tomorrow, for a month, for six months, even a year, and you have to deal with them somehow. And that's not what we're meant to do. It is as if a person came to a clinic that does knee surgery and comes across a doctor who has never performed heart surgery. It just cannot happen. The boys suffer in that group"* (FGC1). In some cases, the experts describe the reputation of the educational-correctional institution as *"a last step"* and complain about insufficient cooperation with other institutions in the system. They also find it problematic that the information obtained during the reception of beneficiaries is occasionally embellished, i. e. inaccurate: *"Sometimes the information provided isn't honest, sometimes it isn't detailed enough, sometimes it's difficult to read the situation. We are often surprised. Sometimes the information leads us to the assumption that a certain case will be difficult and cause multiple problems, and then bam, there are no problems and vice versa. The information doesn't always make it clear why a certain person is here in the first place, and finally the problem is found on a higher level, so it's really difficult"* (FGC1). One of the participants describes his experience at a previous job: *"For ten years I worked in a social welfare centre, and I know how it was, they gave us friendly advice to embellish the situation when making a written statement"* (FGC3).

In relation to residential care as a form of intervention for adolescents with behavioural problems, the experts also list advantages of the institutions of their employment, more specifically, in-house school and workshops for vocational training of adolescents: *"I think there is a big advantage here - the fact that there are an internal school and internal workshops. So that's a big deal, and the kids stay in the institution practically all day, which leads to better supervision and better communication between the school, the correctional department, and the workshop. We are all in the same place, all of us together, so it is much, much easier to work"* (FGC11).

The geographical location of the institutions, some of which are located in smaller, relatively isolated communities, is considered problematic by the experts in terms of poor availability of the services and experts on which adolescents rely, especially when it comes to psychiatric treatment. In addition, the location of institutions in smaller communities also contributes to the stigmatization of adolescents by the local population: *"The town would like to get rid of the facility, it's inconvenient when something gets stolen, there were times when the boys put on a real show... Basically, as far as I know, most people don't like having the facility nearby"* (FGC4).

It is interesting that the caregivers most often believe that the (lack of) success regarding treatment is someone else's responsibility (other institutions, such as courts, social welfare centres, the system as a whole), and speak of their own responsibility to a much lesser extent. The caregivers also mention the insufficient number of caregivers in the institution and inadequate organization of work, emphasizing how difficult it is to set aside time for treatment work. They argue that institutions should have a special team of experts dealing exclusively with treatment work, while the caregivers would focus on taking care of daily routines and obligations. In this context, the caregivers also mention a lack of male caregivers as a more appropriate model for adolescents, since these institutions accommodate only adolescent boys. However, it is also interesting that male caregivers are in the majority in both institutions included in this study, but this is obviously still a dominant perception.

The Complexity of Caregivers' Work

When describing their work, the experts point out multiple risks of the adolescents they work with, which include various forms of behavioural problems, especially inadequate attitudes towards addiction and violent behaviour. The adolescents often use addictive substances, and the caregivers state that it is difficult for them to discover and monitor the variety of intoxicating substances used by the adolescents. Furthermore, the adolescents come from families with multiple problems and generally do not trust adults because of their poor life experiences in the family, school and beyond: *"They don't trust adults. They've had no reason to trust adults from the beginning of their lives until now. When they come here, they don't see them as someone who wants to help them. Trust is earned. They are turned against the system, be it schools, be it social welfare, or it the educational-correctional institution. I mean, throughout their lives they've had no reason to trust adults, their family and beyond"* (FGC1).

Most of these adolescents have had traumatic early-life experiences and show a great need for emotional connection: *"These are very deprived children who come from at-risk families and have previously failed to create a relationship of trust with another person, and a relationship of quality communication with another person - an adult who sets boundaries and rules to abide by, on the one hand, and on the other hand, gives them enough freedom of expression and enough freedom to actually see that there are plenty of adults who truly hear them, see them and who may love them - but that must not happen in a way they find intrusive"* (FGC11). When it comes to establishing relationships with adolescents, the experts mention humour and mutual learning as important elements. They also state that caregivers must seek a balance between gaining authority and gaining trust among adolescents. In addition to multiple risks, the experts also mention the good sides of adolescents, such as creativity, good intellectual capacity, and motivation.

Given these risks, the experts describe their work with the adolescents through the wide range of areas and topics they cover in their daily work: *"Essentially, we work on all areas of their lives. From education, to hygiene, cultural habits - everything that is part of a normal life. Any forms of prevention, counselling. I mean, there is only one caregiver per shift, he or she also really needs to maintain order and be present as an authority, at the same time showing concern for all segments of life. That person is both a police officer, a counsellor and a parent – everything"* (FGC1). When asked about the theoretical foundation of their work, the experts do not provide a specific answer, but they mostly list risks and various aspects of their work, without linking these with specific theoretical approaches and principles. Working with adolescents is primarily based on an individual approach, especially given the great diversity of the beneficiaries. The experts prefer individual and informal conversations, as opposed to group forms of work, which are rarely represented (only when it comes to agreements or a crisis). The caregivers also state that adolescents show little interest in participating in various leisure activities (sections), so these are rarely held: *"Only a few sections take place because of very low interest… They have to be begged and persuaded to attend them. People come here to hold workshops, and they don't show up"* (FGC1).

Discussion

The results of this study regarding the perception of residential care and treatment among adolescents in educational-correctional institutions and their caregivers support the thesis presented by Moos and Moos (1998). Their perspectives differ, which makes sense given that they belong to different groups, i. e., subcultures within the institution. Their perceptions are aligned in many segments, but each group points out certain aspects and problems that the other group does not mention and may not be aware of. In other words, adolescents and caregivers talk about the same things, but often in different ways. At the same time, some of the aspects highlighted by the adolescents are problematic and troubling to such a degree that one must question how it is possible for the experts who act in such manner to still be employed in the residential care system. This especially refers to the statements by the adolescent participants in which they clearly and without hesitation state that certain caregivers do their job very poorly and are often absent from work. Comparing the two groups of participants, one gets the impression that adolescents are more critical, more direct and substantial than the caregivers in their criticism, as shown by previous research on the treatment climate in educational-correctional institutions (e. g., Langdon, Cosgrave, Tranah, 2004; Smith, Maume, Reiner, 1997), which showed that experts perceive the climate in a more positive light than adolescents. Furthermore, Pérez-García et. al. (2019) state that adolescents in educational-correctional institutions have the lowest satisfaction with the treatment, which also arises from the severity of their problems. It is possible that part of the dissatisfaction with the treatment in residential care can be accounted for by the fact that adolescents are placed there involuntarily and have to make certain changes to their behaviour, which is not an easy task. However, even with all these explanations, it is undeniable that adolescents are dissatisfied with the life and the treatment in educational-correctional institutions and doubt their effectiveness. Previous studies show a prevailing positive experience with residential care, despite the disadvantages (Moore et. al., 2017; Soenen, D'Oosterlinck and Broekaert, 2013; Palareti and Berti, 2009), while the results of this study show a more negative perception, despite the advantages. The adolescents clearly state the key shortcomings of residential care.

The results of this research, therefore, build upon previous research in the Croatian context: there is a prevailing feeling that institutional placement is pointless, and the operation of the institution is an additional risk factor (Kovačićek, 2017; Ratkajec Gašević, Maurović, 2015; Jeđud, 2011), there is a lack of treatment activities (Kusturin, 2002; Oreb, Majdak, 2013) and living conditions are poor (Kovačićek 2017; Koller-Trbović, Jeđud Borić and Mirosavljević, 2015; Sklepić, 2011). The adolescents also mention various deprivations and sanctions in the institutions, for example confiscation of objects, the right to go out and money, all of which have been identified in previous research as factors contributing to escapes from the institutions (Ratkajec Gašević, Maurović, 2015).

Despite the above, the adolescents also point out certain positive aspects of their placement, such as the opportunity to change, make positive changes in their behaviour, and the opportunity to finish school. Carter's (2011) research with adolescents yields similar results, where they perceive the success of the treatment through positive changes in their own personality or the development of the capacity for empathizing.

Both the adolescents and the caregivers identify the problem of insufficient differentiation between treatment programs, and even between the institutions themselves. Excessive diversity of beneficiaries in educational-correctional institutions complicates the caregivers' work and negatively affects the experience of treatment among adolescents. In this regard, Huško (2010) argues that placing adolescents with different characteristics and treatment needs in the same space leads to many conflicts, threats, and unacceptable forms of behaviour.

The experts explicitly mention adolescents with mental issues who rarely have access to psychiatric treatment in the local community, since these educational-correctional institutions are located in relatively small, isolated communities. The institutions, which are described by both the experts and the adolescents as the *"last step"* in the intervention spectrum, most often do not offer appropriate treatment and can thus become a new (additional) risk for adolescents, as mentioned by Jeđud (2011).

When discussing the treatment work, the adolescents express a fair amount of dissatisfaction with the monotony, the inadequate range of activities and the (overly) routinised everyday life. Experts, on the other hand, are also dissatisfied because they feel they have the obligation to simultaneously provide various activities to adolescents and often have to start *"from scratch"*.

However, the adolescents and the experts agree in their description of everyday life, claiming that the prevailing activities are those related to care and accommodation, i.e., the functions of residential care that are aimed at meeting the basic needs (hygiene, food, accommodation and school), while other treatment needs are discussed to a lesser extent, even though the experts are aware of these (trauma, multiple risks, etc.). Specifically, the caregivers mention a lack of additional teams of experts or external associates to take over this part of their educational tasks. Based on the results of this study, it seems that several elements are lacking in what is called therapeutic residential (Whittaker, del Valle, Holmes, 2015), more specifically, the strategic use of a purposefully constructed multi-dimensional living environment designed to enhance or provide treatment, education, socialization, support and protection.

The experts tend to link the responsibility for the quality of care and treatment to other, external stakeholders, at the same time not mentioning their own role and responsibility, which is consistent with conclusions of the study conducted by Herceg Babić (2014). This research also showed that caregivers neglect or insufficiently use certain elements of treatment in their work, such as conducting group work or practicing alternative techniques, which was also confirmed in this research. The caregivers prefer an individual and more informal approach, which suits certain adolescents, even though some also perceive it as a lack of interest from the caregivers.

The perspective of the adolescents and experts on education is also interesting. The experts are pleased that there are in-house schools and school workshops in the institutions, and they additionally point out the benefit of spatial confinement of beneficiaries, saying that *"everyone is in the same place, which makes work easier".* The adolescents, however, find this form of schooling too undemanding. This leads to the conclusion that the caregivers prefer the static, closed nature of the institution, while the adolescents would prefer being more open to the local community and experiencing more involvement and normalization. Being more open would probably mean more work for the caregivers, but they seem to forget who is at the focus of their work and whose needs are primary.

Finally, it is important to reflect on possibly the most crucial aspect indicated by the results of this study: the relationship between adolescents and caregivers. Both groups of participants recognize and verbalize the importance of quality relationships as important determinants of treatment in educational-correctional institutions. The caregivers speak of relationships through examples of their own actions and the way they seek to establish a relationship with the beneficiaries. The adults clearly emphasize that establishing relationships is particularly important because the adolescents have previously had negative experiences in relationships with significant adults and perceive the caregivers as role models in this regard. That is why the results from the perspective of adolescents are especially disheartening, since they report the unavailability and absence of caregivers and their distant attitude towards the adolescents. Previous research also emphasizes the importance of the relationship between caregivers and beneficiaries, with some authors citing it as the most important element of treatment (e.g., Moore et al., 2017). D'Oosterlinck and Broekaert (2013) cite the availability and involvement of caregivers in this regard, while Johansson and Andresson (2006), as well as Lanctôt, Lemieux and Mathys (2016), emphasize the need for support and understanding of the trauma and past experiences of adolescents. Sellers (2020) argues that children and adolescents who reported better quality relationships also perceived the institution as a safer place, while Leipoldt et al. (2019) emphasizes that a positive perception of relationships within the institution contributes to greater involvement of adolescents in the treatment. Leloux-Opmeer, Kuiper, Swaab and Scholte (2016), as well as James, Roesch and Zhang (2011) argue that adolescents in residential care show a lack of trust in adults, which is often well-justified. This is confirmed by Bakić (2001), who argues that adolescents in residential care usually experience only rejection from adults, and that such experiences should be transformed in their relationships with caregivers. A positive relationship with the caregivers which contains elements of a warm, spontaneous, human relationship with clear boundaries and requirements contributes to greater success in treatment. However, when it comes to children and adolescents with behavioural problems, Brendtro (2010) points out the circular problem of building relationships, which can be very demanding for experts. The following dynamics takes place: the expert knows and believes that the relationship is key to the treatment work and tries to establish said relationship.

However, the adolescent person, owing to past negative experiences and their own risks, has difficulty in establishing the relationship and does not allow (cannot/does not know how) the establishment of the relationship. Experts sometimes tend to react to such rejection by and problematic behaviour of adolescents by giving up on the relationship, which confirms those previous negative experiences of the adolescents. Brendtro (2010) describes this group of adolescents as "relationship-resistant", which means that the experts must put a great deal of effort into developing a good relationship with these adolescents. It is imperative that the experts avoid trying to become "attractive" to adolescents by giving in or imitating their behaviour ("being one of them"), at the same time criticizing other adults in the environment, taking on parental roles, acting aggressively and succumbing to power struggles, thereby allowing adolescents to see themselves as the problematic ones in the relationship. Instead, the experts should trust the adolescents, so that the adolescents can trust them in return.

It is also interesting that adolescents prefer female caregivers because they are less violent, while the experts state the need for more male caregivers. The adolescents seem to want a gentler and more intimate and therapeutic approach, while the experts usually turn to more rigid and authoritative solutions. As stated by Koller-Trbović, Jeđud Borić and Mirosavljević (2015), this kind of approach and a traditional understanding of gender roles are not uncommon in treatment. Even male social pedagogy students, reflecting on their own choice of occupation, mention certain gender specifics, for example, the male gender as an advantage in direct work (Ćosić, 2018).

To reach conclusion about the relationship between adolescents and caregivers, it is important to make indirect observations from the focus group discussions when it comes to addressing the caregivers. More specifically, the adolescents address the caregivers as "*Professor*", which is very formal and reflects their occupation (i.e., title). In the context of a contemporary approach, new relationships and the positions of power and responsibility of children and adults (Juul, 2005), it is important to transform formal, distant relationships into cooperative, real-life relationships. The authority of adults should be based on consideration, responsibility and mutual respect.

Limitations

One of the major limitations of this research is that it was conducted in only two residential care units that accommodate only adolescent males. In that sense, the sample is gender-limited to a male perspective. Further research should explore the female perspective more broadly and include a greater variety of residential care forms. The conclusions of this research cannot be generalized, since it is a qualitative study. However, the research data is comparable to prior research and the results can be applied and transferred into practice.

Conclusion

Adolescents with behavioural problems who have been separated from their families are an especially vulnerable social group. Therefore, the interventions provided to this group of adolescents need to be carefully designed and aligned with their needs. This study sought to gain insight into the experience of institutional treatment from the perspective of adolescents and their caregivers, in order to formulate guidelines for practice and education of future experts, but also for further research. The specific contribution of this research is in uniting and comparing the perspectives of the beneficiaries and the experts. In the context of practice, the most important guidelines are consistent with the recommendations provided by Trieschman, Whittaker, and Brendtro (2010): that behavioural change (which is the main goal of interventions) must be affected through daily activities and relationships. At the same time, everyday life must be dynamic and meet the needs of children and the modern way of life. Monotony and boredom only add to the risk, which is why educational-correctional institutions for adolescent boys, in addition to providing accommodation, should also offer a wider range of therapeutic and treatment activities primarily aimed at processing traumatic experiences, addiction problems and violent behaviour. Caregivers should develop positive and respectful relationships with adolescents to a much greater extent, as well as be present, involved, and available for building a relationship. There is a significant danger that caregivers who are disappointed in and dissatisfied with the system, will choose undesirable behaviours (absence from work, disinterest, indifference) and distance themselves from the beneficiaries.

Therefore, it is important to invest in the professional and personal capacities of caregivers through regular supervision and education, but also through visible changes in the system that will encourage caregivers to be proactive. However, this research also emphasizes the need for a faster and more decisive reaction from the competent ministry and other institutions regarding the inadequate behaviour of some caregivers.

The study also indicates the necessity of changes in the system of educating future experts for employment in educational-correctional institutions. It is crucial to revise subjects, topics and learning outcomes, and to focus more strongly on the development of treatment relationships with those "relationship-resistant" adolescents (Brendtro, 2010), on the dynamic programming of treatment based on the needs of adolescents, and on the development of new activities and methods.

In terms of research, it would be interesting to explore both the female perspective and the girls' experience of care. Similarly, it would be worthwhile from the perspective of both research and practice, to investigate the role of caregivers in more depth, i.e. to identify how caregivers describe and perceive their role and how this view aligns with modern knowledge. Further research should certainly be more participatory and even more action-based, so that it contributes to change (for the better) the practice and the life in educational-correctional institutions, without having to wait a long time for the academic results to find their way into practice.

Finally, the experts should continuously monitor the beneficiaries and their needs, while actively reflecting on their own practice. Caregivers need to take responsibility for their work, follow current knowledge and research related to the population and the context in which they work, and use these as the basis for their actions. They should also advocate for adolescents who are beneficiaries of institutional treatments and who deserve better care than they are currently receiving.

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Europe Needs to Integrate Immersive Learning Quickly at All Education Levels – But How? What to Learn From 25 EU Projects in This Field

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Abstract/Izvleček Manifold technical developments have allowed immersive technologies - virtual (VR) and augmented (AR) realities and their fusion to mixed or extended reality (MR/XR) - to find their way into many areas of life and work. Given their almost infinite creative possibilities, they are also of great interest for pedagogy. But what are the possibilities and where are the limits, and where does Europe stand in this respect at all? To find answers, we have evaluated 25 EU projects dealing with VR/AR/XR-based learning.

V Evropi je imerzivno učenje potrebno hitro vključiti v vse ravni izobraževanja - vendar kako? Česa se je na tem področju mogoče naučiti iz 25 projektov EU?
Mnogostranski tehnični razvoj je omogočil, da so poglobljene tehnologije – virtualna resničnost (VR – ang. virtual reality) in obogatena resničnost (AR – ang. augmented reality) ter njuno zlitje v mešano ali razširjeno resničnostjo (MR – ang. mixed reality; XR – ang. extended reality) – našle svojo pot v različna področja življenja in dela. Zaradi njihovih skoraj neskončnih ustvarjalnih možnosti so zelo zanimive tudi za pedagogiko. Kakšne pa so možnosti in kje so omejitve, kje v tem pogledu sploh je Evropa? Da bi našli odgovore, smo ocenili 25 projektov EU, ki se ukvarjajo z učenjem na osnovi VR, AR in XR.

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Introduction

In recent years, technologies that enhance or recreate real world environments are increasingly influencing our lives. With Virtual Reality (VR; 2D/3D computer-generated immersive environments), Augmented Reality (AR; real world environments overlaid with computer-generated input) and the recently introduced combination of both as well as their extension with other features (Mixed Reality/MR or Extended Reality/XR), it is possible to simulate almost any process carried out in the physical world. Originally starting in the games industry, more and more VR/AR/XR apps have since been produced for learning in all of its forms with enormous potential: they allow us to travel through the human body (https://www.medicinevirtual.com), visit the Anne Frank House in Amsterdam (https://www.annefrank.org/en/about-us/what-we-do/publications/anne-frank-house-virtual-reality), fight the fear of speaking in front of 1,000 virtual listeners (https://virtualorator.com), conduct experiments in laboratories (https://www.labster.com), undergo safety training in various professions (https://www.vrsafety.co.uk/) or teach ourselves to cook (https://jobsimulat–orgame.com) -- all without even needing to leave your own living room. The possibilities are almost endless, realism is amazingly high, and it can be applied to all kinds of learning: from early childhood education to higher education (HE), from vocational training (VET) to social pedagogy and the training of people with special needs, and from cultural heritage to the arts.

However, VR/AR/XR technologies, services and offers have not only improved rapidly, but at the same time acquisition costs have also fallen dramatically. In the past, these technologies were mainly used for the development of premium products, owing to their high cost. Today, these technologies have become much more common in many areas of social, professional and economic life, and their cost-effectiveness has increased significantly. Thus, the value of investing in VR/AR/XR has become much more broadly recognised within many private, public and business sectors.

As a result, the revenue generated on the global extended reality VR/AR/XR markets is projected to witness an explosive 48.3% Compound Annual Growth Rate (CAGR) between 2020 and 2030. Thus, the industry value will rise massively from a mere $18.5 billion in 2019 to more than $1,005.9 billion by 2030 (Kumar, 2020).

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This will have an enormous impact on many areas of the economy, HE and VET, and this revolution has been reflected at many major fairs and conferences n recent years, e.g. at the Hannover Messe/DE in the field of smart industry, at the BETT Show/UK for education and at the University Industry Interaction Conference/FI for HE business cooperation. Of course, it plays a central role in the regular events of the EuroXR network; its 2020 conference in Valencia/ES is to be held exclusively virtually for the first time, for safety reasons (https://i3b.webs.upv.e–s/webs/eurovr).

Although immersive technologies are generally on the rise, the radical changes and partial restructuring in many areas of life, work and learning caused by COVID-19 will most likely further strengthen this trend. Although comprehensive scientific studies on this topic are still largely lacking, it can be observed everywhere that digital forms of communication, knowledge exchange and knowledge transfer have increased - and for many they have now become the norm. It has been shown that those who were previously familiar with digital and immersive forms of communication and learning found it much easier to adapt to the new situation and to transfer their work and communication processes to a virtual environment relatively quickly. Those who had little or no experience of digitalised forms of working and learning before the outbreak of the pandemic have had to travel long distances and make great efforts to reorient themselves mentally, psychologically, infrastructurally, process-wise and with regard to the necessary development of skills in order to return to a regulated daily routine. From this perspective, COVID-19 is expected to have a major impact on the digitisation of our society and economy and will sustainably initiate urgently needed investment and further developments.

Quo vadis, immersive Europe?

The important issue now is how well European society and especially its economy is prepared for this technological challenge. Unfortunately, compared to its major global business competitors in the USA, China, Japan, South Korea and India, Europe has started slowly in utilising VR/AR/XR business and learning environments and is in danger of lagging further behind. The problem exists less amongst Europe's larger enterprises, with their high investment levels in technical equipment and HDR, but these represent only 0.7% of all European enterprises.

The remaining 99.3% consists of SMEs, the backbone of Europe's economy, who generally experience greater difficulty in investing staff, time and financial resources in order to keep pace with ICT developments (Eurostat, 2019).

A good example is the situation in Germany, one of the largest economies in the world, where two of its main areas - manufacturing and engineering - are heavily affected by smart industry. 99% of German industry is represented by SMEs that are not well prepared for this challenge. Paradoxically, the strong economic position of SMEs currently being experienced in Germany is in fact an enormous barrier to their smart development: Many German SMEs are – at least they were before COVID-19 - too busy to pay appropriate attention to this issue. It is a combination of lack of time and of awareness, which many see as the most serious threat to SMEs. Therefore, the German Federal Ministry of Economic Affairs and Energy initiated the *High-tech Strategy Industry 4.0* (www.bmbf.de/en/the-new-high-tech-strategy-2322.html), which targets the consolidation of resources and promotes transfer, strengthening the dynamism of innovation in industry, to create favourable conditions for innovation, and thus boosting dialogue and participation.

