

THE “WHAT’S UP?” SURVEY OF ADOLESCENTS IN RESIDENTIAL CARE FACILITIES DURING THE ISRAEL–HAMAS WAR

Ben Alfasi, Anna Reznikovski-Kuras, and Tal Arazi

Abstract: On October 7, 2023, the Hamas organization launched a surprise terrorist attack, to which Israel responded by declaring war on Hamas. The aim of this study was to examine the status and needs of adolescents in residential care facilities (RCFs) throughout Israel in light of the ongoing war. An additional aim was to show that our survey itself conveyed the message to the adolescents that the professionals and administrative staff of the RCFs are concerned about them. The study relied on a quantitative research approach, using a self-report online survey among adolescents in RCFs; 340 questionnaires were collected. The adolescents reported emotional needs that surfaced because of the war: 58% felt sad or depressed, 50% were worried or stressed, and 49% were angry or irritable. However, 62% reported feeling safe in their RCF. A multivariate linear regression analysis revealed that a feeling on the part of the adolescents that (a) the RCF staff care about their well-being and (b) they listen to and support them are predictors of the adolescents’ sense of security in the RCF. The findings suggest that developing policies aimed at strengthening the connection between RCF staff and the adolescents in their care, and enhancing strategies of partnership, are essential for increasing the adolescents’ sense of security.

Keywords: children and youth at risk, residential care facilities (RFC), war, times of crisis, Israel

Ben Alfasi MA (corresponding author) is a research associate at the Myers-JDC-Brookdale Institute, JDC Hill PO Box 3886 Jerusalem 91037, Israel. Email: BenAl@jdc.org

Anna Reznikovski-Kuras PhD is a research scholar at the Myers-JDC-Brookdale Institute, JDC Hill PO Box 3886 Jerusalem 91037, Israel. Email: annare@jdc.org

Tal Arazi PhD is a senior research scholar at the Myers-JDC-Brookdale Institute, JDC Hill PO Box 3886 Jerusalem 91037, Israel. Email: tala@jdc.org

Ethical approval: Ethical clearance was obtained from the research ethics committee at the Myers-JDC-Brookdale Institute prior to the commencement of the study.

In recent decades, there has been a growing trend toward involving social service recipients in decision-making processes, policy formulation, service delivery, and evaluation (Birrell & Gray, 2017). This trend reflects a shift in perspective, with the recognition that knowledge is not solely held by professionals and researchers but also includes the unique and distinct expertise of service recipients, who are “experts by experience” (Rosenfeld, 1993, pp. 230–231). The involvement of service recipients has become a significant component of social service planning and implementation processes, with emphasis on ensuring the quality of provided services and that they are tailored to the needs of recipients. This stems from the understanding that service recipients may offer alternative methods for measuring service outcomes and quality, rather than those traditionally used by policymakers and service providers (Beresford & Branfield, 2006).

The participation of service recipients in decision-making offers major advantages. Among them is the potential to significantly contribute to achieving service objectives, enhancing overall satisfaction (Itzhaky & York, 1994), and fostering more meaningful connections, thereby reducing feelings of alienation and social exclusion (Katan & Prager, 1986). At the same time, there are also barriers to involving service recipients. First, doing so disrupts the status quo and requires those presently in authority to relinquish some control over decision-making processes (Barak & Sadan, 2003; Hasenfeld, 2009; Katan & Prager, 1986). Although relinquishing control may seem like a move toward shared responsibility, it does not necessarily ensure genuine collaboration in decision-making. As a result, decision-makers and professionals may feel frustrated by the perceived loss of exclusive authority (Katan & Prager, 1986; Levin, 2012). For example, a social worker with expertise in youth law who involves parents in decisions about their child’s placement in residential care might experience a sense of diminished professional control, especially when their clinical judgement is in conflict with the views of the parents. Additionally, service recipients participating in these processes may feel inferior, uncomfortable, or distrustful toward professionals, or perceive involvement with them to be unrewarding (Smith et al., 2012).

