



Culture of Care
Needs Assessment
Austrian Country Report

***Institute for Masculinity Research and
Gender Studies, Graz (A)***



Culture of Care - Creating and Strengthening a Supportive Environment for Male Victims of Sexualized Violence. Grant Agreement Number: JUST/2015/RDAP/AG/Vict/9296

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Introduction

The following report contains the results of a research carried out as part of the *Culture of Care* project. The project, which is funded by *the European Commission* under the *Rights Equality Citizenship (REC)* programme, has a duration of two years and will end in January 2019. It is carried out by five organizations, based in five different European countries: Germany, Austria, Bulgaria, Spain and Italy. Dissens, a gender research and training agency based in Berlin, is the leading partner. The other partners are Animus, an association that works to support vulnerable children based in Sofia, the Institute for Masculinity Research and Gender Studies at the Verein für Männer- und Geschlechterthemen Steiermark (VMG), a center for research, training and psycho-social support on issues related to masculinity based in Graz, AHIGE working on male issues and gender equality, based in Spain, and the Istituto degli Innocenti, which carries out research, documentation, training and provision of services for the well-being of children in Italy and is based in Florence.

The project aims to create and strengthen an environment able to support boys (potentially) affected by sexualized violence, in order to reduce the risk of such cases, thus addressing both prevention and protection. In particular, the project aims to support these (potential) male children and youth affected by sexualized violence by identifying and training the 'First Point of Contact' (FPC) with whom these children and young people are in contact. This objective will be achieved thanks to a 'Capacity Building Programme' (CBP) for professionals in specific contexts, such as schools, residential care facilities, youth organizations and social services. Moreover, within these contexts children and young people will also be beneficiaries of specific support actions aimed at enhancing their knowledge on the issue of sexualized violence and raising awareness on this issue. Finally, a specific awareness campaign and conferences will be organized in the countries involved in the project. The project has a child-centred and gender sensitive approach and works on gender stereotypes across all its activities.

In order to develop an effective CBP, adapted to the needs of the FPC, the project started off with an analysis to detect their needs and their knowledge on sexualized violence against minors, in particular male ones. This research was carried out in the geographical area of each partner through a questionnaire and focus groups, addressed to various professionals working with children and young people also as volunteers.

To this end the project partners have reached various professionals, such as primary and secondary school teachers, social workers, professional caregivers working in residential and non-residential care facilities for minors, representatives of youth associations, etc. These FPC were asked to complete the questionnaire and to participate in the focus groups, in order to explore their ideas on various topics, including sexualized violence on children/ young people, particularly boys, on the relevance of gender in general and in cases of sexualized violence, as well as their needs in terms of support and training to better prevent, identify and respond to such cases.

This report gives an overview of the results emerging from this needs assessment in Austria. As the prevention and protection systems vary widely between European countries, the report begins with some basic information in Austria. The second chapter will describe the qualitative part of the needs analysis - results emerged from focus group discussions. Chapter three will show the results that emerged from the online questionnaire. The fourth and final part of this report contains a summary of the most important results and recommendations to be taken into account in the subsequent phases of the project, namely the preparation of the capacity building programme, the awareness campaign and the support actions to be addressed to boys to prevent and combat cases of sexualised violence.



1. Country information

In this first chapter we give a short overview about legal provisions and mechanisms for protection against sexualised violence of children, and we show some examples for social services working with affected children in Austria. With the example of both, a guideline for intervention processes in Austrian schools and the *Network against Sexualised Violence* in Styria, we give an insight in supportive networks and tools for First Points of Contact (FPC).

Dark-field **studies**¹ of gender-based violence in Austria show a prevalence rate of 27.7% female and 12% male children among victims of sexualised violence. These comparatively high rates of experiences of sexualised violence become evident if sexualised violence is captured with a broad definition (e.g. if the concept also includes verbal sexualised violence). The narrower the definition, the lower the visibility of children affected by sexualised violence in the data. 20.7% female and 8.1% male children have experienced sexualised violence with physical contact while sexual abuse was reported from 9.8% female and 4.2% male respondents (Kapella et al. 2011).