However, the situation is not like this in Germany alone. Right across Europe, SMEs feel that they could be left behind in terms of digitisation and fear for their future prospects (SMeART, 2018). Everywhere politicians are frantically launching investment and digitisation initiatives to prevent this from happening. How successful these measures will be (if at all), remains to be proven - in any case, it would have been desirable had national and regional politicians given greater attention and urgency to this issue earlier.

And what has happened at the European level? In comparison to many individual Member States, the digitalisation of the public and commercial economic sectors has long been postulated and promoted by various strategies and programmes at the European level. In particular, the EU has recognised that the successful digitisation of European society is not only a technical and infrastructural challenge, but that awareness raising as well as digital education and training are at least equally important.

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As early as 2011, the Commission launched the *Agenda for Modernisation of Europe's Higher Education* Systems (EC 2011/567 final), which sought to improve "the quality and relevance of higher education by exploiting the potential of ICTs" (p. 7), aiming to make the "knowledge triangle work by linking higher education, research and business for excellence and regional development", by creating close and effective links between education, research and business. Lastly, it sought to "build on the pilot project to strengthen the interaction between universities and business through knowledge alliances" (p. 11).

It was followed by the *Digital Single Market Strategy*, which underlined a new dynamic across the European economy as a whole, fostering jobs, growth, innovation and social progress, since all areas of the economy and society are becoming digital; consequently, it postulated that a "change is needed in the way education and training systems adapt to the digital revolution" and to the empirical findings that showed "teachers' lack of digital competences, and their lack of confidence in using digital technologies meaningfully in teaching. […]. Additionally, a recent public consultation on the "Agenda for the Modernisation of Europe's HE Systems" showed that "over two-thirds of students and recent graduates perceive a mismatch between the supply of graduates and the knowledge and skills that the economy needs. […] Other important challenges identified by stakeholders include the impact of technology and globalisation on higher education […]" (EC 2015/196: final).

From this, initiatives were derived to increase the digital competences of educators as quickly as possible (EC 2017/29000, 41), and as a consequence, the European Framework for the Digital Competence of Educators endorses initiatives that set up learning activities in digital environments for both teachers and learners; these allow teachers to experiment with and develop new formats and pedagogical methods (EU: DigCompEdu, 2017, 52). This includes the continuous evaluation of information technology curricula at all training levels as well as the creation of applied blended learning environments in authentic settings, such as in workplace-based learning.

All these policies and programmes may appear to be comprehensive and numerous, but in reality, they are insufficient and fall far too short for Europe to swiftly catch up with other industrialised nations. The EC is aware of this and has just proposed the creation of the first ever Digital Europe Programme, which will invest €8.2 billion to align the next long-term EU budget 2021-2027 with the increasing digital challenges.

With this programme, European Digital Innovation Hubs (EDIHs) will play a central role in stimulating the broad uptake of artificial intelligence, high performance computing (HPC) and cybersecurity, as well as other digital technologies by industry (in particular SMEs and midcaps) and public sector organisations across Europe. EDIHs will function as one-stop shops to help companies respond dynamically to the challenges and become more competitive (https://ec.europa.eu/digital-single-market/en/europe-investing-digital-digital-europe-programme).

The political leadership of Europe has thus taken very important and highly necessary steps towards a digital future - and hopefully, they are not too late.

Nevertheless, it is fair to admit that the Commission has already long been funding projects concerning immersive developments and learning. One of these is the VRinSight project, whose full title tells us all about its main objective: Boosting Virtual Reality Learning within Higher Business Management Education (www.vrinsight.org). During the project's lifetime (10/2018-09/2020), the project group conducted a European survey of the needs of HEIs and SMEs concerning VR learning and teaching (VRinSight, 2019: Cumulative Report); it also developed and implemented a VR-based training programme for HE business management teachers (VRinSight, 2019: Curriculum), including a specially programmed VR classroom, and collected, analysed and presented 25 best practice apps for immersive learning (VRinSight, 2019: Showcase). Finally, the project group undertook European-wide research into all ongoing EU-funded projects dealing with immersive learning. What experiences did they make, what lessons did they learn and what immersive solutions did they come up with? Even more importantly: what can we all learn from them? The project group concluded that perhaps it was a good idea to ask all of the projects these precise questions.

The meta-data analysis of 25 EU projects

In our search for all ongoing VR/AR/XR projects and initiatives, we sifted through the databases of several EU programmes such as ERASMUS+ (links to all programmes mentioned are under References) and CORDIS as well as the programme websites and project catalogues of the Directorate-General for Communications Networks, Content and Technology (CNCT), Internal Market, Industry, Entrepreneurship and SMEs (GROW), Informatics (DIGIT) or Research and Innovation (RTD).

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Overall, around 2,000 approved EU projects during the years 2016 to 2020 were searched, another 80 projects were collected via free internet research, and four projects were recommended by project partners and other experts. From November 2019 to April 2020, 41 of these projects and initiatives were selected through peer evaluation based on a criteria catalogue using the following indicators:

- projects and initiatives must deal with immersive learning (in its widest sense)
- projects and initiatives dealing with immersive learning in HEIs and/or SMEs are preferred
- although the focus is on VR learning, projects with an AR and/or XR focus are also welcome (this open approach is simply better suited to current developments in the field)
- "projects and initiatives must not have been completed by September 2019 (to ensure a certain level of actuality)"
- projects and initiatives must be supported by EU/EC funds (including purely national funds; however, transnational cooperation projects were preferred).

The leaders or public relations officers of the 41 projects were contacted and invited to publish their project work results and experiences by means of articles in the VRinSight Green Paper "Boosting Virtual Reality in Learning" (VRinSight, 2020). Eventually, the following 24 projects were selected as examples of good practice and were published:

N°1: Active Learning in Engineering Education (ALIEN)
Country: Greece
Funding programme: ERASMUS+
Duration: 15/10/2017-14/10/2020
In a nutshell: ALIEN designs, implements, and validates an active learning methodology based on PBL environments addressing real-life issues related to STEM concepts. This methodology aims to build student skills that are demanded by industry and facilitate their easy transition into the workplace. (http://projectalien.eu)

N°2: Country: Connected Teacher Education (CoTeach)

Country: Germany

Funding programme: German Federal Ministry of Education and Research (BMBF): "Funding for teacher training with a focus on digitalization in teacher training"

Duration: 01/03/2020-31/12/2023

In a nutshell: CoTeach develops and evaluates innovative teaching and learning contexts for student teachers and scholars. One work package couples the potential of VR with principles of intercultural learning to create tangible experiences with pedagogically responsible value. (www.uni- wuerzburg.de/pse/forschen/co-teach-connected-teacher-education/)

N°3: An Adult Digital Education Skills Kit to Foster Employability (DESK)

Country: Greece

Funding programme: ERASMUS+

Duration: 01/11/2018-30/04/2021

In a nutshell: The aim of the DESK project is to develop a novel toolbox with which adult trainers can attract, reach out to and assist adult learners to catch up with their digital literacy. (http://desk.e-sl.gr)

N°4: Digital Innovative Media Publishing for All (DIMPA)

Country: France

Funding programme: ERASMUS+

Duration: 01/11/2018-31/10/2020

In a nutshell: The goal is to create accessible learning materials and tools for people to remain employable in an increasingly digital workplace. This first European Massive Open Online Course provides adequate learning concerning six technologies including VR and AR. (www.dimpaproject.eu)

N°5: Teaching and Learning with Technology in Higher Education (EDUTECH)

Country: Spain

Funding programme: ERASMUS+

Duration: 01/09/2019-31/08/2021

In a nutshell: The main aims are to prepare a platform to design teaching activities based on technology with learning analytics as well as to generate a guide and MOOC

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to help all lecturers to implement these methodologies and to create content for disadvantaged people that is based upon these methodologies (www.edu–techproject.eu).

N°6: Fast and easy previsualisation for creative industries (first.stage)
Country: Germany
Funding programme: Horizon 2020
Duration: 01/06/2016-30/09/2019
In a nutshell: Virtual reality glasses and newly developed software help directors, actors, stage designers and other participants to plan the scenes of a theatre or film production realistically in advance. (http://first-stage.eu/)

N°7: Training teachers and trainers for the 4.0 paradigm (Fit for 4.0)
Country: Italy
Funding programme: Erasmus+
Duration: 01/09/2019-31/08/2022
In a nutshell: The project aims to improve teachers' skills to fully embed the 4.0 paradigm in their daily work. It will deliver and pilot a self-assessment tool, a train-the-trainer MOOC, plus policy recommendations to stakeholders and decision-makers.

N°8: Advanced VR, iMmersive Serious Games and Augmented REality as Tools to Raise Awareness and Access to European Underwater CULTURal heritagE (iMARECULTURE)
Country: Cyprus
Funding programme: Horizon 2020
Duration: 01/11/2016-31/01/2020
In a nutshell: Raise public awareness of European identity by focusing on maritime cultural heritage. iMareCulture aims to bring inherently unreachable underwater cultural heritage within the digital reach of the wider public by implementing virtual visits, serious games with immersive technologies and underwater augmented reality. (https://imareculture.eu)

N°9: Inclusive Cultural Heritage in Europe through 3D semantic modelling (INCEPTION)
Country: Italy
Funding programme: Horizon 2020
Duration: 01/06/2015-31/05/2019
In a nutshell: Semantic modelling of Cultural Heritage buildings using BIM to be managed through the INCEPTION platform for the advanced deployment and valorisation of enriched 3D models, for better knowledge sharing and the enhancement of European Heritage. (https://www.inceptionspinoff.com/; https://www.inception-project.eu/en)

N°10: Inclusive Intelligent Verification/Validation for Extended Reality Based Systems (Iv4Xr)
Country: Portugal
Funding programme: Horizon 2020
Duration: 01/10/2019-01/10/2022
In a nutshell: Iv4Xr aims to develop an AI agent-based verification approach to test XR systems; a computational approach for the automated appraisal of human factors and user experience; and to deliver a framework and toolkit to support the automated testing of XR systems. (https://iv4xr-project.eu)

N°11: Learning mathematics through VR (MVR)
Country: France
Funding programme: ERASMUS+
Duration: 01/10/2018-30/10/2020
In a nutshell: The objective is to develop new tools by means of inquiry non-formal education, hands on pedagogical methodology and the usage of VR for enhancing current didactics of mathematics and increasing engagement with learning mathematics. (www.math-reality.eu)

N°12: A human-factors based (VR) training solution for decision-making and acting capabilities under stress and in high risk situations for European LEAs (SHOTPROS)
Country: Austria
Funding programme: HORIZON 2020
Duration: 01/05/2019-30/04/2022

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In a nutshell: After the validation of a human factors model for DMA-SR, the project defines guidelines for (VR) training for Europe's LEAs and develops a training curriculum as well as a VR training environment; finally, a European network and a policy-maker toolkit for knowledge transfer concerning VR training are set up. (www.shotpros.eu)

N°13: University Business Cooperation for Promoting Virtual, Augmented and Mixed Reality Applications within Small and Medium-sized Manufacturing Companies (VAM Realities)
Country: Germany
Funding programme: ERASMUS+
Duration: 01/01/2020-31/12/2022
In a nutshell: The project aims to support European SMEs to become familiar with immersive technology and to assist with the integration of this technology into business operations through cooperation between SMEs, HEIs and technology providers. (https://vam-realities.eu)

N°14: Virtual Reality Archive Learning (ViRAL)
Country: Austria
Funding programme: ERASMUS+
Duration: 01/09/2018-30/08/2021
In a nutshell: ViRAL is a project that aims to develop non-formal adult education using digital tools, such as virtual reality, augmented reality, and 360° videos, with information from archives, museums or initiatives in post-industrial cities. (www.viraltraining.net)

N°15: Fostering Virtual Reality applications within adult learning to improve low skills and qualifications (VIRAL SKILLS)
Country: Austria
Funding programme: ERASMUS+
Duration: 01/10/2018-30/09/2020
In a nutshell: Virtual reality allows learners to immerse themselves in complex topics, with actively experiencing learning content taking the place of memorising. To exploit the full potential of this new medium, VIRAL SKILLS offers comprehensive supporting materials. (www.viralskills.eu)

N°16: We learn to apply augmented and virtual reality in our technology classes (VleaRning)
Country: Spain
Funding programme: ERASMUS+
Duration: 31/12/2018-30/12/2020
In a nutshell: The VleaRning project aims to adapt and introduce AR and VR technologies in European schools. Stakeholders can learn how to integrate these technologies into their classrooms through the Vlearning eLearning platform. (www.vlearningproject.eu)

N°17: Future schools using the power of virtual and augmented Reality for education and training in the classroom (VR@School)
Country: Romania
Funding programme: ERASMUS+
Duration: 01/09/2018-28/02/2021
In a nutshell: The project's main aim is to create a collection of online tools to facilitate teaching and to motivate students to use VR and AR in class. Train the trainer sessions as well as VR lessons for STEM classes will be developed and implemented in VR labs at different schools. (www.vr-school.eu)

N°18: Virtual Reality in Higher Education: Application Scenarios and Recommendations (VR_Education)
Country: Liechtenstein
Funding programme: ERASMUS+
Duration: 01/09/2018-28/02/2021
In a nutshell: Firstly, the project aims to identify virtual reality application areas in higher education. Secondly, the project will result in recommendations enabling lecturers to implement virtual reality in their teaching activities. The project mainly targets educators in higher education and will provide materials to aid the first steps with VR-enhanced practices. (https://www.researchgate.net/project/Virtual-Reality-in-Higher-Education-Application-Scenarios-and-Recommendations)

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N°19: VR-Together (VR-T)
Country: Spain
Funding programme: HORIZON 2020
Duration: 01/10/2017-01/10/2020
In a nutshell: VR-Together offers new VR experiences based on social photorealistic immersive content, creating an end-to-end pipeline integrating state-of-the-art technologies and off-the-shelf components and introducing new methods for social evaluation. (https://vrtogether.eu)

N°20: Integration of Experiential Learning and Virtual Reality into Gifted Education (VR4GIFTED)
Country: Turkey
Funding programme: ERASMUS+
Duration: 01/11/2018-30/04/2021
In a nutshell: The main objectives of the project are to develop a new reference curriculum based on experiential learning theory and Virtual Reality resources to be used in Teacher Training with a focus on the inclusive education of gifted and talented children. (http://vr4gifted.com)

N°21: Virtual Reality for Rehabilitation (VR4REHAB)
Country: Netherlands
Funding programme: INTERREG NEW
Duration: 20/09/2017-19/03/2021
In a nutshell: VR4Rehab enables the co-creation of Virtual Reality-based rehabilitation tools. Combining forces from SMEs, research institutes, clinics and patients, VR4Rehab aims to create a network in which state-of-the-art VR-technology can maximise rehabilitation potential and adhere to the needs of patients and their therapists. (www.nweurope.eu/projects/project-search/vr4rehab-virtual-reality-for-rehabilitation)

N°22: Virtual Reality Audio for Cyber Environments (VRACE)
Country: Austria
Funding programme: HORIZON 2020
Duration: 01/03/2019-28/02/2023
In a nutshell: VRACE aims at providing physically correct and perceptually convincing soundscapes in VR. This goal is pursued through training ESRs in all VR-related domains, namely physical modelling, sound propagation, audio rendering and psychoacoustics. (https://vrace-etn.eu)

N°23: Virtual Reality applied to roadwork training in European construction industry (VROAD)
Country: Spain
Funding programme: ERASMUS+
Duration: 01/10/2018-20/09/2020
In a nutshell: Tackling specific needs for work-based training and hazard prevention in roadworks training through the development, testing and implementation of a training system based on VR. (http://microsites.fundacionlaboral.org/v–road?idioma=1)

N°24: eXtended Reality for All (XR4ALL)
Country: Belgium
Funding programme: HORIZON 2020
Duration: 01/12/2018-01/12/2021
In a nutshell: By creating a pan-European community the project discovers existing XR technology to develop an agenda for further research. It also awards grants to innovative projects and seeks to increase the levels of investment and technology transfer to help high quality products reach the market. (http://xr4all.eu)
Last but not least, our own project has also contributed to this research:

N°25: Boosting Virtual Reality Learning within Higher Business Management Education (VRinSight)
Country: Germany
Funding programme: ERASMUS+
Duration: 01/10/2018-30/09/2020

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In a nutshell: VRinSight aims to usher in VR technology across HE business management studies by identifying the challenges faced by the SMEs as well as the current deficiencies of HE in relation to VR technology, by spearheading a VR training programme for educators and SMEs and by increasing awareness of VR technology across HE and business Europe. (www.vrinsight.org)

In addition to the meta-data analysis of the project presentations and the information and products available on the individual project websites, interviews were also conducted with 10 selected project promoters to validate the data obtained and to gain important, in-depth information.

What have we learned - and what should happen now?

All in all, we have become familiar with a range of projects dedicated to the topic of immersive learning from different perspectives, in different sectors and areas and with regard to different target groups.

On the one hand, this provides confidence, because it testifies to a diversity of innovation and creativity in this important field of future development in Europe.

On the other hand, it is somewhat frustrating to see that the projects are not embedded in any overall concept or have any overarching coordination. It is therefore to be feared that many of the projects will work - as is unfortunately quite usual in the European funding area - solely on their own, although networking within the different project groups would be extremely important and would also create meaningful, cost-effective synergies and know-how transfers.

After reviewing the project websites and publications as well as the implementation of the interviews with 10 selected coordinators, the following findings can be summarised, and conclusions drawn:

- All projects agree on the following starting position and general conditions for their work: Digitalisation of life at all levels is a global challenge which cannot be tackled at national levels alone. Generally, strong global competition is ongoing within industry and commerce, which determines who will take the lead with smart industry and who will be left behind; with the USA, China but also Japan, South Korea and India, Europe has extremely strong opponents to compete against – and it is currently not well positioned.

- An important advantage held by Europe's opponents is the relative homogeneity of their political and economic structures. While here, Europe still has much catching up to do and is very busy dealing with (increasing) national interests and the strong diversity of economic development within its member states. This makes it more difficult to work together in transnational cooperation groups and develop products for the "European market|. This market – including the educational one - does not exist in reality, but is rather only the sum of many individual national markets.

- This is especially true for immersive learning and working. The stages of development of digital learning and working, the degree of awareness and openness to it among target groups, basic knowledge about available hardware and software as well as the skills and experience necessary to use them efficiently and purposefully vary greatly from one member state to another. If no specific countermeasures are taken, these differences will increase rather than diminish in the future. However, these differences do not only exist geographically. They can also be observed in terms of age groups, levels of education, occupational groups and rural/agricultural and urban/industrial living spaces.

- All project leaders confirmed that the cost factor is becoming less and less of a decisive obstacle in dealing with VR/AR/XR-based learning and working. Of course, certain investments need to be taken into account, especially if a larger group of users is involved, but the supply of a powerful internet connection plus basic equipment such as computers and smartphones is available almost anywhere. In addition, relatively inexpensive and high-quality VR/AR/XR hardware is now much more widely available. Also, these devices are becoming lighter and more mobile to handle. The first factor is important because head-mounted displays (especially for VR) quickly lead to fatigue and pain in the head and neck muscles, which hinders longer study and working periods. The second factor is important so that people can move around freely without being bothered by cables connecting head-sets to computers; here, the first stand-alone device, Oculus Quest (www.oculus.com/quest), has made a decisive breakthrough and has opened up completely new application qualities.

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- There has also been great progress with software development, and more and more apps are being used - besides in the pure gaming and leisure sectors - for increasingly serious tasks such as learning support in schools and universities, for vocational training and further education, for the almost authentic experience of culture, art, history and geographical regions, in accident prevention and safety training, in the health sector, for therapeutic treatment, in the planning and construction sector, and as a communication medium etc.

- Although there is in principle a high degree of satisfaction with the - partly self-developed - software used in the projects, all still see a (substantial) need to widen the areas of applications as well as to improve visualisation, graphic resolution, opportunities for interaction with other users and easier movement throughout the environment. At first glance, virtual rooms always look impressive and lifelike, but on closer inspection, there are still many deficiencies and inaccuracies. This is where further developments are urgently needed to ensure that immersive learning and working can be applied successfully and sustainably, especially in areas where accuracy and precision are crucial (for instance, in various medical fields, such as surgery, or plant engineering).

- While solutions for technical challenges seem to be on the right path, there are still many gaps to be bridged in relation to general awareness and knowledge about the possibilities, chances, limits and risks of immersive learning and working. Greater effort must be made in the future to develop sustainable AR/VR/XR strategies, to inform the general public about these technologies and their added value for many areas of work and life. Only if we succeed in reducing the psychological barriers and fear of contact can digitisation reach the centre of society and become firmly established in the long term.

- The high percentage of young people who are already familiar with complex virtual simulations and immersive worlds is very promising for the future. Although their experiences are mainly acquired through computer games, this is a starting point on which to build. The fact that young people often have the appropriate knowledge and skills to quickly pick up how to apply VR/AR/XR hardware and software is a great advantage compared to most other groups of learners. It is important to actively build on existing pre-knowledge and transversion skills, as well as on the basic passion for everything digital, to make young people not only immersive gamers, but also immersive learners.

- In general, it is advisable to approach immersive learning and working very carefully, slowly and professionally. In particular virtual worlds can quickly enchant you with the impressive spaces they create and the bizarre situations to which they expose the user.

  One becomes surprised at how easily our brain can be deceived - and how much we like to be deceived. However, this is not enough to achieve sustainable learning. In the majority of projects, we have experienced that the initial magic quickly fades, and the disappointments become greater and greater the more we realise that immersive learning requires much effort and preparation, that the visual and content-related elaboration of many apps still leaves something to be desired and that technical problems can always occur. Anyone who has ever organised a virtual meeting with several people (e. g., via AltspaceVR, https://altvr.com) or who faces a group of 20 learners but has only one pair of working VR glasses will know about this.

- Therefore, especially at the beginning of immersive learning and working, the overall effort, the sometimes limited possibilities of the apps and the technical sources of error should not be underestimated. Extensive and precise preparation at the infrastructural, technical, organisational and pedagogical levels is essential.

- The biggest problem at present is that there are far too few trainers, teachers and educators who themselves have comprehensive knowledge of VR/AR/XR technologies or the skills to apply them as learning and working tools. Only when these multipliers are professionally trained and educated, can they pass on their knowledge and skills to others. Therefore, it is absolutely necessary that train the trainers programs in all educational areas (school, vocational training, general adult education, higher education, social pedagogy, etc.) be developed as quickly as possible and made widely available. Among others, the pedagogical universities will be challenged to develop and offer such training programmes, not only for their own students, but also on a part-time basis for anyone involved in education and training.

- One experience that all projects have shared is that - at least in the first encounter with immersive learning and working - it cannot function without technical support. It is recommended to obtain advice from a real expert. This begins with the purchase of the right hardware and software and will probably continue during the learning or working process.

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Although the devices are quite easy and largely self-explanatory to operate, you will still be faced with minor and major problems that will need to be solved quickly.Therefore, cooperation with VR/AR/XR experts or at least with other people who already have extensive experience, knowledge and skills with immersive learning and working is recommended.

- What would certainly promote knowledge about VR/AR/XR technologies and their use in the world of education and work would be a central platform where all EU projects related to this topic would be collected and presented. Not only could these projects be made available to a wider public, but one would always have an up-to-date overview of innovative developments in this field. It would also allow the project groups to compare themselves with others and exchange ideas, learn from each other and develop new ideas and projects together Many project leaders have regretted this lack of easy networking and professional exchange with other project groups and experts. It is hoped that the recently launched project showroom by the VAM Realities project (https://vam-realities.eu/related-projects) will fill this gap.