Participation of Children and Adolescents in Decision-Making Processes

The right of children and adolescents to participate in decision-making processes that concern them reflects a value-based and professional perspective anchored in the United Nations Convention on the Rights of the Child (1989). Article 12 of the Convention establishes a child’s right, as an individual and as part of a group, to freely participate and express opinions in any administrative or judicial process that directly or indirectly affects them. This right aims to ensure that the views of children and adolescents are heard and given weight in decision-making processes and policy development that concern them, and recognizes them as individuals whose opinions and desires hold value in decisions that impact their lives (Morag et al., 2021). According to Article 12, the right to participate includes three components: the right to be heard, the right to do so freely, and the right for their opinions to be valued and considered in decision-making processes. In addition, Article 13 grants children the right to freedom of expression, which includes the right to access information. This necessitates providing children with as much information as possible,

couched in clear language and tailored to their age, developmental abilities, and unique characteristics and needs, as well as their desire to receive information (Falch-Eriksen et al., 2021).

The inclusion of children and adolescents in decision-making processes offers many advantages. Participatory decision-making challenges hierarchical relationships between professionals and children or adolescents, promoting equality in these interactions. It also contributes to the empowerment and personal development of children and adolescents (Timor-Shlevin, 2018). Empowering children as people with rights, rather than merely objects of care and protection, aligns with the shift from a discourse of protection and service to one of participation and responsibility. Research shows that children who experience participation in decision-making processes, such as in welfare or education systems, develop a sense of self-confidence and greater willingness to collaborate with caregivers (Soanes, 2015; Odinokova & Rusakova, 2019). However, the literature attests to challenges that can arise in attempts to foster participatory processes with children and adolescents. First, professionals sometimes perceive children and adolescents as lacking the ability or maturity to participate in decision-making processes and to make beneficial choices (Kushar & Ben-Arieh, 2009). Second, the power asymmetry between adults and children can hinder the creation of a collaborative atmosphere (Arnstein, 1969; Gallagher et al., 2008). Third, high levels of child participation in decision-making may occasionally conflict with other considerations, such as ensuring children's protection or their right to development (Molloy, 2024). Finally, institutional and bureaucratic mechanisms in public service systems can impede or even block the possibility of including children and adolescents in decision-making processes (Alfandari, 2016).

Tools for Self-Reporting by Children and Adolescents

Self-report tools for children and adolescents promote the implementation of Article 12 of the United Nations Convention on the Rights of the Child (1989). These tools provide children with a safe space to share their feelings and experiences, enabling “genuine listening” by adults and professionals. This facilitates a direct understanding of children's emotional and social worlds (Van Bijleveld et al., 2013).

Self-report tools for children and adolescents have potential for improving social service systems by collecting data directly from them. Additionally, they serve as a vehicle for conveying a message of care from caregivers and policymakers, while recognizing the child as a partner rather than merely a service recipient. Such messages strengthen the child's trust in social services, enhance their sense of social belonging, and foster hope for a better future (Beitchman & Corradini, 1988; Bevans et al., 2020).

The Purpose of the Study

On October 7, 2023, the Hamas organization launched a surprise terrorist attack on communities surrounding the Gaza Strip. In response, the State of Israel declared war on Hamas. Upon the outbreak of the war, the Division of Out-of-Home Services, Family, Child and Youth,

and Special Placements in Israel's Ministry of Welfare and Social Affairs mobilized immediately to assess the needs of the residential care facilities (RCFs) under its responsibility. The objective of the current study was to examine the status and unique needs of adolescents in RCFs following the Hamas attack and during the ongoing war, as well as the responses to their needs. The survey was also intended to convey a message of concern and partnership to the adolescents from professionals and staff in the RCFs and the Ministry of Welfare.

Methodology

Research Population

A total of 340 adolescents completed the survey questionnaire, a response rate of approximately 10% of all children over the age of 12 in RCFs under the supervision of the Ministry of Welfare in Israel. Of these respondents, 52.9% identified as female, 43.8% as male, and 1.2% as "other". Their ages ranged from 9 to 20 years ($M = 14.9$, $SD = 2.06$), with 4.3% 9 to 11 years, 52.5% 12 to 15 years, 41.9% 16 to 18 years and 1.3% 19 to 20 years. The majority (65%) of the adolescents identified as Jewish, 25.5% as Arab, and 9.5% as belonging to other population groups.