1.1. Legal provisions

In the last years, some **law reforms** have taken place which aimed to strengthen the position of (potential) victims of sexualised violence. According to the *Austrian Penal Code (Strafgesetzbuch, StGB)* ‘criminal acts’ against sexual integrity and self-determination are regulated – the definition of rape also includes sexual assault in domestic settings and in intimate social relationships. A special law concerning sexual assault and sexual abuse of children was introduced in 2004. Since the *Criminal Law Reform* in 2016, the violation of sexual self-determination (§205a StGB) includes sexualised actions against the will of a person – this includes cases of people saying ‘no’ to sexualised actions or cases in which people are coerced into consent due to intimidation and social dilemma forced by the perpetrator. Sexual harassment (§218 StGB) now includes “*intense touch/contact of an intimate part of the body.*”

According to the *Austrian Victims of Crime Act (Verbrechensopfergesetz)* a person who was affected by crime can obtain court assistance. It is offered to all affected persons, either child, youth or adult. It is available for persons who suffered different forms of violence, for example for a child that suffered physical, sexual or emotional abuse. Viewing, downloading and circulation of “*pictures of sexually abused children*” are legally forbidden and indictable in Austria (§207a StGB).

The Austrian legal right to court assistance should help quickly, unbureaucratically, and free of charge, if the crime has already been reported to the police or the public prosecutor’s office or if prosecution has not yet been initiated (e.g. if sexual integrity has been impaired). Court assistance support includes providing information, counselling and accompanying victims to the police or to court. Court assistance happens before, during and after court proceedings and supports to assert

¹ ‘Dark-field’ is a well-known expression in the field of violence research. Criminal statistics usually do not represent the whole field of gender based violence, rather they only illuminate the most severe acts. In order to shed light on the development of criminal acts, dark-field studies (usually focusing on perpetrator-victim-experiences) try to close the gap of knowledge.



rights of the violence-affected person. Children and adolescents under the age of 18 have special rights, e.g. interrogation by persons of the same gender or so-called 'soft interrogation'. Counselors are specifically trained for court assistance work and they respond quality standards. Furthermore there is also a toll-free *Victim Assistance Hotline (Opfernotruf)* and a special hotline for children subjected to violence.² The costs of court assistance are covered by the *Austrian Federal Ministry of Justice*.³ Furthermore the web-platform *gewaltinfo.at* provides information on legal provisions in Austria.⁴

1.2. Social services working with children and adolescents affected by sexualised violence and best practice examples

In this chapter we cannot give an exhaustive overview of social and medical services offered to children and adolescents affected by sexualised violence, our goal here is rather to highlight interesting and innovative programs and resources in Austria in terms of methodological and institutional approaches.⁵ There are different types of institutions:

Forensic Medicine Institutes (Graz, Salzburg, Innsbruck, Wien) analyse marks of physical sexualised violence of survivors (incl. children) and document these marks on a free-of-charge basis for victims.

Some Austrian medical hospitals started child protection groups which support children and youth who are suspected to be affected by (sexualised) violence. For example, the child protection group at the *Styrian University Clinic for Paediatric Surgery* consists of an interdisciplinary team of medical doctors, psychotherapists, nursing personnel and social workers. It counsels medical doctors and elaborates deescalating conflict-solving strategies together with the family of the child. Its motto is "help not punishment" and it provides a 24 hours service.⁶

Non-profits and nongovernmental organizations (NGOs) like child protection centres, violence protection centres, as well as women's' shelters provide support for children and youth victims of sexualised violence. Some of these support structures and service providers are characterised by a gender-sensitive and child-centred approach in working with victims of sexualised violence. These are:

Since twenty-five years the NGO *Selbstlaut (Vowel)* provides information on preventing sexualised violence against children and youth. It is based in Vienna and its first prevention workshops were based on adapted concepts of the youth association *Strohalm* (Berlin). Since then they developed a broad variety of multilingual information and education tools for prevention work with children, like the storybook *Das machen (Doing it)*, videos and many games.⁷ An exhibition, further education for teachers, social pedagogues and other FPC are offered. The team consists of 11 multilingual pedagogues, licensed mediators, a film director and other professionals who offer seminars, workshops, counselling for prevention and intervention. Workshops with children/youth are

² <http://www.rataufdraht.at>

³ See www.justiz.gv.at and especially the English leaflet on court assistance, which can be downloaded: https://www.justiz.gv.at/web2013/file/2c948485371225d601397bee5b620df3.de.0/folder_prozessbegleitung_englisch_endfassung.pdf

⁴ <https://www.gewaltinfo.at/recht/>

⁵ For an overview on extracurricular work for children and youth in Austria see http://www.bmfj.gv.at/dam/jcr:886be723-ce6c-454d-ad06-d33b929bb13f/EN_außerschulische%20kinder-%20und%20jugendarbeit_einzelseiten_web.pdf

⁶ <http://kinderchirurgie.uniklinikumgraz.at/Patientenbetreuung/gemeinsameeinrichtungen/spezialbereiche/kinderschutzgruppe/Seiten/default.aspx>

⁷ <http://selbstlaut.org/publikationen-und-materialien/unsere-materialien/>



provided from 3rd grade primary school and prevention tool kits (parents' evenings, further education and facilitation for pedagogues) are offered for institutions working with children from preschool age on. *Selbstlaut* talks "... with children of all ages about bodies and sexuality as a central part of the prevention of sexual exploitation of children."⁸ On their website they also provide "information for mothers, fathers, legal guardians and significant others" to inform them about their approach and content of school workshops with children – that helps to bring parents and other caregivers on board. Available for download in English are also two "kidsbooks"⁹ and a two-page "overview of information on preventing sexual abuse of girls, boys and youth."¹⁰

To prevent sexualised violence against and among children, adolescents and adults, **Hazissa** is a NGO which provides "information for the public, trainings and knowledge transfer for parents and pedagogues, caregivers, children, adolescents, men and women with disabilities." It is based in the province of Styria and was established in 2003.¹¹ In their workshops boys and girls from six years to over 15 years receive information about sexuality and sexualised violence. The team works in gender-homogeneous settings focusing on the following topics: children's rights, physical self-determination, self-esteem, boundaries, feelings, gender roles and getting help. They train social skills such as empathy and conflict management skills.¹²

LGBTIQ youth counselling: **First love.at** offers a chat- and e-mail-counselling for youth.¹³ **Eswirdbesser.at** is an Austrian offshoot of the online project and video *It gets better* which was started by an American homosexual activist (and spread internationally) as reaction to the suicide of some boys following homophobic bullying. The Austrian version is online since 2013 and the goal is to encourage LGBTIQ adolescents and to raise more public awareness, acceptance and support for them, e.g. by avoiding bullying and homophobia, e.g. with videos in social media.¹⁴ Counselling centres for LGBTIQ populations exist in different federal provinces of Austria – like **COURAGE** or **HOSI**.¹⁵ **COURAGE** for example is "an advice centre for individuals and partners as well as families. Counselling topics are sexuality/relationships, same sex ways of life, transgender and transidentity issues, intersexuality, violence and sexual harassment."¹⁶ They run counselling centres in four capitals of Austrian federal provinces (Wien, Graz, Salzburg and Innsbruck).

Männerberatung Wien (*Men's Counselling Centre Vienna*) offers counselling for boys and men and training about male children, youth and adult work for schools, universities of applied sciences, employees of youth welfare institutions and others. Main topics are work with perpetrators, victim protection and critical reflection of gender roles. Addressing male children and youth as well as their parents and caregivers, the institution offers general counselling, psycho-social and legal court assistance, anti-violence therapy in forensic context for male children and youth affected by (sexualised) violence, psycho-therapeutic group therapy with outdoor-pedagogical elements for adolescent boys who display behavioural problems.¹⁷