What can be learned from this? Europe still seems to be struggling in its development towards an innovative, modern digital society and economy. However, there are many individual developments and efforts that point in the right direction; these have certainly been given a strong tailwind by the experience of the COVID-19 pandemic, and there is a justified hope that this trend will continue to strengthen in the future. There is still a great deal of catching up to do in terms of their holistic embedding in overarching national and European strategies and policies. This is why the EU, many member states and regional governments have launched initiatives and policies in recent years that all postulate the same bottom line: In addition to technical equipment and infrastructure, an open-minded, well-educated and networked society is an elementary prerequisite for development into a digital future. However, this should not hide the fact that in many regions and (economic and educational) areas, strategies are currently not being developed, and there seems to be little hope of adequate funding being made available.

The greatest need for action is currently in the areas of comprehensive awareness-raising campaigning, access to high-speed broadband internet for all European citizens, relevant basic digital hardware and software equipment for all learners, and the training of trainers at all educational levels.

Here, the aim is not to rely exclusively on formal educational pathways, but rather - especially in order to achieve short-term improvements - to promote informal and non-formal forms of learning.

The good news is that some progress is already being made in developing and equipping technical devices and applications and that their declining acquisition costs will make it possible for future investments to achieve greater effectiveness; in any case, however, further substantial investment in infrastructure and equipment will be necessary. As things currently stand, rapid and successful digitisation at all levels and in all areas will be the decisive factor in creating an economically, ecologically, politically and socially successful society in the 21st century. Accepting and proactively tackling this major challenge should be on our agenda sooner rather than later.

With comprehensive digitisation priorities for the budget period 2021-2028, the EU is setting the right course; however, this policy will only be successful if the same priorities are set at national, regional, sectoral and institutional levels throughout Europe. Ultimately, however, it will also be the responsibility of each one of us to be open to these developments and to continue our lifelong learning concerning digital innovations.

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Caring For The Elderly and Working With The Aging Population

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Abstract/Izvleček

Older people receive care and assistance in both formal and informal ways. About 4% of people aged over 65 are living in institutional care. Most of the help is provided by families and other informal carers. We must arrange assistance for informal carers and direct the care not only to the medical aspect but also to the social component. The social care component helps vulnerable older people to overcome the crisis caused by exclusion from their environment and reduction in their social network. This is an important opportunity for social pedagogical work, either in various institutions or through

Skrb za starejše in delo z njimi

Starejši prejemajo pomoč in nego na formalne in neformalne načine. V institucionalni oskrbi je okrog 4 % starejših od 65 let. Večino pomoči potrebnih oskrbujejo svojci v okviru družin in drugi neformalni oskrbovalci. Treba bo urediti finančno in strokovno pomoč neformalnim oskrbovalcem ter oskrbo starejših usmerjati ne le v medicinsko, ampak tudi v socialno komponento. Socialna komponenta oskrbe ranljivejšim starejšim pomaga prebroditi krizo ob izločitvi iz njihovega okolja in redukciji njihove socialne mreže ter družinskih stikov. Tu nastopi socialnopedagoško delo s starostniki, tako v institucijah kot v neformalnih oblikah oskrbe za ohranjanje njihovih kognitivnih sposobnosti in preprečevanje osamljenosti.

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Introduction

For the entire developed world, the population segment over the age of 80 has the fastest growth rate in the whole population. The life expectancy of the population is rising. In EU countries, as much as one-third of people over the age of 80 need at least some help or considerable help to live independently. share of the population over the age of 65 is expected to increase from today's 20% to 30% by 2050. At the same time, the share of people over the age of 80 will increase from about 5% to just over 11%. It is also worth considering that currently, there are 131 people over the age of 65 per 100 children (under 15 years of age) in the population, and this ratio will change to 200 over the age of 65 per 100 children by 2033 (SURS, 2020).

If we try to define elderly people and whether we distinguish several groups among them, we quickly recognize that we are aging from birth. Aging means a progressive and general decrease in physical ability, which increases the likelihood of death. Between the ages of 20 and 30, the first signs of aging can be observed. However, the perception of age is strongly conditioned by social and cultural perception. We should also remark that age is not determined solely by the biological component.

Age cannot be prevented; however, we can significantly influence its quality, both systemically and each individual for himself.

Ramovš (2003) mentions three aspects of aging:

- the *Biological* aspect of aging, which brings declining physical abilities and impaired functions of the human body;
- the *Psychological* aspect of aging, where we can observe a decline in intellectual and sensory functions and the ability to adapt to new life circumstances; this component of aging is based on the structure of an individual's personality and on the level of maturity, self-confidence, and maintenance of life optimism he has achieved; the attitude of the individual towards himself as well as towards other people on the basis of his or her own abilities is also important;
- the *social* aspect of aging, which is associated with withdrawal from active life and increasing dependence on others; it depends on the expectations of the environment towards the individual (whether they will reduce their activities and become more reserved); this is, of course, also indirectly affected by the given financial situation.

In some segments, slightly different aspects of aging are defined by Macuh (2017), who distinguishes four aspects:

- the *health aspect* of aging, based on the fact that the vast majority of old people have various health problems, which directly and indirectly affect their way of life and put them in a dependent position according to the assistance required; dementia is a particular problem, affecting 25% to 30% of the population over the age of 85;

- the *social aspect* of aging, where he emphasizes that the vast majority of people do not change either their social habits or their emotions; we all retain the need to belong and a fear of isolation;

- the *economic aspect*, which is related, on the one hand, to increasingly delayed retirement and the reduction in pensions; it is the latter that severely limits a good proportion of the elderly population and brings some to the brink of (or into) poverty; with each pension reform, the pensions of new retirees are reduced; this is a relevant piece of information that should be used to assess the situation (and the necessary corrections), if the individual's pension is sufficient to pay maintenance in a home for the elderly.

- the *demographic aspect*, which is characteristic of all EU countries and their different social policies, places new, sometimes seemingly intractable demands.

Although the social aspect of aging can mean reducing activity and retreating to privacy, the converse is always possible, such as maintaining physical, mental, and social activity. These are essential elements for achieving successful aging and a quality old age (Milošević Arnold, 2003).

The economic aspect of aging is also coming to the fore. The problem of low pensions will force many of the elderly to extend their work (and paid) activity - not only to maintain vitality through activity but also for fear of poverty or inability to pay for care when it is necessary.

If we divide the period of life into youth, middle age and old age, the last category can be (Macuh, 2017)

- *functional (biological),* which is generally more difficult to measure,

- *chronological* (the number of life years cannot be influenced by anything), or

- *experiential*, related to the activities that we maintain or develop anew.

Moreover, we cannot classify every person over the age of 65 into one group. The age group over 65 can be divided into several groups up to the nineties, among which there are significant differences (as among adolescents).

Chronologically, the period of old age can be divided into three subperiods:

- *younger (early) old age* of 65 to 74, when we adapt to the life of an older person, often associated with the freedom (and restrictions) of a retired person,

- *middle old age* of 75 to 84 years, associated with a more intense decline in strength and often the death of a partner,

- *late old age* from 85 onwards, when we become increasingly frequent   recipients of help from young people and tackle our last tasks in life.

Old age should be viewed without prejudice. This is just another period of life. In all probability, designating this period by the term maturity should also help us avoid undesirable stereotypes. It is unacceptable to view the elderly part of the population as a cost to society. This generation has already dedicated its most productive period to society. It is also necessary for the elderly to be actively included in solving their problems; they should be allowed express their views and wishes. These issues should not be decided by the younger generation exclusively. We must keep in mind that the elderly really are a source of experience, knowledge and wisdom.

Methodology

Our aim is to review the field of care for the elderly in our society to determine what we can do as a society, as politicians, as professional institutions and as individuals, to make the life of the older generation during all stages as safe, as active and as rewarding as possible. We also want to explore the range of options for social pedagogical work in caring for the elderly part of the population.

Both goals can be achieved if we try to answer the following two questions:

- How are issues associated with the elderly being addressed, both formally and informally, in our country?

- In which area do the elderly residents of our society experience the most problems in their lives?

How are issues associated with the elderly formally and informally addressed?

In Slovenia, issues associated with the elderly are addressed through the following forms of activity:

- First, social assistance provided by the social work centres and nursing homes,

- personal assistance to individuals,

- help for families with elderly members at home,

- home help and social service (Centres for social work, nursing homes, concessionaires and volunteers of various associations),
- serviced housing,
- nursing homes.

According to the general opinion of experts (Hudobivnik, 2020), Slovenia offers good institutional care for the elderly in their nursing homes. Home care has been introduced but is still evolving. It is characterized by a high level of family involvement (both physically and in terms of responsibilities). Stephany, quoted in Hudobivnik (2020) emphasizes (according to Stephany, 2020) that support for informal caregivers of the elderly (family members, relatives, friends, neighbours and other non-professionals caring for the elderly) is very important for this system. This support should be offered in the forms of education and training, the provision of alternative care and measures at the national level to enable the coordination of informal carers' paid work and their care for the elderly.

Institutional care in the nursing homes has the following numerical structure:

Residents of the nursing homes are supposed to be people over the age of 65. The average age of residents in Slovenian homes for the elderly is 87 years. As a rule, most of these residents are admitted to a nursing home when they can no longer take care of themselves, nor can their relatives take care of them, and they usually need 24-hour care.

Among the reasons for admission to a nursing home, health problems predominate by far (actual care in the nursing homes also follows this directive). However, we must not neglect social reasons (loneliness), which is another huge problem.

Informal types of long-term care are favoured in most countries of the European Union (including Slovenia). The reason is probably largely because it is cheaper for the state.

In EU countries, (unpaid) informal carers cover between 70% and 95% of care needs for the elderly. Informal care is cheaper at first glance, but it incurs a number of indirect costs. If informal caregivers do not have adequate support, their health, well-being and professional work suffer. Sometimes they have to reduce their employment and thus risk poverty and social exclusion.

Informal care is sometimes equated with family care, which is not always right. Informal caregivers can be divided into several categories:

- adults in their active working life taking care of their parents, acquaintances, friends or neighbours,
- retired or elderly people taking care of their parents or spouses, acquaintances, friends or neighbours,
- young people taking care of their parents, grandparents, other family members, or neighbours,
- paid or unpaid, non-professional carers who replace or supplement the care of family members.

According to research in EU countries (Ogrin, 2020), carers comprise from 40% to 55% adult relatives, and from 20% to 45% partners. A smaller share of help is also provided by siblings, friends and neighbours, most of whom are women. (In the field of health and social services, 86% of all employees are also women (NIJZ, 2020)). The number of paid, informal caregivers has been increasing in the last decade.

Most older people spend most of this period of their lives with their family. The role of the family in this period depends on the lifestyle of the individual. Those who have developed patterns of family connection in earlier periods of life maintain and live these patterns in old age, as well. Čačinovič Vogrinčič (2006) sees the important role of the family in the old age of some of its members mainly in the following:

- connections between the younger generation and parental generations;
- maintenance of generational differences, acceptance of different family roles and parental alliances;
- the family as a working group is a productive starting point for co-creating cooperation during the old age of its individual members.

Thus, aging can also be seen as a family project. At the same time, it is true that individual members of such families and the family as a whole need more useful knowledge about the family, as well as about the necessary activities during assistance to the elderly.

A large share of care for the elderly and people in need in our society is provided by volunteers within the pensioners' associations, the Red Cross and Caritas. In particular, volunteer work by pensioners is an important segment of this care for relatives, neighbours, the local community, the state and, of course, for themselves, as they actively extend the period of their vitality.

Components of this help can include nursing care for the sick, household assistance of various kinds and maintenance of social contacts, socializing (Kožuh Novak, 2015).

In which area do the elderly residents of our society experience the most problems?
The increased share of the elderly in the population consequently means an increase in the required capacity of nursing homes. According to the Community of Social Welfare Institutions of Slovenia, the vast majority of care recipients need full care. In Slovenian nursing homes, two-thirds of residents are women (perhaps older men are typically being cared for at home by women, who retire to the nursing home later - after the death of men).

During the pandemic, there were many warnings that ageism was occurring in relation to the elderly. Judging people on the basis of their age is unacceptable. We would like to mention the viewpoint that the elderly are less promising for medical treatment. You could also say this means a lack of elementary compassion for vulnerable people.

In developed countries, the negative attitude towards the elderly (Čeh, 2019) is increasingly strengthening. Age stereotypes often prevail, and there is a lack of intergenerational cooperation. Consequently, there is more abuse of and violence and discrimination against the elderly, which often remains overlooked. Poverty (material violence) is often associated with physical violence. Gerdina and Jogan (2019) point out that the vulnerability of the elderly is conditioned by their social and physical weakness, the shrinking of social networks and their increasing health problems. The perpetrators of violence against the elderly may be third parties on the street, or partners and children. A legally established, long-term care system, as well as all official institutions, should necessarily create zero tolerance for violence against the elderly. Educational institutions of all ranks also play an important role here, by raising awareness and training young people for solidarity between generations.

During the pandemic, nursing homes became the centres of the most extensive infections in the country and the elderly, the most vulnerable group in society. This problem was addressed by profession and politics in various more or less appropriate and successful ways.

An important fact presented to the media by the elderly residents of the nursing homes, was that no one asked their opinions, including about their well-being, even though they had been in isolation for two months. Even before the crisis, many issues in the relationship and in the field of work with the elderly were too vague and not good, and the crisis only emphasized these segments.

The pension system represents a particular problem. The share of the working population is decreasing, while the share of persons receiving pensions is increasing. Life expectancy and thus the period of receiving a pension are also increasing. At the same time, we can also conclude that the average amount of pension is decreasing compared to the average salary. The relation between the pension and the cost of care for the elderly (institutional or other forms of care) is very important. Often, this relationship is why the elderly cannot financially cover the cost of their lives and any necessary care.

In old age, virtually all people have a particular problem with their social networks. For natural reasons, members of these networks are leaving, and the lower levels of activity undertaken by an individual significantly reduce the chance of establishing new connections and maintaining old ones.

Interpersonal connections are the foundation of every individual's existence, regardless of age. The absence (or presence) of satisfactory interpersonal relationships also affects the well-being and health of people both directly and indirectly, which is even more important in the elderly population. In social networks we can distinguish two branches:

- informal social networks based on solidarity and reciprocity and moral obligations, which include family, relatives, friends, and neighbours;
- formal social networks based on interpersonal connections via employment or various activities.

Formation of an individual's social network is based on the communication and relationships he/she has with other people. With most people, the need for a relationship increases with age, but unfortunately it often remains unsatisfied. This leads to loneliness, which is the worst distress that the elderly can face (Ramovš, 2003). It is in relationship with others that an individual develops their objectives, defines their values and directly builds their development, which is necessary even in old age (Kristovič, 2016). The death of the peers, siblings and especially partners of the elderly reduces this social network.

Results and discussion

What can we do?

When thinking about and planning solutions to the problems of the older generation, we should not keep in mind only the oldest part of this population, which is helpless and most vulnerable, but also representatives of the remaining two chronological groups of the older generation, who are able to participate in society (while aiming to ameliorate the general situation of the older generation) with their experience and activity. Finally, Marovič and Bajželj (2015, p. 26) maintain that "Participation, as a basic premise of human rights and a democratic society, offers different ways of communication, integration and design of aid processes."

It is important to achieve a good quality aging status in the minds of all people. Good quality aging is influenced by several external factors, such as the accessibility of various facilities for the disabled, an adapted (and more accessible) public transport system and, above all, establishing an active old age. All these factors would improve the physical and mental health of the elderly; it is therefore important and necessary for the state to enable their realisation through interventions, since these could directly affect the prolongation of a healthy life, thus reducing the cost of health care.

The basic tendency of society and individuals in relation to the elderly population is to establish the conditions for achieving good quality of life in old age. It contains components of productive and healthy aging, which are mostly related to the need to prolong work activity, to maintain productivity and active health care. Such active aging is a process that encourages and strengthens the opportunities to maintain health, safety and societal inclusion, thereby improving the quality of life. Active aging enables older people to realize their potential for physical, social and mental well-being and participation in society, while society provides the protection, security and assistance they need (World Health Organization, 2019). In this context, the European Commission provides a large amount of earmarked funds for various projects each year. Schwaiger (2020) points this out: "There is virtually no subject area, no target group and no geographical region for which European Union funding can not be obtained." Aware of this, it is possible to activate many programs intended for the elderly population.

Good quality, active aging begins at a young age. The foundations for functioning in old age must already be laid in the earlier stages of life.

Quality of life can also be defined as the welfare or well-being of an individual, based on personal satisfaction with life, in conjunction with their understanding of their own needs and capabilities. This is the most valuable thing an individual can have in their life (Thomas, 2007). It makes sense to look at the quality of life of an individual in the context of their circumstances, including economic and especially social conditions in society (Macuh, 2017). The quality of life an individual has achieved is directly influenced by their family and social network, and what support this network offers.

Kožuh Novak (2015) points out that in Slovenia, the potential of the elderly after retirement is insufficiently exploited. These are the people in the earliest stage of their old age, who can still make a significant contribution to the functioning and development of society. They have numerous abilities, not only for activities aimed at improving their own lives, but also for active participation in all segments of society. It makes sense that the experience of the elderly should form the basis for development of any environment. This is important for two reasons:

- that the elderly take care of the quality of their life, that they are active,
- that their activity contributes considerably to the development of society.

At the state level, it is therefore necessary to legally define informal care for the elderly and provide families and other caregivers with training and assistance, while enabling greater flexibility of working hours in their regular employment. It is also necessary to improve the availability of occasional home help (for crisis relief), day care and alternative care (to allow informal caregivers annual leave, etc.). Informal caregivers also need to be provided with some income, social protection, pension contributions and insurance. In the case of informal providers of assistance to the elderly, it is essential to establish a system to regulate control over their education and knowledge. Only in this way can we guarantee the proper functioning of the care system and prevent abuse.

The right direction is the constant improvement of social solidarity, intergenerational connections and cooperation. Perhaps this is an opportunity to create a new paradigm for interpersonal relationships.

Ramovš et al. (2018) assert there are approximately 400,000 family or other informal caregivers of elderly people in Slovenia, a figure which includes approximately 90% family members and 10% others (mostly neighbours). This means the segment of informal caregivers forms an irreplaceable link in the system of long-term care.

For this reason, it is essential to systematically provide for their education and training, as well as offering various services and types of assistance.

It is also important to arrange social care for the elderly in nursing homes as well as outside them. It is worth emphasizing the importance of the legally established system of long-term care and, of course, the regulation of a suitable working environment and the salaries of those who work with the elderly.

It is necessary to enter the social content of work with the elderly into the legally justified system (these bring content into the everyday life of the elderly).

Within nursing homes, it would make sense to establish household communities, and we need to strengthen the assistance for work with the elderly at home.

In addition to geriatric medicine, social services and the environment in general must also be involved in caring for the needs of the elderly.

Caring for the needs of the elderly is a space for volunteering, including volunteers from the group of the elderly.

Apartments or houses in which older people live represent a particular problem. According to SURS, older people are the owners of the largest share of residential real estate. These apartments are often too large and, above all, architecturally unsuitable for the elderly. They do not have facilitated access, elevators, or custom bathrooms, and they have operating costs that are not manageable with low pensions.

Social pedagogical work with the elderly

When considering the elderly population in need of care, whether institutional or informal, we should not talk exclusively with the medical component of this activity. Social care, involving the prevention of social exclusion and loneliness among older people, is just as important and urgent. Once an elderly person enters institutional care, this means he or she is dependent on the help of others, owing to his or her disability and medical condition. They can no longer perform their necessary life activities on their own, regardless of the fact that they would rather live at home (Kobentar, 2008). When the elderly are admitted into institutional care (nursing homes), this means they are torn from their home and environment, which further increases their vulnerability. In this period, social care for the elderly is also necessary in addition to medical care. The conclusions of a study in a nursing home (Lisjak Simčič, 2019) also show that the residents need (and miss) a genuine relationship and contact with a counsellor (a trained, pedagogical social worker).

They seek understanding, listening, kindness and conversation. For them, it is very important that someone listen to their problems and offer help. This is especially important for residents with a weak social network and scarce family ties. All these needs of the residents increase in proportion with their health problems. Older people in home care need contact with other people, opportunities to talk and a person they can trust and with whom they feel comfortable.

Potential social exclusion, which is quite likely during old age, is not only the result of material deprivation, but is mainly conditioned by social relations and by the extent to which the elderly person is included in social networks. An unsatisfactory social network and social exclusion can directly affect the older person's sense of life quality. Support and social contacts in old age are essential for maintaining cognitive function and in recovery from health crises. Research confirms that these significantly extend life expectancy (Charles, Carstensen, 2009). In social pedagogical work, it is very important to be aware of the value and uniqueness of each individual. We need to treat everyone with respect, while providing support, encouragement and a space in which they can function normally. It is necessary to accept the holistic perspective of an individual with his or her physical, mental and spiritual condition and well-being. It is important to promote a positive self-image, decision-making ability, and independence.

The basic components of the social environment are the family and the social support network. The field for a social counsellor working with the elderly includes more than emphasizing the importance of the family and external support in the care of its elderly members, but also a legally justified system that anticipates and provides the conditions for its realization.

Social pedagogical work with the elderly contains the following guidelines:

- it is based on knowledge from various fields, which may form the basis of assistance and intervention;
- assistance is often focused on mobilizing the strength and potential of the elderly or on the acquisition (restoration) of lost (reduced) abilities.

A social pedagogical worker must have the knowledge and competences to assess the mental, emotional, cognitive and social abilities of an older person. He must determine the rank of the elder person's independence in various life situations and find sources of help in himself and in his environment. The work of a social counsellor with the elderly includes counselling, monitoring, support, cooperation and observation of their problems.

Based on this, the counsellor can understand the problems of the elderly and seek solutions in connecting the older person's personal social resources. Using insight, they can structure, organize, and coordinate relationships for conflict mediation and maintaining trust. Their understanding of everyday situations, recognizing the forms of behaviour of individuals and their material, social and emotional needs is very important (Zorc Maver, 2006). A social pedagogical worker, as an expert who advises and provides assistance to an older person, must be able to assess his or her social and cognitive abilities and help him or her maintain his independence, using various personal sources of power, as well as the family and social network. Thus, the elderly person can strengthen their ability to deal with daily challenges (Mali, 2013). The main emphasis in social pedagogical work with the elderly is improving quality of life by empowering the elderly as much as possible and creating an environment that contributes to problem solving (Bern Klug, Byram, 2018).

Older people quickly find themselves in a condition of social vulnerability. Many older people live on the periphery for several reasons, such as lack of education, or often owing to economic and social factors. Technological development and the processes of globalization often threaten them and place them in a subordinate and vulnerable position. In this case, a social pedagogical worker can help on the basis of personal competencies, theoretical expert knowledge and, above all, an analytical understanding of the situation. The elderly might be people with special needs, they might be demented, they might have problems with various addictions, and sometimes they are even violent (Mali, 2013). In social pedagogical work, a special place is dedicated to dialogue, which opens up an interspace between two participating individuals. Where partners are unequal and do not have equal power, dialogue can be difficult or even impossible, so in this case the social pedagogical worker lends their professional voice to marginalized individuals and groups within a society (Razpotnik, 2006).

In social pedagogical work, the relationship that a social counsellor establishes with his client is of key importance. The establishment of this relationship is influenced by personality and experience. In their work, they must always proceed from the characteristics of the client and his or her social environment. The relationship between a social counsellor and their client is a mutual process of giving and receiving. Within this process, a good contact is created that raises the energy of the relationship and allows for relaxation. This closeness is completely natural and intuitive, but we must establish it on a conscious level (Krajnčan, Bajželj, 2008).

