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**SOCIAL WORK IN A MULTICULTURAL ENVIRONMENT:  
EXPERIENCE OF SOCIAL WORKERS WORKING WITH  
REFUGEE CHILDREN AND THEIR FAMILIES IN GERMANY**

**Master thesis**

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## INTRODUCTION

The research on social work with refugees in Germany, is still modest overall (Rehklau, 2017; Scherr & Scherschel, 2016). On the other hand, for refugee social work, areas of tension are also constant. On the one hand, human rights are permanently fought for and defended, whereby the interpretation about human rights violations remains controversial in certain contexts, and the actors are thus dealing with conflicting legal situations. At the same time, however, they are pragmatic, committed and must come to terms with other actors. In other words, social work is both part of the inclusion and exclusion regulations of the national and European refugee and migration policy. Contributions to the inclusion of recognized refugees (labour market, accommodation, social integration), while they are also involved in processes of exclusion (e.g., deportation) or the management of coping with life under the conditions of relative exclusion is incorporated. Therefore, how do social workers deal with a conflict of interest, on one hand fulfilling policy mandate with a constraint and on another, professional mandate as a social worker.

Children are at a high risk of being victims of conflicts and political violence that sets them at high risk for psychosocial, physical, and moral problems that directly impact growth. The increase in suffering and abuse of children's rights forces families to take the decision to flee to safety. Thus, children face the dire consequence of fleeing from their country of origin and the impact of pre- and post-migration into the host country. They deal with environmental needs, the effects of acculturation stress, interpersonal conflict, social marginalization, language barriers, and multicultural identity conflicts (Kuo, 2014). Social work has a significant role in childcare, child protection, and family support, mainly when working with refugee children. Therefore, social workers are expected to take a holistic social work practice approach to live up to their ethical responsibility to examine any form of institutional or structural oppression and promote social justice (Suárez et al., 2008).

By the end of 2019, about 79.5 million people had been relocated globally due to persecution, conflict, violence, or abuses of human rights. Among this population, 26 million accounts for refugees, of which 10.4 million were children (UNHCR Global Trends report, 2019). Moreover, as much as the understanding of refugees' origin, the destination refugees choose is of relevance. Consequently, Germany is one of the five leading countries by hosting more than 1 million refugees (UNHCR's Refugee Population Statistics Database). Furthermore, with the right refugee integration policies, support, and collective efforts from social workers, refugee children and families can successfully integrate and make a new life for themselves. As for social work practitioners, a failure to develop critical consciousness and critical reflection

about their identities and positions in society may lead to missing or misinterpreting essential elements of a situation and applying inaccurate or uninformed assumptions (Suarez et al., 2008). Thus, hindering the effectiveness of refugee children and their families' integration into the hosting society.

Previous research made by Popescu and Libal (2018) mentions the macro context that shapes social work practice with refugees, indicating the contribution of social work to do much more in advancing the rights and interests of refugees. On the other hand, other studies mention the importance of childcare, child protection and family support remain central to social work practice (Parker, 2000). Moreover, the study elaborates the implications for social work resulting from the growing number of young minors who left their countries with and without families. Several studies also illustrate the importance of cultural awareness for providing effective and appropriate services for refugees (Mahieu & Van Caudenberg, 2020).

Perhaps, all the studies mentioned above support the argument that social work practices in a multicultural context specifically working with refugees and the diversity of services. Although social work has repeatedly dealt with refugee social work, no substantial “theory of social work with refugee children and their families from the perspective of social workers” (D. Filsinger, 2017) has been developed in the context of Germany. Children who arrive with their families as refugees also have needs, which are often not noticed because they do not immediately demand attention in the same way as the needs of unaccompanied children.

Therefore, this research study is practically valuable to understand from frontline practitioners' perspective what kinds of possibilities and limitations exist and discuss the range of their moral responsibility and accountability. Competent multicultural social work practice with refugee children and their families requires that: to practice effectively, social workers must inform themselves about the relevant cultural, social, historical, and political factors that shape the refugee experience. No doubt, social workers learn from experiences and from the chance to develop empathy for that experience. They learn from teaching, from helping others understand what it is like for them (Marsh, 2004). The result of this study is theoretically valuable to current and future practitioners as well as related social service agencies in developing better practices and tools for an engagement in socially and culturally diverse background social services.

**Research problem:** This study examines the real experiences of social workers that are working with refugee children and their families in Germany to understand social work in a multicultural context.

**Research questions:** What problems of refugee children and their families do social workers solve? What interventions do social workers use to address the problems of refugee children and their families? What challenges do social workers face in working with refugee

children and their families and how do they address them? What are the areas of professional development that should be improved for social workers working with refugee children and their families?

**The object** is social work with refugee children and their families in Germany

**The goal** is to reveal theoretically and empirically the peculiarities of social work with refugee children and their families in Germany

**The objectives** are:

1. To reveal the situation of refugee children and their families in Germany
2. To explore multiculturalism and diversity practices in social work with refugee children and their families in Germany
3. To reveal the experience of social workers working with refugee children and their families in Germany.

**Methods:**

**Theoretical methods:** the analysis of scientific literature and documents on the topic to reveal the situation of refugee children and their families in Germany and to explore multiculturalism and diversity practices in social work with refugee children and their families in Germany.

**Empirical methods:** a semi-structured interviews with social workers to reveal their experiences working with refugee children and their families in Germany. The obtained data was analysed by applying the thematic analysis method.

**Master thesis structure:** the content of this master's thesis consists of an introduction, 2 chapters, conclusions, recommendations, a list of references, an abstract in English, and appendices.

## **1. MULTICULTURALISM AND DIVERSITY PRACTICE IN SOCIAL WORK WITH REFUGEE CHILDREN AND THEIR FAMILIES IN GERMANY**

Social work with refugee children and their families is rewarding yet challenging physically, mentally, and emotionally. The complexity of social relations between the past and present reality of refugee children's life can make it quite a difficult journey for their families (M. Daniel et al., 2020). The frustrating aspect of social work with refugee children and their families is that they must deal with other services simultaneously (Popescu & Libal, 2018). Therefore, these families got encumbered and perplexed by various service providers involved with their children and themselves. Due to the different needs of refugee children and their families, social workers require the right skill when working with diverse social groups.

The notion of diversity and multiculturalism are intended to help bring all people together through greater understanding, appreciation, and empathy. This section will begin with an introduction to diversity and multiculturalism followed by the German socio-cultural realities and perspectives.

To establish a working definition, diversity at its core is about differences. Diversity can involve age, culture, race, sexual orientation, or disability. Cox (Vedder, 2002) defines diversity as "the variation of social and cultural identities among people existing together". Whenever differences exist between the practitioner and the refugee children and their family, there is a possibility for miscommunication, inaccurate judgments, and ultimately, ineffective practice, so any intervention is negatively impacted. Whereas multiculturalism is defined as "an ideology that asserts that society should be composed of, or at the very least acknowledge and include, diverse cultural groups" (Sue, 2006). The NASW Code of Ethics gives direction to social work practitioners regarding their work with multicultural people, families, and networks by recognizing fundamental beliefs, standards, and norms that backings work with different customers and networks.

To provide services more effectively in a multicultural setting, social workers can begin by assessing their own personal cultures and "how they influence their personal and professional life, including their self-awareness, knowledge, and skills." (Ahmed et al., 2011). Social workers can use this reflective process to become aware of the multicultural characteristics of diverse people. Culturally encapsulated social workers make the wrong assumptions that dealing with clients from other cultures without any modification in interventive efforts is possible. The practitioner who seeks to be effective in working with people in a multicultural setting should be willing to learn, unlearn, shift their accustomed modes of intervention, and exercise considerable judgment.

All cultural systems are equally valid as variations on the human experience. Thus, no culture is essentially better or worse than another. This approach to work with diverse cultures in a helping role is likely to increasingly become the pattern in the future and a necessary condition for successful practice in multicultural settings.

If the profession of social work is to respond effectively to the challenge of multiculturalism and a pluralistic society on an ongoing basis in the future, it would have to develop a new perspective in theory and practice, more responsive to group diversity (C. Daniel, 2008).

This following subsection reviews the circumstances, needs, and rights, explores integration policies as it applies to refugee children and their families in Germany. Moreover, investigate diversity practice, multiculturalism, and cultural competence in social work with refugee children and their families.

### **1.1. The circumstances of refugee children and their families in Germany**

The Federal Office for Migration and Refugees (BAMF) publishes monthly statistical reports (Aktuelle Zahlen zu Asyl) with information on applications and first instance decisions for main nationalities. Accordingly in 2019 alone 165,938 new asylum seekers were registered. Almost 50.1% of them (71,421) were children. Moreover, Syria is the most popular origin nation for child asylum-seekers, where 21% of those seeking asylum are Syrians. Afghanistan (11%), Iraq (7%), Venezuela (4%), and Eritrea (4%), followed by Nigeria, Turkey, Colombia, and Albania (3 percent each). In general, 45 percent of the child asylum seekers in 2019 were female, with the majority coming from Syria (22%), Afghanistan (9%), Iraq (7%), Venezuela (5%), Nigeria, Eritrea, and Turkey (4 percent each).

**Table. 1:** Top three countries of origin for children asylum seekers in Germany

Countries of origin	Percentage of children asylum seekers in Germany (2019)
Republic of Syria	21%
Afghanistan	11%
Republic of Iraq	7 %

*Source:* UNICEF Database

Similarly, in comparison to past years, according to the UNHCR, UNICEF, and IOM Factsheet for 2019, Germany remained the number one destination for refugee and migrant children in 2019, accounting for 35% of all child asylum applications submitted in Europe during January and December 2019. (71,420 children). According to a UNICEF analysis of the situation of children refugees in Germany (UNICEF, 2017a), refugee families and their children continue to receive benefits in terms of food packages and are required to live in "community housing."

According to the study by UNICEF (UNICEF, 2017a), asylum-seeking families and their children usually still receive food items in exchange for living in "community housing." The increased contact and lack of privacy in those accommodations are not conducive to the upbringing of refugee children. The uncertainty about their ability to stay in Germany creates a stressful situation that makes developing future perspectives difficult. Additionally, the children and their families have endured stressful and traumatic events in their homeland or while fleeing. The leisure options of the refugee children are generally exceptionally restricted. They frequently lack access to cash and frequently reside in areas remote from city centers or sports facilities. Typically, social care in community housing is not aimed at children's leisure time. Whether or not young refugees can spend their leisure time engaging in activities appropriate for their age is highly dependent on individual motivation or the readiness of existing youth service organizations to work with refugee children. Initiatives such as the Bunt kickt gut intercultural street football league and the refugee councils, which are composed of independent representatives of refugee-led organizations and support groups located throughout Germany's federal states, have developed offerings for refugee children. It is unknown how many of these children take advantage of basic offerings and services available throughout the country.

Additionally, nothing is known about whether child services develop offers for this demographic and the concepts adopted to do so, or about how they facilitate young people's access to their services (Findenig et al., 2018). Young people who have fled to Germany with their parents have not yet been a topic of discussion in child and youth services – and when they are, it is usually in relation to unaccompanied minor refugees taking them into custody is a German Social Security Code VIII-mandated task (2017). Municipal governments are currently under immense pressure to provide adequate and suitable housing for accompanied children. Child and youth services have a responsibility to contribute to the formation of suitable living conditions for all children and their families (see section 1 of the German Social Security Code VIII, 2017) and to represent their interests to other authorities. This is a responsibility they should bear for children who have fled to Germany with their families. There are various areas of interest in understanding refugee children's situation, including the acquisition of language skills, building friendships at schools, their role in the family and much more.



## **Acquisition of language skills**

When refugee children arrive in Germany with their families, they are faced with similar challenges of adjusting to a new environment as that of adults. They must adapt to new culture, lifestyle, language, adjust to climate differences and continue to deal with unstable relocation and uncertain future in Germany.

Apart from the differences between states, Germany offers numerous models of welcome class (Willkommensklasse). Additionally, schools adapt overall models to local conditions. Classes vary in their emphasis on language learning versus subject learning and in their approach to transitioning to a normal class (Cerna, 2019). Some schools, for instance, have created welcome classes that are separate from regular classes and taught exclusively in German, whereas others try as much as possible to include new refugees in subject matter classes with regular students from the start and provide them with German language classes to support their learning (OECD, 2019). Between these two categories, there are various combinations of segregated or inclusive approaches with varying methods for transferring children into mainstream education (UNESCO, 2018; Fuchs et al., 2016).

Unlike their parents, research studies on refugee children reveal that they have an easier time with assimilation and acculturation since they are exposed to multiple socialization systems, including the friends, school, teachers, and professionals supporting them with their integration. For refugee children, much of this coping and adaptation is brought about due to their ability to acculturate and assimilate (Zagefka & Brown, 2002).

As soon as the refugee children's families are relocated to a region, they can start a transitional preparatory school. They receive substantial language lessons that allow them to join the orthodox state system. In case they have failed to learn quickly, they will be disadvantaged by lagging linguistically, socially, and culturally. Firstly, teachers are unaware or unable to deal with specific problems of refugee children. There is little provision of support teaching in the schools. Secondly, due to excessive attention towards the children, they might disguise their learning difficulties (UNHCR 2019: Access to education for refugee children).

## **Building friendships at school**

Refugee children living in resident hostels know there are limitations to the social space in which they live. The residential hostels are often cramped, loud, and dirty, considered avoidable for other residents living around them. Thus, migrant non-refugee children try to distance themselves from refugee children. Conversely, refugee children avoid previous bad experiences as much as they can by staying in hostels or immediate vicinity; therefore, friendships built at the hostels are crucial (Anderson, 2001). Moreover, contacts made at school are essential for the

refugee children despite being isolated from others. As much contact matters, teachers' behaviour in class is also equally detrimental for refugee children to feel welcomed (Thomas, 2016). Umerson and Montez (2010) have described that “social relationships—both quantity and quality—affect mental health, health behaviour, physical health, and mortality risk” (S54). For refugee children who resettle in a new country and may not have many informal sources of social support, a possible source of support may be schools, who have the responsibility to receive refugees in their new school and help them establish relationships with local students.

### **Roles in the family**

Families expect refugee children to go to school and help them with translation to get the service they need. Thus, the children's role in the family is often uncertain as, on the other hand, they are conscious of helping the family to cope through challenges. On the other hand, the inversion of responsibility disturbs the family structure as fathers lose their job and are no longer breadwinners letting them feel they have failed the family. Having arrived in Germany, they are also reminded of what has been lost: whether it be a possession, home, families, friends, work, or social status, where mostly invaluable in their current situation. The loss of parental authority creates tension in the family and conflicts are inevitable as children assume they have a “parental” responsibility in translating for the family (Schulz et al., 2013). However, future research is required to determine what influences the outlook of resettled parents in terms of the future prospect of their children in Germany.

*To sum up*, there are many other reasons why families and their children leave their homeland. It is often overlooked that the living situation of the children can play a major role in triggering the fleeing to Germany: the fear that children will be forcibly recruited and used as child soldiers, the danger of circumcisions and forced marriages, closed educational paths and a life without real prospects associated with them, discrimination due to the descent from unlawful parental relationships, not appearing in birth records and the consequent deprivation of all civil rights, or the risk of becoming a victim of child trafficking (Haer et al., 2020). Such incidents are part of the biographies of most refugee children. Moreover, experiencing physical and psychological violence is a burden for children and adolescents, which can lead to aggressive behaviour, isolation, fear, or low self-esteem. Therefore, this section explored the circumstances in which refugee children and families has left its mark even after their arrival in Germany.

### **1.2. The needs of refugee children and their families and children rights**

A third of the refugees who enter Germany are children. Refugee children most of all need the help and protection of the countries in which they are relocated. Whether accompanied or unaccompanied,

they most urgently need an understanding of the trauma they suffered while fleeing. The trip to Germany meant for most of these children the loss of their own home and being separated from relatives or loved ones indefinitely. But from the media, they are often viewed by politicians as an attachment to their family and do not receive the child-friendly support that they urgently need for their development.

The legal framework of the UN convention on the Rights of a child in Germany by the children and Youth welfare law was added, which is laid down in social code (SGB VIII, 1997). The law defines text in its general rules that every child has “a right to promote his development and upbringing to become an independent and socially responsible person” (§1 (1) SGB VII, 1996). Accompanied refugee children are often not accepted by the authorities perceived as independent personalities with their own rights. The German social system does a lot for refugee care, but it is the refugee children who are being escorted least considered because the focus is on unaccompanied refugee children, adults, or the family in their entirety. Many accompanied refugee children live with their families in Germany in mass accommodation, in constant fear of being deported. They have neither their own room nor any other leeway. They hardly can participate in social life (Edwards et al., 2019),

The needs of refugee children and their families include within the areas of health, well-being, and welfare; education; and integration and social inclusion. It's evident that the journey of refugee children and their families to the host country has an immense impact on their physical, emotional health and wellbeing (Fazel et al., 2011).

**Table. 2:** Needs of refugee children and their families

Special needs of refugee children	Description
Family and friends (Relationships and encounters)	<p><i>Family and friends form a central dimension in the everyday life of children.</i></p> <p><i>Quality relationships contribute significantly to well-being, as does the lack of it makes children particularly vulnerable.</i></p>
Education and language	<p><i>When they arrive in Germany at the latest, they realize that their language has lost its normality for communication.</i></p> <p><i>Partially even young children try to overcome language barriers with English words or sentences parts to</i></p>

	<i>overcome.</i>
Security and Protection	<p><i>When the well-being of children is impaired and they prove to be especially vulnerable, it is often due to a lack of security. Defect security and protection is almost always a reason for fleeing.</i></p> <p><i>Children are aware of this or get a feeling for it in experienced situations that have developed, even if they cannot bring this up explicitly. This dimension also includes unsettling observations made by close or reactions of the parents in which their own insecurity about the pressure is coming.</i></p> <p><i>Moreover, after arriving in Germany add another challenge related to the insecure residence status.</i></p>
Health, social and material care	<i>When the need for health and social care is met it fosters healthy physical and psychological development of children with refugee experiences. Trauma therapeutic treatments can also be needed.</i>
Privacy and self determination	<p><i>The dependence on external decisions affects the entire refugee family, but especially the children. Because children are already in a power imbalance in the order of the generation's weight to their disadvantage.</i></p> <p><i>The parents are dependent on external decisions carriers, information, and a lack of self-determination, this affects the children all the more.</i></p>

*Source:* Social and human science research and the framework conditions in Germany (Meysen, 2019)

Nonetheless, attention has been paid to refugee children's resilience, with various factors identified as sources of resilience, including social support, possession of a way of belonging, education, religion, connections to the house culture, family connectedness, and having a positive outlook (Verlinden, 2018). To promote this resilience basic social service and needs

must first be met. This includes the need to be recognized as children, learn German, go to school, have accommodation, have access to health care, and have access to legal representation. The efforts made by families to act as a "protective shield" for their children is recognized within the literature and research findings suggest that parental psychological state has an effect on the psychological state of refugee children (East et al., 2018). This pattern suggests that despite the association of wellbeing of parents with children, refugee children wellbeing can also be improved through alleviating the post traumatic experience of the parents and supporting them to find a positive outlook on their behaviour as well. Children who have the opportunity to engage in developmentally appropriate interactions and activities with adults at home, have the opportunity to develop new skills necessary for success, and are rewarded for their positive behaviour, empathize with their family ties. Is more likely to do. When children feel connected to their family, they are motivated to live by the expectations and rules of the family, which are generally prosocial (Haggerty et al., 2013). Therefore, intervention efforts aimed at improving the lives of parents can also impact the prospect of their children.

### **Rights of refugee children**

The United Nations High Commissioner for Refugees has had a German representation in Berlin since the 1950s and there is now also a branch in Nuremberg at the headquarters of the Federal Office for Migration and Refugees. As in all western countries, the focus of the work of UNHCR in Germany is in the field of legal protection. The organization expresses itself the international perspective on changes in the substantive principles for the asylum granting, sometimes also on invitations from parliaments and their committees. Authorities, courts, lawyers for asylum seekers can apply to the UNHCR consultation on cases. In addition, the UNHCR sees its task in the area of advanced training for asylum and refugee work. The support of accompanied and unaccompanied minor refugees is at the centre of organizational act.