Research Tools

The study was conducted using a quantitative methodology based on a self-report survey completed by adolescents in RCFs supervised by the Ministry of Welfare. The survey included questions about the attributes of the adolescents (gender, age, and ethnic group), and questions about their feelings, emotions, and needs following the events of October 7 and the ongoing war. To make the questionnaire more accessible for children and easier to complete, some of the questions used a response scale with smiley faces instead of or alongside textual responses. The survey also asked which services were provided by the RCFs, what changes had occurred within the facilities, what coping mechanisms the adolescents employed, and how to develop additional or complementary support for them. It is important to mention that the questionnaire was developed with the guidance of an "expert by experience", a graduate of out-of-home treatment settings, with the goal of ensuring that the language used was suited to children and the questionnaire covered a range of topics relevant to their concerns and needs during this period (for example, concerns about the physical security of their family at home).

Data Collection

The survey was distributed by the Out-of-Home Services Division in the Ministry of Welfare through a link sent by email to all RCF directors. The directors were asked to share the link with adolescents in their facilities aged 12 and above, either through a text message or by providing access to a computer at the RCF. The questionnaire was available in both Hebrew and Arabic. Respondents completed the survey anonymously; however, those who wished were able to receive assistance from a staff member of their choice, who could explain the questions and assist with completing the survey. Data collection took place during January 2024, and a total of 340 questionnaires were collected.

Statistical Analysis

Quantitative statistical analysis was carried out using the SPSS-28 software. Pearson correlation tests were performed to examine the relationship between the adolescents' feeling that the RCF staff listen to and support them and their sense of security. In addition, two *t*-tests for independent samples were carried out to test the relationship between the feeling that the RCF staff are concerned about the adolescents' well-being and their sense of security, as well as the relationship between gender and the adolescents' sense of security. Finally, a multivariate linear regression was conducted to assess the impact of age, gender, and aspects of staff emotional support on the adolescents' sense of security.

Ethics

This study involved children and adolescents at risk, a sensitive and vulnerable population, particularly during crises, and thus posed unique professional and ethical challenges. The age of the participants, and the fact that the questionnaire dealt directly with the war situation, were only a few of the aspects considered during the study's design and implementation. The questionnaire included questions that could potentially evoke unpleasant memories or emotional distress among the respondents (e.g., "Does your family live in an area that was attacked or evacuated during the current war?" and "Has anyone in your family, among your relatives, friends, or the RCF staff been harmed in the terror events or the current war?"). To minimize discomfort, the survey's introduction made it clear that responses were anonymous, that answering all questions was not mandatory, and that participants could stop at any point. Furthermore, it was emphasized that if any distress arose while responding, participants were encouraged to seek support from the RCF staff. The study received approval from the Ethics Committee of the Myers-JDC-Brookdale Institute.

Results

Difficulties, Concerns, and Problems

The mood of the adolescents during the war was assessed using four questions. One general question addressed their mood over the prior 2 months, asking them to choose from four responses represented by icons symbolizing different moods (see Figure 1). Using this system, 7.7% of the adolescents reported feeling "very good", 30.7% reported feeling "good", 39.9% reported feeling "not so good", and 21.8% reported feeling "not good at all".

Figure 1. *Icons Symbolizing Different Moods*



Three additional questions focused on specific emotions (happy vs. sad or depressed; calm vs. worried or stressed; and relaxed vs. angry or irritable) over the past 2 months. The adolescents were asked to choose between two options, presented with detailed descriptions and corresponding

icons: 58.5% reported feeling sad or depressed, while 41.5% felt happy; 49.5% reported feeling worried or stressed, while 50.5% felt calm; and 48.6% reported feeling angry or irritable, while 51.4% felt relaxed.

RCF Staff Responses to Adolescents' Feelings and Emotions

Of the 340 adolescents, 85.4% reported having received an explanation about the war situation; of these, 45.4% had received the explanation from RCF staff, 39.1% from media and social networks, 30.7% from their family, and 5.1% from other sources. Most (83.6%) reported that someone from the RCF staff had asked about their well-being in light of the war situation. Nearly half (47.7%) felt that the staff supported and listened to them “almost always” or “always”, while 37.6% reported feeling this way “sometimes”, and only 14.6% indicated that they “usually do not” or “never” felt supported or heard by the staff.