⁸ <http://selbstlaut.org/multilingua/english/>

⁹ *The Playbook for Kids About Sex and A Kid's First Book About Sex*, available at <http://www.joaniblack.com/kidsbooks.htm>

¹⁰ http://selbstlaut.org/wp-content/uploads/2016/11/praevention_englisch.pdf

¹¹ <http://www.hazissa.at/index.php/welcome/>

¹² <http://www.hazissa.at/index.php/welcome/offers/protection-sexualized-violence/children-adolescents/>

¹³ www.firstlove.at (also Vienna, based at the gynaecological ambulance)

¹⁴ <http://eswirdbesser.at/videos.php>

¹⁵ <http://www.hosiwien.at>

¹⁶ <http://www.courage-beratung.at/mitarbeiterinnen,graz>

¹⁷ <http://www.maenner.at/beratung/jugendarbeit/>



Together with the *Institute for Forensic Therapy* the **Wiener sexualtherapeutisches Programm für Sexualstraftäter** (*Vienna Sexual-Therapeutic Programme for Perpetrators of Sexualised Violence, WSPS*) provides “work with perpetrators as protection of ‘victims’.” It includes in-patient and out-patient individual and group therapy for male youth and adult sexual violence perpetrators. They cooperate with victim-protection organisations. Therapies take between two and three years, main costs are paid by the referring courts, prisons or the statutory health insurance. Another therapy program is offered for men who were perpetrators of sexualised violence in cyberspace. They use the word ‘child abuse pictures’ (‘Kindermisbrauchsbilder’) because the word ‘child pornography’ seems too harmless for them. Since twenty-five years *Männerberatung Wien* has provided individual and group-therapy for hundreds of men. With *Not Becoming a Perpetrator* they offer a two-year-prevention program for paedophile men.

liebenslust*,¹⁸ the Austrian associate partner in the *Culture of Care* project, offers sex education for adolescents, young adults and caregivers in the province of Styria since 2012. The project is financially supported by the regional government of Styria. A basic workshop lasts five sessions and includes a reflexive discussion. The work happens in mixed groups and always with a team of two trained sex pedagogues. *liebenslust** also offers sex education workshops for *Unaccompanied Minor Refugees (UMF)*. Trainings are conducted with parents, grandparents, caregivers, pedagogues, public organisations, medical staff, school classes and extra-school services and associations. Like *Hazissa, Courage, the Association for Men and Gender Issues Styria* and other NGOs, *liebenslust** is member of the *Styrian Network for Sex Education*. In the *Culture of Care* project, *liebenslust** also provides further training for experts.

The **Fachstelle für Burschenarbeit** (*Department for Boys Work at the Association for Men and Gender Issues Styria, VMG*)¹⁹ offers sex education workshops for boys and male youth aged 12 years or older which focus on gender, diversity and health. The workshops are called *Open Spaces – live diversity! (Freiräume – Vielfalt leben!)*.²⁰ A four-unit (one unit equals a school-hour) workshop gives specific answers to questions like: How does my body change? What is sexuality? What is self-responsibility in sexuality? Why is porn a bad sex adviser? These questions are discussed under the perspective of variety of ways to live. In the workshops boys also work in small groups (maximum ten boys per group), based on a participatory approach and on confidentiality. All workshops are based on an intersectional understanding, reflexivity and context of genders and sexualities.

One public awareness-raising project of the *Department for Boys Work* at the VMG was *Porn on Class Schedule? (Pornografie am Stundenplan?)*. Through posters and a website boys are supported to learn a self- and social-responsible ways to deal with sexualisation and pornographisation in social media.²¹

Since January 2017 the *Department of Boys Work* carries out *Heroes@ gegen Unterdrückung im Namen der Ehre (Heroes@ against oppression in the name of honour)* in cooperation with the Caritas counselling centre **DIVAN** in the province of Styria. *Heroes@* was developed in Sweden. It has been realized successfully in Germany since 2007, in Austria it is conducted in the provinces of Salzburg and Styria. *Heroes@* focuses on violence prevention work with young men of so-called *Ehrenkulturen (Cultures of Honour)*. *Heroes@* supports these young men in taking their first steps towards gender equality between men and women. It aims at a partnership-based and violence-free living on the