The German representation of the organization is committed to the situation of refugee groups regarding their accommodation, guardianship, the process to improve the asylum procedure and access to education (Wiese, 2019). The legal framework of the UN child rights convention is in Germany by the children and youth welfare law added, which is laid down in social code book VIII. The law defines text in its general rules that every child has a right to promote his development and upbringing to become an independent and socially responsible person" (§1 (1) SGBVII, 1996). This regulation applies to both residents and migrant or refugee children. This means that equality for children is legally required. The protection of children's rights can also be found in Article 24 of the European Charter of Fundamental Rights (GRC, 2000), which pretends that the rights of children are to be protected and not others may be

subordinated to laws relating to foreign nationals (Article 24 (2) GRC, 2000). Moreover, respect for the following children's rights is important when accommodating refugee children to ensure the best interest of the child is met. This includes:

- All refugee children have the right to information about their rights
- All refugee children have the right to play
- All refugee children have the right to protection from sexual, physical, and psychological violence
- All refugee children have the right to go to the toilet and shower undisturbed
- All refugee children have the right to consolation and help

According to the law (Lawrence et al., 2019), refugee children must not be left alone in their distress, the psychosocial care of refugee children must not be passed on to the already financially weak municipalities. The federal and state governments must immediately ensure adequate funding for the protection of refugee children from sexual, physical, and psychological violence.

Refugee children should therefore be treated in the same way as orphaned German children, regardless of the question of the situation under immigration law. These children are entitled to greater protection and support by the state (Article 20 CRC). As a form of care for orphan children, admission to a foster family, adoption, or placement in a suitable childcare facility (Article 20(3)). Furthermore, the highest achievable level of health is guaranteed (Article 24). with Article 28 states that the contracting states recognize the "right of every child to education". Other articles of the CRC are relevant for refugee children: the prohibition of discrimination (Article 2); the obligation to reunite families (Articles 9 and 10); the right to social security benefits (Article 26) and decent living conditions and subsistence (Article 27); a deprivation of liberty is allowed in the case of one child only be used as a last resort and for the shortest reasonable time (Article 37).

*To summarise*, in theory, asylum-seeking children in Germany already have the same support options as other children. However, these children often have very specific needs, which on the one hand are due to their history of escape. On the other hand, the special legal and factual situation as an asylum seeker also plays a role, which is linked, among other things, to the accommodation situation described above, but also to the uncertain prospect of residence. So far, special psychotherapeutic offers are not available for children across the board.

When it comes to supporting children seeking asylum, the parents' situation must also be considered. It is often difficult for them to support their children when they themselves are burdened by their personal experiences and must reorient themselves. Often it is even easier for

the children than the parents to adapt to the new situation in life. This can mean that the children are used as interpreters for their parents, and they must take on tasks that are not appropriate to their age and role. Therefore, parents must be empowered to play their role actively and to serve as caregivers for their children who take responsibility for them, make decisions together with them and offer a positive family environment.

### **1.3. Germany's refugee integration policy for refugee children and their families**

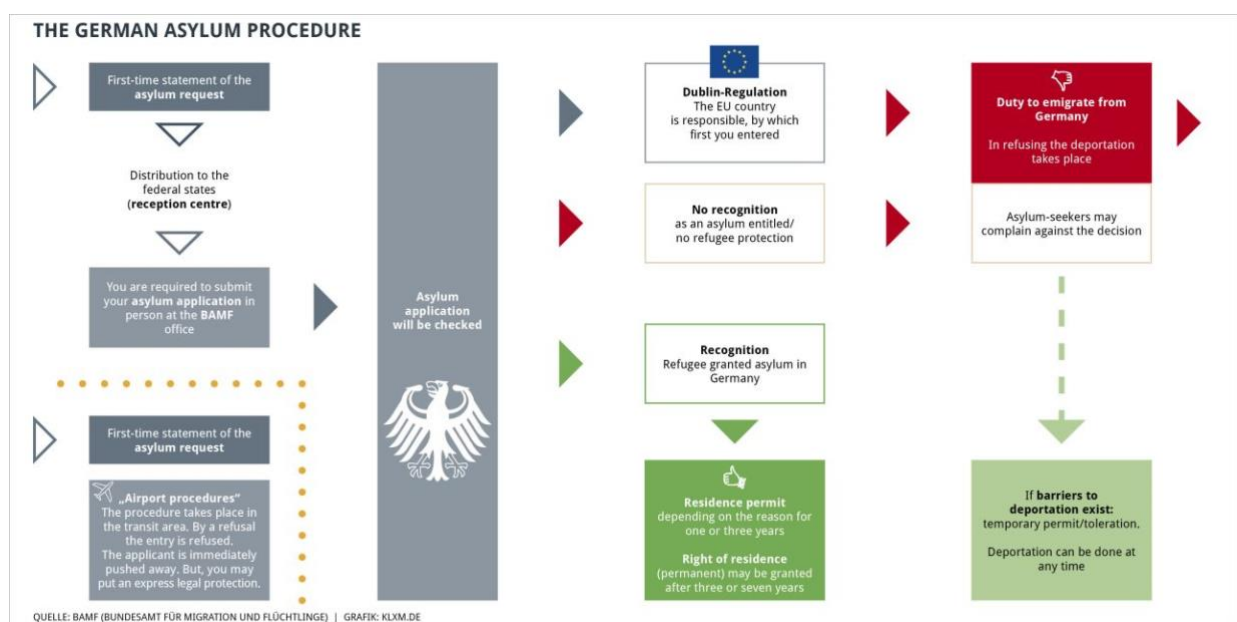
Integration is the process of assimilating into a new society. It entails a two-way adjustment process in which both the individual and the host society adapt, but is often understood as the individual's process of assimilating into a new society (Oduntan & Ruthven, 2019). Integration of refugees is a complex and continuous process that involves legal, social, cultural, and economical components and places significant demands on both the individual and the receiving culture (UNHCR, 2018). Refugee integration is an attempt to address the psychological and sociological consequences of forced displacement. It is governed by the 1951 UN Refugee Convention, which states that "a refugee is someone who is outside his country of nationality due to a well-founded fear of persecution for reasons of race, religion, nationality, membership in a particular social group, or political opinion and is unable or unwilling, due to such fear, to avail himself of hi (UNHCR, 2010; UNHCR, 2015). For the host country, absorbing these refugees into the economic and socio-cultural fabric of receiving countries is a significant challenge for governments and aid agencies. The difficulty is amplified by the fact that refugees are arriving in host nations with increasingly diverse ages, cultural and religious backgrounds, languages spoken, and educational levels (Capps et al. 2015).

Germany's Federal Office for Migration and Refugees refers to integration as a long-term process with the aim of including everyone in society who lives in Germany on a permanent and legal basis. To become a part of German society, refugees should have the opportunity to participate fully and equally in all aspects of social, political, and economic life. Their responsibilities include learning German and upholding the Constitution and laws (UNHCR, 2013). In its 2011 brochure, Migration and Integration, the Federal Ministry of the Interior states that the purpose of integration in Germany extends beyond facilitating coexistence between communities, requiring refugees to learn the language and accept the fundamental values of the receiving society.

Germany's integration strategy is governed by the 2005 Immigration Act, which integrates the Residence Act. The 2005 Immigration Act was based on the recommendations of an independent "Commission on Migration" established by the Federal Minister of the Interior in 2000 to design a new strategy to immigration and integration. Migration and Integration,

Residence Law and Policy on Migration and Integration in Germany is the primary policy document pertaining to integration in Germany (Federal Ministry of Interior October 2011). The general strategy to integration has been to ensure a refugee's ability to engage in German society while equally laying responsibility for integration squarely on the immigrant's shoulders. At the heart of the program is a focus on language and cultural orientation. In 2007, the National Integration Plan provided significant improvements to language and skills training, labour market access, and education. The government made adjustments in 2009 to place a greater emphasis on qualification recognition.

The path to integration begins with an application for asylum in Germany, that involves a series of steps that starts with first contacting the authorities where the refugees have arrived or any other place where the asylum seeker would prefer. In either case, the refugee is sent to the nearest reception centre (Erstaufnahmerichtung) to registration, submission of asylum application and medical assessment. Subsequently, the refugee will be sent to one of the 16 federal states based on “Königstein quota system” which is a fixed admission quota per state. Once they have arrived in the allocated state’s reception centre, they must stay up to 6 months to 2 years based on individual cases. Asylum seekers are entitled for asylum welfare for up to 15 months, with a positive asylum decision, they can later have their own place to stay or register with job centres.



**Fig. 1.** The German asylum procedure

Source: BAMF

According to the Ager and Strang (2008) conceptual framework of refugee integration, they define ten core domains focusing on the structural environment. The primary indicator for



integration is participation in the labour and housing market and educational and health-care systems. Integration into society is the most important prerequisite so that people don't slip into crime, exposure to trafficking or undesired life risks – that applies to both locals and newcomers alike, especially for young people. But now, regarding refugee children and their families what are the framework conditions for successful integration? First, it requires the satisfaction of the most basic needs assuring shelter, food, clothing, healthcare, and access to communications (internet, telecommunications). Families also need shelter, retreat, and privacy. The special needs of children and young people must be considered (games and leisure activities, etc.).

All that is mentioned cannot always be guaranteed given the large number of refugees in the initial reception facilities but must be ensured in the medium term. For successful integration, however, more is required: accommodation in large accommodations (barracks or even tents) without internal structure and social integration in a living environment is acceptable for short transitional periods. The close coexistence with no retreat can be raise risks for stressed people and/or traumatized refugee children and/or their families that leads to conflict and aggression (Cornel et al., 2015).

## **Housing**

Refugees in Germany are accommodated in reception facilities or, after transfer to the districts, in collective facilities or in decentralised, private accommodation. There is thus a wide range of different housing conditions for refugees. When accommodating refugees, on the one hand, there must be a distinction between the admission institutions of the federal states and on the other hand the community of refugees (Razum et al., 2020) . Due to the high number of people who have fled in the meantime, so-called “emergency shelters” have also been set up as they provide emergency shelters provisional quarters in which the refugees attend until they are placed into the responsible collective accommodation facility (German committee for UNICEF 2017). In collective accommodation, there are usually very many people living in a small space. According to a study of 100 collective accommodation facilities in Saxony, the average number of residents per accommodation facility in summer 2018 was 87 people, with the quarter of the most heavily occupied accommodation facilities even having between 110 and 376 residents. As a rule, at least one common room was available there (Baier & Siegert, 2018). Since the adoption of the so-called Asylum Package II (2016), there has also been the possibility in Germany accelerating such asylum applications in so-called special reception facilities to deal with the asylum procedures which, as a rule, have no prospect of recognition (e.g., applications from people from so-called safe third countries). Legally speaking these special reception facilities are also an (initial) admission reception facility of the federal states.

Legal frameworks at different levels (federal states, districts municipalities), pre-determine accommodation provision for refugees. For example, until refugee status is granted, or 18 months have passed, refugees must reside in state-mandated reception centres (section 47 Asylum Act). Certain residence restrictions may apply even according to subsidiary protection levels. Access to private accommodation is a possibility but is limited, depending on refugee's asylum status, the local housing market, and the capacity of states to reallocate. Residents of some facilities share kitchens and bathrooms with their neighbours. In comparison, other facilities provide separate living units (Meißelbach & Patzelt, 2019). Certain temporary facilities have been established utilizing residential containers, while others were repurposed from old schools, offices, or hotels (Baier, 2018). Many refugees residing in private accommodations feel their living area to be insufficiently large (Tanis, 2020). Area variables can have a role in determining home happiness. Many refugees, if given the choice, would choose to reside in urban areas, likely for the convenience of essential facilities like public transportation. If refugees are housed far and are cut off from infrastructure, they feel lonely and find it difficult to connect with local residents. In 2016, around 20% of refugees housed in communal accommodations lived in non-residential, industrial locations (Baier, 2018), which may have a negative effect on their social integration.

## **Health**

According to the Asylum Act (Section 62 AsylG, 1992), asylum seekers and refugees are in the reception facility (or already in the arrival centre) for transferable sickness units medically examined to carry out specific medical treatments on the one hand and on the other hand to be able to prevent transmissions in the accommodations. This sub-search aims to detect infectious diseases due to their possible severity or its infection potential for other people as it is risky. With the examination - independently from the health examination according to § 62 Asylum Act - acute treatment necessity can be determined.

In addition, the Robert Koch Institute, in coordination with the Standing Vaccination Commission (STIKO, 2017) and the federal states Concept to vaccinations Asylum seekers (RKI 2015b). It recommends what is deemed necessary vaccinations as early as possible within the first few days after arriving in a reception facility. The medical examinations in the reception centres are usually organized and carried out by the municipal health authorities and many doctors also volunteer to support the health authorities.

Another aspect of health of refugees is related to outbreaks like covid-19. For example, social distancing measures were much more difficult to implement in collective accommodation than in private accommodation, especially since some collective accommodation is only

temporary in nature (Razum et al., 2020). Not surprisingly, refugees in Germany are associated with lower mental health in comparison to the native part of society and other migrant groups (Jaschke & Kosyakova, 2021). Apart from the health risks they experience, refugees face a variety of challenges when it comes to accessing healthcare services in Germany. Without the agreement of certified professionals from social and immigration offices who operate as so-called gatekeepers, refugees whose asylum applications have been denied or are still being processed are not entitled to get medical care in Germany during the first 15 months of their stay (Razum et al., 2019). The obstacles to access healthcare that refugees in Germany face is likely to result a long term health impairments and diseases which go undetected and which may have serious outcomes for not just health and personal well being (Robjant et al., 2009) but also the financial expenses that refugees could not afford (Bozorgmehr & Razum, 2015).

### **Language and Integration Courses**

An essential key for the social integration of refugee children and their families is learning the German language. Language skills enable comprehension in everyday life and is the basis for dealing with matters of life independently. For the contact with social institutions, the control research of the written language of German, for example, to focus on one's own interests and to be able to formulate and enforce claims (Anderson, 2001). Moreover, being able to communicate proficiently facilitates social interactions and job market onboarding.

The German integration language acquisition system faced several issues due to the massive influx of refugees since 2015. These difficulties include the availability of integration courses that matches the number of participants, the successfully teaching the course content, recruiting qualified teachers, and retaining. The question of how well the German integration course system handles and how it will function post 2015 is difficult to answer (Wienberg et al., 2019). While, for children and adolescents who come to Germany, child day-care schools and schools are the places where they learn the German language. The younger children, the easier it is for them to acquire German as a second language. Refugee children in day-care with integration in mixed groups can easily understand German from other children and educators. If, on the other hand, foreign children are placed in specific groups in the day-care center for a longer period, the language acquisition takes longer than needed because the opportunities of informal “learning on the side” are less likely.

### **Education**

Education is a key requirement for integration in the acquisition process material livelihood security and participation in social life. The integration of young refugees into the education

system is often described as a task for society as a whole that serves the common good. The federal government writes in the justification for the recently passed integration law:

*"Lack of integration not only leads to social problems in the medium and long term, but also causes high costs."* (Draft of integration law: Bundestag, 2016)

From this perspective, the education of refugee children has an instrumental value that relates to two aspects: The young people should be put in a position to earn their own living so that they do not become a burden on the social systems in the long term. In addition, the refugees should not feel excluded either materially or culturally but should be able to see themselves as a recognized part of local society. This perspective on integration is based on the hope that refugees will be willing to accept the principles of the German legal and social order the more they themselves are able to take advantage of the opportunities offered by a free and pluralistic society. On a theoretical level, this value of education can be described as follows: The politically liberal society, which relies on individual freedom and thus inevitably on the coexistence of very different ways of life, lays the groundwork with a well-developed education system that opens up opportunities for all young people, the cornerstone of their own continued existence (Wapler, 2016).

However, education and support do not just begin in the children's educational institutions or school, but in the family. For children, everyday educational processes of parents lay the foundation for formal education (Koehler & Schneider, 2019). Parents play an important role in their children's educational pathways and should be encouraged and the children are encouraged and strengthened to assume this responsibility as well as possible to accompany them on their educational path. Additionally, to foster social integration based on cultural heterogeneity, the educational system must pivot and focus on multicultural education. Rather than perceiving children as human capital to be taught, multicultural education places students and their cultural identities at the center of learning (Timm, 2016).

### **Labour Market Access**

Despite the background of the current refugee situation, the question of increased integration of refugees into the labour market is on the rise. In the past, refugees were not allowed to earn any money. Today there is a paradigm shift in German immigration policy. The early integration of refugees into the labour market is intended to lead to social integration. The federal government has met this need with a number of legislative amendments. Access to the labour market for refugees with a positive prospect of staying has been made easier. Further simplifications for the successful integration of refugees were created by the fact that access to the temporary work sector is now also possible for refugees. Within the framework of the Integration Act (2016),

100,000 additional workplaces are required every year. For asylum seekers, so-called refugee integration measures, have been created by the end of 2020. The program continues to exist in addition to the options already available, to provide work opportunities in reception facilities. Job opportunities are an instrument of labour market policy, that of integration in the job market. This promotes work that is carried out in public interest, is additional and competition neutral. Job opportunities are not work employment relationships within the meaning of labour law. The newly created refugee integration measures are employment opportunities that are located with municipalities, state, or non-profit organizations. Most of these additional work opportunities should be outside of reception facilities or shared accommodation. The aim is to help asylum seekers during the asylum procedure through meaningful and charitable work in the German labour market. The refugee integration measures usually last up to six months and comprise a weekly working time of a maximum of 30 hours. Participants receive an additional expense allowance of 80 cents per hour.

### **Participation of organizations**

Social services are provided at every intersection of an asylum seekers journey. In Germany, several governmental and non-governmental organizations are involved to support asylum seekers until they integrate to society. Beginning from reception facilities there are social services called “Verfahrensberatung” in German, they give information about or help regarding asylum process. When moving from reception facilities to communal accommodation or an apartment, there are social services with an office located in the same facility. They provide answers to questions or problems of tenants. In some places, refugees have formed organizations to work towards their political rights and support for each other. The following are some of the organizations involved in the recent years:

**Youth without Borders (Jugendliche ohne Grenzen)** is a German-wide association of young refugees founded in 2005 on the principle that those affected have their own voice and do not require a "representative policy for those affected".

**Caravan for the right of refugees and migrants** is a network of self-organized refugees united in a solidarity struggle against substandard living conditions, deportation, lager, and vouchers with the goal of achieving equal rights.

**The VOICE Refugee Forum – A Network of Refugee Initiatives in Germany** is an organization that supports the self-organisation of refugees and their communities against the

Apartheid in isolation camps and ‘Lager’ and to empower the political networks and struggles in the camps.

NGOs have a long history of assisting refugees and other displaced people. However, in recent years, they have also become increasingly active in protection of refugees, a role delegated to the United Nations High Commissioner for Refugees (UNHCR). This growing NGO involvement in refugee protection is a result of both the international community's incapacity to protect displaced persons and the more active role that NGOs are playing in global political and economic issues (Lester, 2015). NGO's that work with refugees work independently to advise people and work for the rights of refugees. The biggest NGO for refugees in Germany is called Pro Asyl, the NGO's working in the state of Baden Württemberg where this research was conducted are AWO International and Caritas.

*In summary*, the significant costs to be expected for accepting and accommodating refugees, for additional housing, school integration, language, and education programs, but also for measures to ensure public safety, will ultimately only weigh moderately on federal and state budgets. Many of the investments that are now required - for example in housing construction - are primarily catching up on what has been neglected and cannot be attributed solely to the reception of refugees. Investments in integration and qualification will also pay off in the long term (Hinte et al., 2015). However, for the highly indebted municipalities, many of which have already exhausted their capacity to accommodate refugees, more far-reaching, more flexible and at the same time more sustainable support will be required than is currently planned. Because in the municipalities, the course is set for the social acceptance of refugees and the economic success or failure of integration in the form of accommodation, support, and integration. Undoubtedly, the extent of the refugee intake also harbors some social and political explosive power. Planning and communication errors in the distribution of refugees in Germany and Europe, as well as the obvious efforts of right-wing populist groups to make political capital out of this issue, can fuel latent xenophobia and promote a social climate of intolerance (Bonin, 2015). A lack of European solidarity can ultimately lead to a “change in mood” in Germany as well. Beyond all the questions of a fairer distribution in Europe, given the acute crisis situation in the Middle East, Germany will in all likelihood have to adjust to a large number of refugees in the longer term. Causes of flight such as climate change, water shortages and hunger could also be felt in Europe in future. Proactive development cooperation measures are becoming increasingly important, but they can only produce long-term success.