Sense of Security Among the RCF Adolescents

Over half (61.6%) of the adolescents reported feeling safe in the RCF “almost always” or “always”; 28.1% reported feeling safe “sometimes”, and only 10.3% reported “usually not” or “never” feeling safe.

The Relationship Between Adolescents' Sense of Security and Emotional Support From RCF Staff

A Pearson correlation test was conducted in order to test for a correlation between the perception that RCF staff listen to and support the adolescents and the adolescents' sense of security. The results showed a positive moderate correlation between emotional support and adolescents' sense of security ($r = .487, p < .01$). This indicates that the more the adolescents felt that staff listened to and supported them, the greater their sense of security was in the RCF.

In order to test whether there was a correlation between the perception that staff are concerned about the adolescents' well-being and their sense of security, a t -test for independent samples was carried out. This test compared the sense of security among adolescents who felt that staff cared about their well-being with that of those who did not. The results revealed that adolescents who felt that the staff showed concern for their well-being or emotions during the war reported a higher sense of security within the RCF ($M = 2.6, SD = 0.63$) compared to those who did not feel that the staff was concerned about their well-being ($M = 2.3, SD = 0.78; t[302] = -2.962, p = .004$).

In order to test whether there was a correlation between gender and adolescents' sense of security, a t -test for independent samples was carried out. The results showed that boys report a higher sense of security within the RCF ($M = 2.6, SD = 0.63$) than girls do ($M = 2.4, SD = 0.68; t[295] = 3.112, p = .002$).

Finally, in order to identify the factors predicting adolescents' sense of security within the RCF, a multivariate linear regression analysis was carried out. The explanatory variables included in the regression were gender, age, the subjective feeling that staff are concerned about their well-

being or ask how they are feeling, and the subjective feeling that staff listen to and support them; the sense of security was the dependent variable. The regression model was statistically significant ($F[4,260] = 21.952, p < .001$), with an adjusted R^2 of 25.2%, indicating that 25.2% of the variance in adolescents' sense of security could be explained by the model. The results of the regression are presented in Table 1. The adolescents' sense of security can be predicted using the proposed model: the more the adolescents felt that staff cared about their well-being and asked about their feelings, and that the staff listened to and supported them, the stronger was their sense of security during the war. Furthermore, boys felt a stronger sense of security than girls did.

Table 1. *Using Emotional Support From the RCF Staff to Predict the Sense of Security of Adolescents (n = 264)*

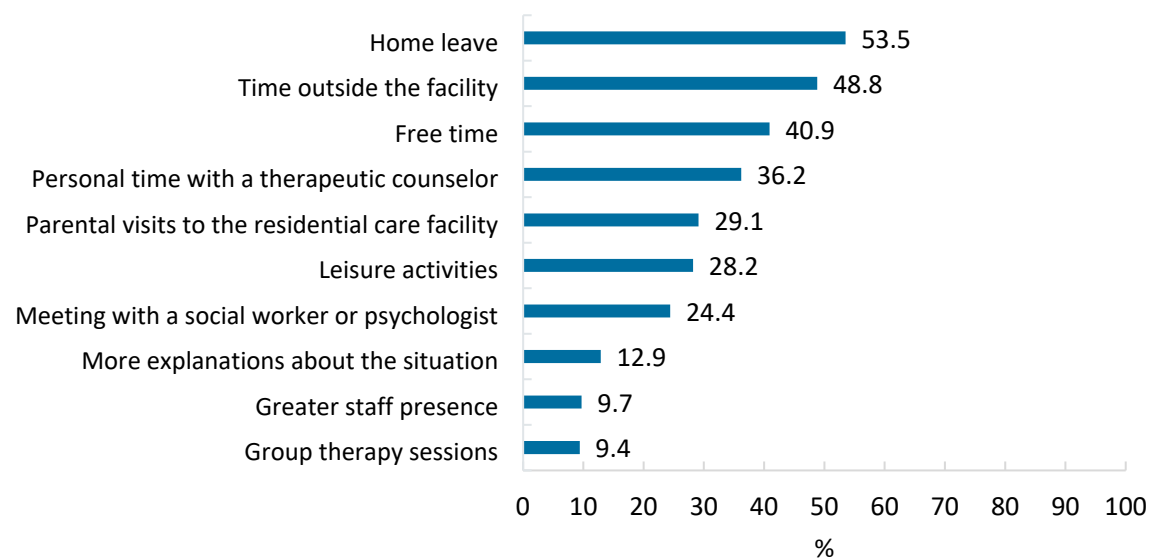
Explanatory variables	<i>B</i>	<i>SE b</i>	β	<i>t</i>
Gender – male	0.150	0.074	0.112	*2.021
Age	0.027	0.018	0.082	1.502
Feel that the staff are concerned about their well-being	0.205	0.104	0.114	*1.971
Feel that the staff listen to and support them	0.386	0.054	0.415	***7.092
R^2	0.252			
F	21.952***			