The social pedagogical worker must be genuine, empathetic and compassionate and must accept the client with respect. Once a relationship is established between the social counsellor and his or her client, the counsellor gets to know the older person and works with them to strengthen opportunities for solving the challenges facing the elderly.

Considering the issues discussed above, we conclude it to be essential for all types of assistance provided to the elderly, whether part of institutional or informal care, to include a social component of care. Depending to its scope and intensity, it must, of course, also be foreseen in legislation. Only in this way will planned long-term care be complete, high in quality and friendly to the recipients.

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The Meaning of Radicalisation in Modern Social Pedagogy

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Abstract/Izvleček The article defines radicalisation as part of the processes of modern liberation, which are recognised in the interlacement of emancipatory potential in social pedagogy and mobilisation in the theory of community development. In parallel to this, we problematise the internally divided socio-pedagogical attitude, which, on the one hand, seeks to liberate, and on the other hand, is repeatedly caught in the preservation of existing "oppressive" power relations. In doing so, we consider the concerns regarding political action as the goal of "radicalising" social pedagogy, which indicate that in social pedagogy we have internalized collaboration as a democratic "norm" of solving social and other societal issues and thus accepted it as the only formally realistic option to achieve structural change.

Pomen radikalizacije v sodobni socialni pedagogiki
V prispevku definiramo radikalizacijo tudi kot del procesov novodobnega osvobajanja, ki jih prepoznamo v prepletu emancipacijskega potenciala v socialni pedagogiki in mobilizacijske dimenzije v teoriji razvoja skupnosti. Vzporedno problematiziramo notranje razcepljeno socialnopedagoško držo, ki po eni strani želi osvobajati, po drugi pa se vedno znova ujame v ohranjanje obstoječih »zatiralskih« oblastnih razmerij. Pri tem upoštevamo pomisleke v zvezi s politično akcijo kot ciljem »radikalizirajoče« socialne pedagogike, ki kažejo na to, da smo v socialni pedagogiki ponotranjili sodelovanje kot demokratično »normo« reševanja socialne in druge družbene problematike in jo s tem sprejeli kot edino formalno realno možnost za doseganje strukturnih sprememb.

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Introduction

Social pedagogy, like work focused on community development, is a highly socially sensitive science (discipline) and profession, and as such is constantly faced with new challenges, which are primarily in the anticipation of responding and adjusting to rapid socio-political changes. In addition, it is a science that calls for critical reflection and social critique and is thus continuously positioned on the continuum of the dichotomy between the more radical and more conservative dimension of response/action. Its position on the continuum is mostly related to the socio-political order and its current situation. Referring to historical analyses (such as that of H. Marburger (1987)), it can be said that in times of turbulent social and political events (often in connection with economic crises), social pedagogy often takes a more radical, even revolutionary position; on the other hand, with the tendency to calm down social conflict, it seeks alternative options, acts as a peacemaker, a proponent of consensus and is thus more conservative (also curative). Despite the appearance of a predominant dimension (more radical or more conservative) over a period, social pedagogy mostly oscillates between one and the other dimension at the same time, making it internally split, contradictory, and sometimes incoherent. Regardless of the current position of social pedagogy in this dichotomy between the alternative and the conservative, both have in common a lack of the courage of hopelessness, which prevents us from experiencing "the trembling with complete negativity" and testifies to being trapped in a modern apocalyptic situation, as described by A. Zupančič Žerdin (2019, p. 86): "In an apocalyptic world, in the idle course of normalization and adjusting to one thing after another, day after day, our attitude toward the world is so 'healthy' that *it is even too healthy*. We have the strength and courage to endure everything." Which means that the alternative, the potential, the "radicalising", even the revolutionary, which are "stored" in the emancipatory potential, can be reduced to collaboration and adjustment at any cost, to eliminate conflict and establish "peace". A good example of the latter is "reconciliation with fate" in the field of additional professional assistance and its arrangement in primary school, as stated by Š. Razpotnik (2014).

Even though the socio-pedagogical profession, with its professional views and moral and ethical concerns, draws attention to the anomalies of the existing arrangement, and with which practitioners also do not agree, both the academics and practitioners adjust to the current arrangement through rationalisation in the sense that it is better this way than being unable to implement such assistance at all.

The internally divided, ambivalent attitude is thus, in a way, a desirable, modern attitude of social pedagogical workers that more than fits political ideologies that abuse democratic values. It is about "peacefulness" (in the sense of an absence of conflict at all levels of functioning as a democratic norm) overriding activism or radicalisation according to Freire (2019), based on humanism (but not naïve humanism), freedom, and human/child rights. Such an attitude lacks the courage of hopelessness, the courage to perceive the hopelessness of a situation, which would allow them the possibility of another and therefore free choice as defined by Lacan and Hegel (Zupančič Žerdin, 2019). Free choice, however, plays a key role in the attitude of revolutionaries, as defined by Freire (2019), as it moves away from mere apparent efforts for change and is fuelled by the courage of hopelessness. In this way, it is radicalised and realized in a creative, critical, and liberated action when it comes to devotion to the chosen (moral-ethical, *author's note*) position, to the extent that it no longer accepts established democratic ways of "peaceful warfare" (only in the form of collaboration and the search for social consensus at all costs) but, according to Freire (ibid.), patiently and persistently engages in efforts to change concrete objective reality (including by provoking social conflict, but not by forms of malignant aggression, as Fromm (2013) describes).

L. Eriksson (2011) also finds that, in the spirit of democracy, social pedagogy has, along with community work or community development and like most socially sensitive sciences, assimilated to action aimed at collaboration and the search for consensus, which moves it away from a more radical (also more political) approach to social reflection and critique through social conflict. As such, modern social pedagogy is more conservative, adaptive, also normative, and (still) has the function of a fig leaf, as defined by A. Frommann (Kobolt, 2001). In a way, the author (ibid.) comes to terms with the latter when she mentions that it is precisely because of this function that social pedagogy remains a relevant profession, although that function limits it.

Such a remark, probably taken out of a context in which there was no room for the broader development of thought, could also be understood as a surrender to fate, i.e., the acceptance that social pedagogy no longer contains socio-critical discourse and potential or a tendency to change, which could also be perceived in modern Slovenian social pedagogy. Without socio-critical discourse, it is transformed merely into the development of methods that make it recognizable and different from other sciences (ibid.), while at the same time it is subject to the traps of reductionism and instrumentalization (Lorenz, 2008).

Hämäläinen (2015), in contrast to A. Frommann (but 14 years later), says that he recognizes many societal (including socio-critical, *author's note*), general and therefore transnational and transdisciplinary topics within socio-pedagogical theory, such as ethics, gender, class, addiction, crime and poverty. The latter connects social pedagogy with the relationship between democracy and education, which in a way also establishes it as a political theory (ibid.). The author (ibid.) points out that, in terms of theory, social pedagogy has a completely emancipatory "nature", since the focus of theoretical interest is mostly the moral-ethical aspect rather than the technical-rational one, and in it, the socio-ethical and socio-political issues and values are exposed.

L. Eriksson (2011) connects the reflections of A. Frommann (Kobolt, 2001) and Hämäläinen (2015), when in seeking common ground between "community development" and social pedagogy, she points out that in both, the mobilisation, caring (welfare) and democratic dimensions intertwine and include aspects of direct (methodical) action in practice as well as social criticism. The common thread of relationships between these dimensions is the "search for" or establishment of a balance between the collective (group, community, social) and the individual (ibid.); therefore, the dynamics of relationships is often contradictory, ambiguous, and especially related to historical and socio-cultural background. In the article, the author (Eriksson, 2011) focuses mostly on mobilisation in connection with the theory of community development (or work focused on community development), which can be a starting point for thinking about a socio-critical or even "radicalising" social pedagogy.

In the current social situation, when in the "Western world" we live individualism as a consequence of neoliberalism and capitalism, we can find sociological discussions similar to Galimberti's (2015a, 2015b), which (sometimes almost excessively and without critical distance) emphasize the importance of community for the holistic development of an individual.

Thus, there is a tendency to re-strengthen the caring and even more the mobilizing dimension in the community, taking into account the democratic principle, in which case, according to L. Eriksson (2011), it is about "liberation of citizens" with the help of human and material resources. According to the author (ibid.), those activities become crucial in which both social pedagogical workers and community members (citizens) act as agents in social change. The latter, however, is not produced by provoking social conflict, but through (dialogical, *author's note*) education that influences all the actors involved by mobilizing them, which in turn leads to a change in structures. Freire (2019) speaks similarly about problematic, dialogical education, which is already more radicalised, and Flaker (2012) describes this mode of action – through education, as one of the non-authoritarian practices (which we assess as radicalising social pedagogy) which are part of modern (social) movements. By describing the latter, he upgrades L. Eriksson's (2011) definitions, since he believes that modern movements "do not liberate, but occupy spaces, especially public ones, and re-appropriate them" (Flaker, 2012, p. 9). In this way, they are still a threat to the "empire" that wants the land/space for itself but move away from violence (although they are also likely to provoke social conflict, *author's note*). They are based on the rule of democracy of direct action, the basic starting point of which is the proposals that the actors are prepared to implement (ibid.).

Even though we are aware that social pedagogy and its practices cannot avoid being trapped in the machinery of capitalism, as described by A. Zupančič Žerdin (2019), or precisely because of this, from the point of view of developing socio-pedagogical theory, we find it important to revive, upgrade (also radicalise in the Freirean sense, *author's note*) and systematically develop the emancipatory potential, the mobilizing dimension of this science. Thus, modern neoliberal capitalist society demanded the reconceptualization of many fields (including scientific-professional ones) and transformations within the language. However, these processes were not followed by change in the form of social consciousness, "as the latter persist in ideological oxymorons, which largely disables the appropriate potential emancipatory action and facilitates the management of society" (Zadnikar, 2015, p. 21).

This is the case, for example, with the concept and notion of democracy, in which Badiou (2013, in Zupančič Žerdin, 2019) asks himself what the "phallic emblem" or the "authentic symbol" of our present time would be. He places the symbol in the word "democracy" and the way the latter works today. He says that the signifier "democracy" is in no way hidden; however, what is hidden, and what the author wants to point out is that it acts as a "phallus of our time" or even as our fetish.

He states: "Today, being a Democrat is a sentimental necessity. The brutal naked power that destroys us begins to be recognized and even loved by everyone the moment it is covered up with the word 'democracy'" (Badiou, 2013, p. 213, in Zupančič Žerdin, 2019, p. 90). Therefore, when we problematize the democratic principle or democracy, we are talking about the ideological (ab)use of this concept, which is under the power of the ideology of happiness – as the absence of frustrations and conflicts – and promotes only one way of solving social problems (which is suitable to the government): collaboration aimed at peace or apparent consensus. With the latter, we have in mind the attitude towards the world, which is even too healthy and tolerates everything (Zupančič Žerdin, 2019) when it comes to collaboration, social adjustment at any cost with zero tolerance for violence, which does not distinguish between malignant and benign aggression, according to Fromm (2013), and in the absence of a "boss" (as A. Zupančič Žerdin (2019) speaks of him) is the only possible one. Non-authoritarian practices of modern "liberation" or reoccupation of space (let alone attempts to provoke social conflict) can be presented as violence in such an ideological discourse of power, despite all the peacefulness that significantly distinguishes them from more radical revolutionary movements (as known from the 1960s and 1970s), which also supported violence in the name of the struggle.

In favour of stepping out of "ideological contamination", the paper first aims to define radicalization based on Freire's (2019) definition, with the help of critical comparative theoretical analysis, and then to define and highlight the importance of radicalizing processes of modern liberation for modern social pedagogy with the help of the intertwining of emancipatory potential in social pedagogy and mobilisation in community development theory in the national and international context.

In the discussion, we pursue the following objectives: 1. Problematizing the internally divided, ambivalent attitude of social pedagogy / social pedagogical workers, which on the one hand, and mostly only seemingly, seeks to liberate, and on the other hand, is repeatedly caught in maintaining the existing oppressive power relations; 2. Innovative integration of the emancipatory potential of social pedagogy and the dimension of mobilisation from the community development theory (especially at the macro level); 3. Defining radicalization also as a possible way out of the dichotomy of the conservative vs the alternative; and 4. Seeking more effective, "radicalising" socio-pedagogical interventions (actions).

Concerning the objectives, we answer four basic research questions: 1. How (if at all) to intervene and overcome the characteristic dichotomous constellations of this science, profession, and occupation by problematizing the internal fragmentation and ambivalence of social pedagogy on both the theoretical and practical level?; 2. How to connect the socio-pedagogical emancipatory potential and mobilisation from community development theory in a new, innovative way?; 3. How to upgrade the radicalization according to Freire (2019) to offer a more pervasive, almost revolutionary alternative to the current internally divided social pedagogy?; and 4. Which are the possible modern, radicalising liberation practices?

However, since we enter the discussion with an awareness of the impact of individualization (Zorc Maver, 1997), focusing only on the lone individual (Zadnikar, 2015), the grip of instrumentalization and reductionism (Lorenz, 2008; Kobolt, 2001) and other social processes, caution would be advisable in understanding and interpreting all activist-coloured notions that can expect (too) much from radicalization and revolutionism in social pedagogy, although we would already define our discussions and proposals in the paper as radicalising, even revolutionary for the profession and science.

The importance of modern radicalising content and practices in social pedagogy

To avoid terminological confusion, we will first define how we understand the concept of modernity in the article and connect it with the concept of radicalization as the central concept of the discussion.

"Modern" in our case is associated with recent times or the present, but for accurate theoretical analysis, we find it necessary to define modernity in terms of time (quantitatively) and semantically (qualitatively), especially in the case of fledgling Slovenian social pedagogy. Therefore, could we say that when we talk about modern Slovenian social pedagogy, we talk about all 30 years of social pedagogy in Slovenia? In a way, the answer is yes, because it is based on modern findings of foreign socio-pedagogical theories and practices that we have implemented (and still do) in Slovenia. Also, from the humanistic point of view, the very beginnings of socio-pedagogical activity in Slovenia could be defined as modern and contemporary (taking into account the qualitative rather than quantitative meaning of both words), unlike some current socio-pedagogical practices (as well as theoretical discussions), which have undergone processes of "correction", merely tertiary prevention and normativity, and are, in this qualitative sense, obsolete.

That is why we will not limit ourselves to a quantitative definition in relation to modernity, but only to a qualitative one, in which the criterion for modernity is objective and not the ideological adequacy of a professional/theoretical perspective, concept, practice, activity, etc. for the present time, current socio-political events, the demands of society, social reality, etc., which at the same time maintains a specific socio-pedagogical value, moral and ethical mission and socio-critical attitude.

From the point of view of socio-critical distance/reflection and socio-political events, the question of modernity is still relevant, because *modern* in our case does not necessarily mean being in accordance with current socio-political expectations if they are strongly ideological. Liberating social pedagogy (through the process of radicalization (Freire, 2019)) should recognize such ideologically contaminated expectations and respond to them following its mission, vision, and values, as written in the Code of Ethics for Workers in the Field of Social Pedagogy (2004), to meet the set criterion of professional and scientific adequacy. When we talk about radicalisation, we think of the criticism that fuels creativity and liberates, "involves a greater commitment to the chosen position and therefore allows for greater engagement in efforts to change concrete, objective reality" (Freire, 2019, p. 11). At the same time, it is about the ever-present "alternative" thinking, social-critical action, and thoughtful activism, as described by Flaker (2012) and Freire (2019).

In his work *Direktno socialno delo* (Direct social work), Flaker (2012) presents a collage of theoretical alternatives and thoughtful activism, which presents us with an example of radicalising practices.

We understand the latter as the realization (process) of radicalization, and we also want this in social pedagogy. The work (ibid.) is about Exit in the broadest possible sense of the word (or at least an attempt to do so), which we want to emphasize by using a capital letter. In the present article, we replace the term Fight for, which was used by Flaker (2012) to describe events related to Direct social work, with the term Exit. In this sense, the meaning of the word Exit is both an abstract and a practical category, although we are aware that, as an ideal and in this sense a norm, it is easier to think about it in theory than in practice.

Namely, the notion of Exit raises doubts about whether it is possible to leave a certain ideology at all without already being part of another (on both an abstract and a practical level), as well as concerns expressed by A. Zupančič Žerdin (2019) regarding the feasibility of an individual's exit from capitalism, which proves to be a practically impossible move.

Nevertheless, we define Exit as primarily a more radical (even radicalising) struggle against the interlacement of prevailing ideologies (from political, scientific and professional, to purely practical), in which social pedagical workers are also trapped. It is based on the rule of the democracy of direct action and does not ask what we could do but what we will do and, in this sense, it plans concrete activities (ibid.). We believe that the search for and implementation of such responses are also required in socio-pedagogical activities, which could in the long term contribute to a liberating transition from the corrective, adaptive, and purely integrative to the participatory, inclusive, and multicultural work environment and practices at all levels of operation. On the other hand, in the spirit of the rule of direct action, it would be necessary to seek and persistently demand answers to the question of why the Exit (of Direct social work) had and still has a limited action range, which we have already indicated by problematizing the Exit from ideology.

According to Freire (2019), the process of radicalization is included in the pedagogical (also political) action as such, since the latter is defined as problematizing education and thus as a revolutionary future. It is thus prophetic, offers hope, and "is a humanistic and liberating act" (ibid., p. 64), which presupposes the emancipation of the oppressed (which is not possible without provoking social conflict). It can be implemented only by a society that has carried out a revolution without any of the revolutionary leaders taking power.

When we introduce Freire's (2019) revolutionary pro-active principle, it should be noted that "on the outskirts of the developed world, where individualisation and disintegration of the community have not reached so deep and the new political subjectivities are still able to establish a recovery of the community", appears a whole range of transformations of pedagogical and social action, also as a result of local needs (Zadnikar, 2015, p. 18, 19). Therefore, such a pro-active principle could serve as a model and inspiration for radicalising (social) pedagogic action in (Western) European countries; however, the cultural and socio-political differences of such conceptual transfer should be considered.

The essence of this principle is the dialogic nature of education, which is recognized as a practice of freedom (Freire, 2019, p. 73): "If the problematizing concept of education is to be a practice of freedom, its dialogic nature must begin not only when teachers-students find themselves with students-teachers in a pedagogical situation, but earlier when the first one wonders what they will talk about with the others. This concern for the content of the dialogue is, in fact, a concern for the program content of education."

The latter does not imply subordination or imposition but is "an organised, systematic and in-depth return to the people of what the people have previously handed over to the teacher/student in an unstructured way" (ibid., p. 74). With this type of action and education, we are not only in apparent participation, but we live full participation, in which the roles of teacher and student are constantly exchanged and coordinated regarding the content of education and cooperation. In such an organisation, the key role is played by the people, in which we include all stakeholders of the revolutionary educational processes and socio-pedagogical activity, both teachers and students, social pedagogical workers, users and clients. We believe that Freire's (2019) argumentation and explanation of the use of the terms teacher/student and the people tend to eliminate authoritarian, hierarchically conditioned practices of power, in favour of the dialogical negotiation of a non-authoritarian leader, an "authentic revolutionary" (ibid., p. 75), whose sole purpose is the liberation of the people (of which he himself is a part) in constant cooperation with them. It is because of that argument that we maintain the concept of the people in other parts of the text, which do not relate to Freire (2019), but with the difference that in those sections the term is used in quotation marks.

In this way, we also seek to emphasize the importance of radicalization within the symbolic, i.e., language, which is not an insignificant part of the problematizing, dialogic education that liberates and of the participatory discourse.

Full participation, originating from the life world of "the people" is, among other things, the vision of social pedagogy and its practices, which is also stated by Marovič and Bajželj (2015, p. 26) who point out that "participation, as a basic premise of human rights and democratic society, offers different ways of communication, integration, and the design of aid processes. It represents a fundamental element of socio-pedagogical orientation in the life world of an individual and means the opening of various opportunities for developing social skills, building identity, gaining self-reliance, self-confidence, developing prosocial behaviour, opportunities for cooperation, co-organization, and empowerment of an individual."

However, contemporary sociological debates (Galimberti 2015a, 2015b; Rutar 2002; Salecl 2017, etc.) point out that these (socio)pedagogical practices under the influence of capitalism and neoliberalism are increasingly losing their "visionary character" and resorting either to "naive humanism" and/or to productivity/goal orientation, which measures only the effect, efficiency or even surplus of work; in both cases, they therefore come to terms with the funding concept of educational activity by adapting to the situation.

The latter could be prevented by a sensitive, patient, humanist, and "revolutionary" leadership/leader, in which the object of action "is the reality to be transformed by them together with other people" (Freire, 2019, p. 74). Only in this way can we get to know the actual living situation and the efforts and aspirations of the people, which then serves as a starting point for composition of the program content of education or political activity. In this way, we also avoid the political trap pointed out by Úcar (2013) and which will be specifically discussed below, namely, that socio-pedagogical activity is expected to provide momentary, ad hoc, and imposed solutions to structural problems and direct intervention in system structures. Here we defend Hämäläinen's (2015) thesis, which says that socio-pedagogical theory and practice are always political, but at the same time we heed Freire's (2019) warning that this is precisely why it is necessary to critically evaluate the living situations of the educators, politicians, and the people, which makes it possible to "understand the structural conditions in which the thought and language of the people are dialectically framed" (ibid., p. 78).

It follows that the program content (socio-pedagogical, *author's note*) of the action is the domain of both the leaders (teachers, politicians, social pedagogical workers, etc.) and the people (ibid.), and therefore, according to Úcar (2013), non-political or indirectly political. The author (ibid.) on this point somewhat differs from Freire (2019), believing that we need to clarify the limits of socio-pedagogical action, and thus in some way he recognizes the "investment" model of politics with top-down, enforced structural measures, while Freire (2019) speaks of liberating, problematizing education as the only truly humanistic and political practice, whose sole aim is the liberation of the people.

The intersection of emancipatory potential and mobilisation as a driving force for radicalising socio-pedagogical social activity

As we can see, our conception of radicalising activity includes both the tendency toward emancipation of science, the profession, and all its stakeholders, i.e. the emancipatory potential, as well as the mobilisation through which this potential should be expressed in a way that would provoke social, structural, professional and also political changes important for the profession. Therefore, we are talking about radicalization as an intersection of emancipatory potential and mobilisation.

D. Zorc Maver (1995, 1997, 2006) and Š. Razpotnik (2006, 2014) speak directly or indirectly about the emancipatory potential in connection with social pedagogy when discussing the social and professional role/function of social pedagogy.

They both highlight the importance of exit from the purely corrective function, which they also see in the strengthening of social criticism through the reflection of own practices and increased engagement in solving social problems. Zadnikar (2015) also calls for the latter (engagement, auth. note), but he highlights not social pedagogy alone but the entire pedagogical and, to a certain extent, also psychological conglomerate. Within these, the pedagogical part "blindly serves the ruling systemic imperatives" (ibid., p. 19) and then complains that it is their victim, while the other, psychological part of this conglomerate, is not only in the "service" of the system, but even has the upper hand in it, since it forms part of the intervention professions. Therefore, the author urges: "They should transform their pedagogy and join social movements. It is hopeless to merely protect the level of wages and not sabotage the wage ideology of education /… / and not change the concept of one's work and introduce the pedagogy of liberation" (ibid., p. 19).