Additionally, the common perception at the governmental level that integration is a process centered on learning a new language, getting employment, and securing accommodation reflects refugees' perceptions. However, refugees take it a step further, basing

their idea of integration in an awareness of rights and responsibilities, the timing of events, and the subjective development of "feelings of belonging." Some refugees never felt completely integrated, regardless of how long they stayed in the new country, demonstrating that integration is more subjective than objective. As a result, governments' integration goals of equality, inclusion, and competence may be met in ways other than those anticipated or desired by governments, and the expectation that everyone will achieve specified goals does not reflect reality.

#### **1.4. Diversity practice in social work with refugee children and their families**

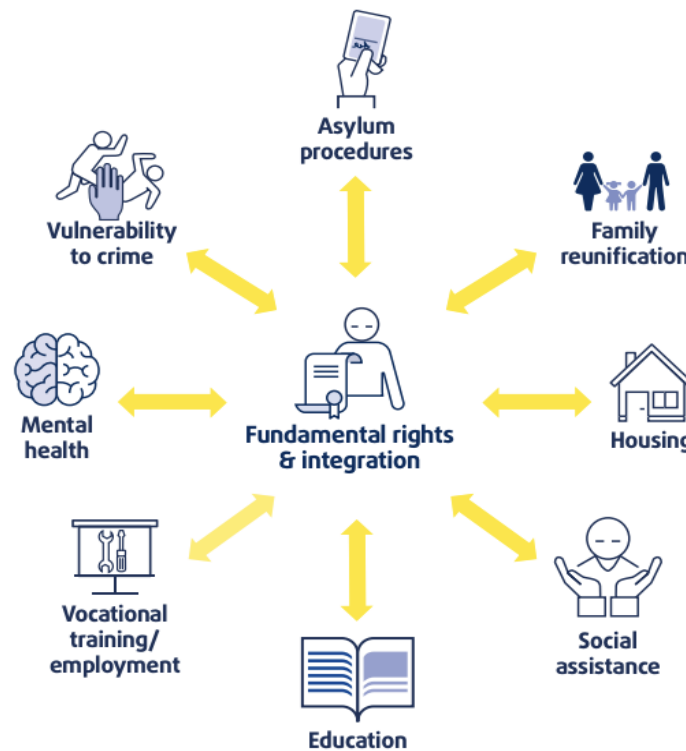
Diversity is inherent in social work which is about recognising, respecting, and valuing the differences between individuals. It means treating people as individuals and recognising their different needs. The aim of social work is not to eradicate the home cultural practice of refugees, rather to promote bicultural competence (Walker, n.d.) where one retains the skills that are important when one is immersed in original culture and at the same time while acquiring new behaviours that are required to integrate to the mainstream society. Moreover, social work education should contain more international content to allow social workers to understand the cultural backgrounds of refugee children and their families and be more sensitive to their needs (Midgley, 2001). Newbigging and Thomas (2011) recommend "good practice" principles in working with refugees, which include:

- a person-centered approach and a solution-oriented approach,
- respect for cultural identity and migration experiences,
- preventing discrimination and promoting equality,
- bringing about decisions quickly and transparently and communicating them with the involvement of those involved (and guardians),
- promote integration and independence as well
- cooperation with various organizations to overcome institutional barriers.

Social work facilitates conditions to implement the above principles. On the other hand, becoming familiar with hindrances of successful integration is as much important to bring the opportunity for social work practitioners to design, intervene and provide services targeted to refugee children and their families not only in micro level but further in mezzo and macro. This section discusses the shortcoming of various factors that play a role in successful integration and what kind of interventions are required from social workers in the field (Fig. 2).

#### **Length of asylum procedure**

Lengthy asylum procedure and providing a legal status defines integration processes. First, lengthy asylum procedures impede investments in acquisition of the German language and delay labour market entry. Second, having an efficient asylum procedure on the asylum application (irrespective of the outcome) increases the transition rate to the first job for refugee families and promotes entry into the first language course for the children primarily and then for parents (Kosyakova & Brenzel, 2020).



**Fig. 2.** a system of successful refugee integration

*Source:* FRA, 2019

Counselling on the asylum process is a critical component of social work with refugee children and families. The most important task of asylum procedure advice is preparation for the hearing at the Federal Office for Migration and Refugees (BAMF). It is the core of the asylum procedure to which asylum seekers respond need to be particularly well prepared. The advice by social workers can include (R. Weinzierl, 2017)

- the explanation of the Dublin procedure
- the explanation of the legal options for action
- the explanation of the official documents
- the procurement of documents
- the writing of documents



- any required statement on the minutes of the hearing
- referring those seeking advice to lawyers
- working with lawyers for those seeking advice
- contact with clerks and decision-makers at the BAMF

## **Housing**

Often accompanied refugee children and adolescents must last longer than the legal requirement's predetermined duration of six months in emergency shelters or initial reception facilities. The ones planned by the federal government facilities (AnKER) are the arrival and reception situation of children and adolescents dramatically deteriorating again. Accommodation in refugee shelters offers a hardly child-friendly fair environment, as children and adolescents often do not have protected places as well as child-friendly quiet places to have an opportunity to play.

## **Education**

Children and young people's right to education is partially denied, as some state schools' law the suspension of compulsory education during the stay in the initial reception facility and thereby access to day-care and school is difficult. The children and adolescents are in a kind of "waiting state", which is detrimental to their development.

There is always a special eye for refugee social work to pay attention to children and adolescents. The protection of child welfare and the realization of basic children's rights for all children result from the UN Children's Fund (UNICEF, 2017b), which has existed since 1989 legal convention that is legally valid in Germany and It goes without saying that this is also a matter of application in all workers' welfare institutions. This includes the following rights:

- *Right to education:* in cooperation with the school and youth offices for immediate training or in consultation with the parents are responsible for registering in a day-care centre.
- *Right to rest, leisure time and play:* for a healthy development of children and adolescents also includes access to social participation and leisure activities. Social workers should facilitate access to social participation in the local regions where the refugee children and families are located.
- *Right to health care:* the right to health care must be provided for children.

*Finally*, political foundations must be created so that the refugee children and their families regardless of their reasons for fleeing in Germany are treated humanely. This should be all areas of life such as housing, social benefits, medical care, work, education, advice and, ultimately, inclusion in equal measure. A policy is needed that addresses the multiple reasons for migration

and does justice to the growing diversity of migration. It is a political mandate, the dynamics and diversity of refugees to create solutions for the new wave of refugees.

### **1.5. Multiculturalism approach in social work with refugee children and their families**

In Germany, multiculturalism is exemplified with strong national and ethnic identities. Historically, there has been an expectation newcomers will adopt the norms and traditions of the host culture, at least publicly, and customs from 'back home' be relegated to the private sphere (Sundar et al., 2012). Nevertheless, In essence, multiculturalism is an approach that affirms the reality of cultural diversity, the need for tolerance and appreciation of different cultures and the importance of understanding the dynamics of cultural diversity and interactions in work with people (Sue, 2006). Numerous ongoing multi-system factors increase the difficulty of providing services to refugee children and their families. Community health centers and other organizations tasked with providing care to refugees are frequently underfunded and expected to respond with little to no warning or training. The worldwide refugee crisis is far from over (Dubus & Davis, 2018).

A look at the figures on immigration in Germany from the obvious hypothesis that meanwhile 'multiculturalism' caused by intensive migration is undeniable exists and as cultural diversity in the circle of refugees like also an indelible part of the locals themselves on social life in Germany. 'Multiculturalism Therefore does not represent a warning sign, but the expression of social and cultural pluralism, which has a massive political implication that calls on the political problems that arise with the presence of foreigners (Schmidtke, 2012).

On the other hand, agencies are expected to address the needs of an ever-changing demography without the necessary resources, training, and unified applied competence. Current and future political conflicts, as well as the accelerating pace of climate change, all lead to a persistent refugee catastrophe. Individuals and families forced to escape their homelands will remain dependent on social workers. Social workers must be prepared to handle this need. Being prepared entails improving system coordination (including governments, resettlement agencies, and communities), as well as embracing multiculturalism within health and mental health teams. We do not need to gain these abilities independently of other organisations that support refugees. Sharing experiences can help increase understanding of culturally effective techniques and alleviate some of the load associated with learning new practices as populations evolve (Dungs, 2011).

Multicultural perspectives on teaching and learning strengthen students' knowledge, sensitivity, and comprehension of race, ethnicity, gender, and refugee groups, and are likely to lead to culturally competent social work practice. With the continued rise of culturally different

individuals and groups of people, social workers' ability to satisfy the multicultural requirements of a diverse community will be impacted. Considerations for cultural competency are included into multicultural practice in the following ways:

- Social workers must be aware of their own values and prejudices.
- Social workers must be aware of their clients' worldviews.
- Social workers must be capable of providing culturally competent interventions.

To deliver culturally competent services, social workers must incorporate their attitudes, knowledge, and abilities into their practice (Kohli et al., 2010). Social workers can play a critical role in reacting to and encouraging cooperation between mainstream sociocultural attitudes and populations seeking acceptance and acknowledgment when acting in an advocacy capacity.

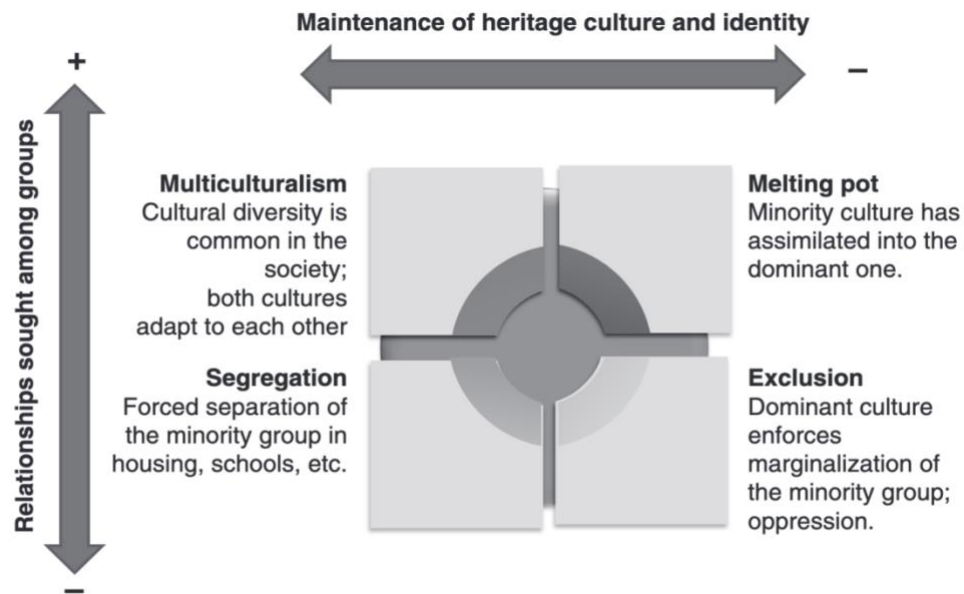
According to NASW (2014), social workers must avoid the idea that one intervention fits all and fail to incorporate the role and effect of culture into services and interventions to apply a multicultural approach. For example, well integrated and new refugee families retain fundamental religious and cultural beliefs. Thus, it is critical for social workers to be receptive to discussing and learning about these beliefs and their impact on the individual's life. Social workers must be aware of several common challenges to and errors in the provision of culturally competent services, such as:

- evaluation and practices that do not consider culture, religion and secularism can increase the likelihood of inadequate and possible ill-considered treatment interventions and services
- consideration of possible cultural attitudes in seeking treatment
- an unprepared social work workforce

A model based on the orientations of refugees to face issues related to maintaining their own cultural identities and participating in the mainstream society was depicted by Berry (2005) which shows four distinct orientations emerge from the intersection of cultural identity and mainstream society culture. When translated to refugee children and their families we can infer the following meaning:

- Multiculturalism (Integration): high maintenance of refugee's own culture and maintain positive relationship with the other group. In other words, promoting integration as a model for multicultural societies fosters an appreciation for cultural diversity.
- Melting pot (Assimilation): low maintenance of refugee's own culture and maintain positive relationship with the other group.
- Segregation (Separation): high maintenance of refugee's own culture and infrequent interaction with the other group.

- Exclusion (Marginalization): low maintenance of refugee's own culture and infrequent interaction with other groups



**Fig. 3.** Position of multiculturalism in relation to maintaining culture and identity

*Source:* Berry (2005)

Integrated refugee children and their families sometimes experience a feeling of alienation, as if they were foreigners in their own country (Schaub et al., 2021). However, considering that it is highly unlikely that living with those who does not necessarily share once value or norms, expecting this feeling will disappear anytime soon is not ideal, the most significant criticism aimed at the integration model appears to be one that also may quickly inevitably turn into some form of sudden segregation, with disparate communities coexisting ineffectively. This may lead to tensions: if cultures don't communicate, they cease to understand each other, let alone give each other anything of value.

In conclusion, the entire process of displacement necessitates a thorough study of its impact on individuals and how they evolved coping mechanisms to alleviate the process's pressure. Bemak and Chung (2017) state most of the time, refugees leave their nation of origin abruptly and without adequate time for planning and preparation. Numerous ambiguities regarding their destinations, travel routes, modes of transport, and threats encountered during the journey place refugees under enormous pressure and place them in danger psychologically and physically (Bemak & Chung, 2017, p. 299). Throughout the displacement and integration process, the new social environment's reaction to refugees challenges the individual's notion of "self." Unpredictability and ambiguous communications exacerbate questions about an

individual's values and capabilities and create a chasm between the individual now and the individual then. Therefore, it is of importance to close the gap between the previous self and how they define their identity now with maintaining balance between majority culture and theirs.

### **1.6. Cultural competence in social work with refugee children and their families**

Refugee children and their families have unique strengths and needs related to their cultural backgrounds and experiences of forced displacement and resettlement. Refugee service providers must demonstrate cultural competence to effectively serve clients, but this is often complicated by unclear definitions and a lack of practical guidance. In a practical oriented approach, Heidi Keller (2013) defines the cultural competence as a triad with the following components:

- Knowledge
- Mindfulness
- Diversity

The basis of every cultural competence is first the knowledge of different cultural models, diversity of socialization goals and styles of upbringing. Socioeconomic factors such as formal education, the economic situation, the family structure, and age are decisive.

When serving refugee children and their families, cultural competence may improve service quality and accessibility, address health disparities, and promote self-sufficiency and adjustment to life in a new country. For instance, cultural competence interventions are effective at improving health care providers' knowledge, understanding, and skills when caring for patients from multicultural backgrounds (Govere & Govere, 2016).

The following can be briefly summarized as access barriers to refugee children and their families to be identified (Gaitanides, 2003) in Germany and demand application of cultural competence skills:

- Lack of information about the existence of the offers, their objectives, and requirements
- Insufficient trust in linguistic and intercultural communication if no native speakers are represented in the facility
- Assumption that the German employees are not free from negative ethnic Prejudices therefore have a little acceptance by refugee families
- Reservations about suspected cultural proselytizing intentions

- Reservation of Muslims towards Christian tendencies
- Avoidance of authorities and institutions
- Fear of children being taken out of the family
- Fear of consequences in terms of residence law if they are used - e.g., from youth welfare offered
- Traditional taboos and modesty (“dirty family laundry washes / woman not in public”)
- Access to supply structures that reflect the social reality

Not only the refugee clients are afraid of the threshold also the employees of the regular services have internal barriers to the refugee children and their family. The refugee clients are attacked on the unconscious level by many social service providers. There it is a mixture of fear of others and activation of the collective feelings of guilt, from prejudice and from unconsciously acting ethnocentrism. Lack of cultural sensitivity and fear of losing skills and being overwhelmed (D. D. Filsinger, 2002).

Therefore, social workers can engage in a provider-level approach to solve a lack of cultural competence for their clients by:

- *Committing to self-awareness and respect for cultural diversity:* culture is complex, dynamic, and diverse. A person may or may not be typical of their cultural group. Never lose sight of the person as an individual (Walker, 2019)
- *Building knowledge of refugee cultures, home countries, histories, and experiences:* Both refugee families and providers believe that refugee service providers should be culturally informed. People from refugee backgrounds have also emphasized that providers should understand them “in their totality”, not just as “refugees” or “New Germans” (Phillips, 2009)
- *Engaging respectfully with clients:* Cultural competence studies emphasize the importance of open, respectful communication and building trust and rapport (Suurmond et al., 2010). People from refugee backgrounds, who receive services they perceive as technically competent but lacking in cultural competence, may find the experience distressing and isolating (Phillips, 2009).

Moreover, NASW (2015) has published 10 standards for cultural competence in social work practice that includes while working with refugee children and their families. Each standard is discussed below in reference to working with refugees. Social workers are expected to

1. Function according to *ethics and values* of their profession
2. Recognize and *stay aware* of their cultural identity and others
3. Possess and *develop specialized knowledge* about history, traditions, values, family systems, refugee status, religion, sexual orientation of the group they serve
4. Demonstrate the importance of cultural values by utilizing a diverse range of skills (micro, mezzo, and macro) and techniques.
5. Be *aware of services*, resources and institutions serving refugee children and their families
6. Understand the impact of social systems, policies and how it affects refugee children and their families. Therefore, *stand to advocate* on behalf of multicultural clients.
7. Support and advocate for *diverse workforce* recruitments that had prior success in working with refugee children and their families.
8. Should take leadership in educating their colleagues about culturally competent practice with refugee children and their families, therefore fulfill a *professional education* standard.
9. Provide alternatives for refugee children and their families so that they can *communicate* effectively for instance by providing translation services.
10. Demonstrate in promoting cultural competence in their organization and beyond.

Effective practice with refugee children and their families requires culturally competent individual practitioners and organizations. To become culturally competent practitioners, social workers must develop abilities and capacities that facilitate their work with diverse populations (Walker, 2019). Social workers must be able to see the world through the eyes of refugee children and their families by learning about their values, beliefs, and custom(s) to which the refugee children and their families belong. They must assess their values, beliefs, and culture to scrutinize and change false assumptions and stereotypes.

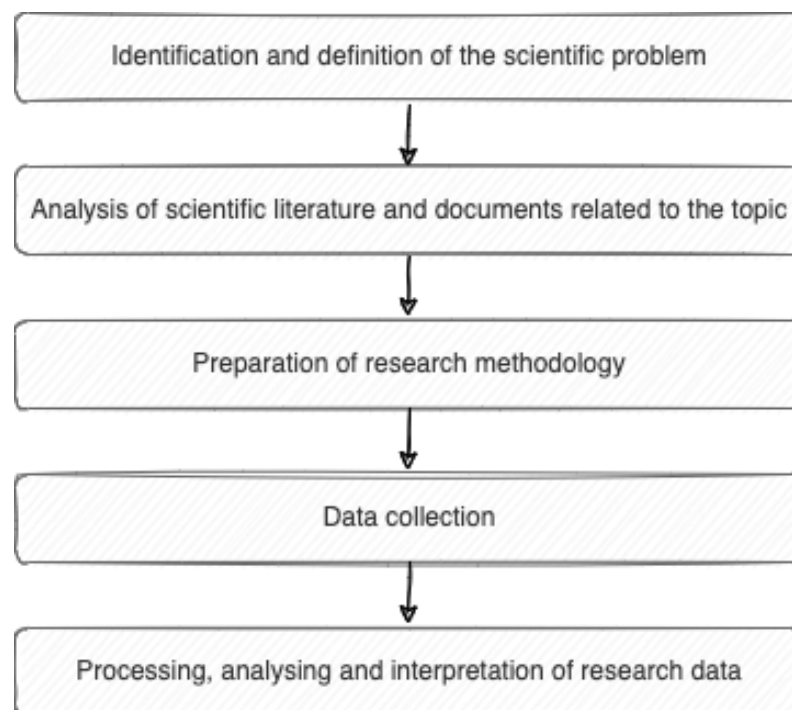
*To sum up*, social workers must think and behave flexibly without judging, respecting, and valuing diversity as a positive, enriching characteristic of human life. While learning about the cultural values and customs of a varied group, the social worker must determine whether or not the group's understanding applies to a particular kid or family. (UNESCO, 2009).