*** $p < .001$. * $p < .05$.

Mechanisms and Practices to Help Adolescents Cope With the War

Figure 2 illustrates the practices that adolescents reported as helpful in improving their well-being and coping with the war.

Figure 2. *Mechanisms and Practices to Help Adolescents Cope With the War (n=340)*



Discussion

The survey findings highlight the importance of involving children and adolescents in decision-making processes that are related to the social services provided to them. This is especially important in the case of adolescents in RCFs, whether during war or peace (Gottschalk & Borhan, 2023). Collecting data 3 months after the outbreak of the war facilitated a real-time examination of the adolescents' emotional states, their unique needs resulting from the war, the services provided in the RCFs, and additional measures that could be implemented to ease their situation. This approach aligns with Article 12 of the United Nations Convention on the Rights of the Child (1989), which emphasizes the right of children and adolescents to receive information and express their opinions in decision-making processes that concern them.

The findings show that the war significantly impacted the adolescents' emotional situation, with more than half reporting feelings of sadness, depression, and worry. These findings are consistent with the research literature, which indicates that during national crises or wars, children and adolescents are exposed to additional trauma and are at greater risk of developing trauma-related disorders (Catani, 2018). This underscores the importance of providing safe spaces where adolescents can share feelings, voice concerns, and receive support from adults who can help mediate the situation, identify their distress, and create tailored responses in real time. The survey results emphasize the importance of addressing the needs adolescents express, such as their desire for more frequent home leave, increased leisure time within the RCF, or opportunities for personal or group conversations with caregivers (social workers and psychologists). Developing a full and unmediated understanding of adolescents' needs requires paying close attention to their own perspectives on their needs and emotions, which may not always be easily identifiable by professionals. Moreover, the findings reinforce the notion that adolescents are "experts by experience" (Rosenfeld, 1993). When they are included in decision-making processes by allowing them to share their opinions and perspectives, and when their input is treated with appropriate gravity, it becomes possible to develop responses more accurately tailored to their needs.

The findings indicate that the adolescents' sense of security was positively correlated with their perception that RCF staff care about and listen to them. The more adolescents felt that the staff showed interest in them and listened to them, the greater their sense of security. This finding aligns with research literature that emphasizes the importance of relationships between adults and children during crises. Other studies have also shown that when adolescents perceive staff as willing to listen to and support them, their sense of security increases (Sellers et al., 2020; Slaatto et al., 2023). This demonstrates that investing in emotional and personal connections between staff and adolescents is not only a valuable educational and therapeutic goal in itself but is also closely linked to the adolescents' psychological well-being and sense of security, particularly in stressful and crisis situations (Sellers et al., 2020; Slaatto et al., 2023).

The finding that boys reported a higher sense of security than girls did raises questions about gender differences in risk perception and feelings of security. This may point to the need for gender-specific responses, such as creating dedicated spaces for discussions with girls, examining

gender-related perceptions and attitudes among professional staff, and addressing the fact that girls may have a lower sense of security, even if they do not always express it unless asked directly.

In a broader context, the participation of adolescents in a self-report survey during a complex and emotionally charged national crisis demonstrates the potential for involving service recipients in decision-making processes during crises. Such processes can strengthen the adolescents' trust in educational and therapeutic staff in RCFs, reduce feelings of alienation, and enhance solidarity and mutual accountability between the adolescents and the professional staff. However, the findings also highlight the challenges in implementing such processes. While there is a desire to give adolescents a voice, these efforts must be reinforced by supportive policies and sufficient resources, including manpower, time, and professional tools. The success of participatory processes depends on the prior preparation of RCF staff and the Ministry of Welfare management, including ongoing communication with adolescents and staff, encouraging survey participation, and ensuring that findings are followed up on and translated into action in the field.