Most of these authors (Eriksson, 2011; Flaker, 2012; Freire, 2019; Zadnikar, 2015; etc.) in their call for change, emphasize the importance of a group or a community, so it is not surprising that L. Eriksson's paper (2011) first presents the basic technical and theoretical bases of community development, which is multidimensional, even contradictory, and incoherent, like social pedagogy. In connection with the latter, she is primarily interested in mobilisation as one of the most important dimensions of community development, because with its fundamental objective, i.e., "liberation of citizens" using the human and material resources in the community (ibid.), the latter approaches closely to the content of socio-critical (radical) social pedagogy (about which H. Marburger (1987) writes in more detail).

The author recognizes the presence of mobilisation in social pedagogy, especially at the point of community campaigns in which both social pedagogical workers and "the people" are co-creators and agents of the content and, consequently, of structural and societal changes. This dimension is intertwined with others (especially the welfare and democratic dimensions) and hence mobilizes actors in different ways towards achieving the ideal/norm – the mobilisation of "the people" (Eriksson, 2011). According to the socio-political situation, the latter may also be interpreted in different ways, even being used as a means of manipulation, and is always torn between adaptation (mobilisation imposed from above) and radicalisation (hence also emancipation and activism from the bottom-up).

In addition to the common ground in mobilisation, the author (ibid.) points out some general similarities between the tradition of community development and social pedagogy, for example, holistic understanding of education, learning, and development, the focus on work with marginalized groups, and the constant tension between the radical and conservative strategy of mobilisation, which in both traditions is manifested in the form of professional and social dilemmas. If we focus on social pedagogy alone, we would point out the following: 1. the dilemma of the position of social pedagogical worker as a professional (ibid.) and also as an "executive" (in a corrective and adaptive sense) (Foucault, 2004); 2. the question of the balance of responsibilities, freedoms and rights between the individual and the group, community and "the people" (Eriksson, 2011); 3. The eclecticism and fragmentation of social pedagogy, in theory and practice, as an obstacle to community action (ibid.) and at the same time protection of the individual's integrity;

4. the issue of the "pure pedagogical nature" of social pedagogy (ibid.), which in our opinion occurs in practice as a widening of the gap between theory, in the direction of demarcation of what is and what is not social pedagogy, and practice, in which individual content/disciplines cannot be so sharply limited, and at the same time, schooling as a central subject of (school) social pedagogy, in which it often succumbs to the so-called "primacy of intervention professions" (psychology, psychiatry, psychotherapy (and counselling service) - as named by Zadnikar (2015)); 5. and last but not least, the dilemma of the border between civil society and the public sector (ibid.), because current social pedagogy often thinks of and seeks to support, above all, the first, but reproduces and works for the second (in favour of the public sector and its systemic order).

Some of the dilemmas arising from the tensions between various mobilisation strategies can show that the emancipatory potential and mobilisation together, in a process of radicalization, are *conditio sine qua non* or the driving force behind the modern "radicalising" socio-pedagogical practices that attempt to overcome these tensions and dilemmas. Emancipatory potential can be expressed only through mobilisation; therefore, in this sense, the two are inseparable, because the former may exist, but without the mobilisation of direct action it does not materialize. We could also say that emancipatory potential is already *a priori* covered by the mobilisation dimension, since without a tendency for emancipation in the desired direction of change, there is no "fuel" for mobilisation. However, at the level of practice, only the intersection of the two processes can create the necessary sufficient energy, i.e., the fuel for thoughtful activism.

The question of the fuel, the driving force, is the nerve point of modern activism, which with all its emancipatory potential, fails to achieve the desired changes (if we think of the Exit or the Fight for (Flaker, 2012)). We ask ourselves whether the emancipatory potential lies outside the mobilisation dimension and only inside the democratic dimension. If mobilisation is an ideal/norm at the cost of social conflict in the former, then such a norm in the latter prevails in the form of cooperation with the aim of consensus, which is, as evidenced by several professional practices, not always possible to achieve.

The classic response to the persistent failure of this democratic principle is nihilism, but we should not / do not want to accept this response, notwithstanding that at the moment we can think of the exit more as it is explained by A. Zupančič Žerdin (2019), who states that an exit from capitalism that manipulates democratic principles is the only possible solution, but at the same time, we emphasize that such a solution is utopian, and the individual cannot perform it alone. Isn't this a call for a "revolution"?

The content and concepts that have been identified show that modern social pedagogy as a radicalising practice (and theory), is the most uniform, compared with its other professional and scientific content. Its basic meaning is to facilitate the realization of the ever-present emancipatory potential of science and the profession, which is also reflected in the tendency to seek answers to social dilemmas and questions by going beyond them; however, the realization of this potential can be achieved by mobilizing the people to seek answers that can be realized.

The process of radicalisation in our case is thus actualized in the common goal of all activities of radicalising education, dialogic education, which is the search for common program content through dialogue (which is one form of mobilized emancipatory potential), in the meaning of exploration, as Freire (2019) would say, of the thematic universe of the people or the collection of its generative themes. In this way, the people can also re-appropriate certain spaces that were taken from them, as described by Flaker (2012). However, since, as pointed out by Freire (2019), this search and exploration cannot be run by a society (science, the profession, *author's note*) that has not yet implemented revolution, it would be appropriate to highlight the question of the method of this revolutionary action, which the author (ibid.) does not specify in detail because he is more concerned with the activities that happen after such a revolution. Namely, this revolutionary method (Freire, 2019) reopens a dilemma that we seek to overcome by finding an answer to the question of the internally divided, dichotomous attitude of social pedagogical workers.

On the one hand, the author (ibid.) talks about revolution and radicalisation, i.e., activism (at the time of revolution), and on the other hand, about dialogue and consensus as democratic principles (after the revolution), which clearly does not exceed dichotomy/fragmentation. The paper itself does not delimit revolutionary action to the period before and after the revolution, because with the tendency to transcend the dichotomy, we include in it Freire's (2019) pre-revolutionary and revolutionary processes.

Both the former and the latter cannot be considered separately from (not only, but also) political action; it is thus especially important to know the dangers of Úcar's (2013) political trap.

Integrated "radicalised" action and the political trap

If, when thinking about the political dimension, we seek origins in Greek philosophy, which deduced that as stakeholders in public space, we (the people) are always political animals, then we can fully agree with Hämäläinen (2015), who says that socio-pedagogical theory and practice are always also political. However, Úcar (2013) warns that in such an understanding, we become caught in the political trap. He emphasizes that bringing social pedagogy and politics closer or even equating them has led to confusion about what social pedagogy can and cannot do. According to the author (ibid.), starting with Freire (1985), it was clear that any educational activity is also political rather than vice versa.

The latter would mean, according to Petrie (2002, in Petrie and Cameron, 2009), that all social pedagogies are political because they have planned and unplanned goals or purposes, and thus exert a social impact in various fields while being implemented within the relationships of power and control that are present in every social situation. Nevertheless, according to Úcar (2013), some structural phenomena (poverty, exclusion, unemployment, etc.) are not pedagogical and cannot be tackled by educational practices alone. The latter include social pedagogy, which through its orientation, seeks to improve the living conditions of its clients, as well as the situation in the community through pedagogical activities. According to the author, this cannot be done directly through these activities, but improving citizens' living conditions is more a matter of politics and regulation (i.e., including social work, *author's note*). However, social pedagogy can play a decisive role in improving social conditions through educational practices, but there is one significant difference between socio-pedagogical activity and political measures, namely the pace of change in both cases.

Socio-pedagogical activities as part of educational processes are slow and often follow structural changes and policies, while political measures are expected to address (per the top-down principle, *author's note*) acute, emergency social and other problematic situations (ibid.).

The author (ibid.) believes that social pedagogy should not be a response to structural problems, although this is often expected of it (and of other sciences). These unrealistic expectations, however, then affect its public image, in which its (non)effectiveness is also assessed. It is therefore essential when dealing with the political trap, to distinguish between the political and the socio-pedagogical, as well as to determine the contact points between both (ibid.). One such contact point, which can prevent social pedagogy from falling into this trap, can be found in radicalisation as a role for social pedagogy – which is a combination of its emancipatory potential and mobilizing dimension and is powered more by activism (radicalism (Freire, 2019)) than fanaticism (Marburger, 1987; Razpotnik, 2014; Zorc Maver, 2006) – and in the social pedagogical worker in the role of politician (Storø, 2013) or in that of a (professional) activist, "an authentic revolutionary" (for the definition of this phrase, see Freire (2019, p. 75)). In both cases, it is an awareness that political decisions and consequently regulations can have a significant impact on the work of the social pedagogue, who is defined by Storø (2013) as a policy and regulation executor (described by D. Zorc Maver (2006) as a corrective function of a social pedagogical worker), while also problematizing this role. We believe that this awareness enables a critical distance to political ideologies and a professional stance in relation to political decisions that directly or indirectly affect socio-pedagogical work and its users, the people. It is about the active citizenship (participation) of social pedagogical workers and related activities (measures) in the event of a clash between professionalism and political decrees (which are supposed to implement political ideology). In this way, we avoid sectarianism and move toward radicalisation, according to Freire (2019), as a form of conscious, committed social engagement. While the latter does not rule out the trend toward structural change (in which social pedagogy could also be seen as political), the aim of such activism is essentially to promote professional positions and arguments in favour of users, the people and, consequently, of society as a whole. It is as if, in this case, social pedagogy would provide an opportunity for meta-analysis based on meta-theory, which would allow certain social activities in the direction of change, as Maryanowicz-Hetka (2016) speaks about in more detail.

Overlooked opportunities to activate socio-pedagogical radicalised practices

We see the first mobilisation within emancipatory potential, if we do not want to fall into the political trap (Úcar, 2013), in the (socio) pedagogical power carried by theory and practice of social pedagogy. We are not talking about pedagogical power, which would result from a position of strength, which assumes that the one who owns it (*the strength*) is the only one who knows things; neither are we talking about the power that social pedagogical workers have in direct practice with users, but about the power that places academics and students among professional social pedagogical practitioners, who together represent the teachers/pupils and the people. We start by assuming that the training of future social pedagogical workers is one of the socio-pedagogical professions (vocations) or practices that are bound by a code of ethics with full responsibility, and indirectly this includes students as future holders and providers of this profession. As has been established, Úcar (2013) considers that with socio-pedagogical education, we cannot and must not intervene directly in structural change, but we can do so indirectly and with the help of the latter. The question is, however, how and where can we do this, and whether we can bring together the public sector and civil society (in the form of social movements and multitudes).

If we think in a somewhat utopian way and give a positive answer to that question, then we can start in the following order: 1. at the faculty level with all the opportunities offered by study programs and other training courses, consultations, conferences for social pedagogical workers and other professional workers; 2. at the level of the professional association with the various events and congresses that are offered by it; 3. followed by a public scientific area at a national and international level, in which social pedagogy should be more actively involved; and 4. with student and other movements, which should be encouraged and strengthened by socio-pedagogical studies, etc. Nevertheless, it seems important to us that these are forms of planned, inter-related and well-considered activity, which we see as the central role of the professional association or chamber. We continue seeking an answer to the question of the appropriate form and direction of the intersection of emancipation and mobilisation of socio-pedagogical education at all levels that could offer ideas about and answers to these socio-political dilemmas.

In theory, the emancipatory potential can be mobilized through critically discursive, meta- and socio-analytical analysis and reasoning, which at the same time demonstrates the topicality of the question and the need to revive the socio-critical emancipatory potential of social pedagogy, as was evident in the 1960s and 1970s (Marburger, 1987). Contemporary theoretical discussions (Eriksson, 2011; Galimberti, 2015a, 2015b; Razpotnik, 2014; Salecl, 2017; etc.) highlight the question of society and community, which we see as an opportunity to promote socio-pedagogical movements in the direction of indirect commitment to the social changes necessary to improve social justice, social solidarity, and the inclusive community. However, we must not forget the important difference between activism, on the one hand, and fanaticism, on the other, or as Freire (2019) would say, between radicalism (which is creative and fuelled by criticality) and sectarianism (which generates myths and alienates). In the case of the former, it is about dialogue and involvement in the processes of liberation (ibid.), humanization and democratization of society, which can become part of a socio-pedagogical education, and in the case of the latter, the (socio) pedagogical activities can be turned into political struggle and propaganda (Marburger, 1987; Úcar, 2013), where social pedagogy is established as a social system in which its activities have a narrow-minded focus on the correction and preparation of people to fit political ideology (Hämäläinen, 2015) and thus has a corrective function (Zorc Maver, 2006).

Š. Razpotnik (2014) points out that socio-pedagogical, pro-active action should go beyond institutional frameworks and open a space for critical reflection on current social developments. The latter could be linked to the somewhat visionary reflection by A. Bogdan Zupančič (2018), who sees the opportunity to overcome such (institutional frameworks, *author's note*) in higher education, which should use its intellectual potential to exit system frameworks and create a public, socio-pedagogical intellectual space. If we refer to the question of the importance of community in this public space (Bertoncelj, 2017; Bogdan Zupančič, 2018; Eriksson, 2011; Razpotnik, 2014), then we see social pedagogy as the central protagonist in the strengthening of such a professional community, both in theory and directly by active agency and intervention in practice.

The greatest deficit in the mobilisation of emancipatory potential can be observed in the academic field, especially at the level of student resources, as well as in the academic involvement of social pedagogy at the level of the resources for social pedagogy as a science.

Within the latter, we believe that there is a lack of socio-spatial structures and communicative sectors, referred to by D. Zorc Maver (1997), which would address the issue of the status quo to develop critical discursive analysis and scientific discussion. Thus, in the course of the study program, as shown by content analysis, very little space is devoted to socio-analysis, as imagined by Bourdieu (2012; Gaber, 2012), which places Homo Academicus under scrutiny in a way that allows in-depth reflection. "Bourdieu thus explicitly talks about himself and tests the power of scientific reflection when discussing his own world" (ibid., p. 261). He understands sociological reflection both as the moral responsibility of scientists and, above all, as a way of sociological control of the distortions that affect scientists' constructions of the research subject, which result from the (dis)position of the sociologist in academic space and, more generally, in the social world in which he occupies a contemplative stance (Wacquant, 1990, in Gaber, 2012). We see this kind of socio-analysis as an opportunity to work at an academic level, an opportunity for cooperation between academics in practice and with students, since in this way they interfere with the self-evident and status quo. In this way they would live social constructivism, which is referred to by Storø (2013) as a basis for socio-pedagogical activity.

They would enter a process of continuous questioning, which would be based on needs, not only of direct professional practice but also of academic and student practice, and eventually lead to issues such as the overburdening of academics with practice, the gap between theory and practice, the lack of vision and system in research, and student absenteeism, which was highlighted by D. Zaviršek (2017) as a taboo theme. A short presentation of the socio-analysis – which is the product of the author's position in the field and at the same time "the product of the author who turns the whole apparatus of socio-analysis inwards" (Gaber, 2012, p. 260), into his own field of activity – could be one of the ways of, if expressed in socio-pedagogical language, "socio-spatial structures and communicative sectors" (Zorc Maver, 1997) or "radicalising" practices, which, in its various forms, would promote the necessary vital socio-political points and encourage change, to which we are ultimately bound by the code of ethics.

Conclusion

By problematising the internal fragmentation and ambivalence of social pedagogy at both theoretical and practical levels, the article shows that the dichotomous constellation of this science, profession, and occupation forms a single nerve point in modern socio-critical discussions on social pedagogy, which may take, somewhat paradoxically, the role of emancipatory potential. In combination with mobilisation from the theory of community development, the latter represents, in an innovative way, an upgraded process of radicalisation by Freire (2019) and thus offers a more incisive alternative to the internally-split social pedagogy, also with the help of new "radicalising" liberation practices.

We start by discovering the importance of the intersection between the emancipatory potential and mobilisation dimension as a driving force of socio-pedagogical radicalising action or the realization of (the process of) radicalisation, the aim of which is modern liberation. The modern, internally divided attitude is merely indicative of the apparent ambivalence of socio-pedagogical activity in practice, since it does not contribute to socio-critical, revolutionary action at the macro-level, but often represents an ideologically contaminated democratic norm, in purely individual-centred professional conduct (mainly in the mezzo (institutions) and microsphere (practices)); it should therefore be replaced by an emancipatory attitude on the part of "professional social activists" or even "humanitarian social revolutionaries".

Whatever the name, the proactive radicalising professional attitude should integrate the whole continuum of the dichotomy between the conservative and the alternative, and include the following: indirect political efforts for bottom-up structural and economic social change; reflection on and distancing from prevailing political, professional and other ideologies; testing and questioning the established democratic patterns of professional behaviour – and in this way, it might have introduced more determination, perseverance and perspicacity or radicalisation, including by provoking social conflict as a form of benign aggression (as indicated by Fromm, 2013).

As such, the radicalising socio-pedagogical attitude would be the most appropriate response to the new form of capitalism (Boltnaski in Chiapello, 2005, in Grušovnik, 2019, p. 191), which works so as to discourage the constant problematising of ideological (ab)use of democratic principles when it acts as an "extremely flexible economic and socio-political system, /… / that always manages to absorb its own critique and eventually turn it into the production of surplus value and the reproduction of the means of production."

With revolutionism in socio-pedagogical thinking and activity, this science and discipline would also be recognised as a part of critical pedagogy and avoid only the "artistic" critics of capitalism, which "the changed form of the free market economy /… / managed to appropriate, and thus make for ideological concepts par excellence" (Grušovnik, 2019, p. 192). In this way, it would in some way go beyond the internal fragmentation and its conflict nature as a "process of education (and action, *author's note*), which will not be satisfied only with activity versus passivity and authenticity versus non-authenticity; instead, justice and equality could be its priorities to the same extent as freedom, authenticity and personal self-realization, and its main wager will be what Freire (again in connection with the theology of liberation) calls "communion" (ibid., p. 193).

Freire's introduction of "communion" (2019) into the socio-pedagogical context enables us to define the radicalising co-operation that goes beyond cooperation as a democratic norm, and in which there is a kind of fusion of leaders and people (in our case social pedagogical workers and users, *author's note*) and whose essence is to communicate without coercion and social expectations and thus to enable human revolutionary action. Therefore, it is "sympathetic, loving, communicative, humble and liberating" (ibid., p. 161). This manner of social-pedagogical co-operation can avoid the political trap, since it is an informed action, a co-existence between social pedagogical workers and users who join the former on the path of liberation (including their own).

The users are thus co-creators and active participants in radicalising processes (even political ones), enabling them to participate fully and encouraging autonomous decisions. Such co-operation mobilises emancipatory potential in the form of the so far overlooked socio-pedagogical radicalising practices.

We see an opportunity, perhaps among the most important ones, which in connection with teachers is highlighted by M. Miharčič Hladnik (1995) and Rutar (2002), in the public intellectual (including critical, *author's note*) space that takes account of the reflective and meta-analytic position. In the latter, teachers (or teachers/students) as intellectuals (teachers/students, informed individuals) are autonomous and responsible holders of this space.

We believe that such a space (including social movements, multitudes) – which should also be provided by the study program, and where, for the time being, it is more student absenteeism than anything else (Zaviršek, 2017) – would mean a more serious entry into the public sphere as a part of civil society, including for Slovenian social pedagogy, and would enable autonomy and taking responsibility, which, in a way, both teachers and social pedagogical workers evade by resorting to nihilism.

If the central holder and the protagonist of such a public space was an independent research group of stakeholders at all levels of the socio-pedagogical occupation (which could also be developed by a professional association or chamber), it would probably be possible to secure a sufficient politically and ideologically impeccable space, where the systematic development of social pedagogy as an independent scientific discipline and a critical reflection of the developments in practice would be realized – an informed questioning of the status quo and the search for common program content, using all known tools and those yet unknown (among which we could place the "reflexive tool of understanding cultural invasion, which we need to discuss the development of modern capitalism and try to respond accordingly" (Grušovnik, 2019, p. (193)) that allow such questioning. We believe that such an independent scientific group would contribute to the specialization of research, somewhat paradoxically, also by drawing a dividing line between scientific and practical social pedagogy, which we consider important for establishing the partial autonomy of social pedagogy as a science, which is of constitutive value for the latter (which is stated in more detail by Hämäläinen, 2015). This is particularly the case if we seek to engage in more in-depth linguistic analyses or analyses of spoken acts in the meta-analysis processes, which could indicate the ideological function of (ab)use of words, as Zadnikar (2015) reminds us.

In this case, it would be necessary to mobilize (the most overlooked) emancipatory potential of the academic field of social pedagogy in the form of socio-analysis. This would allow social pedagogy to enter the sphere of critical pedagogical thought, both at the level of theory with discussion and at the level of practice, by implementing Freire's (2019) and Flaker's (2012) (modern) liberation practices. Thus, at least for Slovenian social pedagogy (which is internally split and ambivalent), it seems that it is currently engaged (also theoretically) in all the practices in which it operates and responds to social issues following democratic principles and norms (in the form of curative and top-down approaches); it therefore runs out of energy, time and space for self-exploration and radicalising action, including that in the form of problematising and liberating education.

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Survival camps in nature as a form of social skills training

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Abstract/Izvleček This paper presents survival camps in nature as a form of social skills training. The camps are aimed primarily at adolescents with behavioural and emotional difficulties. They comprise many everyday social skills where both the group and the individual in the group are important. Social skills are among the many skills we teach in survival camps. Participants become acquainted with the content, methods and skills, and they strengthen the competences that help them to better integrate and function in the society. We shall present to what extent and in what way the social skills of young people are strengthened at survival camps, how young people gain vital experiences and competences and develop their potential.

Tabori preživetja v naravi kot oblika treningov socialnih veščin

Namen prispevka je predstaviti tabore preživetja v naravi, kot obliko treninga socialnih veščin. Tabori so namenjeni predvsem mladostnikom z vedenjskimi in čustvenimi težavami. Vsebujejo veliko vsakodnevnih socialnih veščin, kjer sta pomembna tako skupina kot posameznik v skupini. Socialne veščine so ene od mnogih veščin, ki jih »učimo« na taborih preživetja. Udeleženci spoznavajo vsebine, metode in veščine ter krepijo kompetence, ki jim pomagajo pri boljšemu vključevanju in delovanju v družbi. Predstavili bomo v kolikšni meri in na kakšen način se na taborih preživetja krepijo socialne veščine mladostnikov, kako mladostniki pridobivajo življenjsko pomembne izkušnje in kompetence ter razvijajo lastne potenciale.

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Introduction

In most cases, a lack of social skills and the ability to make social contacts are present in adolescents with behavioural and emotional difficulties. The reasons for this can vary. Nevertheless, social skills can be learned through social skills training. Humans are social beings, and we all need social skills and contact with others. Adler (Adler, 2013) believes that without social games, the sense of belonging in an individual cannot occur.

Gomezel and Kobolt believe that in today's society, which is constantly changing, the consequences emerge in the areas of the economy and values, as a product of globalization, thus making children and adolescents face new challenges and issues of how to survive in psychological, material and sociological terms. (Gomezel and Kobolt, 2012).

Nowadays, we cannot offer the most appropriate forms of help to young people with behavioural and emotional difficulties or disorders with the old forms and methods of work. With regards to the needs of children and adolescents, different types of assistance need to be developed. In the 1930s, the pioneer of experiential pedagogy, Kurt Hahn, identified six types of decline which the youth of the time faced: decline in physical activity, in initiative and courage, in memory and imagination, skills, self-discipline, caution, and compassion. To treat these types of decline, Hahn envisioned four antidotes: fitness training, expeditions, projects, and humanitarian rescue activities (in Krajnčan, 2007).