## 2. THE EXPERIENCE OF SOCIAL WORKERS WORKING WITH REFUGEE CHILDREN AND THEIR FAMILIES IN GERMANY: THE CASE OF STUTTGART

### 2.1. Methodology and research design

The purpose of this chapter is to explain in detail the research methods and the methodology implemented for this study. The chapter will explain first the choice of research aim, then the research design and methods. The chapter then goes on to discuss the sampling procedure applied by the author, as well as the advantages and disadvantages of the research tools chosen followed by the data analysis methods which have been used. It concludes with a brief discussion on the ethical considerations and limitations posed by the research methodology.

**Logical sequence of research:** The research process is composed of a series of actions or steps required to conduct research effectively, as well as the desired sequencing of these actions or steps (Fig. 4) is an ideal demonstration of a research process.



**Fig. 4.** Research process

#### Step 1: Identification and definition of the scientific problem

A research problem is a statement about an area of concern, a condition to be improved, a difficulty to be eliminated, or a troubling question that exists in scholarly literature, in theory, or in practice that points to the need for meaningful understanding and deliberate investigation. In some social science disciplines, the research problem is typically posed in the form of a question.



A research problem does not state how to do something, offer a vague or broad proposition, or present a value question.

### **Step 2: Analysis of scientific literature and documents related to the topic**

Once the research problem was identified and defined, the scientific literature and document related to the topic were analyzed. A theoretical part of the thesis was prepared to reveal multiculturalism and diversity practice by revisiting the circumstances, needs, integration policy of refugee children and their families in Germany while revisiting studies related to diversity practice, multiculturalism approach and cultural competence in the field of social work.

### **Step 3: Preparation of research methodology**

After a theoretical analysis of scientific literatures and documents related to the topic, a research methodology was prepared.

### **Step 4: Data Collection**

Accurate data collection is crucial to evaluate and answer the research problem proposed in the introduction of this research. Therefore, in this research a qualitative data was collected to explore the experience of social workers working with refugee children and their families. The collection of data was organized as an open-ended question keeping in mind that the addition a body of knowledge to the existing research is of importance.

### **Step 5: Processing, analyzing and interpretation of research data**

The collected data was processed, analyzed, and interpreted based on the principles of thematic content analysis and the use of NVivo analysis software. The result is presented as a figure and table

### **Type of research**

The focus of this research is to understand the contribution of social workers working with refugee children and their families. Therefore, this research makes use of qualitative research methods, according to Denzin & Lincoln (2011, p3), qualitative research is a situated activity in which the observer is positioned in the world. Qualitative research is a collection of interpretive, material techniques that help us see the world. These actions have a transformative influence on the environment. They transform the world into a collection of representations, which may include field notes, interviews, dialogues, images, recordings, and self-reflections. Qualitative research entails interpretive and naturalistic approach. This means that qualitative researchers observe events in their natural environments, aiming to make sense of or interpret them in terms of the meanings given to them by individuals. According to Pulla and Carter (2018), interpretivism enables the researcher to develop in depth subjective insight of people's lives. One reason for using a qualitative approach and applying interpretivism in this study was to present a

comprehensive view of the subject from the perspective of social workers who have worked with or are currently working with refugee children and their families, as well as their perceptions and understandings about it through in-depth interviews.

**Data collection method.** For the purpose of this research a semi-structured interview method was used. According to Kallio (2016), semi-structured interviews are a common data collection method in qualitative research that has been found to be successful in enabling reciprocity between the interviewer and participant therefore, enabling the gathering of valuable information. As the current research requires enriched input about the experiences of social workers, this data collection allows for open-ended responses from participants for more in-depth information.

**Data collecting instrument.** The instrument used for data collection was an interview questionnaire (see Appendix 1). The interview consists of 6 major research question topics followed by sub-topic questions. Furthermore, when required the researcher has flexibility to ask a follow up question. The questions for social workers are designed in such a way that they can explain their experiences while working with refugee children and their families' addressing challenges, needs, interventions, essential competences, and reflection towards areas of professional development.

### **Sampling procedure**

In this research, purposeful sampling techniques is used with a criterion sampling approach by identifying and selecting interviewees based on predetermined criteria as mentioned by Palinkas (2015). The research participants were chosen according to the following criteria: 1) social workers working or worked with refugee children and their families 2) social workers with at least 2 or more years of experience with refugee children and their families

The study was carried out in May to June of 2021 in Stuttgart city, Germany and data saturation was applied. The researcher applied interviews indefinitely, or until data saturation occurs and fresh data from interviews ceases to emerge (Arnault, 2002).

### **Sampling description**

The study was conducted with 6 social workers, 1 male and 5 female social workers who have at least 2 or more years of experience of working with refugee children and their families. According to the scope of the study, participants reside in Stuttgart and work as social workers at the time of the interview. Ahead of the interviews, participants have been given an explanation

on the purpose of the research and agreed for participation through a direct call and email communication channels. The characteristics of the participants is depicted in table 3.

**Table 3:** Description of research participants

<b>Codes of interview participants</b>	<b>Gender</b>	<b>Work of experience with refugee children and their families</b>	<b>Role description</b>
SWM	M	5	Social worker
SWF	F	2	Social worker
SWE	F	3	Social worker
SWD	F	5	Social worker
SWL	F	2	Social worker
SWML	F	7	Social worker

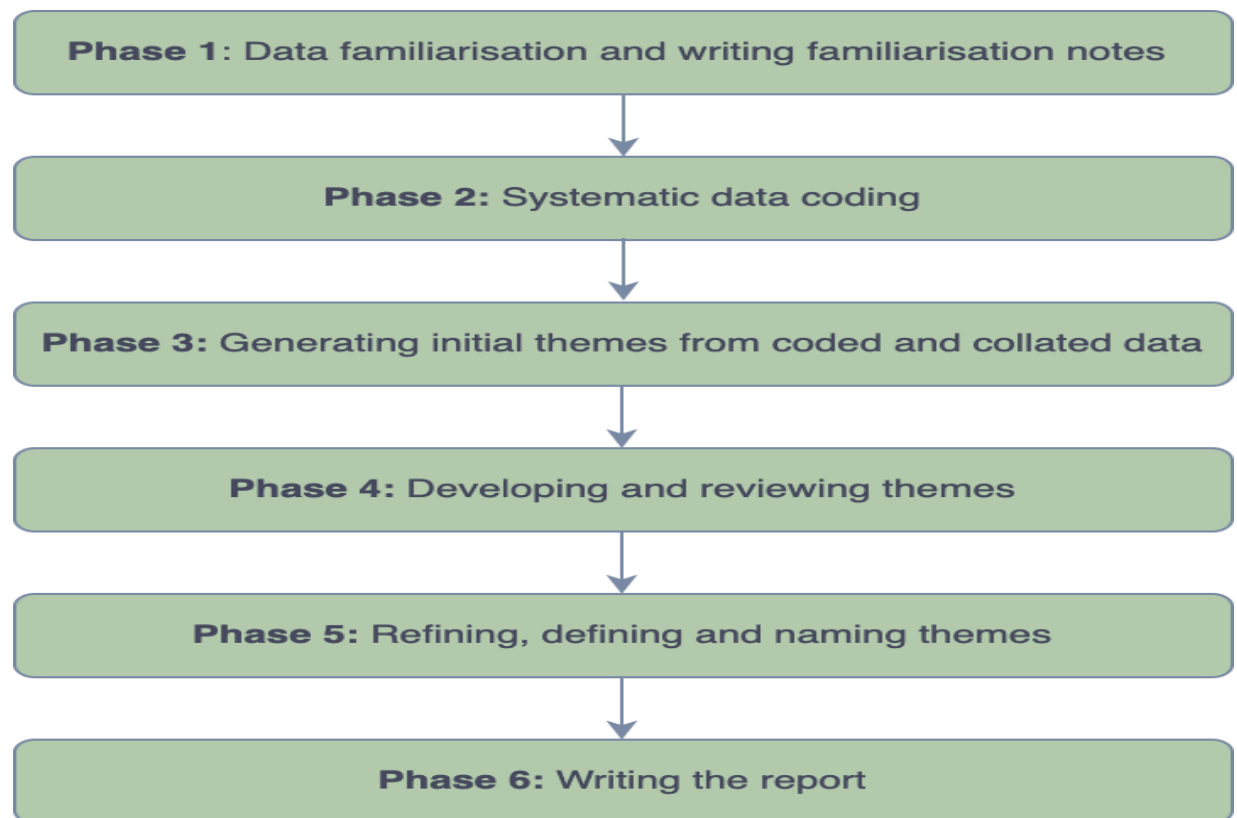
### **Ethical considerations**

The research has taken into consideration issues related with the informed consent of the participants. All the social workers undergoing interviews were informed in advance about the purposes of this research and gave their signature on an informed consent (Koskei & Simiyu, 2015). Before interviews, participants are required to fill a consent form and confirm their voluntary participation with a signature. Their identity including their name and place of work has been kept in strict confidentiality by assigning a unique code to each participant.

On the other hand, since the topic touches more vulnerable parts of the participants, emotional distancing was considered at the time of the interviews, for example when the participants must share emotional occurrences in time.

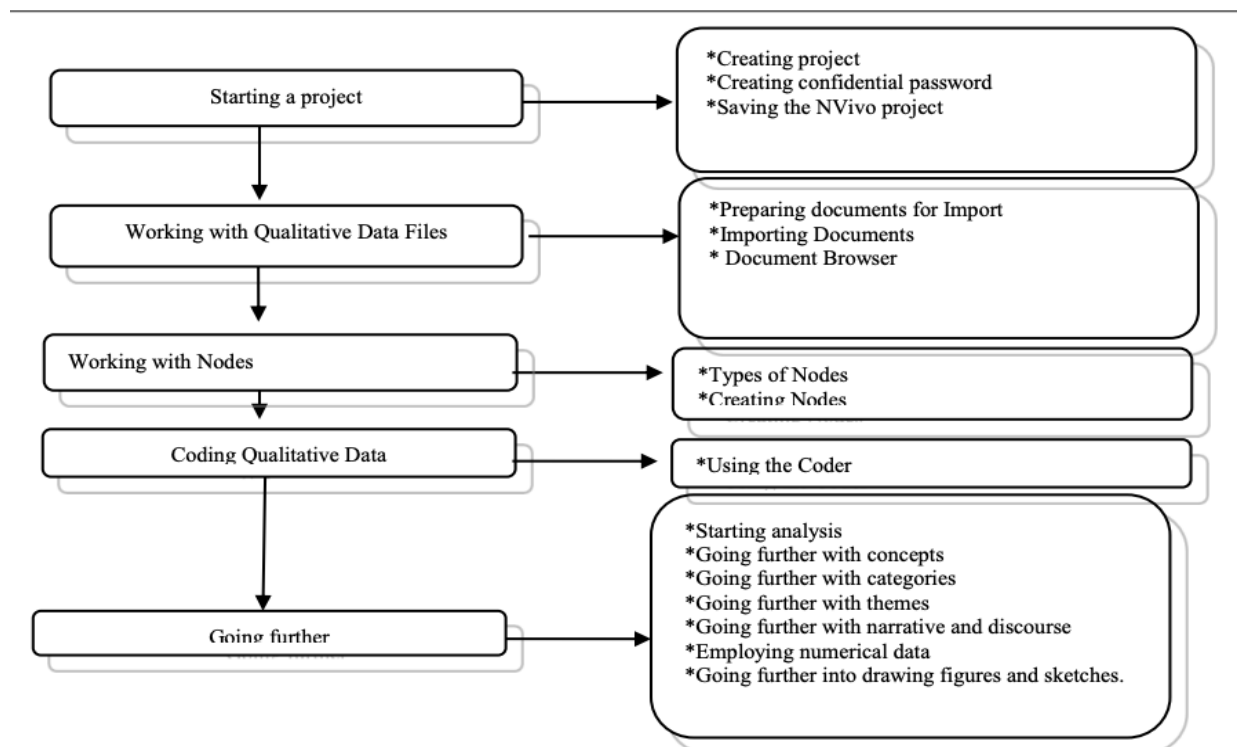
### **Method of data analysis**

The analysis of the semi-structured interviews undertakes a thematic analysis. Qualitative thematic analysis is a suitable method of analysis for understanding experiences, thoughts and characteristics across the data that has been collected (Michellée, 2020). Using thematic analysis as a method to find, analyse and report repeated patterns among social workers experience sets the ground to realise insights into the research question and further find the relationship with underlying theory framework. Thematic analysis involves six iterative processes (Fig. 5):



**Fig. 5.** Iterative process of thematic analysis

The data analysis was achieved using NVivo, that supports organizing transcripts, coding and grouping by themes.



**Fig. 6.** Procedure followed in NVivo

## **Research limitations**

The interviewer's positionality and cultural gaps might have affected communication in some of the interviews.

## **2.2. Data analysis**

The analyses of the research data disclose 4 main themes and corresponding subthemes, with main themes include

- 1) the needs of refugee children and their families comprising limited access to education, limited access to health care services and unfavorable housing conditions as subthemes
- 2) interventions used by social workers comprising child protection and family reunification, psycho-social service, and multidisciplinary teamwork & referral support service
- 3) the challenges faced by social workers comprising cultural norm and poor attitude, heavy caseload and refugee protection related laws
- 4) the areas of professional development comprising cultural competence, critical thinking, and organization

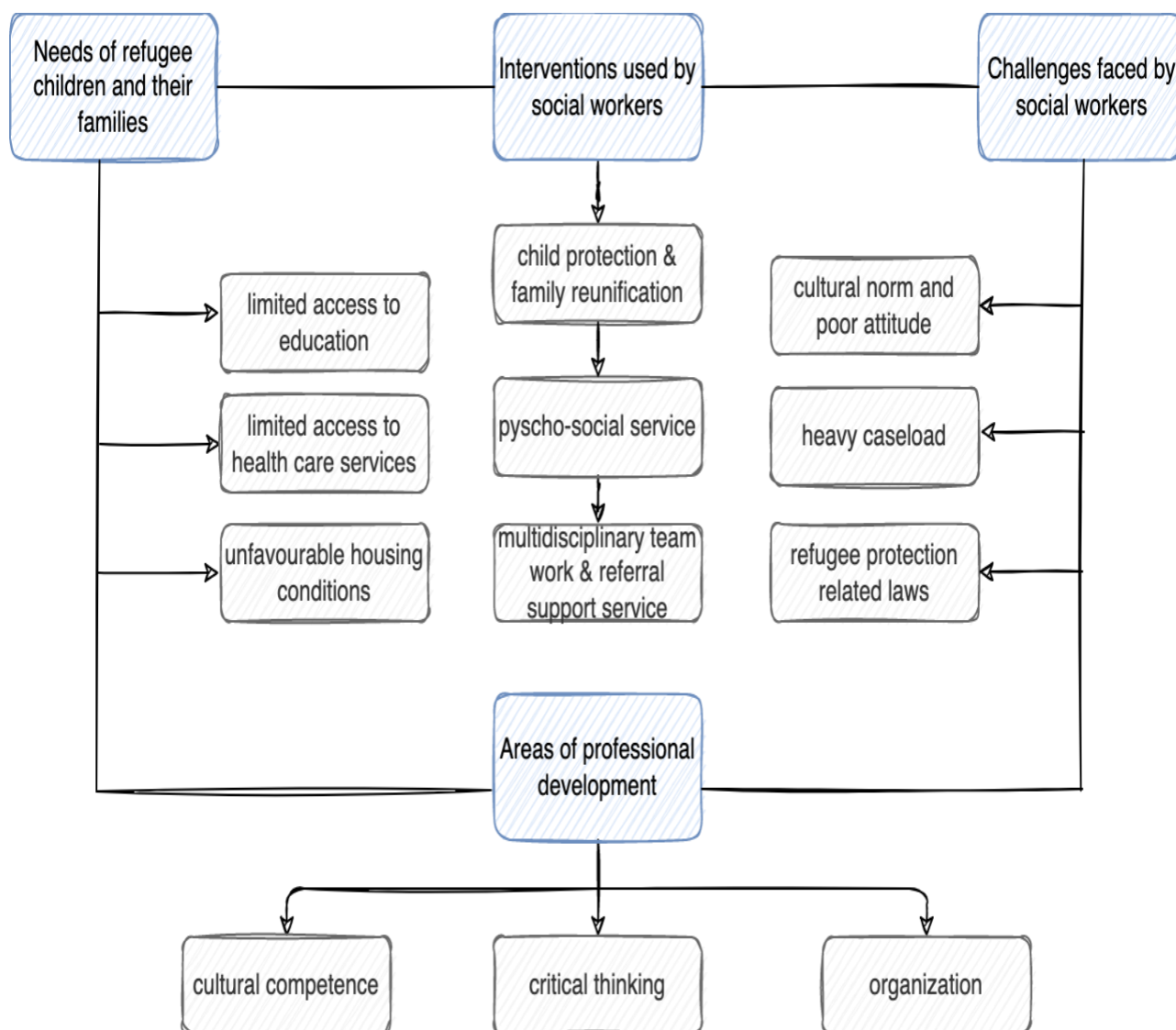


Fig. 7. Summary of thematic analysis

### 2.2.1 The needs of refugee children and their families

The study revealed different needs of refugee children and their families (Table 4).

**Table 4:** Thematic Area 1: Needs of refugee children and their families

Thematic Area 1	Subthemes
Needs of refugee children and their families	Limited access to quality education
	Limited access to Health care services
	Unfavorable Housing conditions
	Language and communication related barriers

***Limited access to quality education.*** Among the needs of refugee children and their families is the limited access to quality education for their children. Easy access to education is essential for children as through it, they acquire necessary skills that enable them to live as responsible member of society. However, assisting refugees to access education is associated with various challenges including waiting for a long time for children to be enrolled. This was brought explained in the following statements:

*“When the kid grows up, we help them find kindergarten and help them also to transit as a transit from the kindergarten to the school and everything in between. It's very difficult to find a kindergarten space because there's many kids and not enough kindergartens, which means sometimes the children don't go to the kindergarten at the age of three. But at the age of four or five, sometimes even six.” (SWM)*

Because of this problem it was mentioned that they try to enroll children as earlier as possible like immediately after they are born to book a place for them so that they may go when they reach the required age as shared here below:

*“We assist their kids to be enrolled into kindergarten, but the problem is that here you have a very long waiting list until the kids gets enrolled in kindergarten, so you have to start the process early like after they are born so that you secure a place for them.” (SWF).*

Social workers explained what is required for refugees' children to have access to education and the process where they check the age of the child and how they try to do all the necessary to facilitate access to education even though the waiting time is long:

*“So, what we do we check if they have an interview scheduled or not It is important to confirm the age of children after that we assist them in getting enrolled to school and facilitate them to access train or bus (ticket or card) usually the process take a long time like four months” (SWE).*

Another problem associated with the access to education for refugees, is that the performance of children who manage to get enrolled is poor not only because of the living conditions at the camp where there are distractions but also lack of involvement of parents with homework and active participation in their children's education. This was illustrated in the following statement:

*“As I mentioned the rooms are like 14 square meters for two people. So, you don't have any quiet atmosphere for doing homework and in addition to that most parents cannot help their children to revise, especially with German lessons. So how children are supposed to perform well” (SWD).*

Uneven preparations by the state concerning to the mandatory schooling of recently arrived children do not provide equal opportunities for all that, the time of waiting to access to education

also impact the future school attendance in general for these refugees to the extent that even when there is a place in school the eligibility criteria like the age are hard to meet since they aged out and thus some children educational needs are not met as explained here:

*“Age limits stop admission to education for refugee youth who have reached the age of 16” (SWML).*

Lastly, it was clearly stated that communication between children, families and the teachers is essential in education to make sure that the needs of children according to their stage of development are being met. This was pointed out by social workers explaining difficulties around the education needs of children where parents don't communicate with teachers due to language barriers and it is not easy to attend Germany language classes because they must stay home taking care of the children who have not got place in kindergarten. This was illustrated in the following statements:

*“So, it's especially the women who are suffering from as it's really hard for them to get connected with teachers of different children who manage to go to school, since they need to do childcare for those other children if they are at home and can't go to a kindergarten or school and. Then that also makes it harder for these parents to learn German and of course they are pretty much excluded. (SWL).*

**Language and communication related barriers.** Refugees and their families have communication problems due to language barriers and this is one among many problems they have and a serious obstacle to their integration in receiving countries. This was pointed out by one social worker in this way:

*“I have several cases where I am talking with customer service on behalf of families when they don't pay their rent or they get caught driving without a ticket or someone who does not pay his phone bills, internet I try to call customer services a lot however the problem always is that they are not allowed to give me any information unless the person (/refugee families) is here, but the person doesn't speak German to explain his problem (SWF).”*

**Limited access to Health care services.** Social workers explained that refugees have several needs mainly regarding access to health care, they get assistance in finding translators and scheduling appointments to ensure that health care is accessed. They believe that the health care provisions available are not proportionate to needs of families as pointed out in these statements:

*“The communication between the doctor and patient is impaired if there is no translator to help and families are denied medical care if there's no translator available (SWD).*

Assistance provided to refugees in general depend on the needs expressed, however some problems are not easily noticeable like mental health problems associated with traumatizing life



experiences they have lived that cause repercussions to the behaviours or living styles in the camp where they stay, and therefore it is challenging for refugees and social workers to handle them.