¹⁸ <https://www.liebenslust.at/>

¹⁹ www.burschenarbeit.at

²⁰ [\[steiermark.at/sites/maennerberatung.mur.at/files/burschenangebote_fiels/a5_jungenarbeit_2011_low_q.pdf\]\(http://vmg-steiermark.at/sites/maennerberatung.mur.at/files/burschenangebote_fiels/a5_jungenarbeit_2011_low_q.pdf\)](http://vmg-</p></div><div data-bbox=)

²¹ <http://vmg-steiermark.at/de/empfehlung/projekt-pornografie-am-stundenplan>



basis of human rights. In weekly meetings they are working intensively on topics like honour, sexuality, identity, equality, gender roles and human rights. Young men taking part in the *Heroes@* project are awarded for the *Heroes@-Certificate* after a one-year-training phase.²²

Child protection centres (Kinderschutzzentren). The *Bundesverband Österreichischer Kinderschutzzentren* is an umbrella organisation for 29 child protection centres and 11 local branches which are operated by 18 provider institutions. Child protection centres are located in all Austrian provinces, not only in province capitals but also in rural regions.²³ Their fields of action and focus of work is based on the *UN Convention on the Rights of the Child*, Art. 3 and 19. In this context they are assigned and contracted to support families as a private provider of the Austrian child and youth welfare system. Their newest public awareness-raising movie campaign is called *Save Children*. One of the series of video-spots presented in Austrian cinemas is focusing on sexualised violence.²⁴

Violence protection centres (Gewaltschutzzentren) exist in all Austrian provinces. They were established in 1997 by the *Austrian Federal Ministry of Interior Affairs* to support the implementation of the *Law for the Protection of Domestic Violence*. The *Violence Protection Centre Styria* actively supports people, especially women and children, including boys, who were affected by (sexualised) violence through legal and psychosocial assistance. The centre works in the province of Styria and is publicly financed by the *Austrian Federal Ministry of Health and Women's Affairs* and by the *Austrian Federal Ministry of the Interior*. It provides court assistance as well, which is financed by the *Austrian Federal Ministry of Justice*. Their local branches in six Styrian areas, their counselling service for persons affected by bullying and their diagnostic (clearing) centre for persons affected by violence in institutions are financed by the *Government of the Province of Styria*. They network with institutions and governmental authorities to raise safety of violence-affected people. Public relations activities include reform proposals, events, media relations, symposiums and trainings. Their working principles are: "We listen to you. We take time for you. We believe you. We support you."²⁵

1.3. General information about intervention in school

In Austria family members are the most predominant perpetrators of sexualised violence and many children are forced to witness domestic violence. For the safety of the child it is recommended to first obtain counsel from experts of a crisis team (e.g. about the right time to contact parents/ caregivers). All legal steps like the duty to report (see § 84 STOP) must be considered in light of the child's welfare to best safeguard the affected child.

In case of imminent danger, the interests of those concerned must be negotiated and reflected between confidentiality obligation and protection of the child's health. In case of doubt health outweighs confidentiality. Haller and Lanske (2006) list the most relevant laws in this context. The *Austrian Federal Ministry of Education* suggest a procedure according to the following steps for intervention at schools (see Haller and Lanske, 2006):

- **Step 1: Recognition and documentation of changes/ signals:** it is necessary to document these signals in written form over a period of approx. four weeks with an 'observation

²² <http://vmg-steiermark.at/de/heroes/projekt>

²³ <http://www.oe-kinderschutzzentren.at/zentren/zentren-vor-ort/> and http://kinderschutzzentren.at-web.cc/wp-content/uploads/2016/05/OE_Kinderschutzzentren_Jahresbericht2015.pdf

²⁴ <http://www.oe-kinderschutzzentren.at/presse/presseinfos/>

²⁵ <http://www.gewaltschutzzentrum-steiermark.at/>

protocol' including date/hour, physical and psychosomatic signals, emotional and social signals, school performance indicators, verbal statements of the child. If the person writing this protocol notices that the situation is problematic, he/she should look for help independently (note on this observation template: *"Because it is very normal that you feel insecure and overloaded and that you want to talk with someone about it"*).