A primary limitation of the present study is the low response rate of approximately 10% of all children over the age of 12 in RCFs under the supervision of the Ministry of Welfare. Possible explanations for this low rate include, first and foremost, the outbreak of the war, which led many adolescents to disengage from non-essential activities, including participation in research. In addition, the questionnaire was disseminated by the ministry's headquarters to the directors of the RCFs, who were responsible for forwarding the link to the youth at their facility. It is possible that not all directors completed this task. Furthermore, some adolescents don't have access to a computer or smartphone, limiting their ability to participate.

An analysis of the respondents' characteristics suggests that they are similar to those of the population of all children over the age of 12 in RCFs. However, it is possible that the low response rate introduced bias into the findings. This may be particularly true for underrepresented groups such as ultra-Orthodox adolescents, who often have limited or no access to digital devices. To overcome these challenges in future research, it is recommended that the questionnaire link be distributed directly to the youth when possible.

In conclusion, and notwithstanding the low response rate to the survey, the use of the "What's Up?" survey during the war underscores the substantial value of self-report tools. These tools can deepen policymakers' and professionals' understanding of the emotional world of RCF adolescents, provide the adolescents with a sense of visibility and value, and improve decision-making processes and fine-tuning of responses to the adolescents' needs. Future research should delve into additional cultural and social differences that may influence adolescents' sense of security in RCFs. More broadly, we recommend examining the organizational conditions that facilitate meaningful participatory processes for children and adolescents in RCFs. Nonetheless, the findings of this study already suggest that developing policies aimed at strengthening the personal connection between professional staff and adolescents, and designing responses tailored to the adolescents' needs, are essential to enhancing their sense of security and psychological resilience, both during crises and in normal times.

References

- Alfandari, R. (2017). Partnership with parents in child protection: A systems approach to evaluate reformative developments in Israel. *British Journal of Social Work*, 47(4), 1061–1077. <https://doi.org/10.1093/bjsw/bcw101>
- Arnstein, S. R. (1969). A ladder of citizen participation. *Journal of the American Institute of Planners*, 35(4), 216–224. <https://doi.org/10.1080/01944366908977225>
- Barak, D., & Sadan, E. (2003). Empowerment and partnership: Deceptive terminology [Hebrew]. In A. Churchman & E. Sadan (Eds.), *Participation: Your way to influence* (pp. 106–124). Kibbutz Meuchad.
- Beitchman, J. H., & Corradini, A. (1988). Self-report measures for use with children: A review and comment. *Journal of Clinical Psychology*, 44(4), 477–490. [https://doi.org/10.1002/1097-4679\(198807\)44:4<477::AID-JCLP2270440402>3.0.CO;2-K](https://doi.org/10.1002/1097-4679(198807)44:4<477::AID-JCLP2270440402>3.0.CO;2-K)
- Beresford, P., & Branfield, F. (2006). Developing inclusive partnerships: User-defined outcomes, networking and knowledge – a case study. *Health & Social Care in the Community*, 14(5), 436–444. <https://doi.org/10.1111/j.1365-2524.2006.00654.x>
- Bevans, K. B., Ahuvia, I. L., Hallock, T. M., Mendonca, R., Roth, S., Forrest, C. B., Blackwell, C., Kramer, J., & Wakschlag, L. (2020). Investigating child self-report capacity: A systematic review and utility analysis. *Quality of Life Research*, 29, 1147–1158. <https://doi.org/10.1007/s11136-019-02387-3>
- Birrell, D., & Gray, A. M. (2017). *Delivering social welfare*. Policy Press.
- Catani, C. (2018). Mental health of children living in war zones: A risk and protection perspective. *World Psychiatry*, 17(1), 104–105. <https://doi.org/10.1002/wps.20496>
- Falch-Eriksen, A., Toros, K., Sindi, I., & Lehtme, R. (2021). Children expressing their views in child protection casework: Current research and their rights going forward. *Child & Family Social Work*, 26(3), 485–497. <https://doi.org/10.1111/cfs.12831>
- Gallagher, M., Tisdall, K. M., & Davis, J. (2008). Reflecting on children and young people's participation in the UK. *The International Journal of Children's Rights*, 16(3), 343–359. <https://doi.org/10.1163/157181808X311187>
- Gottschalk, F., & Borhan, H. (2023). Child participation in decision making: Implications for education and beyond [Education working paper no. 301]. OECD. https://www.oecd.org/en/publications/child-participation-in-decision-making_a37eba6c-en.html
- Hasenfeld, Y. (2009). *Human services as complex organizations*. Sage.