One participant explained that in these words:

*“They are burdened with their own things, and they have sometimes difficulties expressing how they feel and what happened to them. Sometimes it can be their own illnesses or traumatic experience or still, language to use telling their story is the problem that they chose to deal with all those issues by themselves and with their own souls, rather than being open to share, and fear that their children may be removed under their care because it happens sometimes in with some families where there is a threat to the wellbeing of children, like when parents have mental problems they are placed in temporary care (SWL).*

Access to health care whether it is full, or partial depend on the status as a refugee or asylum seeker, according to the laws and policies to the extent that the doctor chose to help needed basing on that and considering the documents you have. This was detailed by two participants in these statements:

*“Depending on the piece of paper you have they can help you by only doing the basics, like when you have pain, they stop your pain, but for other cases I have a client, for example, who has tooth pain but because of her piece of paper, they are not treating the tooth, they will probably just pull it because you don't have to full access to health care and no one is going to pay for it (SWF”).*

The link between access to health care and legal stay in host countries was pointed out also by social workers:

*“Obviously, health care is a big issue, and now it's it depends very much on the status as well. So, when you have refugee status, you have normal health care. And when you arrive as an asylum seeker at the beginning, you get papers from the social welfare office to visit doctors. The children get normal health care. But for adults, usually they say, OK only for emergency things, and cannot do everything. Then we have people with suspension of deportation, with them there have been problems especially when they would need a therapy or special treatment sometimes the cost for that will not be covered and this is very sad, but yeah, it really depends on the single case.” (SWE).*

Social workers outlined that some doctors according to their speciality are not easily accessible to refugees/asylum seekers because they have many patients.

*“It's hard to find a paediatrician right now. It's almost impossible. It's only if there's an emergency because they don't take new clients. (SWML”).*

**Unfavourable housing conditions.** Unfavourable housing conditions raised as a challenge for children and their families, is explained initially by the big number of people staying in group or collective accommodation where privacy is limited or inexistent and it is not safe especially to children. This was highlighted by a participant:

*“This is a very big challenge for the children because everything here is very crowded, and the rooms are full. They don’t have their own room. And also, another thing is that they have shared bathrooms and kitchens, with other families like men and women that are not known to them, and it is not safe space for children, even if they know the people on the same floor or flat sometimes, they have guests who can abuse the children. So, there’s not really any safe place especially for children. (SWM)”*.

*“Accommodation is really a big problem because people live so close together, they share that bathroom with 20 other people and that kitchen to you share your washing machine with like 40 other people.” (SWF).*

The private accommodation for refugees has a positive effect on the wellness of refugees and asylum seekers as advanced by a social worker working with them. She explained that in these statements:

*“But when you live in your own apartment, you have quiet, you have peace. You don’t have like 20 other people. But that you share your kitchen with, so it’s like you a level of hygiene and you clean it and it’s like a whole different mindset.” (SWF).*

The comparison was made also between a level of wellbeing between those who live in shared accommodation versus those who live in private accommodations emphasizing that stigmatization is found in people who have emotional problems since their condition affect the wellbeing of others living under the same accommodation. This was detailed here below by a social worker:

*“Sometimes in one room there were six seven sleeping on the couch. In a big room with 30 people. And you know these beds are not good. Besides, such shared accommodations you can never knowing who’s coming to night in this room or who’s leaving, it is not comfortable. Again, with little children they cry or scream, or others have behaviours issues like aggressively, fight with each other’s, they steal things from the kitchen and put it in the cupboards and or hide it under the bed or something like that. We had also those who had trauma because of what they experienced, maybe during the war there and psychological issues that they are screaming in the night due to nightmares that other people staying with them were complaining because they cannot sleep, it’s a lot of*

*problems we see we even have those who are self-harming, You know, like taking a knife and stretching, or cutting their hand, (SWE) ”.*

*To sum up*, it is essential to create new initiatives for opening new schools that will guarantee the availability of education centres for children where parents, teachers and children work together to achieve healthy growth of the children in to educated citizens. Moreover, language acquisition allows everyone to communicate without barriers. On the other hand, accessible health care choices for families are crucial to achieve integration goals. Finally, assessing living conditions for refugee children and their families is critical to understand refugee’s welfare.

### **2.2.2. Interventions used by social workers to address the problems of refugee children and their families**

The study revealed interventions used by social workers to address the problems of refugee children and their families (Table 5).

**Table 5:** Thematic Area 2: Interventions used by social workers to address the problems of refugees (children and their families).

Thematic Area 2	Subthemes
Interventions used by social workers to address the problems of refugees (children and their families)	Child protection, family tracing and reunification
	Psycho-social service provision
	Multidisciplinary teamwork and referral support services

***Child protection, family tracing and reunification.*** Social workers shared that they manage cases whereby there is conflict between parents, and they need to support children and their families in making sure that children are protected against any harm that would affect them directly or indirectly.

*“We manage cases where the husband hits the woman in the presence of kids that they try to stop the fight themselves trying to rescue their mother or they call the neighbours for help or call the police to be involved.” (SWF).*

Among the interventions they conduct includes identification of unaccompanied minors and separated children from one of the parents not only to ensure that their needs are met but also to assist them to contact and have reunited them with their families if they are still alive or facilitate placement alternative care in host countries.

*“We had children who came without their parents. some shared that they got separated on their way and stopped in Turkey or somewhere else, some had phone numbers that we try to call and put them in contact with their families or others cannot be reached.”* (SWE)

*“Something that is always nice for social work is when family that has to been split up and is reunited again, we had this case of a brother and sister. The brother was an adult, but the sister was a minor about 10 or 11 and the family was still in Syria, and they lived here for quite a few years and a year and a half ago, then through contacting and sharing information the family finally made it from Syria to Germany, and now the entire family is reunited. It’s a nice accomplishment.”* (SWL).

Social workers are expected to be alert to receive and keep record of the people who come in the camp for the first time. They explained how they help children and their families including assistance regarding birth registration for children born in the camp and other necessities. this was illustrated in the following statements:

*“We help with all the documents, the registration of the child and finding paediatrician and booking appointment every time it is needed.”* (SWM).

**Psycho-social service provision.** The circumstances that lead them to seek refuge in another locality are sometimes linked with traumatising events that the expertise of professionals is needed to best assist them, therefore psychosocial care is provided to families to enable them to cope with difficulties associated with their condition of being refugees. The time needed for their documents to be ready is unknown and the process is long that there is needed communication and interactions with different actors involved to inquire what is necessary and make sure that needs of refugees are addressed including emotional needs as they express concern that they might be sent back to their home country is they don’t have documents. This was detailed in the statements below:

*“I support the people within everyday life. I try to help them with contacting doctors and having their paperwork done or submit their application for money, which they get each month to support themselves. And sometimes I have time to sit down with the families and people to talk a bit about their lives and why they are refugees, some people are open to talk about it and they have fear to be sent back in their home countries”* (SWD).

**Multidisciplinary teamwork and referral support services.** Social workers are in direct contact with refugees, they hear their problems and refer them to other service providers who can assist them according to their problems.

*“We conduct assessments and try to find a way to solve the problem, or we communicate with other actors to act in the best interests of our clients and it's always like a struggle since they often have the feeling that nothing is moving “(SWL).*

*In summary*, uniting separated refugee families with their children or vice versa remains of importance for social workers to intervene and facilitate the reunification process. Social workers help to their service users to cope with trauma and problems. Therefore, social workers working together with other support services can provide efficient services to refugee children and their families.

### **2.2.3. Challenges faced social workers face in working with refugee children and their families**

The study revealed challenges faced by social workers in working with refugee children and their families: culture norms and poor attitudes, heavy caseloads, refugee protection related legislative frameworks (Table 6).

**Table 6:** Thematic Area 3: challenges faced social workers face in working with refugee children and their families

Thematic Area 3	Subthemes
Challenges faced by social workers face in working with refugee children and their families.	Culture norms and poor attitudes
	Heavy case loads
	Refugee protection related legislative frameworks

***Culture norms and poor attitudes.*** Among many challenges identified by social workers includes some culture norms which are associated with restrictions to privacy, controlling behaviour and many other harms perpetrated against women to the extent that it become hard to help survivors of these harms and their families who need social work interventions during their stay be it short or long-term in the camp. This was explained by one social workers in these statements:

*“I knew that in some cultures women don't have the same rights or are not seen as equal. Sometimes I felt bad not knowing what to do because in the end, the husband decides for everything and I think maybe if there was a male colleague to solve some issues things could be better for these families we have .There is a case of this family I tried to get in touch and I found out that the woman has been unreachable because the husband always*

*locked the door when he left , it was really hard because we were thinking about involving the police as we wondered what can we do if something happens, like if there's a fire she would be dead. She and the small daughter so. I tried to talk with this man, but it didn't work. In the end, they moved away, so I don't know what happened to them in the end. (SWD).*

Another challenge identified is the poor attitude of refugees especially rudeness while asking for services is frequently found and it's one of the challenges encountered by social workers who do all their can to assist these refugees.

*“So professionally, I would say you sometimes when a person yells at you, sometimes you just need to try to understand where the person is coming from and what's happening in their life. I'm not saying that it's OK to yell at someone because you need help, but we see this a lot.” (SWF).*

Mass movements of refugees is a big challenge for social workers as the people in charge of securing shelters and cater for needs of these people and sometimes there are not enough staff to help.

*“Often, we are understaffed, which means there's a lot of work to do and some colleagues are very sick, or somebody is on a need for some reason, or we don't have new colleagues. This is quite challenging because in the last few years, more and more colleagues quit including those older colleagues with the work experience and it makes it difficult to assist all those who need our services. (SWML).*

**Heavy case loads.** Another social worker pointed at the heavy case load in these statements:

*“It's not OK having 80 people in one house, which is meant to be for 16. But it's getting more and more common to have a bus coming in the middle of the night with people that needs you. In this situation you must solve this problem and there is not enough space for too many people.” (SWE).*

Social workers spend most of the time with refugees that they understand their needs and see their needs which are sometimes ignored by laws as well as refugee protection related legislative frameworks in Germany and that is a challenge to social workers who are supposed to act in the best interest of refugees and at the same time comply with the laws and have a collaboration with actors involved in the implementation of these laws.

*“About laws personally, my opinion is Germany's trying to make you want to leave yourself.” (SWD)*

*“And often the police call us in before to let us know what's going to happen. As social workers, we would like to warn the people and say, listen, please don't come home on this day because the police are coming to deport you, but we can't its illegal. So, we just must comply with whatever comes from them. What we do is we've tried to communicate with the police as simple as we can, but we abide by the rules.” (SWM).*

**Refugee protection related legislative frameworks.** This was also supported by another social workers who explained how it is hard to work with law influencer:

*“The legal system is the biggest obstacle, I think, in this work field. Yeah, because it's very strict. We were supporting people to get in touch with lawyers. But our team leader advised us not to talk about this part of our work with our lawyer because their interest was to send away the people as soon as possible and our interest was to support them as good as possible. So, this was like a secret part of our act, so I often go with people to the lawyer.” (SWD)*

In summary, social workers must have to be aware of some refugee children and their families try to live up to their cultural norms and beliefs that requires the social worker to adopt cultural sensitivity and the right approach to give services, moreover, how to deal heavy caseloads at times. Finally, it can be a challenge for social workers to work with law enforcements targeting refugees to leave than to stay.

#### **2.2.4. Area of professional development of social worker working with refugee children and their families**

The study revealed the area of professional development of social workers working with refugee children and their families (Table 7).

**Table 7:** Thematic Area 4: Area of professional development

Thematic Area 4	Subthemes
Area of professional development	Cultural competence
	Critical thinking
	Organization

**Cultural competence.** Social workers are expected to be deal with people from different backgrounds reason why they need to act courteous and receptive to related cultural beliefs to be able to build good relationships with them and meet their needs.

*“You need to understand that people act in a certain way that you will never understand because you did not grow up the same context as they did. You need to accept that if they do things differently than you do, it’s still good. It’s different, but it’s good. It doesn’t mean that things are bad. You need to be open for like maybe speaking a lot with your hands and trying to explain things and maybe learning, yes, maybe learning some words and that different, different languages.” (SWF)*

**Critical thinking.** Critical thinking is the aptitude to examine information collected from unprejudiced scrutiny. Social workers are expected to impartially assess each case by gathering information either by observation, ask question and investigate. Thinking critically allows social workers to make informed decisions, recognize the greatest ways and design the suitable plan to assist people who need services.

*“You also try to adjust to that environment where they are working so that they can accept you. Automatically because the way you act or the way you handle problems, that’s one of the things that define you when you are with them, sometimes it is needed to think quickly and effectively according to the situation.” (SWD)*

**Organization.** Because social work services in the camp are needed by different groups of people, without organization it impossible to meet the targets and assist the people planning what is needed to be done and when to do it is part of organization of your work as a social worker.

*” I think, well, I have my office hours, I have them from 10 to 12 and then I have them in the afternoon from like two to four and everything. We’ve got this office hours, I would say, I have to better organize my work because normally, the people are supposed to come into his office hours so I can, like, collect all information needed and prepare what I have to do and then I can work on it in free time when I’m not here, because I only work three days a week at the moment” (SWF)*

In summary, social work as a dynamic profession, it requires refugee social workers to develop their cultural competence, critical thinking ability and collaboration skills among different organizations and service points as an essential pre-requisite to work effectively with refugee children and their families.



### 2.3. Discussion of results

Safeguard of human rights, especially refugees, is a global concern, which is the main preoccupation for many actors specifically social worker. Regarding the needs of refugee children and their families one of them is the limited access to quality education in the camp where they are staying. The majority of people who requested protection in Germany is young people below 30 years old between 2016 and 2017 (Maddox, 2021). This group of people has specific needs among which education is included. Education is the route through which one society pass on wisdom, standards, abilities from one generation to another (Dar, 2020). It is important that all children access education as it is useful for people. According to Human rights and especially the rights of the child, every child regardless of his or her origin must be educated by his or her guardians (Miller et al., 2014).

Meeting education needs of children has been and will always be a controversial topic but when it comes to vulnerable children other needs like nutrition, health is prioritized yet educational needs are also to be met. This problem has attracted attention of several researchers, for example, Heldal et al. (2021) affirmed that refugee children are segregated against as they are considered as outsiders by the host communities. This shows how prioritizing the education needs of children in refugee camps is needed since through education, acquisition of skills needed for successful integration in host countries like language skills as well as other skills is achieved. In a research conducted by Kollender (2020) this limited access to quality education was also raised by where it was pointed out that the long waiting periods for children to be enrolled in educational institutions which vary between 3 to 6 months is a problem for refugees and their families without forgetting denial to access education if an individual has reached 16 years old . Usually, refugees should be facilitated to get all the services they need in the host country because these host countries have shown that they have the power and ability to receive and host refugees, However according to the social workers, the refugees are saddened by the fact that they are not receiving the services they need yet there are institutions and organizations mandated to provide these services. Shuayb & Crul (2020) found out that refugees in different part of the world are subject of discrimination, marginalization, and exploitation due to unfriendly educational policies where refugees are expected to accept whatever educational options available that benefit the host countries in different ways.

The right to health care for refugees is a matter of great concern as it has been shown that some of the diseases that refugees face is neglected. A study conducted by Edward & Hines-Martin (2014) revealed that refugees face obstacles in their attempts to access health care because of limited accessibility and availability of services.

It is common for employees working at various levels in the camp or outside to meet and discuss inter-agency collaboration to better assist the refugees, however, the study conducted by Warmbein et al. (2020) revealed issues in health care service delivery for refugees where it was noted that authorizations of health services, information sharing and collaboration between actors in charge, deficiencies in management of mental health problems are the main barriers to accessibility of health care services of refugees in Germany.

This correlates with the findings of this study where it was found out that having the right to medical care and receiving assistance in that regard depend on the legal status and the ability to express yourself in German language. Based on this you can prove that even though there are various refugee care agencies, whose main mandate is to promote the welfare of refugees, the cooperation is nonexistent since each of them works independently without involving other partners who work for refugees, yet their teamwork would help in better health service delivery.

DeSa et al. (2022) identified barriers to access mental health services for refugee women in high income countries for refugee resettlement mainly language barrier, stigmatization, and lack of culturally appropriate resources. There is a need to take care of the welfare of refugees, by facilitating easy access to medical care, as it has been shown that mental illness affects refugees due to their poor living conditions in the refugee camps or the traumatizing events they have experienced before reaching the host countries. Access to health services may also be limited by other factors on behalf of refugees or asylum seekers like, the legal status in a host country as shown by the study of Decker et al. (2018) who found out that undocumented individuals are afraid to go to the doctor for fear that the authorities will take them back to their home countries because they are staying illegally in these countries. Refugees are at risk of a variety of health problems, but especially mental health care is one of the most urgent issues that need to be addressed and the available health systems in host countries are supposed to meet the needs of these refugees and make sure that information regarding health provision are available regardless of the legal status Walther et al. (2020). It is a fact that legal restrictions have an impact on the access to some services they need.

From this study, housing living conditions related problems that emerged are in two different domains the first one is related to health and wellness where it will be demonstrated the impact of these housing on psychological wellbeing of its inhabitants whereas the other one concerns the location of these accommodations and its ability to meet the needs of its residents. It came out that refugee housing is characterized by overcrowding, lack of comfort and lack of privacy in collective accommodation where people who have some sickness or who have a disability maybe exposed to stigmatization by those who live in those public buildings, and all these have a negative impact on the wellbeing of refugees and their families in general.

Previous studies carried out regarding the accommodations of refugee have similar findings like this study about refugee camps in Jordan by Alawamleh (2020) who mentioned that discomfort in refugee camps is caused by overpopulation and this causes further problems like waste accumulation in inhabited areas and aeration gaps making the stay of refugees in such setting insupportable but tolerable since there are no other options. It was also pointed out in some countries that these accommodations have bedbugs that inhabitants have bites and rashes caused by them and authorities believe it is costly for them to address this problem (HADZIBULIC, 2020).

The cost of services needed by refugees has been discussed where it was pointed out that refugees are exhausting the resources of European countries (Beck, 2017). This would explain why the housing conditions for refugees has many shortage as acclaims by these professionals working in refugee camps. The problems of this settlement are innumerable but this in particular has been frequently revisited by various researchers includes inaccessibility to necessary elementary systems and services needed to perform effectively like lack of internet and private rooms for students (Kollender, 2020). Depending on the age of the residents in the refugee camps, each age has its own challenges, here we can mention the results of another study about children's play which revealed that people in the camps are worried about the bad habits that could be copied by children from other residents with whom the play (Ardelean, 2021). Beside there is a problem with the location of these housing specifically the fact that they are frequently in the rural areas make it hard to access some educational institutions as demonstrated (Koehler & Schneider, 2019). These are issues of concern as observed by the people working in these residences even though the hosting countries continue to do much to improve the living conditions of the refugees.