- **Step 2: Evaluate suspicious facts** - with support of colleagues and/or professional experts.
- **Step 3: Counselling in crisis-team**
- **Step 4: Prevention**, e.g. through sex-pedagogical units especially in classes with suspicious dynamics.
- **Step 5:** If the suspicion cannot be substantiated, teachers should **stay sensitive**, set prevention in class, work out a **crisis action plan** in the pedagogical staff conference or in a school internal training unit for pedagogical personnel. If the suspicion proves to be factual it must be reported to the principal of the school, a crisis team has to be convened, further steps need to be determined, results have to be written up and documented. It has to be decided when and how parents/ caregivers will be involved, if/ when it is reported to the youth welfare authority and to court, the schools authority has to be generally informed, support actions for the affected child and maybe witnessing children/ youth have to be planned and undertaken.

1.4. Best practice: manuals and brochures

Recent public media awareness on sexualised violence against boys was increased due to an actual criminal trial accusing an educator of a boy scout-organisation.²⁶ In reaction, the concerned organisation has developed and installed a code of behaviour²⁷ to protect children and youth against any form of violence and to foster their children's rights. In the global umbrella organisation of the boy scouts there is an ongoing project called *Safe from Harm* about sexualised violence against and among children and adolescents including prevention strategies and trainings for pedagogues.²⁸

A book about sexualised violence committed by a nanny against a boy (Hall, 2011, *Everything and Nothing*) increased public awareness on the topic of female perpetrators (incl. affected male children and adolescents) in Austria. The German translation of the book was entitled *Kein Sicherer Ort (No Safe Place)*, and it was published in 2012. A brochure with a similar title (*Kein sicherer Ort / (No) A Safe Place*, BMFJ 2016) can be recommended to First Points of Contacts. It was published by the *Austrian Federal Ministry for Families and Youth (BMFJ)* and includes definitions of sexualised violence, legal provisions, and guidelines for First Points of Contacts as well as prevention tools. It also includes topics like women as perpetrators or male child and adolescent victims:

- *"Due to gender specific reasons sexualised violence against boys can have other effects than to girls. (...) Victims of abuse themselves feel powerless. They think they can't influence what happens with them. They feel ugly, weak and as losers. As weakness does not correspond to a role of men, male victims more than female tend to gain the lost feeling of control through dominant and aggressive behaviour."* (BMFJ 2016: 12, freely translated into English by report authors)

²⁶ <http://wien.orf.at/news/stories/2753550/> in 2016 a Scouts pedagogue was convicted to four years prison, but in Oct. 2017 he was acquitted. See <http://www.vienna.at/missbrauchsprozess-gegen-wiener-pfadfinder-fuehrer-freispruch/5519398>.

²⁷ http://wpp.at/sites/default/files/aktuelles/datei/ppoe_resolution_sicherheitshalber.pdf

²⁸ <http://worldscoutmoot.is/safe-from-harm/>

- *“Who are the male and female perpetrators? Sexualised violence is predominantly committed in intimate social environments that means in closer circle of family and circle of acquaintances). (...) In our pictures of sexualised violence it is difficult to imagine women as perpetrators, but they can abuse too: for example, within the framework of caring activities, as ‘experienced’ sexual partner, by abusing children as partner’s substitute or as confidante and co-perpetrator of abusing men.” (BMFJ 2016: 13, freely translated into English by report authors)*

On gewaltinfo.at, also initiated by *BMFJ*, FPC find basic knowledge on the topic of sexualised violence on children (e.g. definition of sexualised violence,²⁹ structural knowledge, support institutions for their province and for special topics of violence and more).³⁰

2. Results of the Qualitative Data Analysis

2.1. Sampling and Method

In Austria the needs of First Points of Contacts (FPC) were assessed with three qualitative focus group discussions and a quantitative questionnaire. It was a challenge to get in contact with FPC in schools, especially with teachers in primary and secondary school. One of the reasons was the timing at the end of the school year, another reason was what is known in the literature as an *availability bias*: Some of the teachers and school social workers who were asked to participate in the needs assessment said that sexualised violence against male children and boys is no topic in their school in general and for their own work in particular (*“This is not a topic at all in our school” / “I was never confronted with that topic” / “No experience” / “Nothing to talk about”*).