- Itzhaky, H., & York, A. S. (1994). Different types of client participation and the effects on community-social work intervention. *Journal of Social Service Research*, 19(1-2), 85–98. https://doi.org/10.1300/J079v19n01_05
- Katan, J., & Prager, E. (1986). Consumer and worker participation in agency-level decision making: Some considerations of their linkages. *Administration in Social Work*, 10(1), 79–88. https://doi.org/10.1300/J147v10n01_08
- Kushar, H., & Ben-Arieh, A. (2009). Children's participation in shaping social policy: The role of social work [Hebrew]. *Social Security*, 81, 107–134.
- Levin, L. (2012). Towards a revised definition of client collaboration: The knowledge–power–politics triad. *Journal of Social Work Practice*, 26(2), 181–195. <https://doi.org/10.1080/02650533.2010.545121>
- Molloy, S. (2024). The Committee on the Rights of the Child and Article 12: Applying the Lundy model to treaty body recommendations. *Leiden Journal of International Law*, 37(3), 669–693. <https://doi.org/10.1017/S0922156524000098>
- Morag, T., Savag, Y., Zolotnik, D., & Arazi, T. (2021). Ensuring the Rights of children and adolescents in Israel during the COVID-19 crisis: A perspective based on the International Convention on the Rights of the Child [Hebrew]. *Medicine and Law*, 52, 40–71.
- Odinokova, V., & Rusakova, M. (2019). Participation of children in decision-making and their psychosocial wellbeing within the child protection system in St. Petersburg, Russia [Russian]. *The Journal of Social Policy Studies*, 17(4), 643–656. <https://doi.org/10.17323/727-0634-2019-17-4-643-656>
- Rosenfeld, Y. M. (1993). Partnership: Guidelines for developing practice with and for marginalized populations [Hebrew]. *Society and Welfare*, 13, 225–236.
- Sellers, D. E., Smith, E. G., Izzo, C. V., McCabe, L. A., & Nunno, M. A. (2020). Child feelings of safety in residential care: The supporting role of adult–child relationships. *Residential Treatment for Children & Youth*, 37(2), 136–155. <https://doi.org/10.1080/0886571X.2020.1712576>
- Slaatto, A., Kleppe, L. C., Mellblom, A. V., & Baugerud, G. A. (2023). Youth in residential facilities: “Am I safe?”, “Do I matter?”, and “Do you care?”. *Residential Treatment for Children & Youth*, 40(1), 87–108. <https://doi.org/10.1080/0886571X.2022.2082628>
- Smith, M., Gallagher, M., Wosu, H., Stewart, J., Cree, V. E., Hunter, S., Evans, S., Montgomery, C., Holiday, S., & Wilkinson, H. (2012). Engaging w-ith involuntary service users in social work: Findings from a knowledge exchange project. *The British Journal of Social Work*, 42(8), 1460–1477. <https://doi.org/10.1093/bjsw/bcr162>

Soanes, H. R. (2015). *A study of three child's voice initiatives and their impact for the year 6 participants and their junior school* [Doctoral dissertation, University of Greenwich].
<https://gala.gre.ac.uk/id/eprint/14324/>

Timor-Shlevin, S. (2018). Partnership: Practice and its implications in working with adolescents [Hebrew]. *Social Security*, 104, 9–34.

United Nations Convention on the Rights of the Child, November 20, 1989.
<https://www.ohchr.org/sites/default/files/crc.pdf>

Van Bijleveld, G. G., Dedding, C. W. M., & Bunders-Aelen, J. F. G. (2013). Children's and young people's participation within child welfare and child protection services: A state-of-the-art review. *Child and Family Social Work*, 20, 129–138. <https://doi.org/10.1111/cfs.12082>