The present study discussed also the interventions used by social workers to address the problems of refugees especially children and their families. Among intervention conducted by social workers include protection activities for children. Child protection is a type of work in charge of deterrence and response to abuse, exploitation, neglect and violence (Subashi & Bregu, 2021). Usually in wartimes the family prioritizes child safety which is sometimes is explained by many refugees who are predominantly children due to separation with their parents while fleeing or simply children who were sent alone so that at least the children could survive in case the parents die. These activities are usually carried out by these social workers in collaboration with other camp workers where they combine information and efforts to protect the rights of these children. Unaccompanied minors are a vulnerable group that needs attention among many other social groups found among refugees and asylum seekers this why services dedicated to help them take a big time of social workers (Salmerón-Manzano & Manzano-Agugliaro, 2018).

The study by (Gamez-Luna & Romo, 2019) stressed that accompanied children have unique needs to be met by host countries including schooling, alternative care arrangements, integration in the community, protection, legal support etc. For these activities to be performed successfully there's needed collaboration among distinct humanitarian organizations working for refugees. These play a key role in fighting against family separation, and participate in activities regarding family locating and reunification, controlling foster care systems and parental guidance services (Witte et al., 2016). The family is the first safe environment and the primary target of interventions dedicated to promote the wellbeing of children which is why child protection workers put so much efforts into supporting the family so that it can meet the child's needs. (Bennouna et al., 2018) found out an interconnectedness not only between children safety and wellbeing but also with family issues in terms of access to health care, occupation that some chose to abandon school to find employment and contribute to the problem solving of these social problems affecting their families. This shows how the welfare of the child is linked to the well-being of the family to the extent that if the family needs are not address it will have implication on children. In some cases families can be harmful to the children due to the behaviour of parents or caregivers that a professional is required to intervene like in case of neglectful or careless parents to the emotional or physical needs of the child (Venumadhava et al., 2017). Addressing these needs is also among the interventions conducted by social workers for refugee children and their families. Psychosocial support is the hub term to describe interventions performed to respond to social needs of its beneficiary (Ubels, 2020). Psychosocial problems associated with the condition of being a refugee /asylum seeker are responded to through provision of psychosocial support services provided by social workers to address the needs of refugees.

Some of the most common problems in camps, as demonstrated in this to research, are related to legal status of refugees and related documentations, which facilitate full access or limited access to medical services, schools and other necessities because of their difficulties in communication or language barrier, this assistance is provided by social workers to link refugees to other service providers like interpreters or assistance finding accommodation or to resolve disputes between their families and others. Abdelhamed (2021) asserts that refugees are exposed to mental health risks which may be related to war-related trauma or other forms of human rights abuses their experience in their home countries or even in the reception centers or refugee camp. In collaboration between agencies operating in the reception centers, these social workers find solutions to some of the common problems or refer the refugees to other service providers who can help but the initial identification of this problem is conducted by social workers. For example, in case of identification of psychiatric problem, referral is made to appropriate

institution and additional follow up is done by social workers. Activities dedicated to promote integration are organized to help refugees acquire basic skills and promote successful integration are facilitated by volunteers in collaboration with social workers these includes enrollment to German language training, job registration (Funk, 2016).

Language learning helps to interact with citizens and thus avoid to loneliness, because German language is very important for these refugees in daily communication and mainly a requisite in finding a job and thus making a living. Pot et al. (2018) affirms that learning a language for aging population is beneficial for their mental health since less language skills cause avoidance of social gatherings and create limited interaction with others. Zehetmair et al. (2021) stated that psychosocial activities organized for women where language classes, knitting, cooking classes and monthly cooking gatherings have been beneficial for women in terms of building their social networks, raising their self-esteem and created a safe space for women to discuss their problems and offer mutual support to one another.

A cultural aspect causing challenges in working with refugees and their families is linked with men negative treatment towards women and their rights, as it was found that in some societies, women are forced to remain behind and stand still while their husbands and brothers make decisions for them which is so cultural that whoever want to challenge that is considered as an extremist or deviant. Social workers indicated that they encountered problems in their daily work where they failed to reach some women because their husband before going anywhere they lock the door and open for them when they are back which is unsafe or considered as restriction of liberty to these women. Arar et al. (2013) portrayed struggles faced by Arabic women in education settings trying to break through cultural barriers and managed to sit in leadership positions which were intended for men and performed well in those positions proving how men and women are equal. The empirical findings of this study correlates with what was found regarding refugee women where their attitude and behaviours was also demonstrated as problematic: *“women react in certain ways such as stressing, panicking, quitting the tasks, wasting time and making wrong decision which negatively impact the integration process.”* (Kainat et al., 2021).

These authors further explained how these gender related struggles rooted in culture lead to adaptations difficulties in host countries where they are in constant dilemma between living an old life or imitating the culture of the host country, they went to, yet they were accustomed to living in overdependence on their husbands. Refugees meet problems before, during and after migration in different domains including financial, health, relational but again they have some abilities to cope, adjust and overcome these thanks to the support network around them, their families and other refugees with whom they share problems and offer mutual support between

themselves (Walther et al., 2020). It is difficult to help refugees sometimes because they don't easily discuss or seek help regarding certain issues they face such as rape, sexual harassment and psychiatric issues since they are taboo in Islamic culture Mehran et al. (2021) As these problems, are common in crowded places such as refugee centers, it is challenging for professional helpers like social worker and other health professional to handle them or eradicate them when people are reluctant to talk about them ,but also it is their mandate to use cultural sensitive approaches to be able to communicate with them and provide whatever assistance they need in partnership with the other actors working in the same humanitarian setting and follow the standards operating procedures regarding their interventions and avoid traumatization.

Heavy caseloads is a challenge that emerged during this study where social workers in reception centers reported that they are involved in different activities dedicated to ensure the safety and wellbeing of refugees and that the quantity of the work is overwhelming. During wartime, women and children are numerous compared the rest of people and the protection of children is the main task in humanitarian work (He, 2021). In child protection work with refugee children, it is of utmost importance to ensure that no additional harm is caused by these interventions because these children have gone through a lot and factors like exposure to human rights violations ,psychological disturbing events ,interruptions or abrupt breakage of family relations due to death or missing their families, friends must be documented as they inform future care placements either in care or educational settings (Kaplan et al., 2015).

This explain the numerous cases to be managed and many task related to that due to the importance of this intervention. Also, this was supported by Zalewski (2017) stressing that the heavy case load to manage with refugees include conducting assessment for unaccompanied and separated children which needs to be done in 3 month to find out what are their needs and level of assistance required so that later these children may be transferred to other locations.

Not only that, but there is also the care of children who have problems with their families, their parents causing lack of parental care exposing them to developmental deficiencies due to neglect or other types of maltreatments. According to Zeanah & Humphreys (2018) child maltreatment or abuse is an intentional harm perpetrated against a child by his caregivers or family it may include failing to meet his emotional, physical, developmental needs and exposure to harm such as domestic violence or acts of violence inflicted to a child such as hitting ,sexual violence and other attempts. Interventions dedicated to prevent against these problems or assisting families undergoing these issues are not simple since they require much time, energy and is the responsibility of social workers who require collaboration with different agencies including law enforcement entities not only to ensure that individual needs of the victims are met but also the perpetrator are provided with the necessary services according to the law (Luo,

2021). It is a fact that social workers have a lot of work to do since they are in direct contact with refugees ,children and their families solving daily life issues like linking refugees to legal support officers to address the asylum related issues, family reunification ,housing and residence related issues to facilitate integration in the society (Ghaderi & Karim, 2019).

In the empirical results of this study, there was a recurring topic where social workers affirmed that the Germany is one of the few countries in the world that has strict refugee protection laws negatively affecting the wellbeing of asylum seekers. This correlates with the findings of other studies which have shown that refugee law is one of the most common causes of mental health problems for them, although there is much evidence that a lot has been done to ensure that their rights are respected (Abdelhamed, 2021). The management of refugee's problems in general are not a concern for refugees only a burden on host countries. For instance, regarding the access to education, these social workers stated that the legal asylum-seeking status is what matters the most in securing a place at kindergarten or any other education setting according to the age of the individual.

Kollender (2020) asserted that Germany law is very strict, and many refugees do not have easy access to the basic services they need in some areas like education which raises the question of whether the education for all principle is respected or does not apply to refugee children. Also this issue of refugee law was raised by (Koehler & Schneider, 2019) affirming that host countries law implementations do not take into considerations the unique problems of vulnerable people they are supposed to care for and do not fully meet their needs since refugees are fleeing in order to protect their lives, which is why the host country should prioritize human values above everything else. This issue is also related to the law which affects delivery of health services to refugees /asylum seekers and their families where it has been reported that there are some vaccines that children need but they do not get because the access to that health service depend on their asylum seeking status or refugee status (Perniciaro et al., 2018).

Apart from education and health, it is clear that refugee related laws have a negative impact on the socio-economic life of these people where it is difficult to be employed or impossible when your asylum status is unclear and those who are in position to determine that don't make the process quick for applicants in order to make future plans. Buxton, (2020) commented about these refugee related laws stating that refugees go through prolonged periods of time in refugee centers or in outside together with other local citizens expecting that the permanent status will be given to them which is advantageous to receiving countries since it permit them to make refugees go back to their home countries and have the last word over their cases and thus is detrimental for refugees since it is not safe for them.

The areas of professional development regarding social work with refugees that was emerged in the empirical findings of this study initially there is culture competence which was found to be important to have in their daily interventions. Dressler (2021) consider culture competence as a level to which a person shows to others how he sees or consider his own culture and all, an individual must possess in terms of knowledge and skills to live in harmony with others in a particular society.

It is the ability to react and respond perfectly to situations minding how it may be interpreted in other culture which means that knowledge about important elements of a foreign culture are a requisite to be able to handle related situations. Davis (2020) further referred to cultural competence as a process and a way towards becoming knowledgeable in interacting or dealing with and behaving amongst different cultural circumstances and milieus. There is no culture superior to the other which is why these social workers should know or have general knowledge about the culture of those who come to seek their help.

Asfaw et al. (2020) advanced that it is recommended to consider individual 's culture while planning interventions and choose wisely cultural appropriate approaches in order to reach positive results in interventions since the interpretations of clients play a big role in the helping plan of the professionals .when the core values of the culture are considered in the provision of assistance, it enables the beneficiary to value what is being done to him or her and give his active participation to make sure that the goals set are achieved successfully.

Multicultural beliefs of people working with professionals and approaches must go hand in hand to make sure that there is correct contextualization or adaptation since the interactions between those different parties must be built on trust and establishing it relies on those factors (Osborn & Karandikar, 2022). Knowing cultural behaviours of specific group of people is beneficial in therapeutic care for professionals working with them. Arar et al. (2013) advanced that in order to gain respect and complete acceptance by their communities. Muslim women need to wear traditional dress and headdress as a symbol of acceptance of cultural norms. As an important skill to have while serving people from different cultural groups, cultural competence inform the assessment, interventions and guide the relationship between the clients and social workers (Walker, 2019).

Qureshi (2020) explains that the Cultural competence is displayed in its 3 components of knowledge, attitude and skills that the ability to respond adequately as a professional must be demonstrated by how much you know about that particular culture specifically the knowledge you have about the problem you are solving and more importantly the attitude you are exhibiting relating to that problem and the application of skills, or the approach you are taking in the particular situation. This emphasize the fact that cultural competence is not static and that social



workers are called to continue learn to update their knowledge according to the time and also adapt their interventions according to the context.

Bansal (2016) posits that it is required to have self-awareness regarding cultural norms, morals and prejudices since all these impacts one's implied thinking enabling him to reflect about automatic responses about diversity and by getting insights about one's prejudices and assumptions, deferential inquisitiveness assist him in addressing these assumptions.

Reflecting about practice, and questioning the values and motives is paramount as through it, professional growth is attained. The empirical findings highlighted the importance of cultural competence as social workers are working with refugees with diverse cultural background which is why self-awareness and continuous check regarding ones biases is required to make sure that these interventions are meeting the needs of refugees and their families. Whitley (2012) affirms that cultural competence includes religious competence as individuals religious affiliation guides clients' beliefs, morals, actions, and convictions and influence the way they behave in different life domain like eating habits, drinking, sexual preferences that it is hard to separate them with life daily routines.

This means that elements of people's religious beliefs can be useful while designing interventions plans or providing relief services in humanitarian context like shelters and other infrastructures like bathrooms etc. Mehran et al. (2021) supported this in their study emphasizing on intercultural insufficiencies found in gender sensitive and protection concerns in humanitarian interventions where religious identities and other cultural belongingness were unnoticed and this made difficult for refugees the performances of essential daily activities like taking shower and going to collect food in the same environments with men. It is ideal for taking into considerations these cultural and religious aspects of people needing social work services as their life evolve around these aspects and adaptations in an environment which does not care about this is hostile for these communities.

Seawright et al. (2021) argued that recognizing culture opinions of communication reinforces an individual 's knowledge of their own culture while generating further appreciation for other cultures. This important in communication as misunderstanding may exist due to ignorance about culture of specific group with whom interactions are being carried and that lack of knowledge about a particular culture may create relational problems between people from diverse cultural background since some may find inappropriate some habits and behaviours yet they are acceptable in the particular culture of the other group. In this study, it was reported that it was a habit for refugee to lock the doors and leave their wives locked in the house yet for social workers it was a gender based violence related act since it was perceived as a denial to

opportunities and a safety concern however in matters like this more explorations are needed to clear out misconceptions and make sure that the safety of the concerned parties is insured.

Bhatti-Sinclair (2015) argued that insufficient comprehension of cultural influences and lack of judgment in interventions may cause harm to beneficiaries as it was found in a child protection case of Victoria Climbié where misunderstandings due to communication gaps between the social worker and family of the child prevented the assessment from achieving the positive results and this could have been avoided if all had been handled well. Other studies also explored the culture competence is health related relationship between the client and the professional and made important points precisely (Wanigatunge, 2021) also supported this adding that in health care related professions, culture competence is not only about the language abilities necessary to manage language hurdles it is the capability to analyze problems from the client's point of view considering his cultural background and this play a key role in gaining his active participation as a partner in decision making and problem management.

It is understood that this good communication with respect to cultural background of different parties involved is essential in social work especially in humanitarian context as people from diverse background are working together to assist refugees who despite of the position of vulnerability they are, other barriers like language and the aftereffects of wars and related social problems are weighing on them that even requesting the service they need is itself a challenge.

The empirical results of this study show that social workers value critical thinking as something needed to perform well in their obligations while assisting refugees' children and their families. Several studies defined critical in different ways for Al-Asadi & Hussein (2021), it is a way of thinking through which the person decides to assess things and arrive to take decisions based on the facts. They implied that it is careful way of reflecting until you reach a conclusion which is useful. Also critical thinking is "the type of thinking about any subject, content or problem in which the thinker improves the quality of his thinking by competently analysing, evaluating and reconstructing it and serves as a filter to select what should be harnessed or discarded in this actual avalanche of instantaneous information" (Belchior Rocha & Casquilho-Martins, 2019).

This can be explained that critical thinking is the ability to reflect on something in a sense that every aspect is analyzed without biases. Given the fact that in humanitarian context there is always filled with surprises and emergencies, without critical thinking it is impossible to meet the needs of beneficiaries which is the primary goal of every intervention because whatever we do is the result of our thoughts. Also conceptualization of critical thinking it is a manner of getting answers to problems or a way for accomplishing tasks (Fenton & Mark, 2019).

Pantin (2018) argues that it is an approach of challenging, defeating, and fixing problems in life. The common ground in these assumptions is that it's a thinking way that goes beyond what you see and focusing on the possible results you are trying to achieve, and it is totally different with superficial thinking since you carefully evaluate the information or situation to be able to reach a decision. A fractional or a non-critical view can endanger the work of any person, but the value of critical thinking lies in the capability to assess the situation in order to identify inconsistencies to address the issues at hand while seeking the ways to compile the information in totality. Thinking critically is different from following procedures without questioning or thinking about alternatives ways to achieve same results ,it is thinking again and reassess the facts (Loseby, 2019).

In humanitarian context, it is required for social workers to make effective decisions in the best interest of the people they serve and make sure that these decisions are not only following standards operating procedures or meeting the targets set by the high ups but the decisions or conducting interventions that are meaningful and harmless to these people in a quick and efficient way is what is in line with their mandate and deontological code of their profession and it is a skill to be developed progressively.

The last point important in social work with refugees is organization as mentioned by social workers working with refugees, given the number of tasks they need to accomplish and the people they need to teach, it is understandable that without organization nothing could be done. Kochetova et al. (2020) argues that self-organization is a result of mixture of physiological and psychological qualities, displayed in the performance of an activity and realized independently and demonstrated in the capability to plan activities judiciously and accomplish them progressively. It is the ability to arrange or create a specific order according to which activities will be carried and the level of organization is evaluated by the quality of work performed. (Bucăța et al., 2021) argues that poor planning led to low productivity especially when individuals procrastinate or don't allocate the correct amount of time to the performance of assigned tasks. This shows how there is a correlation between time management and productivity and how the ignorance of one factor affects the quality of results expected. Since there are many tasks to be performed the proper allocation of time and making arrangement about the flow of activities make the performance of these tasks fact and easy. Afolayan (2021) argues that to some people don't reach their goals because of poor planning and not being able to manage time adequately due to procrastination or not knowing how to prioritize things meaning bearing in mind the sequence of activities what is coming first and what is following and this led to poor performance as well as the decision making process whether it is long or short all this have implications on the productivity. This is in line with what the previous authors discussed about

regarding effective time management and also planning skills as these two are effective in daily performance. Lack of work ethic and clear work schedule can have serious health consequences such as burnout and stress related issues (Maiya, 2020) without the proper organization and allocation of tasks, social workers are at risk of burnout since some work hard and have many things to take care of while others maybe are doing nothing which may have a detrimental effect on their relationship as co-workers and in general on their health. Viciawati (2018) added that clear job descriptions play a role in better performance of assigned tasks since every worker is aware of what his supposed to do and work to achieve his work targets.

The empirical results demonstrated that the social workers are in direct contact with refugees and among their tasks include orient refugees to other service providers, this may be time consuming along other challenges above mentioned but organization skills being important in the realization of the assigned task, it is of utmost importance to plan their daily activities and make sure that they have a schedule to follow.

## CONCLUSIONS

1. An overview on the current situation for refugee children and their families that suggests an attention for creating nurturing environment for children around their living compound, schools, family, and friends. While for families, the need for better living conditions, employment programs, health coverage and language acquisition remain crucial.

2. Historically, there has been an expectation newcomers will adopt the norms and traditions of the German culture, nevertheless due to the influx of refugees and migrants in the recent decades, there has been a shift on policies and social services to be more inclusive of other cultures and integrate them to society more smoothly.

3. The research results based on the experience of social workers working with refugee children and their families in Germany revealed the needs of refugee children and their families, interventions used by social workers working with refugees, the challenges faced by social workers working with refugees and the areas of professional development of social workers.

- The needs of refugee children and their families are access to education, health care and accommodation, remain major obstacles of smooth integration for refugee children and their families
- Child protection, family tracing and reunification, psycho-social service provision, multidisciplinary teamwork and referral support services remain to be the main intervention methods suggested and practiced among the refugee social workers.
- Handling heavy caseloads, dealing with ever increasing refugee laws that do not comply with social worker's moral or ethical responsibilities and remaining aware of service users' cultural norms and values that sometimes contradict with social worker's values, is substantial for effective practice of multicultural social work.
- The major social work development areas include cultural competence, organization, and critical thinking as an asset for a refugee social worker to practice social work with diverse population.

## **RECOMMENDATION**

Without the motivation of families to integrate, the competence of social workers to work with refugees and the supporting system taking measures to assure needs are met, effective multicultural social work practice cannot be achieved. The findings of the research shows that unmet needs of refugee children and their families arises from lack of provision of service providers and unaligned effort between the social workers and external service providers.