Nevertheless the author’s involvement in several related networks and communities of practise, as well as the existence of a *Department for Boys Work* helped to recruit professionals who are FPC for male victims of sexualised violence. One supportive source was the *Network Against Sexualised Violence in Styria* with members from different childcare facilities (e.g. child protection centres, work with boys, work with girls, sexual assistance services, women centres, work with perpetrators, sexual education). Existing cooperations with NGOs related to the research field of interest (e.g. protection from violence) opened the way to the social service field and especially the *Department for Boys Work* provided relevant knowledge, based on workshops with boys carried out in schools (sexuality, violence prevention), long-term experience in face-to-face work with boys, street-work and *Boys’ Day* experience. Therefore the three focus group discussions, carried out in Styria, represent three different work settings:

- 1.) One focus group (**Social Service Group - SSG**) with seven social workers and social pedagogues was carried out in an umbrella organisation for social service institutions in a regional district of Styria (June 2017). All participants were (potential) FPC for boys in different settings, these were: One representative of the regional administration, one street-

²⁹ <https://www.gewaltinfo.at/fachwissen/formen/sexualisiert/>

³⁰ <https://www.gewaltinfo.at/fachwissen/formen/sexualisiert/missbrauch.php>

worker, two social workers in different schools in the regional district, two social pedagogues working in child protection centres and youth support centres and one managing director of the umbrella organisation for social service institutions in the regional district of Styria.

- 2.) A second focus group was carried out right after the meeting of the *Network Against Sexualised Violence* with three of the network members (June 2017). All of them are FPC in the health sector. Therefore we decided to call the group the **Medical Service Group - MSG**. The participants were one lawyer and one medical doctor working a.o. with children and youth victims in a medical institute (incl. criminology) and one psychologist/psychotherapist who works in a child protection centre in the hospital in Graz.
- 3.) The third focus group was carried out with six boys' workers in different settings and with different target groups, working at the *Department for Boys Work*. These social workers, social pedagogues as well as social counsellors are (potential) FPC as they carry out different projects with refugees (e.g. Heroes©), workshops with boys in school related to the topic of violence, sexuality and also sexualised violence and they are in contact with boys in the counselling department as well. We call this focus group the **Boys Work Group (BWG)**.

All of the professionals in the three focus groups have specific knowledge and experience in working with children and youth victims of (sexualised) violence, some of them have special experience in working with boys in the respective field of interest.

Two of the focus groups consisted of representatives of more than one facility (mixed groups, SSG and MSG) and were facilitated by one moderator (both discussions took place at the same time in different districts of Styria). One focus group (BWG) was facilitated by two interviewers (one moderator and one observer concentrating on group dynamics and taking notes).

Methods used

All three groups started with a short introduction of the project, its aims, objectives and activities. In the process of introducing the *EU Culture of Care (CoC)* project, the researchers also pointed to former projects like *AuP* (Scambor 2017), and it turned out that the professionals were very keen to know more about the research results. Nevertheless, the main focus of the discussion was on *CoC* - the more the participants got to know about the aim and objectives of the project, the better they were able to answer questions and discuss relevant issues.

After the introduction of the project and a short overview about the focus group procedure, the professionals were asked to think about their own work context and provide examples and information, especially related to the situation of boys.

