

Working with Youth in Residential Settings

Small Group Scenario 1

Tiffany is 13-years-old. She entered care about six months ago. At the time she disclosed that for the past two years her step-father has been raping her and that for the past year her 3 step-brothers have also been raping her. There was a schedule.

She finally disclosed to a close friend at school who didn't know how to respond and in her next free period told her teacher. The teacher immediately reported the information to the local child abuse hotline and a caseworker came to see Tiffany at school.

That night Tiffany went to a foster home, leaving her home, her school district, community and all her friends. Over the next three months Tiffany tried to adjust to living in a home with two parents and two younger "foster sisters". But Tiffany reverted to learned behavior, when her foster father would discipline her she tried to become inappropriate with him. After three months the foster family decided that they could no longer deal with these behaviors appropriately.

Tiffany was recommended for a residential treatment facility.

With her mother's accusations of having been at fault for the rape(s) and the behaviors at the foster home now on her record she is quickly identified as the "promiscuous" one at the facility. All the staff are made aware that they need to "be careful" around her. Since entering the facility no one has talked to her about the assaults and the trauma-therapist that the caseworker has recommended for her has a waiting list.

1. What might your role(s) be in this scenario?

2. How do you make your role/services known to the agency and youth?

3. Given the information provided, what strengths does the youth have?

4. What action steps would you take or services might you provide?

5. What collaborating partners might you work with?

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Small Group Scenario 2

Amanda comes to the Emergency Shelter late one night after having been taken into custody by the police. They responded to a call from the local ER. Amanda had arrived 3 hours early with a lot of bruises, various cuts all over her body and it was determined she had been raped, she was barely conscious when a “good Samaritan” brought her to the hospital. By the time the police got there Amanda was awake and able to tell the police that she had no idea where her mother was, she was probably out getting high somewhere and that she didn’t know her father. Her mother had kicked her out two weeks ago; she’d been living on the street, couch surfing when she had the chance. She couldn’t identify the person who raped her.

After a few days at the facility Amanda started getting into trouble because she wasn’t showering. Her “poor hygiene” caused her to lose privileges. She became more and more angry. One night she was so angry she got physical with a staff member, three staff members restrained her by holding her down. She began to scream even louder, she had a flashback to the rape. Because her body went into “fight” mode and she couldn’t calm herself down she was restrained for 45 minutes.

When she was finally exhausted her body stopped and they took her to the “quiet room” (with padded walls) until it was time for bed.

In the next few days Amanda stopped talking altogether.

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Small Group Scenario 3

Dameon is a 17 year old boy who loves emo music, art, and playing the game Magik. He just entered into placement at a residential facility just outside of his home town. He was concerned about the living situation with his mother, and having been in and out of placement, thought it would be safer to enter into a different living situation. He is one of 12 boys, age 10-17, that lives in the facility. The staff is all male, most between the ages of 20 and 35. Two days after he entered the program, he discloses to staff members that the week prior, while living at home with his mom, he thinks he might have been raped by a friend's father. He explains that he was at a party with a good friend and his friend's father and got really drunk. He remembers the friend's father offering to take him home, but his next memory is waking up alone in his friend's father's parked pick-up truck with his jeans ripped and partially undone. He explains that when he used the bathroom he experienced pain and bleeding. He is crying as he tells the story, but over the next few days seems to return to "normal."

Staff members follow their proper mandated reporting policies and call the child abuse hotline to report the suspected abuse. Someone also recommends calling the police. A caseworker from the agency phones the local police and relays the story, but the police respond that if Dameon is unable to recall where exactly the assault was located, he can't be sure which department has jurisdiction. The police officer encourages the caseworker to find out where it happened and be sure to call the correct department.

Staff begins to doubt that Dameon's telling the truth. He's been in and out of placement several times and seems "fine" now. They're also confused at how a 17 year old couldn't "get away" from a grown man and start to wonder if he is gay. They don't bring it up again and decide not to call the police officer back since they don't have any more information.

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Small Group Scenario 4

Mitchell is a 12 year old boy who loves movies, board games, and fishing. He was recently put in placement at an emergency shelter for boys age 8-17. He is one of ten boys in the facility. He was removed from his home after his mother witnessed Mitchell forcing his two year old brother to perform oral sex on him. Mitchell lived there with his mother, step-father, and two younger brothers. There is suspicion that Mitchell may have been sexually abused by his biological father who is currently incarcerated. Mitchell's mother reports that she was repeatedly raped as a child by her father and she doesn't know what to do with Mitchell, as she is scared at what he might do to his younger brother. She is struggling with mixed emotions related to this event and suffering from flashbacks of her own abuse. Child protective services is investigating the claim and placed Mitchell in the emergency shelter indefinitely until an investigation is complete.

Mitchell appears much less mature than the typical 12 year old and is clingy to the older boys in the program. They get easily irritated with Mitchell and tend to bully him. Staff struggle to interact positively with Mitchell because of the knowledge of what he may have done to his brother. He has undergone a psychiatric evaluation but has not received any other services and will likely go without them until a decision is made about the accusations.

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