Therefore, accordingly the researcher recommends:

- reform refugee laws to be supportive than trying to deport or reject as many refugees as possible
- create possibility to have supporting services around refugee organization than social workers seeking for support system from outside
- provide supervision for refugee social workers to have cultural competence, reflect on their shortcomings and learn from each other
- establish neutrality on social services that offer services for refugee children and their families therefore avoiding bias
- put in place a retention policy for refugee social workers to avoid premature departure from their role
- equal treatment for every refugee child and their families
- help refugee children and their families to achieve their goals in the best way possible

## SUMMARY

### **Social work in a multicultural environment: experience of social workers working with refugee children and their families in Germany**

Multicultural social work practice creates the awareness of one's value, bias, or assumptions, understanding of the worldviews of clients, developing of the right intervention strategy, and enhancing cultural competence. To better understand how social work in a multicultural setting is practiced, the research was conducted to explore the perception of social workers working with refugee children and their families in Germany. The main goal of this thesis was to analyze the challenges, intervention strategies and opportunities while working with refugee children and their families. Moreover, the thesis also explored the needs, rights and integration efforts for refugee children and their families. This thesis was carried out in Stuttgart, Germany with interviews as a data collection method conducted between May to June of 2021. The data collection targeted social work practitioners that have been working in the field of refugee social work for the past at least two years or more. The selection criteria were based on purposeful sampling techniques is used with a criterion-i sampling approach by identifying and selecting interviewees based on predetermined criteria. Semi-structured interviews were used to conduct the interview with 6 refugee social workers. The 4 interviews were conducted in person and 2 online using zoom platform. The interviews are recorded according to ethical agreements with participants and later was transcribed and analyzed using thematic analysis method by NVivo software. The results show the need for social workers to be equipped to be organized, think critically, and become culturally competent to be effective to work in a multicultural environment. On the other hand, addressing the needs of refugee children and their families increases the overall satisfaction of living in the host country. The challenges faced by social workers in dealing with heavy caseloads, cultural differences, and refugee laws need special attention from different organization and governmental bodies by expanding the capacity and collaboration among different supporting systems. Finally, the study recommends providing reform on the current refugee laws, possibility to social work practitioners together in a fluid way, equal treatment of refugee children and their families without giving them a label based on their gender, nationality, or background.

## REFERENCES

1. Abdelhamed, K. (2021). Social Worker Roles with Refugees. *Egyptian Journal of Social Work, 1*.
2. Afolayan, M. (2021). *Time management*.
3. Ahmed, S., Wilson, K. B., Jr, R. C. H., & Jones, J. W. (2011). What Does It Mean to Be a Culturally-Competent Counselor? *Journal for Social Action in Counseling & Psychology, 3*(1), 17–28. <https://doi.org/10.33043/JSACP.3.1.17-28>
4. Al-Asadi, N., & Hussein, N. (2021). *Critical Thinking*.
5. Alawamleh, Z. (2020). *Refugee camps as behaviour settings: the case of Gaza refugee camp in Jordan*. <https://doi.org/10.13140/RG.2.2.13215.43683>
6. Anderson, P. (2001). ‘You Don’t Belong Here in Germany...’: On the Social Situation of Refugee Children in Germany. *Journal of Refugee Studies, 14*(2), 187–199. <https://doi.org/10.1093/jrs/14.2.187>
7. Arar, K., Shapira, T., Azaiza, F., & Hertz-Lazarowitz, R. (2013). *Challenging Cultural Norms* (pp. 59–74). [https://doi.org/10.1057/9781137319333\\_4](https://doi.org/10.1057/9781137319333_4)
8. Ardelean, A. (2021). Play in a refugee camp: Disorder from chaos. *International Journal of Play, 10*(4), 355–360. <https://doi.org/10.1080/21594937.2021.2005395>
9. Arnault, D. S. (2002). Help-Seeking and Social Support in Japanese Sojourners. *Western Journal of Nursing Research, 24*(3), 295–306. <https://doi.org/10.1177/01939450222045914>
10. Asfaw, B., Beiersmann, C., Keck, V., Nikendei, C., Benson-Martin, J., Schütt, I., & Lohmann, J. (2020). Experiences of psychotherapists working with refugees in Germany: A qualitative study. *BMC Psychiatry, 20*. <https://doi.org/10.1186/s12888-020-02996-0>
11. Baier, A., & Siegert, M. (2018). *Die Wohnsituation Geflüchteter. Ausgabe 02/2018 der Kurzanalysen des Forschungszentrums Migration, Integration und Asyl des Bundesamtes für Migration und Flüchtlinge, Nürnberg*.
12. Bansal, A. (2016). Turning cross-cultural medical education on its head: Learning about ourselves and developing respectful curiosity. *Family Medicine and Community Health, 4*, 41–44. <https://doi.org/10.15212/FMCH.2016.0109>
13. Beck, M. (2017). *Securitization of Refugees in Europe*.
14. Belchior Rocha, H., & Casquilho-Martins, I. (2019). *Critical Thinking in Social Work Training*. <https://doi.org/10.5772/intechopen.89538>
15. Bennouna, C., Fischer, H.-T., Wessells, M., & Boothby, N. (2018). Rethinking Child Protection in Emergencies. *International Journal of Child Health and Nutrition, 7*, 39–46. <https://doi.org/10.6000/1929-4247.2018.07.02.1>



16. Berry, J. W. (2005). Acculturation: Living successfully in two cultures. *International Journal of Intercultural Relations*, 29(6), 697–712. <https://doi.org/10.1016/j.ijintrel.2005.07.013>
17. Bhatti-Sinclair, K. (2015). Culturally Appropriate Interventions in Social Work. *International Encyclopedia of the Social & Behavioral Sciences*.  
<https://doi.org/10.1016/B978-0-08-097086-8.28023-9>
18. Bonin, H. (2015). Langfristige fiskalische Erträge künftiger Zuwanderung nach Deutschland. *Wirtschaftsdienst*, 2015(4), 262–268.  
<https://www.wirtschaftsdienst.eu/inhalt/jahr/2015/heft/4/beitrag/langfristige-fiskalische-ertraege-kuenftiger-zuwanderung-nach-deutschland.html>
19. Bozorgmehr, K., & Razum, O. (2015). Effect of Restricting Access to Health Care on Health Expenditures among Asylum-Seekers and Refugees: A Quasi-Experimental Study in Germany, 1994–2013. *PLoS ONE*, 10, e0131483.  
<https://doi.org/10.1371/journal.pone.0131483>
20. Bucăța, G., Rizescu, M., & Barsan, L.-N. (2021). Time management: the basic concern in the organization. *Journal of Defense Studies & Resource Management*, 12, 179–188.
21. Buxton, R. (2020). Justice in waiting: The harms and wrongs of temporary refugee protection. *European Journal of Political Theory*, 147488512097357.  
<https://doi.org/10.1177/1474885120973578>
22. Cerna, L. (2019). *Refugee education: Integration models and practices in OECD countries*. OECD. <https://doi.org/10.1787/a3251a00-en>
23. Cornel, H., Dünkler, F., Pruin, I., Sonnen, B.-R., & Weber, J. (2015). Die Integration von Flüchtlingen als kriminalpräventive Aufgabe – Ein kriminologischer Zwischenruf. *Neue Kriminalpolitik*, 27(4), 325–330. <http://www.jstor.org/stable/26422655>
24. Daniel, C. (2008). From Liberal Pluralism to Critical Multiculturalism: The Need for a Paradigm Shift in Multicultural Education for Social Work Practice in the United States. *Journal of Progressive Human Services*, 19, 19–38.  
<https://doi.org/10.1080/10428230802070215>
25. Daniel, M., Ottemöller, F. G., Katsi, M., Hollekim, R., & Tesfazghi, Z. Z. (2020). Intergenerational perspectives on refugee children and youth's adaptation to life in Norway. *Population, Space and Place*, 26(6), e2321. <https://doi.org/10.1002/psp.2321>
26. Dar, R. (2020). Educational rights of children ,issues and challenges. *International Journal of Advanced Research*, 3, 115–125. <https://doi.org/10.31426/ijamsr.2018.1.10.10>
27. Davis, M. (2020). *The “Culture” in Cultural Competence* (pp. 15–29).  
[https://doi.org/10.1007/978-981-15-5362-2\\_2](https://doi.org/10.1007/978-981-15-5362-2_2)

28. Decker, J., Park, H.-S., Ashley, W., & Bame, C. (2018). How the Legal Status of Undocumented Students Affects Their Access to Higher Education, Public Health and Mental Health Services. *Journal of Education & Social Policy*, 5.  
<https://doi.org/10.30845/jesp.v5n2a3>
29. DeSa, S., Gebremeskel, A., Omonaiye, O., & Yaya, S. (2022). Barriers and facilitators to access mental health services among refugee women in high-income countries: A systematic review. *Systematic Reviews*, 11. <https://doi.org/10.1186/s13643-022-01936-1>
30. Dressler, W. (2021). *Cultural Competence*.
31. Dubus, N., & Davis, A. (2018). Culturally Effective Practice With Refugees in Community Health Centers: An Exploratory Study. *Advances in Social Work*, 18(3), 874–886.  
<https://doi.org/10.18060/21731>
32. Dungs, S. (2011). *Anerkennungsmodelle des Anderen*. 17.
33. East, P. L., Gahagan, S., & Al-Delaimy, W. K. (2018). The Impact of Refugee Mothers' Trauma, Posttraumatic Stress, and Depression on Their Children's Adjustment. *Journal of Immigrant and Minority Health*, 20(2), 271–282. <https://doi.org/10.1007/s10903-017-0624-2>
34. Edward, J., & Hines-Martin, V. (2014). Exploring the Providers Perspective of Health and Social Service Availability for Immigrants and Refugees in a Southern Urban Community. *Journal of Immigrant and Minority Health / Center for Minority Public Health*, 17. <https://doi.org/10.1007/s10903-014-0048-1>
35. Edwards, D. J., Borgstedt, D. S., Borchard, I., Resch, J., Weber, D., Hassel, S., Kahmann, C., & Berneburg, L. (2019). *A UNICEF Germany and UNICEF Division of Private Fundraising and Partnership (PFP) project*. 84.
36. Fazel, M., Reed, R., Panter-Brick, C., & Stein, A. (2011). Mental health of displaced and refugee children resettled in high income countries: Risk and protective factors. *Lancet*, 379, 266–282. [https://doi.org/10.1016/S0140-6736\(11\)60051-2](https://doi.org/10.1016/S0140-6736(11)60051-2)
37. Fenton, J., & Mark, S. (2019). 'You Can't Say That!': Critical Thinking, Identity Politics, and the Social Work Academy. *Societies*, 9, 71. <https://doi.org/10.3390/soc9040071>
38. Filsinger, D. (2017). *Soziale arbeit mit flüchtlingen*. 40.
39. Filsinger, D. D. (2002). *Expertise: Interkulturelle Öffnung Sozialer Dienste*. 86.
40. Findenig, I., Klinger, S., & Buchner, T. (2018). Handlungsfeld unbegleitete Minderjährige mit Fluchterfahrung. Heraus- und Anforderungen für (sozial-)pädagogisches Handeln in Kinder- und Jugendhilfeeinrichtungen. *Soziale Passagen*, 10.  
<https://doi.org/10.1007/s12592-018-0294-5>

41. Fuchs, I., Ahrenholz, B., & Birnbaum, T. (2016). Ahrenholz, Bernt / Fuchs, Isabel / Birnbaum, Theresa (2016): 'dann haben wir natürlich gemerkt der übergang ist der knackpunkt' - Modelle der Beschulung von Seiteneinsteigern in der Praxis. In: BiSS-Journal, 5. Ausgabe, 11/2016. Verfügbar unter: [http://www.biss-sprachbildung.de/pdf/Evaluation\\_Sekundarstufe.pdf](http://www.biss-sprachbildung.de/pdf/Evaluation_Sekundarstufe.pdf) [15.11.2016]. *BiSS-Journal*, 5.
42. Funk, N. (2016). A spectre in Germany: Refugees, a 'welcome culture' and an 'integration politics'. *Journal of Global Ethics*, 12, 289–299.  
<https://doi.org/10.1080/17449626.2016.1252785>
43. Gaitanides, S. (2003). Interkulturelle Kompetenz als Anforderungsprofil in der Jugend- und Sozialarbeit. Nr. 3. <https://repository.difu.de/jspui/handle/difu/281037>
44. Gamez-Luna, A., & Romo, H. (2019). *Unaccompanied Minors: Marginalized in the Education System*.
45. Ghaderi, C., & Karim, L. (2019). *Social work with refugees in Kurdistan Region in Iraq* (pp. 163–184).
46. Govere, L., & Govere, E. M. (2016). How Effective is Cultural Competence Training of Healthcare Providers on Improving Patient Satisfaction of Minority Groups? A Systematic Review of Literature. *Worldviews on Evidence-Based Nursing*, 13(6), 402–410. <https://doi.org/10.1111/wvn.12176>
47. HADZIBULIC, S. (2020). Child Refugees in Europe. *Prizren social science journal*, 4, 49–54. <https://doi.org/10.32936/pssj.v4i2.148>
48. Haggerty, K. P., McGlynn-Wright, A., & Klima, T. (2013). Promising Parenting Programs for Reducing Adolescent Problem Behaviors. *Journal of Children's Services*, 8(4), 10.1108/JCS-04-2013-0016. <https://doi.org/10.1108/JCS-04-2013-0016>
49. He, N. (2021). The Prayer of Refugee Children. *Advances in Literary Study*, 09, 73–83. <https://doi.org/10.4236/als.2021.92009>
50. Heldal, M., Hagen, T. L., Olaussen, I., & Haugen, G. M. D. (2021). Social Sustainable Education in a Refugee Camp. *Sustainability*, 13, 3925. <https://doi.org/10.3390/su13073925>
51. Hinte, H., Rinne, U., & Zimmermann, K. F. (2015). Flüchtlinge in Deutschland: Herausforderung und Chancen. *Wirtschaftsdienst*, 2015(11), 744–751. <https://www.wirtschaftsdienst.eu/inhalt/jahr/2015/heft/11/beitrag/fluechtlinge-in-deutschland-herausforderung-und-chancen.html>
52. Jaschke, P., & Kosyakova, Y. (2021). Does Facilitated and Early Access to the Healthcare System Improve Refugees' Health Outcomes? Evidence from a Natural Experiment in

- Germany. *International Migration Review*, 55(3), 812–842.  
<https://doi.org/10.1177/0197918320980413>
53. Kainat, K., Eskola, E.-L., & Widen, G. (2021). Sociocultural barriers to information and integration of women refugees. *Journal of Documentation, ahead-of-print*.  
<https://doi.org/10.1108/JD-05-2021-0107>
  54. Kallio, H., Pietilä, A.-M., Johnson, M., & Kangasniemi, M. (2016). Systematic methodological review: Developing a framework for a qualitative semi-structured interview guide. *Journal of Advanced Nursing*, 72(12), 2954–2965.  
<https://doi.org/10.1111/jan.13031>
  55. Kaplan, I., Stolk, Y., Valibhoy, M., Tucker, A., & Baker, J. (2015). Cognitive assessment of refugee children: Effects of trauma and new language acquisition. *Transcultural Psychiatry*, 53. <https://doi.org/10.1177/1363461515612933>
  56. Keller, H., & Niedersächsisches Institut für Frühkindliche Bildung und Entwicklung (Eds.). (2013). *Interkulturelle Praxis in der Kita: Wissen, Haltung, Können*. Herder.
  57. Kochetova, T., Stelmakh, Y., & Tihanova, N. (2020). The Formation of Students' Self-Organization Skills in a Technical University. *ITM Web of Conferences*, 35, 06003.  
<https://doi.org/10.1051/itmconf/20203506003>
  58. Koehler, C., & Schneider, J. (2019). Young refugees in education: The particular challenges of school systems in Europe. *Comparative Migration Studies*, 7.  
<https://doi.org/10.1186/s40878-019-0129-3>
  59. Kohli, H. K., Huber, R., & Faul, A. C. (2010). Historical and Theoretical Development of Culturally Competent Social Work Practice. *Journal of Teaching in Social Work*, 30(3), 252–271. <https://doi.org/10.1080/08841233.2010.499091>
  60. Kollender, E. (2020). *Education For All – or Only For Some? COVID-19 and Discrimination Against „Refugee Children“ in the German Education System*.
  61. Koskei, B., & Simiyu, C. (2015). Role of Interviews, Observation, Pitfalls and Ethical Issues in Qualitative Research Methods. *Journal of educational policy and entrepreneurial research*, 2(3), 108–117. <http://www.jeper.org/index.php/JEPER/article/view/103>
  62. Kosyakova, Y., & Brenzel, H. (2020). The role of length of asylum procedure and legal status in the labour market integration of refugees in Germany. *Soziale Welt*, 71, 123–159. <https://doi.org/10.5771/0038-6073-2020-1-2-123>
  63. Kuo, B. C. H. (2014). Coping, acculturation, and psychological adaptation among migrants: A theoretical and empirical review and synthesis of the literature. *Health Psychology and Behavioral Medicine*, 2(1), 16–33. <https://doi.org/10.1080/21642850.2013.843459>

64. Lawrence, J. A., Dodds, A. E., Kaplan, I., & Tucci, M. M. (2019). The Rights of Refugee Children and the UN Convention on the Rights of the Child. *Laws*, 8(3), 20.  
<https://doi.org/10.3390/laws8030020>
65. Loseby, D. (2019). *Critical Thinking Skills*.
66. Luo, H. (2021). The Role of Social Work and Social Work Leadership in Pandemic Crisis Intervention. *Open Journal of Social Sciences*, 09, 639–650.  
<https://doi.org/10.4236/jss.2021.95036>
67. Maddox, A. (2021). *Life situations of older refugees in Germany*.
68. Maiya, U. (2020). *A study on stress management: effects and coping skills*.
69. Mehran, N., Jumaa, J., Lazaridou, F., Foroutan, N., Heinz, A., & Kluge, U. (2021). Spatiality of Social Stress Experienced by Refugee Women in Initial Reception Centers. *Journal of International Migration and Integration / Revue de l'Integration et de La Migration Internationale*. <https://doi.org/10.1007/s12134-021-00890-6>
70. Meißelbach, C., & Patzelt, W. (2019). 'Verwahrung' oder 'Ankommen'? Die Unterbringungssituation in Sachsens Gemeinschaftsunterkünften für Geflüchtete (Heim-TÜV 2019).
71. Midgley, J. (2001). Issues in International Social Work: Resolving Critical Debates in the Profession. *Journal of Social Work*, 1(1), 21–35.  
<https://doi.org/10.1177/146801730100100103>
72. Miller, G. E., Colebrook, J., & Ellis, B. R. (2014). Advocating for the Rights of the Child Through Family–School Collaboration. *Journal of Educational & Psychological Consultation*, 24(1), 10–27. <https://doi.org/10.1080/10474412.2014.870483>
73. Newbigging, K., & Thomas, N. (2011). Good Practice in Social Care for Refugee and Asylum-seeking Children. *Child Abuse Review*, 20(5), 374–390.  
<https://doi.org/10.1002/car.1178>
74. Oduntan, O., & Ruthven, I. (2019). The Information Needs Matrix: A navigational guide for refugee integration. *Information Processing & Management*, 56(3), 791–808.  
<https://doi.org/10.1016/j.ipm.2018.12.001>
75. Osborn, P., & Karandikar, S. (2022). Practice-based knowledge perspectives of cultural competence in social work. *Journal of Ethnic & Cultural Diversity in Social Work*.  
<https://doi.org/10.1080/15313204.2022.2046228>
76. Palinkas, L. A., Horwitz, S. M., Green, C. A., Wisdom, J. P., Duan, N., & Hoagwood, K. (2015). Purposeful sampling for qualitative data collection and analysis in mixed method implementation research. *Administration and Policy in Mental Health*, 42(5), 533–544.  
<https://doi.org/10.1007/s10488-013-0528-y>