We believe that, in addition to formal education, young people need to be equipped with a range of social skills and competences that will help them cope with the unpredictable challenges of the present to the best of their ability. This unpredictability and uncertainty can be presented to young people at survival camps in nature, where they experience first-hand all the advantages and obstacles nature has to offer.

At survival camps, we wish for young people to discover their limits, take risks, face their fears, accept challenges, experience successes/failures, exercise, gain self-confidence, learn to take responsibility, and put off their desires and ideas, as well as to persevere in difficult situations. In extreme situations, an individual can get to know himself and others better. In the remainder of the article, we will describe the meaning of social skills training and survival camps in nature.

We will examine the extent to which and the way in which the social skills of young people can be strengthened in survival camps.

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In Slovenia, no major changes have been seen in the field of work with this type of population since the 1980s. Based on experience from current practice, adolescents need different approaches, which are related not only to everyday tasks and school, but also to their active participation, finding strong areas within individuals and strengthening them, empowering them, or focusing on individual resources, overcoming unpleasant situations, as well as developing other social skills. One attempt at a different type of work with adolescents with emotional and behavioural difficulties is the project of survival camps in nature.

Social skills training

In the future, the state, and especially schools will be unable to implement sufficient transfer of social competences. Even nowadays, these institutions are insufficiently able to provide that. The system itself is not in favour of social competences being introduced into society. Every human being will be or is already responsible for protecting him/herself from future social crises (Adler, 2013). One of the informal ways to acquire these competences is through social skills training.

During adolescence, an individual's relationships with others change both quantitatively and qualitatively. In social contacts, young people acquire new social knowledge and skills, try out different new roles, define their life goals, beliefs and values and thus also shape their personality and identity. Within the framework of social development, self-esteem, emotional response, aggression, and self-control also develop (Zupančič and Svetina, 2004).

Rozman (2006) believes that informal education is becoming an increasingly important part of learning, socialization, skills acquisition, social networking, etc. There is often not enough space in the school system for young people to learn real-life skills such as communication, cooperation, teamwork, empathic listening, exploring their creativity, etc., so this informal part of learning is thus even more important and necessary.

Social skills enable appropriate social communication, if we consider our own needs and the needs of other people. They not only teach us facts and emphasize more than knowledge but also belong to the social field in the broadest sense (the field of communication, relationships). Mastering social skills enables an individual to effectively satisfy their social needs, while not benefiting from the people around them, but respecting and understanding them (Velkov, Klobučar and Pahovič 1998). This is exactly what is needed by adolescents with emotional and behavioural difficulties or disorders.

When it comes to social skills training, we are speaking of children, adolescents, or adults being trained in practical skills that are beneficial for their everyday life: appropriate communication, personal appearance, moral evaluation, overcoming unpleasant situations, resolving conflict situations, appropriate giving and receiving of criticism, expressing and accepting praise, relationships with others, gender relations, relationships with parents and authorities, group work, active participation, leadership, etc. Learning social skills is one of the important areas in adolescence, since it creates opportunities for an individual's life in a given society. Social skills can be learned by young people in different environments, within the family, school, peer group, extracurricular activities, etc.

Some young people lack any environment in which social skills could be learned and tested. If we look at it from the perspective of curative/preventive work with people, the acquisition of social skills is one of the main learning processes (Rozman, 2006). Adler (2013) believes that a healthy measure of responsibility gives a person the basis for business success and personal satisfaction. To achieve our goals, he provides the following twelve laws: responsibility, learning, will, taking the initiative, trust, reality, adjustment, leadership, equalization, growth, defence, and benefit.

The main feature of interpersonal relationships is the recognition of diversity and one's own thinking. Another important feature is the ability to give and receive feedback. Reciprocity of relations represents an equal mutual encounter of opposites, differences and similarities. In mutual relations, everyone has the right to personal expression/opinion and individuality, as well as the recognition of contradictions and their realistic resolution (Možina et al. 1994).

In short, the training itself offers the tools to help us achieve certain goals. The training is designed to empower and involve the individual and offer skills and opportunities for action. In most cases, training takes place in the form of workshops led by a qualified social skills training instructor.

Workshop participants sit in a circle, so that everyone can see each other. The leader - instructor also sits among them. In principle, an individual workshop should not last more than an hour and a half. There are certain rules for workshops that help improve the climate and the development of the group: work in a circle, only one person speaks, everyone respects everyone, we do not comment on the contributions of other participants, we all feel fine, there is possibility of non-cooperation if we do not feel like it, and trust. It is important that the workshop participants feel safe and accepted.

The workshops can be conducted in different ways. We can have pre-made workshops on certain topics, such as getting to know each other, relationships, gender relations, social proximity, drugs, problem solving, occupations, group work and values. We use different ways of presenting each topic in the workshops, with the help of various games, guided fantasies, role-play, pair work, group work, associations, reflections, conversations, etc. Workshops are not a strictly defined set of tasks or skills that an individual or group must solve, but leave a great deal of creativity, originality and adaptation to the group and the individual. At the end of each workshop, we conduct a short evaluation of or reflection on the workshop, where each participant has the opportunity to evaluate (reflect about) the workshop, the leadership, the group, themselves or just to say what they want.

According to Rozman, the goals of social skills training are as follows:

- Objectives related to relationships: acceptance of differences, communication, networking, expansion of acquaintances, learning within a group/community, learning tolerance, benevolence, acceptance of different opinions, etc.

- Objectives related to self-empowerment: self-evaluation, coping with oneself, taking responsibility, dealing with personal crises or crises in the society, etc.

- Objectives related to learning concrete skills: talking about different topics, using skills to work better, preventing problems in relationships, constructive conflict resolution, equipping with concrete skills: cooking, self-care, caring for others, the group (Rozman, 2006).

We believe that adolescents, especially those with emotional and behavioural difficulties, need clear rules, structure, clearly defined requirements, and as many positive experiences as possible to empower them to function successfully in today's society.

Survival camps in nature

Social pedagogical project work with young people and experiential pedagogical projects are based on experiential learning. David A. Kolb says that experiential learning is learning which is in direct contact with the reality that the individual is studying. It is a learning process in which knowledge is created through transformation of experience (in Pipan, 2008: 53-54).

Based on our experience, social pedagogical workers in Slovenian educational institutions and working alongside survival instructors have developed the idea and later the concept of offering young people with emotional and behavioural difficulties survival camps in nature.

One form of social skills training, greatly complemented with experiential pedagogy, is the survival camp in nature. The main purpose of survival camps is to teach participants how to survive in nature and overcome the problems we face in nature with as few resources (convenient, conventional) as possible and with comradely help. Experiential pedagogical survival camps have been implemented since 2011, mainly in the forested and mountainous areas of western Slovenia. In addition to the social pedagogical worker, the camps are run by three instructors from the Karantania Adventures association, who are trained for survival in nature. Throughout the duration of each camp, survival instructors teach participants survival techniques. They pay full attention to both the individuals and the group. Experiential learning methods take into account the holistic nature of an individual's personal experience. The camps are based on safety, professionalism, adventure and socializing.

The camps are implemented according to the pedagogical principle of interpretation - demonstration - imitation and practical work. The entire youth program consists of an initial and an advanced survival camp. The basic camp lasts four days and includes a three-day bivouac in nature. The main goal of the basic survival camp is for individuals to become acquainted with and learn a range of survival skills in nature and to learn about or adapt to group life, while the main goal of the advanced camp (more demanding level) is to test the individuals or the group in survival skills and group life in nature, learned at the basic camp, and to upgrade this knowledge with more demanding skills for survival in nature. In the structure, the advanced survival camp program does not differ much in structure from the basic camp.

The differences are in more demanding content, the duration (three days) and the location of the implementation itself. In the advanced camps, the individuals, and the group work more independently and autonomously, with less instruction from the instructors.

Krajnčan (2007) believes that experiential pedagogy for adolescents and teachers does not represent everyday situations. Experiential pedagogical processes can last only a few hours, a day, a few days, a week, a month to several months. All the organizers have in common the fact that they try to initiate learning processes as quickly, as extensively and as thoroughly as possible under special learning conditions and strive for long-term action by setting goals each time.

For each survival camp, there is a diverse, heterogeneous group composed of young men and women of different background, social status, and education, who are problematic, non-problematic, dropouts, unemployed, university students, high school students, etc. The participants were young people from the Produkcijska šola production school, young people sent to camps by social work centres, students who were doing their work experience or internships at the Mladinski dom Jarše youth centre, participants in programs of the Zavod Bob institute for education and cultural activities, young people who attended the Youth Aid Centre Association, visitors to the Cona Fužine community program for young people, young people who lived in residential groups at various residential treatment centres, young people from the district youth centres within the public institution Javni zavod Mladi zmaji Ljubljana, etc. In most cases, the participants of the camps did not know each other. The groups were composed in accordance with how the individuals applied to each camp; therefore, they were mixed, girls and boys aged between 15 and 26 years. The average ratio between boys and girls was 3:1.

The entire program of an individual survival camp in nature is psychophysically demanding; it takes place completely in the natural environment, under the 24-hour-vigilant eyes of professional staff. The staff is responsible for professional and safe organization, and the implementation of the program at each camp. The participants attend the camps voluntarily and at their own risk, in agreement with their parents. At the introductory meetings, future participants are presented with basic information about the camp.

Camp participants are expected to do their utmost within the scope of their abilities, i.e., to do their best. At the camps, the participants are constantly occupied, so there is no time to think about trivialities or the hardships of everyday life.

Each day begins with a morning workout and continues with a morning meeting where participants are introduced to the activities to be performed that day and asked about their well-being.

At the camps, in addition to survival and mountaineering basics (walking on the terrain, orientation, climbing, rope technique, knots, rope descents, etc.), the participants learn how to safely spend several nights in nature. With the help of survival instructors, the participants try to prepare different types of food from plants found in nature (identify edible and poisonous wild plants, bake bread, dry and smoke food, etc.), learn how to find or obtain drinking water by themselves and what to do in case of an accident or injury (how to act in the first minutes after the accident, basic first aid, signalling, reporting the accident; how to stop bleeding, immobilize limbs, make a stretcher, transfer the victim and other techniques). They learn to make an improvised backpack and shoes, start a fire the primitive way, make a torch, tools, a rope, etc. They learn many useful things that may come in handy in everyday life. Through work processes, as a group, they move from simple tasks to increasingly complex and demanding ones. Within four days of living together, relationships are established and strengthened among the participants, and a group is formed.

Problem solving is more successful when we focus on the problem and try to overcome it. We do not avoid problems but try to solve them. When we deal with our own problems, we become aware that we can control our own lives. Successful overcoming of problems contributes to a positive self-image and personal strength (Lekić et al., 2011).

In working with participants, the instructors use different forms of work, such as frontal, group work, pair work and individual work, as well as different methods such as explanation, demonstration, interview and practical work. A social pedagogical worker is present at the camp. His/her task is to supervise, help the camp participants and cooperate with the instructors (in case of any participant problems). The social pedagogical worker observes the functioning and development of the group and individuals from a meta position, monitors the group dynamics and discusses and agrees with instructors and participants on an ongoing basis regarding possible changes in the functioning of the group or individuals. Upon each completed day, an analysis/reflection of the day's work is performed, in which the participants have an active role. The evening analysis of the day is also performed by the instructors and social pedagogical worker.

A socially successful adolescent can be an adolescent who is aware of him/herself, the people around and the society in a broader sense. He or she has an established basic system of values, which in time were adopted as his/her own and made important, and to which he/she adheres in life.

The adolescent can set short-term and long-term goals, is willing to work for them and knows how to give up things which would hinder him/her from achieving the goals. He/she knows how to deal with the problems that come his/her way and is aware that they are solvable, that it is always possible to choose between several solutions and knows how to decide on the appropriate solution (Metelko Lisec, 2004).

Here are a few more points we think are important in the implementation of survival camps in nature:

- Change of environment for the individual - change in behaviour/performance is possible.
- No phone signal, no television, internet, games, Facebook, Instagram, etc.; we are disconnected, there are fewer distractions.
- The participant depends on him/herself or the group (no parents, guardians, relatives, teachers, peer group, etc.)
- Participants overcome situations that are unpleasant for them; they must overcome fear; they are constantly occupied.
- Participants work in stressful situations to which they are unused, and must adapt, be resilient, etc.
- Creation of trust, companionship, group work, leading the group.
- Getting to know oneself and others.
- Learning social skills and competences.

Methods

Research sample

The research was based on a non-random sample involving participants in survival camps. The total number of respondents was 40, aged between 15 and 26 years. Two-thirds of the respondents were male and one-third female (Kožar and Vukovič, 2018). Data collection took place between 2011 and 2018.

Data collection procedures

For the purposes of data collection, we used a qualitative research method, and as a data collection technique, we used a survey in the form of a written questionnaire. Participation in the survey was voluntary and anonymous. We also obtained data for the purpose of evaluating the program by observing the participants and conducted interviews with camp participants after the camp to monitor possible changes in individuals.

Content and methodological characteristics of the instrument

The youth questionnaire that we compiled for the purpose of analysing the effects of the camps consisted of three sets. In the first set, there were 3 closed-ended questions. In the second set, there were 8 open-ended questions related to assessment of the acquired content and the evaluation of the work of the instructors. We were interested in what content the participants liked and what not, what they gained for themselves, what strengths they learned at the camp, which ones they would like to improve in the future and how they would deal with their weaknesses next time. In the third set, participants used a 10-point assessment scale to assess their own experience and the extent to which they did or did not achieve the stated goals.

Data processing methods

The questionnaire was first processed in a descriptive statistical manner. In the next phase, we combined and coded the respondents' answers. We defined the concepts and then the categories of the statements and answers we received and used them for analysis. In doing so, we tried to form categories substantively similar to individual research questions. The content of the interviews was analysed on the basis of research questions, starting from the codes that were formed in the coding process.

We are aware that from a methodological point of view, the research is incomplete and needs correction. We also see the absence of a control group as a shortcoming. By analyzing the responses of the survival camp participants, we tried to detect and determine whether and how participation in the survival camps affects the individual. What has changed in the adolescent? Berdajs (2017, p. 107) believes that it is important to know the quantitative and, above all, qualitative indicators of our work, based on which we can assess performance.

The objectives of the analysis are as follows:

- To determine to what extent and in what way the social skills of young people are strengthened in survival camps.
- To find out how individual skills learned and mastered at the survival camp affect the young person.
- To determine whether the new acquired skills are permanent or present/acquired only during the survival camp.

We asked ourselves the following questions:

To what extent and in what way are the social skills of young people strengthened in survival camps?

Are these skills acquired by adolescents in survival camps permanent or are they present/acquired only for the duration of the camp?

Are an individual's social skills tied to specific activities at the survival camp?

Does the approach of having to take care of yourself work in a comfortable society, where adolescents do not know how to take care of themselves?

How does the fact that the adolescent eats things he/she has never eaten in his/her life, sleeps under the open sky and does things he/she has never done in his/her life, affect the young person?

How do certain skills that the adolescents test at the survival camp affect them?

For the purpose of data collection, we used a qualitative research method, and a survey in the form of a written questionnaire as a data collection technique. The data for the purpose of evaluating the program were obtained by observing the participants. To monitor possible changes in individuals, we also conducted interviews with the participants upon the conclusion of the camp. We were interested in what had changed in the individual during and after the camp.

Mesec (2009) believes that evaluation in the narrower sense refers only to the achievement of objectives and the evaluation of effects. One of the objectives of the evaluation is to determine whether the program was successful and efficient or what its actual effects were.

The analysis - evaluation of survival camps is an attempt to evaluate the goals we have set for ourselves in terms of the individual's and the group's experience and progress. The evaluation includes reflections by participants, instructors and survival camp leaders.

The evaluation of survival camps was performed with the additional intention of obtaining feedback on what was good, bad and what should be improved in the implementation of future camps and their evaluations.

The evaluation of the work at each camp took place on several levels - ongoing (every day) and final (final evaluation of the participants about two to three weeks after conclusion of each camp). The final evaluation was performed by the instructors, who also performed daily evaluations after finishing all daily activities. All the evaluations, morning, evening and final ones, were kept by the camp leader or someone else pre-determined to perform this task. The circle method was used, meaning one speaks, the other listens, while avoiding general criticism.

In giving feedback, the instructors gave the participants feedback on their actions and behaviour, but not on their personality, in particular, trying to praise their strengths.

Upon completion of daily activities, a daily evaluation was performed according to the above-described method. Every evening, the participants would talk by the fire about the past day and receive feedback on their contribution to the common good of the group. The participants were expected and encouraged to give at least one positive and one negative "feedback" on the activities taking place during the previous day at the camp. They were encouraged to evaluate their own activity, well-being, behaviour, leadership and cooperation with others. Everyone was deeply engaged in solving ongoing problems if these occurred.

During the two camps, the instructors also used their assessment instrument on a five-point scale to experimentally evaluate the participants and present them with the overall assessments at the evening evaluations. They were assessed in the following categories: leadership, group participation, self-initiative and overcoming problems/fears.

The questionnaire for young people that we compiled for the purpose of evaluating the effects of the camps consisted of 3 closed-type questions and 8 open-type questions related to self-experience and evaluation of the content learnt.

We were mainly interested in what content they liked and which not, what they gained for themselves, which strengths they learned at the camp, which ones they would like to improve in the future and how they would deal with their weaknesses next time.

There were 2 scales of views in the questionnaire: the participants had to grade how they evaluated the work of instructors on a scale from -5 to +5 (the average grade was 4.5), and on the second scale they also had to grade from -5 to +5 to what extent had or had not achieved the stated objectives of the camp.

The final evaluation of each camp was performed a month after the end of each camp at the latest, when the participants were answering the questionnaires, of which the results of the analysis will be presented below. At the final group evaluation, we received many concrete information from the participants regarding their positive and negative experiences at the camp. We also encouraged them to try to identify how the experience and skills gained could benefit them in their daily lives. Upon the group evaluation of all the participants in each camp, the evaluation of the performers followed.

We also obtained feedback from the parents, guardians or educators of the participants (whether they noticed any changes in behaviour after the camp or not). In most cases, the parents' feedback has been very positive. Quite a few of them perceived positive changes in adolescents' behaviour/performance.

Findings

All the participants thought that it was good to have attended the camp. They all thought that participating in the camp was useful for them. Among the activities they liked the most were climbing (70% of participants), followed in some cases by being away from the world, preparation of food, setting up bivouacs and lighting a fire. There was no content that most participants disliked; two liked everything, while others mentioned killing a rabbit, walking, cigarette break, gathering food, equipment problems (too sharp or blunt knife) and strict supervision of instructors as the content they did not like too much.

Participants felt that they had gained a lot of knowledge, and their answers can be reasonably divided into the four most often mentioned categories:

1. technical skills (knot tying, preparing and making a fire, orientation, first aid, find and preparation food in nature and housing construction, climbing),
2. coping with one's own limitations (absence and overcoming fears (especially of heights), overcoming physical strains, overcoming unpleasant situations),

3. getting to know one's personal qualities (independence, autonomy, motivation, self-confidence, self-esteem, courage, modesty, patience, conscientiousness, ingenuity, self-confidence),

4. social skills (joining a group of strangers, teamwork, cooperation, willingness to cooperate to achieve a common goal, helping others).

The participants listed the following strong qualities which surfaced during the camp: absence of and overcoming fear (especially of heights), courage, teamwork, cooperation, modesty, patience, conscientiousness, willingness to cooperate to achieve a common goal, ingenuity, self-confidence, and helping others. When they had to choose one or two of their strengths they would like to keep at the current level or improve, they chose courage (12x), perseverance (6x), patience, confidence, cooperation, and modesty.

When asked how to achieve this, they replied they would achieve it gradually, by participating in or performing similar activities, by continuing courses, and by trying to complete things and appreciate what they have.

With some participants, we find courage problematic, since two stated that they would upgrade this characteristic by not thinking too much about the consequences and not being afraid of anything. Here it would make sense to open a discussion with the group and warn them of the possible negative consequences of being too brave and not thinking about the consequences.

We believe that the mountaineering elements at the camp are a welcome change, as they conjure up excellent tension and relaxation from other challenges, resulting in the individual's increase of energy.

When asked how they would deal with their weaknesses next time, however, they answered fairly unanimously: some would face them and do better or try to overcome them; they would be stricter with themselves and think first. Only one of the participants stated that he would treat his weaknesses the same next time.

In light of the answers, we feel that the participants felt part of the group during the camp, that they cooperated with other members of the group and talked to each other, considered, encouraged, rejoiced together and solved problems mutually. Some participants found the basic camp more strenuous in terms of group dynamics. We believe that through experience at the basic camp, participants in the advanced camp were at least mentally better prepared for camp activities. At the basic camp, the group and individuals are allowed to be more independent each day, and each day, both the group and the individual take on greater responsibility.

This enabled the individuals to become more and more connected and the group to become stronger. The very group dynamics and the development of the group from getting to know each other to cooperation is the field of observation and research, to which we want to dedicate even more attention at future camps. The aim is to survive in the wild with one another, taking care of the fire as caring for others, and leading a group.

According to the participants' answers, social skills and their strengthening at the camp are most connected to meeting new people, working in a group or pair, accepting and giving criticism in an appropriate way, in cooperation among individuals, and evening reflections of the individual and the group. One of the most important goals of the camp is for the participants to learn vital skills/competences and be able to transfer them to later everyday situations, to real life.

Through active engagement and work at the camp (learning by doing), young people gain practical knowledge, and through learning for life, also the skills that will benefit them in life. In camp evaluations, the participants themselves assessed that they had acquired considerable knowledge on how to survive in nature and be resourceful when losing everything, some social skills such as tolerance and cooperation, as well as getting to know oneself, the group and the environment. We believe that many skills were presented, but not all of them were mastered by individual participants to a satisfactory extent. The daily evaluations were too late, more guided self-reflection by individuals would be needed, also focused on everyday life and possible personality shift. The participants ranked various things among the strong qualities that surfaced during the camp. We also see the meaning of survival camps in nature in the fact that an individual, to survive, must do many things they otherwise would not do in life. At the camps, young people sometimes go through a "crisis", overcome fear, and after returning home, many people think about themselves, their lives and what is really important. At the camp, everyone also had time to reflect on what is genuinely important in their lives.

Most of all, we can observe the closeness and distance in interactions or according to social situations (for the living together to have an effect depends on their cognitive assessment of the given conditions - here voluntary participation plays an extremely important role), an insight into the impact of their energy and mood on the whole group, the specificity and intensity of individual problems, the level of

trust, taking responsibility for oneself and others; mutual competition and interactive work (several people perform one task) increase negative effects, create social conflicts, the social atmosphere created in the group plays an important role, influence - negative effect alongside the phenomenon of personal space (Krajnčan, 2017, p. 126).

We think it beneficial to remind the individuals of self-reflection during the evening evaluations of the day, to think about their action in various situations, or how they would react differently in a different environment, and how they are affected by lack of sleep, food and comfort. It seems good for an individual to become aware of these things and learn how to react in stressful situations and how to adjust their actions/behaviour accordingly. We find that the participants gained new social experiences and skills very intensively. The experience of working in a group has enriched them, especially cooperation, i.e., working with others to achieve set goals. Preparation of fire, bivouacs and food connects the group; cooperation is necessary, as well as helping each other. Thus, the individual was able to learn a lot from the group itself and from other participants. The group became more important than the individual. Each day, individuals within the group became more connected, more supportive of and caring towards each other.

The group was formed on the first day, and over the following days, various roles were established in the group. In the end with a few individual exceptions, the groups were very coordinated and worked supportively, collaboratively. Everyone had to meet their boundaries and limits and overcome them, which was good for the group. Thus, for example, the participants at one camp spontaneously suggested that, given that there were two foreigners in the group who did not understand Slovene, all the communication during the camp should be in English. They felt that the foreigners were not on an equal basis with the other participants. In today's society, there is not enough cooperation, care for others; there is too much individuality and competition, which was revealed in the camps. The adolescents learned how important group spirit is, how much good a harmonious group can do, and how much harm a person dividing the group can do. We notice that those young people who were socially slightly weaker had difficulty integrating into the group and working with others at the beginning of the camp. The hardest part is the first day, when they start adjusting to the new reality.

From what we have heard, we believe that the first day is the greatest shock for the individuals, as they must do things they had never done before in their life, prepare and eat food from nature, not sleep in a warm bed but under the open sky and go without a telephone. It turned out that most participants were quite spoiled about food; most of them fantasized about pizza, burgers, steak, chocolate, etc. These delicacies cannot be found in nature, and some young people found this difficult to accept. Nevertheless, we believe that the attitude towards food among some young people changed at least a little, which is among the goals of the camp. Just thinking that food is not as self-evident as it seems to us within the embrace of a safe home is a big step in changing an individual's thinking. In civilization, everything is very self-evident, normal, but in the middle of the wilderness, other things are more important. Especially the first day and night, which presented a shock for the individual, as the instructors took away everything the participants did not need, there were new people, nature, a different authority, etc. In fact, all were on the same page; no one had more than others, which would give them an advantage. Also, the fact that there was no clock was a kind of ordeal, since they had to become more immersed in nature, observe the position of the sun and follow it.

At a certain period of time during the camp, each participant had the task of leading the entire group. Thus, some adolescents led a group for the first time in their lives. We believe that it is definitely a welcome experience for any individual to have the opportunity to lead and to be led. At the evening evaluations, we gave the individuals feedback on how we saw their leadership of the group. We believe that adolescents need a lot of positive and negative experiences and consequently, adequate feedback. Given their reflections and despite the fact that the leadership experience was difficult for some, we believe that it is necessary to enable individuals to have this experience at the camp. Quality group leadership is certainly an important social skill to which we pay too little attention. Leadership also shows how much and in what way an individual is able to communicate well with the group and identify and resolve conflicts appropriately.

The participants' answers also denote that the implementation of the camps was of high quality. The instructors were very well prepared and were extremely professional throughout the duration of the camp. Adolescents believe that they have been given a great amount of useful knowledge, and some will forever remember their saying: "The sooner it is, the sooner it's sooner for everyone!"

For many, their way of working was too different from the usual, namely authoritarian, which in situations where it is necessary to act quickly, can be the most appropriate. Their framework was clear and logical; from easier, to more difficult, from individual to the group. They required the individual to be focused, flexible and self-disciplined, which was certainly not an easy task for adolescents. Immediate feedback after completing a task or skill was also important. Preparation for the camp, which included a presentation of the camp to potential participants proved to be of key importance for effective implementation of the survival camp. The entire camp project was performed in a safe and confidential environment.

Conclusions

For the development of a young person seeking his/her own identity, a way to him/herself, formal education in today's confused moment of society is not by itself enough. The knowledge acquired in schools alone is insufficient for life success.

In Finland, the main goal of the school system is to serve as an instrument for achieving equality in society.

In schools, there is insufficient encouragement for the development of the adolescent's personality, which would be tied to his or her uniqueness and diversity and would equip the adolescent with skills to help him/her cope with the demands of the environment. Informal methods such as social skills training definitely make this possible. Social skills training can be an applied method for socialization of an individual, where participation of the individual means active action and cooperation, as well as co-responsibility in the process of one's own development (Marovič, 2017).

Social skills training has proven to be an extremely welcome and useful method in working with adolescents with behavioural and emotional difficulties. It helps young people to develop social skills. As an upgrade to social skills training, we started conducting survival camps in nature. We wanted young people to discover their limits, broaden their experience, take risks, face their fears, accept challenges and at the same time, experience success, exercise, gain self-confidence, as well as learn to take responsibility, put off their desires and ideas and persevere in difficult situations. We wanted to push them beyond their comfort zone, since extreme situations force people to get to know themselves and others.

We tried to encourage young people to participate as actively as possible in all the activities at the camps and to have as many positive experiences as possible.

Solving problems and challenges within the group and the possibility to choose are also part of learning social skills. However, we wonder whether and to what extent there is individual autonomy and freedom for group members?

Although all participants think the camp was useful for them, we ask ourselves if this is actually the case. What exactly is the connection between experience in nature and real life? Whether these experiences are permanent or only last during the camp cannot be determined.

Neither can we determine whether the skills acquired have had a positive impact on the functioning of adolescents in their lives. A few participants mentioned that when they found themselves in challenging situations after the camp, they remembered how difficult it was for them at the camp, how they overcame the unpleasant situation or effort and said to themselves, "If I could do it then, I can do it now!" We believe that overcoming unpleasant situations was a goal successfully achieved at the camps. Through various activities, individuals got to know themselves better and were able to push their limits.

Schröder and Kettiger (2001) presume that demonstrable processes of introducing change usually take much longer in practice than originally envisaged and planned, so that it is often not possible to construct a closed chain of action between the changed and the changing practices and between the desired or the achieved effects. This is mainly due to the delay in the effect of the changed foundation of the practice in question and its effects, which are estimated to show after four to five years.

Strong stimuli indisputably remain with us for a long time. For experiential pedagogy, however, it is essential that we retain what we have learned not only as "the property of memory" during the project, but also as material for later active use, in everyday life. Participants must therefore learn to transfer the result, translate it, use it under different conditions and in disparate situations (Krajnčan, 2007). Thus, we think it sensible to check the effects of the camps on an individual for one year or even longer after completion of the camp, which we have never done before. Consequently, we can only predict whether, for example, an individual's longer presence (14 days, one month or more) at the camp would have a stronger influence on the development of his/her social skills and consequently on a change in behaviour/performance. We assume that a longer stay would have a positive effect on the possible activation of the adolescent's potential.

It is difficult for an individual to make major changes in 3-4 days. We also think that at the camp itself, individuals could be left more alone with themselves, their thoughts, problems, fears, and boredom, alone with nature. With some individuals, breakthroughs were certainly visible at the individual level. Bogdan Zupančič and Krajnčan believe that: "Given that modern findings emphasize the importance of an emotionally receptive climate and personal relationships on the appropriate development of children and adolescents in various areas, we cannot take the relational and broader socio-emotional competence for granted or as something that just comes with education" (Bogdan Zupančič and Krajnčan, 2019, p. 67).

In view of the above findings and the opinions of the camp participants based on high average evaluation, we estimate that we have achieved the set goals and successfully performed individual camps. Almost all participants felt that the camps benefited them. Relatively low average evaluation occurred for features specific to the selected population, therefore not causing too much worry, but it would be reasonable to consider what other content could be included in order to maintain and develop the features that received lower evaluation scores, such as putting off their desires and ideas, solving problems, taking responsibility, being afraid and encouraging others.

In addition, we feel that more attention should be paid to improving perseverance and self-initiative in individuals. We especially tried to develop perseverance in lighting fires, hiking, orientation and treasure hunting.

We are aware that it would be methodologically more appropriate to daily measure the added value in various areas of developing social skills and competences at the survival camp, but this is extremely difficult, owing to the nature of the project, which takes place in the wilderness 24 hours a day. We would need an additional collaborator at the camp to focus only on this area.

We believe that the most reservations and opportunities for improvement in and progress of the project itself lie in the field of monitoring and evaluation of the project. Through evaluation, we could better determine the truly positive effects of the camp on the individual and the group. The evaluation and its tools should be developed into an appropriate methodology, since observation of individuals and groups in real time constitutes the true added value and calls for the use of an appropriate methodology, such as ethnographic research, for example. As well, individuals who prematurely left the camp should also be asked for their opinion on the survival camp.

The experience of spending time in nature, without the objects that often seem so self-evident to us, brings us closer to ourselves and others and offers many positive examples for the development of personal qualities. Survival camps represent a close connection to reality. We feel that in a comfortable society where adolescents are not well versed in taking care of themselves, the approach of having to take care of oneself in connection with participation truly works and is successful. At the camp, young people began to appreciate what they had done themselves and what they had. In our opinion it is thus very beneficial for young people to gather food and prepare their own meals, even their own accommodation.

The project of survival camps in nature can be an example of good practice for working with behaviourally and emotionally difficult adolescents. Survival camps are no longer a novelty in Slovenia, but they can be one of the novelties in the renovation of the entire system for working with adolescents with behavioural and emotional difficulties or disorders. Perhaps, similar survival camps could be experimentally performed with prison inmates, with the aim of training for life and increasing their competences upon release, as well as reducing the risk of recidivism (Mrhar Prelić, 2019).

The aim of this project is to become sustainable, comparable to similar projects in countries around the world, which would include both "problematic" adolescents and the population of ordinary adolescents from all over Slovenia and abroad. We will definitely try to extend each camp to a longer time frame, to offer even more content and experiences. By changing the environment and a different (unconventional) approach, we will try to influence positive changes in adolescent behavioural patterns. Adolescents should be encouraged to create a responsible life for themselves. For some of them, today's rapid changes in adolescents and their problems require more radical and decisive forms of help. However, the question is whether survival camps can be intended for young people on the entire continuum of help, from the easiest to the most difficult cases.

Survival camps in nature are definitely a retreat from the crazy forces of globalization and a return to the nature, to genuine/primordial human relationships, framed primarily by nature. Intensive, socially isolated projects with attractive content and locations, as well as trained professional companions should be implemented in the education system. Such intensive programs would be very welcome for children and adolescents who find it difficult to cope with institutional rules (Krajnčan, 2017).

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RE

CRISIS SITUATIONS AMONG CHILDREN/ADOLESCENTS WITH EMOTIONAL AND BEHAVIOURAL DISORDERS IN EDUCATION

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Abstract/Izvleček Employees in education, especially in residential treatment centres, face crisis situations as a result of emotional and behavioural problems/disorders of children and adolescents. They most often face various types of violence, self-aggression, use of illicit substances and abuse. Cases of children and adolescents with mental health problems are frequent. Crisis interventions differ with the complexity of the situation, and regardless of the approach, an appropriate relationship is crucial to any solution. The purpose of this article is to present and elaborate the most common crisis situations and some successful interventions in such cases. **Krizne situacije otrok/mladostnikov s čustvenimi in vedenjskimi motnjami v vzgoji in izobraževanju** Zaposleni v vzgoji in izobraževanju, zlasti v vzgojnih zavodih se srečujejo s kriznimi situacijami, ki so posledica čustvenih in vedenjskih težav/motenj otrok/mladostnikov.. Najpogosteje se spopadajo z različnimi vrstami nasilja, avtoagresijo, uporabo prepovedanih substanc ter zlorabami. Pogosti so tudi primeri otrok/mladostnikov, ki jim lahko pripisujemo težave v duševnem zdravju. Krizne intervencije se razlikujejo od zahtevnosti situacije, ne glede na pristop pa je za vsa kakršno reševanje ključnega pomena odnos. Namen prispevka je prikazati in elaborirati najpogostejše krizne situacije ter nekatere uspešne intervencije za tovrstne primere.

Introduction

Residential treatment centres are intended for educational, social, emotional and thus, comprehensive compensation for and correction of what children did not receive in their earlier development, and which represents deviations from the expected (Krajnčan, 2003). It is an extremely sensitive field of work where both emotional and rational categories meet. The result means frequent crisis situations faced by educators in residential treatment centres. The crisis situation or the process in which a crisis forms must be understood as a psychological burden that significantly deviates from the normal state. The state of mental stress is perceived as difficult to accept and often leads to emotional destabilization. We also speak of a crisis when "changed situations require solutions that cannot be managed with previously available or obvious options for solving problems" (Droos, 2001). As a result, the burdens of children/adolescents that they carry often escalate. In addition, educators in residential treatment centres often encounter children/adolescents who mostly have mental health problems. The scale of the problem is of great concern, especially owing to the difficulty of accessing outpatient psychiatric services. Moreover, inappropriate treatment may strengthen or trigger mental disorders even more, which can represent failure during the stay in the residential treatment centre; thus, it is necessary to determine what types of treatment models are used in the institution's practice when working with individual disorders (Zalokar, 2013). In crisis situations, professionals or educators must be able to intervene and deal with such situations effectively. Given all the above, the following text will review the most common crisis situations faced by educators in residential treatment centres and, as a result, review the concept of crisis intervention. In connection with the above, we will explore the techniques that can be used in certain crisis situations. Techniques mainly mean the tools that can be used if a child/adolescent poses a danger to him/herself or others. We know various intervention methods that can be used in crisis situations. From the general model of approach in crisis interventions, we focused on individual approaches, which according to information from practitioners and statements in the literature are used with the most common and most difficult cases, that is from various forms of self-aggression (suicide attempts, self-injury), physical and psychological violence, the use of illicit substances and subsequent conditions, to abuse and mental health problems. Through comparative analysis of various studies, we will explore the following issues: What types of crises exist? How can we help children/adolescents in difficult situations?

How can we learn crisis intervention? And finally, how to help the educator in such situations, how to empower him/her to act appropriately? Upon raising such questions, we shall try to summarize insights into the treatment of children/adolescents in psychosocial crises and explain the crisis intervention measures.

Method

The article includes an analysis of definitions and existing research related to the issue of crisis intervention at home and abroad. We used the descriptive and comparative method, with the help of which we reflected on and evaluated the existing literature and transferred it to the field of crisis situations and crisis intervention.

Results and discussion

Children/adolescents in residential treatment centres often face crisis situations. In addition to the circumstances at home and emotional and/or behavioural problems/disorders, these are also caused by the new circumstances in which they must find and prove themselves. Kobolt (2011) says that emotional and behavioural disorders manifest as passive/withdrawn behaviour or as aggressive/impulsive behaviour. Since Kobolt uses the term problems, she adds that these must occur over a long period of time or be the result of severe losses which occur suddenly or of pressures which are usually not permanent. She also defines these children as children with dissocial behaviour that is intense, repetitive, and permanent. In addition, problems manifest themselves as problems in social integration, which is mostly unsuccessful. Skalar (2003, p. 9) cites them as "children whose behaviour endangers themselves, their life and health, their personal and social integrity, and children whose behaviour is threatening to the social environment because it is directed against the rules, worth and values, and against applicable moral norms and laws". To better understand how to react in children/adolescents' crisis situations, we first focused on what a crisis or crisis situation is.

A crisis is a loss of mental balance which a person feels when dealing with events and living conditions with which he or she is currently unable to cope, owing to the nature and extent of his or her skills gained from previous experience and proven tools for achieving important life goals or for coping with their life situation (Cullberg, 1978, Sonneck 2000).

"A crisis emerges at the moment when an individual's usual problem-management mechanisms are not appropriate or are insufficient and the person cannot solve the problem which is very important to him/her. At that moment the person becomes confused, does not take appropriate action and the crisis is not resolved, but it deepens" (Tekavčič-Grad, 1994, p. 1). Droos (2001) describes a crisis situation or the process in which a crisis is formed as a psychological burden that significantly deviates from the normal state. The state of mental stress is perceived as difficult to accept and often leads to emotional destabilization. We also talk about a crisis when "a changed situation requires solutions that cannot be managed with the presently available or obvious possibilities for solving problems." The crisis is thus expressed differently depending on the individual, while all the definitions have in common that if an individual, at a given moment cannot solve the stressful situation with normal life mechanisms or experiences, the situation escalates. Based on the reviewed literature (Krajnčan, 2003, Marovič, 2018, Skalar 2003, Kobolt, 2011, Zalokar, 2013, Šoln Vrbinc, Jakič Brezočnik, Švalj, 2016, Myschker, 2009), we classified the most common escalations or crisis situations faced by professionals in residential treatment centres into:

- externally-directed aggression and violence,
- self-aggression,
- use of prohibited substances,
- abuse and
- mental disorders or mental health problems.

Crisis situations

Aggression is a behavioural trait that manifests primarily in violent, domineering acts against others. It is any form of behaviour intended to harm or injure another living being who wishes to avoid such behaviour. The author also states that aggression is learnt (Pačnik, 1998). Mrevlje (1995) adds that aggression is not accidental, but targeted and intentional. Brekoviwitz (1993) distinguishes between the following forms of aggression:

- verbal aggression (insults, remarks, jokes, etc.),
- indirect aggression (intrigue),
- aggression directed outwards (towards others),
- self-directed aggression (suicide, alcoholism, self-loathing, etc.),

- instrumental aggression (serves to achieve a goal, aggression is merely the means),
- - hostile aggression (injuring or killing someone),
- active aggression (actively doing something to the detriment of another),
- passive aggression (by not doing something the person causes harm to another),
- consciously controlled (planning a robbery), and
- impulsive aggression (impulsive violent reaction to a stimulus).

Externally-directed aggression and violence are the type of aggression directed outwards, typical of which are impulsive reactions, characterized by anger attacks and rage, which can lead to a state of reduced conscious thinking. This type of aggression can be directed at other people or at objects. In the case of aggression against other people, it is a matter of physical or verbal attacks, while in the case of aggression directed at objects, it is mainly the destruction of material goods, throwing objects, etc. (Hrastar, Bužan, Mrže, Hitejc, 1988). From the sociological psychological aspect, aggression can be defined as a social problem in the interaction between two individuals or groups and depends on the individual's characteristics and the situation or circumstances where the behaviour takes place. Aggression is behaviour done with the intent to cause harm or pain to a living being that seeks to avoid such an act (Krahé, 2013).

In addition to aggressive outbreaks, which mostly occur among peers or in relation to educators, residential treatment centres also face self-aggression, which is more difficult to identify.

Self-aggression is behaviour that forces an individual into relationships in which they feel depreciated and/or experience rejection or loss (Tomori, 1988). A self-aggressive act is an individual's message to society, from which we can discern despair, rebellion, contempt, and other feelings (Šajn, 1995 in Matiš, 2018). Self-aggressive behaviour is most clearly and recognizably shown through coefficients of suicide and suicide attempts, which nowadays represent a global problem (Mrevlje, 1995, p. 6). Self-aggression may actualize in the physical realm, where pain predominates, and aggression is directed at individual parts of the body, occurring as self-harm or suicide, as well as in the psychological field, where the emphasis is on suffering (Milosavljevič, Milenkovič, 1988).

Miličinski (1989) divides different forms of self-aggression more specifically into:

- Indirect self-destructive behaviour (abandoning treatment for serious illnesses, gambling, risky sports, psychosomatic diseases, prostitution, driving under the

- influence, excessively risky self-sacrificing behaviour, and abuse of alcohol or illegal drugs) (Mrevlje, 1995).
- Suicidal thinking (personal suicidal thoughts, thinking about what one could do to him/herself and how (Gaber, 2011).
- Suicidal tendencies (acts against oneself, although it is a behaviour that is not direct and has not yet resulted in a suicidal act. Alcohol abuse is often an example of such tendencies (Mrevlje, 1995).
- Parasuicidal pause (the escape of an individual from an unbearable condition. Such intentions seem like a suicide attempt, but the individual does not perceive it as such (e.g., self-poisoning with medicinal substances) (Gaber, 2011).
- Suicide threats (the individual informs the surroundings of his/her self-aggressive intentions, but has not done anything yet (Mrevlje, 1995).
- Intentional self-harm (the individual intentionally injures parts of the body in a way that is not socially acceptable, but has no suicidal intent (Thanks, 2012).
- Parasuicidal gesture (self-poisoning with drugs) (Mrevlje, 1995).
- Attempted suicide (self-harm, ingestion of large amounts of chemicals, self-poisoning, which the affected individual began and performed with the intention to harm as well as to draw attention (Mrevlje, 1995).

There is a thin line between self-aggression and mental health problems. Therefore, it is difficult to find a dividing line to distinguish one from the other. Professional staff in residential treatment centres perceive that many children/adolescents show various signs and symptoms of mental disorders or illness. Upon examination by specialists (psychiatrists or clinical psychologists), many find that they need regular treatment for mental disorders that have been detected, or it is revealed that mental disorders had existed for a long time previously and had not been identified and treated. In some cases, hospitalization is urgently needed (Zalokar, 2013). In a 2012 survey, Zalokar (2013) found that 41.95% of children and adolescents enrolled in residential treatment centres have mental health problems. The study identified a wide range of disorders, from behavioural and emotional disorders to bipolar disorder, anxiety, depression, ADHD, hyperkinetic disorders, and obsessive-compulsive disorders.

We decided to list some disorders so as to provide insight into the varied spectrum of disorders or problems faced by educators in residential treatment centres and thus to highlight the issue of mixed disorders. In addition, we sought point out the

problem of employee qualifications for dealing with children/adolescents with mental health problems.

Only Residential and Counselling Centre Planina has the authority to accept children/adolescents with mild to moderate mental problems/disorders (VIZ Planina, 2020), while other residential treatment centres have no authorisation and are therefore not competent in these cases. Nevertheless, children/adolescents with defined problems/disorders are placed all over Slovenia.

Marovič (2018) also points this out, noting that most problems arise from a misalignment between the child/adolescent's disorder and the limited, socio-pedagogical approach of a residential treatment centre, which then finds itself unable to cope with such a child/adolescent. She adds that:

Problems mainly arise when we find that the child/adolescent has exceeded the scope of the residential treatment centre which with its socio-pedagogical approaches - due to a combination of various factors (individual's non-cooperation; various forms of aggression, violence against oneself and/or others; consumption of illicit substances; the institutional environment is more threatening than his/her home environment, etc.) - can no longer help him/her (Marovič, 2018, p. 136).

When children/adolescents are being placed in a residential treatment centre, they experience distress because this is an extremely invasive measure that withdraws an individual from his/her own environment and places him/her in a new environment among unknown people. This would cause stress even in people without problems or disorders. Dežman (2015) says that in such cases, adolescents are particularly likely to resort to drugs or alcohol more quickly, since these offer a kind of withdrawal from their new situation, and especially emphasizes that those who increase their drug use upon coming to the institution and thus get closer to becoming addicted are dangerous. Dežman (2018) adds that there is no data on adolescents starting to use illicit substances consequent to their arrival at a residential treatment centre, while Mashowuer (2015, in Antoničič, 2019) states the opposite, namely that many young people start using directly on arrival at a residential treatment centre.

In addition to the crisis situations we have already mentioned, we also focused on abuse, which must not be overlooked, and which resonates in residential treatment centres, although this topic often remains undiscussed.

By the term abuse we mainly indicate sexual abuse (other types of abuse were included in the chapter on violence) which may occur to a child/adolescent during the time of his/her placement in a residential treatment centre, regardless of whether it is committed by peers, a family member or someone else during the course of placement.

Bašič (1997, p. 142) defines sexual abuse of a child/adolescent as "participation of dependent children and minors in sexual activities with an adult or a person older or bigger than them, in which the child or adolescent is abused as a sexual object for satisfying the sexual needs or desires of a person older than him/her and in which he/she does not have the opportunity to choose whether to consent to sexual activity or not, due to unequal powers in the relationship between him/her and another person." N. Končnik Goršič (1995, p. 174) says that "we speak of sexual abuse when an adult, to satisfy his or her own sexual needs, exploits a child who is neither emotionally nor rationally mature enough to understand and oppose the act."