77. Pantin, L. (2018). *Critical Thinking: The Good - The Bad - The Ugly*.
78. Parker, J. (2000). Social work with refugees and asylum seekers: A rationale for developing practice. *Practice*, 12(3), 61–76. <https://doi.org/10.1080/09503150008415191>
79. Perniciaro, S., Imöhl, M., & van der Linden, M. (2018). Invasive Pneumococcal Disease in Refugee Children, Germany. *Emerging Infectious Diseases*, 24. <https://doi.org/10.3201/eid2410.180253>
80. Phillips, A. (2009). Intercultural Knowledge and Skills in Social Service Work with Refugees. *Journal of Ethnographic & Qualitative Research*, 3(3), 185–195.
81. Popescu, M., & Libal, K. (2018). Social Work With Migrants and Refugees: Challenges, Best Practices, and Future Directions. *Advances in Social Work*, 18(3), i–x. <https://doi.org/10.18060/22600>
82. Pot, A., Keijzer, M., & De Bot, K. (2018). The language barrier in migrant aging. *International Journal of Bilingual Education and Bilingualism*, 23, 1–19. <https://doi.org/10.1080/13670050.2018.1435627>
83. Pulla, V., & Carter, E. (2018). Employing Interpretivism in Social Work Research. *International Journal of Social Work and Human Services Practice*, 6(1), 9–14. <https://doi.org/10.13189/ijrh.2018.060102>
84. Qureshi, A. (2020). *Cultural Competence in Psychotherapy* (pp. 119–130). [https://doi.org/10.1007/978-3-030-24082-0\\_9](https://doi.org/10.1007/978-3-030-24082-0_9)
85. R. Weinzierl. (2017). *Beratung und Rechtsschutz im Asylverfahren*. 44.
86. Razum, O., Penning, V., Mohsenpour, A., & Bozorgmehr, K. (2020). Covid-19 in Flüchtlingsunterkünften: ÖGD jetzt weiter stärken. *Gesundheitswesen (Bundesverband Der Ärzte Des Öffentlichen Gesundheitsdienstes (Germany))*, 82(5), 392–396. <https://doi.org/10.1055/a-1154-5063>
87. Rehklau, C. (2017). Flüchtlinge als Adressat\_innen Sozialer Arbeit ? In C. Ghaderi & T. Eppenstein (Eds.), *Flüchtlinge: Multiperspektivische Zugänge* (pp. 305–322). Springer Fachmedien. [https://doi.org/10.1007/978-3-658-15741-8\\_17](https://doi.org/10.1007/978-3-658-15741-8_17)
88. Robjant, K., Hassan, R., & Katona, C. (2009). Mental health implications of detaining asylum seekers: Systematic review. *The British Journal of Psychiatry: The Journal of Mental Science*, 194(4), 306–312. <https://doi.org/10.1192/bjp.bp.108.053223>
89. Salmerón-Manzano, E., & Manzano-Agugliaro, F. (2018). Unaccompanied Minors: Worldwide Research Perspectives. *Publications*, 7, 2. <https://doi.org/10.3390/publications7010002>

90. Schaub, M., Gereke, J., & Baldassarri, D. (2021). Strangers in Hostile Lands: Exposure to Refugees and Right-Wing Support in Germany's Eastern Regions. *Comparative Political Studies*, 54(3–4), 686–717. <https://doi.org/10.1177/0010414020957675>
91. Scherr, A., & Scherschel, K. (2016). *Soziale Arbeit mit Flüchtlingen im Spannungsfeld von Nationalstaatlichkeit und Universalismus Menschenrechte – ein selbstvidenter normativer Bezugsrahmen der Sozialen Arbeit?* 6.
92. Schmidtke, O. (2012). Multikulturalität als zivilgesellschaftliche Gestaltungsaufgabe.: Eine demokratietheoretische Interpretation aus kanadischer Perspektive. In E. Ariëns, E. Richter, & M. Sicking (Eds.), *Multikulturalität in Europa* (pp. 19–40). Transcript Verlag. <https://www.jstor.org/stable/j.ctv1fxdh9.4>
93. Schulz, S., Titzmann, P., & Schlesier-Michel, A. (2013). *Jugendliche Übersetzer: Language Brokering in Migrantenfamilien in Deutschland [Adolescent interpreter: Language brokering in migrant families in Germany]*. <https://doi.org/10.5167/uzh-84600>
94. Seawright, L., Albers, R., & Schanne, S. (2021). Building Cultural Competence and Changing Cultural Perceptions: Students from the UAE and USA Participate in a Cultural Exchange Project. *Business Communication Research and Practice*, 4, 5–13. <https://doi.org/10.22682/bcrp.2021.4.1.5>
95. Shuayb, M., & Crul, M. (2020). Reflection on the Education of Refugee Children: Beyond Reification and Emergency. *Refuge: Canada's Journal on Refugees*, 36, 3–8. <https://doi.org/10.25071/1920-7336.40831>
96. Suárez, Z. E., Newman, P. A., & Reed, B. G. (2008). Critical Consciousness and Cross-Cultural/Intersectional Social Work Practice: A Case Analysis. *Families in Society*, 89(3), 407–417. <https://doi.org/10.1606/1044-3894.3766>
97. Subashi, A., & Bregu, E. (2021). Child Protection Measures as a Legal Instrument for Child Protection at Tirana Municipality. *Academic Journal of Interdisciplinary Studies*, 10, 158. <https://doi.org/10.36941/ajis-2021-0162>
98. Sue, S. (2006). Cultural competency: From philosophy to research and practice. *Journal of Community Psychology*, 34(2), 237–245. <https://doi.org/10.1002/jcop.20095>
99. Sundar, P., Sylvestre, J., & Bassi, A. (2012). *Diversity and social work practice* (pp. 355–371). <https://doi.org/10.4135/9781446247648.n24>
100. Suurmond, J., Seeleman, C., Rupp, I., Goosen, S., & Stronks, K. (2010). Cultural competence among nurse practitioners working with asylum seekers. *Nurse Education Today*, 30(8), 821–826. <https://doi.org/10.1016/j.nedt.2010.03.006>

101. Tanis, K. (2020). *Entwicklungen in der Wohnsituation Geflüchteter* (Vols 5–2020). Bundesamt für Migration und Flüchtlinge (BAMF) Forschungszentrum Migration, Integration und Asyl (FZ).
102. Thomas, R. L. (2016). The Right to Quality Education for Refugee Children Through Social Inclusion. *Journal of Human Rights and Social Work*, 1(4), 193–201.  
<https://doi.org/10.1007/s41134-016-0022-z>
103. Timm, M. (2016). The Integration of Refugees into the German Education System: A Stance for Cultural Pluralism and Multicultural Education. *EJEP: EJournal of Education Policy*. <https://eric.ed.gov/?id=EJ1158163>
104. Ubels, T. (2020). *Mental health and psychosocial support: Hidden potential and harm*.
105. Vedder, G. (2002). Rezensionen: Creating the Multicultural Organization. A Strategy for Capturing the Power of Diversity. *German Journal of Human Resource Management: Zeitschrift Für Personalforschung*, 16, 110–111.  
<https://doi.org/10.1177/239700220201600107>
106. Venumadhava, G., Balaraddy, V., & Mavarkar, A. (2017). CHILD ABUSE. *Social Science*, 3, 12.
107. Viciawati, S. (2018). Organizing Skills For Zakat Utilisation Dynamics In Faith-Based Organization. *Komunitas: international journal of Indonesian society and culture*, 10, 53–67. <https://doi.org/10.15294/komunitas.v10i1.11117>
108. Walker, S. (n.d.). The teaching of Maori social work practice and theory to a predominantly pakeha audience. *Aotearoa New Zealand Social Work*, 24(3/4), 65–74.  
<https://doi.org/10.3316/informit.266267715294554>
109. Walker, S. (2019). *Culturally competent social work*.
110. Walther, L., Fuchs, L., Schupp, J., & von Scheve, C. (2020). Living Conditions and the Mental Health and Well-being of Refugees: Evidence from a Large-Scale German Survey. *Journal of Immigrant and Minority Health*, 22. <https://doi.org/10.1007/s10903-019-00968-5>
111. Wanigatunge, C. (2021). Culturally competent physician: A need of the day. *Journal of the Ceylon College of Physicians*, 52, 1. <https://doi.org/10.4038/jccp.v52i1.7924>
112. Wapler, F. (2016). Sozialrechtliche Leistungen der Bildungsförderung für junge Flüchtlinge. *RdJB Recht der Jugend und des Bildungswesens*, 64(3), 345–363.  
<https://doi.org/10.5771/0034-1312-2016-3-345>
113. Warmbein, A., Beiersmann, C., Eulgem, A., Demir, J., & Neuhaus, F. (2020). *Gaps in Health Care Services for Refugees in Cologne, Germany – a Mixed Methods Analysis*. <https://doi.org/10.21203/rs.3.rs-120232/v1>



114. Whitley, R. (2012). Religious competence as cultural competence. *Transcultural Psychiatry*, 49, 245–260. <https://doi.org/10.1177/1363461512439088>
115. Wienberg, J., Grotlischen, A., & Dutz, G. (2019). *Language Learning of Migrants: Empirical Evidence from the German integration course system (accepted). Language Learning of Migrants in Europe-Theoretical, Empirical, Policy and Pedagogical Issues.*
116. Wiese, L. S. (2019). Von »Kriegskindern« zu Flüchtlingskindern. *Kinderanalyse*, 27(4), 313–338. <https://doi.org/10.21706/ka-27-4-313>
117. Witte, S., Miehlbradt, L., Santen, E., & Kindler, H. (2016). *Briefing on the German Child Protection System.* <https://doi.org/10.13140/RG.2.2.34253.64487>
118. Zagefka, H., & Brown, R. (2002). The relationship between acculturation strategies, relative fit and intergroup relations: Immigrant-majority relations in Germany. *European Journal of Social Psychology*, 32, 171–188. <https://doi.org/10.1002/ejsp.73>
119. Zalewski, I. (2017). *Unaccompanied minor refugees in the state of Brandenburg, Germany.*
120. Zeanah, C., & Humphreys, K. (2018). Child Abuse and Neglect. *Journal of the American Academy of Child & Adolescent Psychiatry*, 57, 637–644. <https://doi.org/10.1016/j.jaac.2018.06.007>
121. Zehetmair, C., Kindermann, D., Tegeler, I., Derreza-Greeven, C., Cranz, A., Friederich, H.-C., Nikendei, C., Mwanri, L., Gesesew, H., Faulk, N., & Mude, W. (2021). A Qualitative Evaluation of a Mother and Child Center Providing Psychosocial Support to Newly Arrived Female Refugees in a Registration and Reception Center in Germany. *International Journal of Environmental Research and Public Health*, 18, 1–21. <https://doi.org/10.3390/ijerph18094480>

## ANNEXES

### ANNEX 1

#### *Interview questionnaire for social workers*

1. What are the challenges faced by refugee children and their families? Please describe them and provide examples.
2. What are the needs you meet as a social worker working with refugee children and their families? Please describe them and provide examples.
3. What strategies or intervention procedures do you use to meet the needs of refugee children and their family? Please describe them and provide examples.
4. What kind of personal or professional challenges have you faced while working with refugee children and their families. Please describe them and provide examples.
5. Would you explain, in your own words, what it takes to be a social worker working with refugee children and their families?
6. What are the areas of professional development that should be improved for social workers working with refugee children and their families? Please describe them and provide examples.

## Thematic analysis mapping

Thematic areas	subthemes	Proving statement
1. Problems of refugee children and their families	Limited access to quality education	<i>"When the kid grows up, we help them find kindergarten and help them also to transit as a transit from the kindergarten to the school and everything in between. It's very difficult to find a kindergarten space because there's many kids and not enough kindergartens, which means sometimes the children don't go to the kindergarten at the age of three. But at the age of four or five, sometimes even six. (SWM)</i>
		<i>"we assist their kids to be enrolled into kindergarten , but the problem is that here you have a very long waiting list until the kids gets enrolled in kindergarten, so you have to start the process early like after they are born so that you secure a place for them. (SWF).</i>
		<i>"So, what we do we check if they have an interview scheduled or not It is important to confirm the age of children after that we assist them in getting enrolled to school and facilitate them to access train or bus (ticket or card) usually the process take a long time like four months. (SWE).</i>
		<i>"As I mentioned the rooms are like 14 square meters for two people. So, you don 't have any quiet atmosphere for doing homework and in addition to that most parents cannot help their children to revise, especially with German lessons. So how children are supposed to perform well? (SWD).</i>
		<i>"Age limits stop admission to education for refugee youth who have reached the age of 16" (SWML).</i>
		<i>"So, it's especially the women who are suffering from as it's really hard for them to get connected with teachers of different children who manage to go to school, since they need to do childcare for those other children if they are at home and can't go to a kindergarten or school and. Then that also makes it harder for this parent to learn German and of course they are pretty much excluded. (SWL).</i>
		<i>"I have several cases where I am talking with customer service on behalf of families when they don't pay their rent or they get caught driving without a ticket or someone who does not pay his phone bills, internet I try to call customer services a lot however the problem always is that they are not allowed to give me any information unless the person (/refugee families) is here, but the person doesn't speak German to explain his problem (SWF)."</i>
	Limited access to Health care	<i>"The communication between the doctor and patient is impaired if there is no translator to provide assistance and families are denied medical care if there's no translator available (SWD).</i>

	services	<p><i>“They are burdened with their own things, and they have sometimes difficulties expressing how they feel and what happened to them. Sometimes it can be their own illnesses or traumatic experience or still, language to use telling their story is the problem that they chose to deal with all those issues by themselves and with their own souls, rather than being open to share, and fear that their children may be removed under their care because it happens sometimes in with some families where there is a threat to the wellbeing of children, like when parents have mental problems they are placed in temporary care (SWL).</i></p>
		<p><i>“Depending on the piece of paper you have they can help you by only doing the basics, like when you have pain, they stop your pain, but for other cases I have a client, for example, who has tooth pain but because of her piece of paper, they are not treating the tooth, they will probably just pull it because you don't have to full access to health care and no one is going to pay for it (SWF)”</i></p>
		<p><i>“Obviously, health care is a big issue, and now it's it depends very much on the status as well. So, when you have refugee status, you have normal health care. And when you arrive as an asylum seeker at the beginning, you get papers from the social welfare office to visit doctors. The children get normal health care. But for adults, usually they say, OK only for emergency things, and cannot do everything. Then we have people with suspension of deportation, with them there have been problems especially when they would need a therapy or special treatment sometimes the cost for that will not be covered and this is very sad, but yeah, it really depends on the single case.(SWE).</i></p>
		<p><i>“It's really hard to find a paediatrician right now. It's almost impossible. It's only if there's an emergency because they don't take new clients. (SWML”).</i></p>
	Unfavorable Housing conditions	<p><i>“This is a very big challenge for the children because everything here is very crowded, and the rooms are full. They don't have their own room. And also, another thing is that they have shared bathrooms and kitchens, with other families like men and women that are not known to them, and it is not safe space for children, Even if even if they know the people on the same floor or flat sometimes they have guests who can abuse the children. So, there's not really any safe place especially for children. (SWM)”.</i></p>
		<p><i>“Accommodation is really a big problem because people live so close together, they share that bathroom with 20 other people and that kitchen to you share your washing machine with like 40 other people.” (SWF).</i></p>
		<p><i>“But when you live in your own apartment, you have quiet, you have peace. You don't have like 20 other people. But that you share your kitchen with, so it's like you a level of hygiene and you clean it and it's like</i></p>

		<i>a whole different mindset.” (SWF).</i>
		<i>“Sometimes in one room there were six seven sleeping on the couch. In a big room with 30 people. And you know these beds are not good. Besides, such shared accommodations you can never knowing who’s coming to night in this room or who’s leaving, it is not comfortable. Again, with little children they cry or scream, or others have behaviours issues like aggressively, fight with each other’s, they steal things from the kitchen and put it in the cupboards and or hide it under the bed or something like that. We had also those who had trauma because of what they experienced, maybe during the war there and psychological issues that they are screaming in the night due to nightmares that other people staying with them were complaining because they cannot sleep, it’s a lot of problems we see we even have those who are self-harming, You know, like taking a knife and stretching, or cutting their hand, (SWE)”.</i>
2. Interventions used by social workers to address the problems of refugees( children and their families	Child protection ,family tracing & reunification	<i>“We manage cases where the husband hits the woman in the presence of kids that they try to stop the fight themselves trying to rescue their mother or they call the neighbours for help or call the police to be involved. (SWF).</i>
		<i>“We had children who came without their parents. some shared that they got separated on their way and stopped in Turkey or somewhere else , some had phone numbers that we try to call and put them in contact with their families or others cannot be reached .(SWE)”.</i>
		<i>"Something that is always nice for social work is when family that has to been split up and is reunited again, we had this case of a brother and sister. The brother was an adult, but the sister was a minor about 10 or 11 and the family was still in Syria, and they lived here for quite a few years and a year and a half ago, then through contacting and sharing information the family finally made it from Syria to Germany, and now the entire family is reunited. It’s a nice accomplishment.”(SWL).</i>
		<i>“We help with all the documents, the registration of the child and finding paediatrician and booking appointment every time it is needed”. (SWM).</i>
	Psycho-social service provision	<i>“I support the people with in everyday life. I try to help them with contacting doctors and also having their paperwork done or submit their application for money, which they get each month to support themselves. And sometimes I have time to sit down with the families and people to talk a bit about their lives and why they are refugees, some people are open to talk about it and they have fear to be sent back in their home countries” (SWD).</i>
		<i>“We conduct assessments and try to find a way to solve the problem, or we communicate with other actors to act in the best interests of our clients</i>

		<i>and it's always like a struggle since they often have the feeling that nothing is moving “(SWL).</i>
	Multidisciplinary team work and referral support services	<i>“I knew that in some cultures women don't have the same rights or are not seen as equal. Sometimes I felt bad not knowing what to do because in the end, the husband decides for everything and I think maybe if there was a male colleague to solve some issues things could be better for these families we have .There is a case of this family I tried to get in touch and I found out that the woman has been unreachable because the husband always locked the door when he left , it was really hard because we were thinking about involving the police as we wondered what can we do if something happens, like if there's a fire she would be dead. She and the small daughter so. I tried to talk with this man but it didn't work. In the end, they moved away, so I don't know what happened to them in the end. (SWD).</i>
3. Challenges faced social workers face in working with refugee children and their families.	Culture norms and poor attitudes	<i>“So professionally, I would say you sometimes when a person yells at you, sometimes you just need to try to understand where the person is coming from and what's happening in their life. I'm not saying that it's OK to yell at someone because you need help but we see this a lot.”(SWF).</i>
	Heavy case loads	<i>“Often we are understaffed, which means there's a lot of work to do and some colleagues are very sick or somebody is on a need for some reason or we don't have new colleagues. This is quite challenging because in the last few years, more and more colleagues quit including those older colleagues with the work experience and it makes it difficult to assist all those who need our services. (SWML).</i>
		<i>“It's not OK having 80 people in one house, which is meant to be for 16. But it's getting more and more common to have a bus coming in the middle of the night with people that needs you. In this situation you have to solve this problem and there is not enough space for too many people.”(SWE).</i>
	Refugee protection related legislative frameworks	<i>“And often the police call us in before to let us know what's going to happen. As social workers, we would like to warn the people and say, listen, please don't come home on this day because the police is coming to deport you but we can't its illegal .So we just have to comply with whatever comes from them. What we do is we've tried to communicate with the police as simple as we can, but we abide by the rules.” (SWM).</i>
		<i>The legal system is the biggest obstacle, I think, in this work field. Yeah, because it's very strict. We were actually supporting people to get in touch with lawyers. But our team leader advised us not to talk about this part of our work with our lawyer because their interest was to send away the people as soon as possible and our interest was to support them as good</i>

		<i>as possible. So this was like a secret part of our act so I often go with people to the lawyer. (SWD)</i>
4.Area of professional development	Culture competence	<i>“You need to understand that people act in a certain way that you will never understand because you did not grow up the same context as they did. You need to accept that if they do things differently than you do, it’s still good. It’s different, but it’s good. It doesn’t mean that things are bad. You need to be open for like maybe speaking a lot with your hands and trying to explain things and maybe learning, yes, maybe learning some words and that different, different languages. (SWF).</i>
	Critical thinking	<i>“You also try to adjust to that environment where they are working so that they can accept you. Automatically because the way you act or the way you handle problems, that’s one of the things that define you when you are with them, sometimes it is needed to think quickly and effectively according to the situation. (SWD)</i>
	Organization	<i>” I think, well, I have my office hours, I have them from 10 to 12 and then I have them in the afternoon from like two to four and everything. We’ve got this office hours, I would say, I have to better organize my work because normally, the people are supposed to come into his office hours so I can, like, collect all information needed and prepare what I have to do and then I can work on it in free time when I’m not here, because I only work three days a week at the moment” (SWF).</i>