Frei (1996, in Cerkovnik Hvala, M. 2008) states that sexual abuse is when an adult intentionally uses a child to sexually arouse him/herself and/or to satisfy his/her own sexual desire. It often happens that the child/adolescent trusts or even depends on this adult. In addition, the adult is always in a stronger position in relation to the child. Thus, it is difficult for a child to freely decide on the actions required of him/her by the adult. He/she also cannot consciously participate in the said acts. When the child/adolescent agrees to participate under these conditions, it is impossible to overlook the damage this represents for the child's further development.

Moreover, Repič (2006) emphasizes that, in addition to the above, any involuntary contact with an older person can be classified as sexual abuse. When sexual abuse occurs, it is necessary to be aware that in such situations, the child needs safety the most. In addition to safety, it is necessary to provide him/her with shelter, a sense of acceptance and respect for his needs (Zaviršek and Lamovec, 1994). Zaviršek and Lamovec (2004) adds that the first step is most important; this refers to the moment when a third person becomes aware of the abuse. This person must believe the finding and be ready to help the child, express empathy for the child's pain and begin taking steps to prevent any further abuse.

Professionals employed in a residential treatment centre are expected to acquire competences with which they would be able to work in the environment specified during their studies.

However, we are aware that it is difficult to be prepared for the institutional environment and that competence is acquired through experience. Therefore, we tried to answer the question of what crisis interventions really are and which should be used in certain crisis situations to prevent or mitigate individual damage.

Crisis interventions

The help following a crisis or distress is called crisis intervention, intervention in crisis, or help or aid in distress (Tekavčič-Grad, 1994). The basic goal of crisis intervention should be the return of the individual to (at least) the level of daily functioning that was characteristic of the individual before the crisis (Ucman, 2018). "Crisis intervention is an independent method of counselling, therapy and treatment [...]" (Stein 2009, p. 151). It must be adapted to the individual and his/her specific situation. (Collins, Collins, 2005). The professional must assess the impact of the crisis on the behaviour, cognition, development and ecosystem of the child/adolescent. Once the professional establishes this kind of understanding of the user in crisis, he/she can decide which short-term or long-term approach he/she will take. Since the well-being of the child and the prevention of his or her vulnerability come first and are the most important, workers in residential treatment centres usually have very limited time to react. Regardless of the time options given to them, the goals of an individual intervention are certainly the following (Collins, Collins, 2005):

- to ensure the safety of the child/adolescent,
- to restore current emotional balance (if possible, of course),
- to manage the crisis in the short term and connect the client with appropriate resources.

In addition, Stein (2009) sets out some general principles of crisis intervention, which are as follows:

- quick start,
- ancillary activity,
- flexibility of methods,
- focus on the current situation/event,
- integration of and into the environment,
- relief and cooperation.

In a crisis situation, the professional should act in the following six steps. Collins and Collins (2005) state that it is necessary to approach the child or adolescent in a supportive and empathetic manner, by intervening in a way that creates safety, stabilizes the situation and prevents aggravation and, if possible, meets the individual's present needs. In addition, explore and evaluate the scale of crisis responses, explore alternatives and develop different options.

At the same time, help the child/adolescent activate his/her personal and social capital and, if necessary, connect with the environment. In the 6th and final step, anticipate further developments and possible actions.

We have listed some basic assumptions that apply to general and broader crisis interventions. However, we also focused on the specific ones, which differ according to the type of crisis situation. We emphasize that the choice of method or crisis intervention depends on the child/adolescent we work with and one of the essential competences is certainly the empathy of the professional worker, with which he/she establishes an important relationship, which is essential for any further work in the residential treatment centre.

Additionally, we believe that the trust established between the educator and the child/adolescent is of key importance. Only in this case can we test further methods, which without trust, would be unlikely to produce results.

As has been established above, the educators in residential treatment centres often face the consequences of adolescent drug abuse. Professionals (Krajnčan and Šoln Vrbinc, 2015, Zalokar, 2013, Dežman, 2005, Dežman, 2008, etc.) are critical of the topic of drugs in residential treatment centres, as they all point out professional incompetence among staff and residential treatment centres as the very impetus for such cases. Thus, everyone cites as a "measure" only the prevention of use and raising awareness of young people about the harmful effects of drugs, therefore working on prevention, but there is no sign of any crisis intervention to be deployed in case of use, if we exclude communal treatment. Dežman (2008) even cites ways for residential treatment centres to deal with users of psychoactive substances who oppose treatment. Such a user should continue to live in the residential treatment centre, but does not receive appropriate treatment, since residential treatment centres do not have programs for users, which they do not accept at the declarative level.

Additionally, an adolescent who is addicted to drugs and refuses treatment can be transferred to a home or, as a juvenile, be returned to his or her home environment. At this point, we wondered whether the strategies mentioned could even be called "strategies". We believe that they are oriented towards repression and fail to offer the individual enough help in the area where he/she would obviously need it. Although residential treatment centres are not responsible for working with young people addicted to drugs, it is necessary that they find a range of strategies and offer help within their capabilities.

Nevertheless, we emphasize that the educator has too much responsibility, having to seek ways to constructively help the individual on his/her own.

Regarding aggressive behaviour and violence, which can also occur as a result of drug abuse, Mlinarič (2000) emphasizes that educators must provide children who show aggressive behaviour with positive experiences among peers, an environment in which the individual will not feel threatened. They should try to enable a sense of acceptance in the group and discover activities in which the child or adolescent can assert him/herself. In addition, they should offer the individual an open conversation about his/her reactions and offer various options for resolving conflicts. However, it is also necessary to allow the individual to experience responsibility for his/her actions.

In cases of self-aggression and related self-harm behaviour, an interdisciplinary approach, anticipating cooperation of the residential treatment centres, social services, health services and the young person's family, is crucial for successful treatment of children/adolescents with such problems. All the agents should regularly inform each other about the child's/adolescent's condition, especially when new episodes appear, and the level of suicide risk changes (Kvas Kučič, Krajnik and Konec Juričič, 2012; Self-harm in over 8s: long-term management, 2011). For problems of self-aggression, we focused on techniques which the educators can teach the children/adolescents prone to self-harm, thus preventing greater harm, but still offering some satisfaction to the individuals. Galonar Vodopivec (2006, p. 293) presents techniques that are useful at the very moment when an individual feels consumed by the need for self-harm. These can also be called minimization techniques or alternative ways of coping with distress. These techniques replace invasive methods of self-harm with methods that are less harmful:

- relaxation techniques
- physical activity,
- slow, calming activities.

In addition, it is necessary to reduce the individual's risk factors that we have the power to influence, and surely to strengthen the protective factors and improve the quality of life of the child/adolescent with these problems. It is also recommended to record a journal of triggers (Self-harm in over 8s: long-term management, 2011). As an aid, distraction methods (one of the minimization techniques) are also mentioned, which distract the person from damaging their skin. Distractions without serious consequences include the following: drawing on the skin with a red marker, snapping the rubber band on the wrist, sticking patches on the places which the person wants to injure, temporary tattoos or applying henna and removing the applied, squeezing (red coloured) ice cubes, rubbing the ice cubes on the parts of the body which the person wants to injure, applying food colouring diluted with warm water to the body, chewing leather, using make-up to draw injuries on the hand, creating an artificial layer of skin by applying skin colour plasticine, which can serve as a basis for careful cuts that do not reach the skin (artificial blood can be used for additional effect), hot shower and rough peeling, drawing on old scars, biting chilli peppers, rubbing the skin with a toothbrush, holding a bottle filled with hot water, etc. (Distractions that can help…, 2007, p. 1)

However, when self-injurious behaviour occurs, Mlinarič (2000 in Matiš, 2018) states that medical care or even hospitalization is required in the event of serious injuries. In addition, it is necessary to seek the help of appropriate professionals (psychiatrist, psychologist), while identifying the causes of such actions and trying to eliminate them.

We believe that educators in residential treatment centres who face this type of problem should be well-aware of and educated on how to act in situations where self-harm occurs. They should know when an emergency call is necessary and how to act before the emergency medical help arrives. In such cases, educators should not be left on their own to learn and educate themselves on this topic, as education on this topic should be mandatory and funded by the employers. In addition, they should have clear instructions on how to proceed in such cases, as well as be legally protected if such situations do occur and they do the best that is in their power.

It should be emphasized that appropriate professionals should be available to the population mentioned at all times or somewhere in their vicinity, to offer help as soon as possible. They know from practice that this is, unfortunately, not the case. The waiting periods for paediatric psychiatrists are long, and most residential treatment centres operate in such a way that several children visit a paediatric psychiatrist at once, and not during individual escalations, if we exclude cases involving hospitalization.

As already mentioned, the boundaries between mental health, mental health problems and mental health disorders in this issue blur quickly. Recently, there more and more children/adolescents have been placed in residential treatment centres while suffering from these problems/disorders.

Although children/adolescents with such problems are placed in residential treatment centres throughout Slovenia, only Residential and Counselling Centre Planina has the authority to accept such cases. However, in the given situation, a professional cannot rely on jurisdiction and is forced to do something for this population and try to achieve improvements and results. The STEPPS Program has also proven to be a successful method for working with children/adolescents with mental health problems/disorders. The STEPPS program incorporates the principles of systemic therapy (Liebman, Minuchin, Baker, 1974), according to which maladaptive behaviours are maintained by an individual's systems made up of family members, friends, the school environment, health care staff, and others. When changing inappropriate behaviours, it is therefore necessary to also change the response of the systems to these behaviours. For this purpose, important others from different systems are included in the reinforcement groups, which encourage and reward the newly learned behavioural patterns (integrated systemic and cognitive-behavioural component) (Black et al., 2004). However, when we talk about insensitive, apathetic traits, research results testify to the effectiveness of functional family therapy. Comprehensive and individualized treatment at a mental health centre resulted in a reduction in behavioural disorders and lower re-arrest rates. Caldwell et al. (61) reported that adolescents with severe problems/disorders showed improvement in a safe facility for serious offenders, by using the intensive treatment program which utilized reward-oriented approaches, was focused on the adolescent's personal interests and taught empathy skills.

More specifically, the reports show that adolescent offenders receiving intensive treatment were less prone to relapse during the 2-year follow-up period, compared to offenders treated under the standard treatment program at the same correctional facility (Zalokar, 2013).

Nevertheless, we must remain aware that this therapy can only be performed by those who are qualified for it and again, to call on to greater opportunities for additional education of employees.

Abuse may also lead to mental health problems. How do we deal with such cases? It is difficult for children to talk about abuse, especially sexual abuse, which is often a taboo topic. Our response to the child's story or revelation is extremely important. In particular, the reaction we offer to the child telling the story determines whether he/she will continue with the story or not. It is emphasized that the child should not be questioned but left to talk freely. It does not matter whether we obtain all the details from the first narrative, since it is necessary that we respond clearly, with focus and let the child tell us as much as he/she can in a given situation

In addition, it is recommended that we keep repeating to the child that we believe him/her and will protect him, praise him/her for telling his/her story, empower him/her that he or she is not guilty for what happened, and emphasize that we will try to do everything in our power to ensure that such events never happen again. A sexually abused child loses the sense of safety that is absolutely necessary for his/her development, so it is necessary to help re-establish that feeling. How can we try to achieve this? We can mainly experiment with pre-determined rituals, and with a certain routine, ensure that the child knows what to expect. For example, we can always use the same ritual before going to bed, having dinner together, or reading a fairy tale. It is necessary to consistently adhere to agreements and not to promise something that cannot be fulfilled, and in doing so, make it clear to the child we are at his/her disposal when he/she wants or needs it. It is necessary to offer additional attention, while not being too intrusive. Moreover, we should not pretend that the event did not occur, minimize it, or remain silent about it, as this can only further traumatize the child (Society for Nonviolent Communication, 2016). In view of this, it is necessary to record all the observations in connection with the said event as accurately as possible, since the data collected may be extremely important for further consideration. In making notes, it is necessary to record the facts exactly as stated by the child and not by one's own interpretation or generalization.

Since we must follow the principle of ensuring the safety and well-being of the child, the perceived abuse must immediately be reported to the competent institutions (regardless of whether the abuse occurred within the residential treatment centre, or a suspicion of abuse in the home environment was detected). Anyone who suspects abuse is obliged to report such a suspicion. Thus, the competent social work centre or the police (working group for non-violence in nursing, Slovene: *Delovna skupina za nenasilje v zdravstveni negi*) must be notified within 24 hours.

Upon performing all official duties in connection with the report and upon ensuring the basic safety of the child, the real hard work begins, concerning the "healing of wounds" and the empowerment of the child.

Despite the specifics of sexual abuse, the same psychotherapeutic techniques are used to treat such abuse as for other psychological traumas. In the aftermath of sexual abuse, psychotherapy is thus usually used in three stages. The first phase ensures safety, which includes creating a safe environment, including the feeling of being accepted by the environment with the people who are important for the child. In doing so, it is necessary to identify the problem of which the child should try to be aware.

The second phase deals with remembering and mourning, which is done through reconstruction of the story, mourning the trauma, and processing traumatic feelings. In the third phase, the emphasis is on integration into normal life in terms of building relationships and creating the future (Kristberg, 1995; Uranjek, 2001; in Rojšek, 2002). Regardless of the methods used to deal with the traumatic consequences of sexual abuse, we would like to highlight that the key to any success is the relationship, which represents the foundation for further treatment of the individual.

Conclusion

Residential treatment centres accept children and adolescents with emotional and behavioural problems/disorders; the parents of these children may feel educationally helpless or may have a home environment that is so threatening that the child/adolescent is placed in a residential treatment centre. Children/adolescents from the age of 6 until the age of 17 are placed in residential treatment centres. Those centres, which are intended for minors, accept adolescents between the ages of 14-18, with the possibility to extend their stay until the age of 21 (Skalar, 1995; in Šoln Vrbinc, Jakič Brezočnik, Švalj, 2016).

In the institutions, where all the threads of life exist in one place, the child/adolescent often encounters crisis situations, which are made even more demanding because of their pre-existing emotional and behavioural problems/disorders.

A crisis, which can be understood as a moment in which an individual's established mechanisms fail and the person cannot solve the problem as he or she would like (Tekavčič-Grad, 1994), is experienced daily by children/adolescents placed in residential treatment centres. Everyone experiences crisis differently, and while some may experience a situation as an everyday event, others experience the same situation as very stressful. Therefore, it is the educator's duty to assess with empathy whether or when an individual experiences a situation as a crisis, even in cases when it is not expressed alarmingly. According to professionals (Krajnčan, 2003, Marovič, 2018, Skalar 2003, Kobolt, 2011, Zalokar, 2013, Šoln Vrbinc, Jakič Brezočnik, Švalj, 2016, Myschker, 2009), the most common crisis situations that require intervention are the following: externally-directed aggression and violence, self-aggression, use of illicit substances, abuse and mental disorders or mental health problems. The intensity of escalation is reflected differently. In identifying a correct reaction in these situations, we believe that the key is to establish a solid, high-quality relationship, which is also emphasized by Krajnčan and Bajželj (2008), and forms the starting point for any quality work with individuals, not only in residential treatment centres but also in general. However, when a crisis situation occurs, our reaction depends on the type of situation itself. Crisis intervention should have a basic goal: to pursue the individual's return at least to the level of normal life (Ucman, 2008). We emphasize that in pursuing this goal, it is first necessary to ensure the safety of the individual and other participants. The type of intervention depends on the individual and the situation, while regardless of the situation, we try to adhere to the six basic principles mentioned by Stein (2009): that it is necessary to intervene quickly, offer an ancillary activity, choose flexible methods, focus on the current situation, get involved in the environment and offer relief and cooperation at the same time. Speedy intervention also depends on a call for emergency medical assistance or to the police, especially in cases where the child's/adolescent's life is endangered, and time plays a key role. When a crisis situation involving violence occurs, such as outwardly directed aggression, which is most often expressed in anger attacks and rage and can be directed at people or objects (Hrastar, Bužan, Mrže, Hitejc, 1988), it is first necessary to prevent the attack and protect oneself, the perpetrator and the others involved.

The offenses must also be reported to the competent authorities. In doing so, it is useful to prepare and provide a sufficiently safe and stimulating living environment for those children/adolescents who are more prone to violent outbursts. As a positive thing, Mlinarič (2000) also points out good experience with peers and taking responsibility for one's own actions. This range of combined factors should encourage more effective intervention in the event of violent outbursts and, in addition, reduce the number of violent situations. We are aware that it is difficult to eradicate violence in residential treatment centres, but we can do a lot to reduce such situations and to resolve them when such escalations occur.

In crisis situations related to self-aggressive behaviour, which is most often expressed in the physical field, where aggression is directed at parts of the body, such as self-harm or suicide (Milosavljevič, Milenkovič, 1988), crisis intervention is crucial, since young lives may be at risk. Thus, in the case of self-harm or suicide attempts, we use minimization techniques that alternatively allow coping with distress and prevent more invasive attempts at self-harm.

Among these, Galonar Vodopivec (2006) classifies relaxation techniques, physical activities and slow activities which enable calming. In addition, distraction methods (Distractions that can help…, 2007) are highlighted, which prevent self-harm intentions or suicide attempts, whereby the individual is distracted by some other technique, for example a hot shower, snapping rubber bands instead of cutting him/herself, rough peeling, massaging with ice cubes, drawing on the skin, etc.

The goal of such methods is to prevent the serious damage that could be caused by self-harm. However, when physical injuries have already occurred, in the worst cases, medical care, emergency medical care, hospitalization are required, along with the identification and elimination of the causes of such actions. Here, it is important to know the child/adolescent well. Only then will we be able to determine whether self-injurious behaviour is merely a cry for help or attention seeking that does not signify a serious tendency towards self-harm, or whether self-injurious behaviour can be threatening. Nevertheless, we emphasize that any act of self-harm or suicide attempt must be taken extremely seriously, since a critical outcome can occur quickly.

In dealing with self-aggression, we quickly step into the field of mental health or mental health problems/disorders. In recent years, the latter have been common among the population placed in residential treatment centres. Zalokar (2013) cites a whole range of mental health problems.

In the survey performed in 2012, she found that as many as 41.95% of children/adolescents living in residential treatment centres needed special care because of these problems. Although only Residential and Counselling Centre Planina has the authority to care for children/adolescents with mental health problems, other residential treatment centres in Slovenia are also dealing with such individuals. The STEPPS Program is cited as a successful method for working with this population. The program contains elements of systems theory, in which unapproved behaviours are maintained by the systems in the individual's environment (family members, friends, school, etc.); therefore, in changing inappropriate behaviours, it is necessary to first change the systems' responses to these behaviours (Black et al., 2004). This means that it is necessary to work with the entire environment surrounding the individual with mental health problems and to change the negative responses of such systems into positive ones in order to achieve results. In addition to the STEPPS program, functional family therapy is also mentioned as very effective. It offers successful results, especially when working with children/adolescents with insensitive, apathetic traits.

In addition to these methods, it would be necessary to emphasize the need for good interdepartmental cooperation (especially cooperation between paediatric psychiatry and residential treatment centres), which means that different professions have to help each other and act for the benefit of the child/adolescent.

In everyday life, children and especially adolescents, encounter alcohol and illicit substances. From simple experimentation, which is most common during adolescence, however, they can quickly advance to addiction problems.

Thus, the institutional environment must also be concerned with the consumption of alcohol and illicit substances. There, consumption may increase as a consequence of stress, and lead to addiction. Unfortunately, there are no guidelines for how educators should act when a minor is under the influence of illicit substances. One possibility mentioned by Dežman (2008) involves the exclusion of the child/adolescent from the residential treatment centre, especially in cases when the child/adolescent refuses to attend treatment. Considering that measure, we critically state that help for individuals in such cases must not be denied, but it is necessary to establish cooperation with institutions working in the field of illicit substances. In addition, educators need to be educated in this area to be aware of the type of drug currently on the market, as well as its effects.

In addition, they need to be taught how to intervene appropriately when a child/adolescent is under the influence of illicit substances. At the same time, we emphasize once more the importance of trust between the individual and the educator. Only in this way can we do the most in this area and offer help most effectively.

Among the frequent crisis situations, we also mentioned abuse, where we focused primarily on sexual abuse. We speak of sexual abuse when an adult uses a child who is not mature enough to understand the act and oppose it, to satisfy the adult's own sexual needs (Končnik Goršič, 1995). In many places, sexual abuse is still a taboo subject and is often not talked about. Nevertheless, such situations occur even behind the walls of residential treatment centres. When such a crisis situation occurs, the event must be reported immediately. Reporting is also required in case of suspicion of abuse, within 24 hours, to the competent social work centre or the police. Upon the report, the real hard work with the child/adolescent begins, since the child/adolescent needs to be empowered again. The Association for Nonviolent Communication (2006) emphasizes the importance of response when an individual confides in us.

In cases like this, it is necessary to offer support, give them time, not ask too many questions, and give them a sense of safety. In addition, we should not promise them anything we will not be able to deliver but let them know that we will be here for them when most needed. Thus, in such situations the educator should be a confidant, supporter and protector of the child/adolescent. He/she should strengthen their relationship and try to boost optimism in the individual, while also trying to work well with the individual's support network and competent institutions which can offer help.

The added value of the article is a systematic theoretical overview of the most common crisis situations, which in addition to the escalations mentioned, offers professionals the possibility of interventions or approaches to be used in a given situation, while also presenting the starting point for the formulation of guidelines in crisis situations in residential treatment centres. We believe that in future, guidelines for dealing with crisis situations will become imperative. Thus, regardless of the wide range of crises that we face in residential treatment centres, they would offer some security for educators and management, or at least some sort of instruction on how to act when individual escalations occur.

At the same time, the guidelines would also offer professionals protection before the law, enabling the educator to act in accordance with the regulations (assuming that such regulations or guidelines existed). We strongly believe this would alleviate the additional burden that educators face in the view of threats from parents who want to bring in lawyers, claiming that educators have not acted properly in certain situations, which are unfortunately on the rise. We are certainly aware of the difficulty of the situation, as well as the specifics of working with such a population. It is also clear to us that there is no recipe for education; what works for one individual may not be a success for another. Nevertheless, we consider that basic guidelines for the most common crisis situations can and must be established, thus providing educators with partial relief and safety, as well as competence in performing their work. In addition, we call for better interdepartmental cooperation, which would also mean greater success in times of crisis situations.

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NAVODILA AVTORJEM

Osnovni namen revije je povezati širok spekter teoretičnih izhodišč in praktičnih rešitev v izobraževanju ter tako spodbujati različne metodološke in vsebinske razprave. Uredniški odbor združuje strokovnjake in raziskovalce iz več evropskih držav in s tem želi ustvariti možnosti za živahen dialog med raznovrstnimi disciplinami in različnimi evropskimi praksami, povezanimi z izobraževanjem.

Revija za elementarno izobraževanje torej objavlja prispevke, ki obravnavajo pomembna, sodobna vprašanja na področju vzgoje in izobraževanja, uporabljajo primerno znanstveno metodologijo ter so slogovno in jezikovno ustrezni. Odražati morajo pomemben prispevek k znanosti oziroma spodbudo za raziskovanje na področju vzgoje in izobraževanja z vidika drugih povezanih ved, kot so kognitivna psihologija, razvoj otroka, uporabno jezikoslovje in druge discipline. Revija sprejema še neobjavljene članke, ki niso bili istočasno poslani v objavo drugim revijam. Prispevki so lahko v slovenskem, angleškem ali nemškem jeziku.

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Prejete prispevke najprej pregleda urednik/založniški odbor in ugotovi, ali vsebinsko ustrezajo konceptu in kriterijem revije.

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Planinšec, J. (2002). Športna vzgoja in medpredmetne povezave v osnovni šoli. *Šport, 50* (1), 11–15.

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