One of the most important steps into the topic was the brainstorming method in the beginning. The first question ("*What do you think is sexualised violence?*") helped to frame the topic of interest in the focus group and with the second question ("*What comes to mind when you hear sexualised violence against boys?*") a focus on gender and sexualised violence was elicited. The brainstorming method helped to engage in the discussion and opened the space for the reflection about work experiences of professionals.

2.2. Results from the focus groups with professionals

In the following subchapter we discuss current research results in close relation with the results of the three focus group discussions, starting with the concepts of sexualised violence and sexualised violence against boys. Then we show different examples and settings in which the participating professionals were confronted with sexualised violence against boys, and we discuss how they were able to recognise the topic as such. We conclude with supportive conditions for processes of disclosure before we move on towards the results of the quantitative survey and summarise recommendations for the next steps in our project (Capacity Building Programme, Awareness-raising Campaign and Support Action).

2.2.1 Sexualised violence ...

The term 'sexualised violence' embraces the survivors' perspective and encompasses different acts. Enders und Kossatz proposed the terms abuse, violation, and boundary transgression to differentiate sexualised violent acts (Enders & Kossatz 2012, p.30 ff). Sexual abuse denotes a legal violation that is punishable under criminal law (predominantly acts involving body contact or the display of pornography as well as exhibitionism). Sexual violations are not captured by criminal law and aim to violate boundaries of affected persons. This includes unintended violations and boundary transgressions because of personal inadequacy (particularly relevant when it comes to boundary transgressions among children) (Rieske et al. 2017a).

When participants of the three focus groups were asked to share their ideas about sexualised violence, a wide range of thoughts was encompassed; these thoughts focused on different dimensions, such as

- different forms of sexualised violence (verbal, physical, sexual abuse, rape, boundary transgressions, being forced to witness sexualised actions, sexualised photos)
- different genders and age groups of perpetrators and victims (men as perpetrator – women as victims; sexual abuse of children)
- different settings in which sexualised violence can take place (e.g. institutionalised setting in boarding schools, but also war was mentioned)
- characteristics of violence (e.g. domination and subordination, vilification, incapacitation, pressure of perpetrators)
- but also coping strategies and effects of sexualised violence (e.g. feelings of shame and guilt, feelings of dependency, being silent, being affected by a trauma)

These thoughts about sexualised violence were shared in a brainstorming method in the beginning of the focus group discussions. Through this method the topic should be already addressed and be opened for further discussion. In one of the three focus groups (MSG), the brainstorming method already lead to an in-depth discussion about concepts and terms. Sexualised violence was discussed as infringement of the intimate individual sphere and *the Criminal Law Reform 2016* in Austria (see Chap. 1) was discussed as a big step forward, due to a stronger regulation of violations of sexual self-determination (205a StGB). Through this reform the definition of sexualised violence gained in breadth (e.g. it also includes *sexting*). For the first time psychological and (non-)verbal sexualised actions were regulated.

Furthermore the term 'victim' was critically reflected, due to its vulnerable implications (e.g. incapability of action), although it is used in law. In therapeutic settings, the professionals



recommended to strengthen a resource-oriented perspective and therefore replace the term ‚victim‘ with ‚person concerned‘ or ‚survivors‘ in everyday language.

.... and sexualised violence against boys

Studies on the prevalence of male victims showed an average of 5.6% of all respondents, who reported experiences of sexualised violence in childhood and/or early adulthood (Stoltenborgh et al. 2011). Mosser (2009) concludes, based on a review on literature on disclosure rates among male victims, that *“half to two-thirds of cases of sexual abuse are being disclosed in adulthood or not at all”* (p.31). Recent studies identify the lack of knowledge of sexuality and of sexual rights, as well as anxieties in regard to the consequences of disclosure as factors inhibiting disclosure (Kavemann et al. 2016). But also gender concepts, especially social constructions of masculinity are an important factor in order to explain low disclosure rates of male victims. Priebe and Svedin address disclosure rates and patterns in their research and conclude that all kind of sexual abuse *“... was reported significantly more frequently by females than by males”* (Priebe and Svedin 2009, p.25).

When the professionals in the focus groups were asked to share their thoughts about sexualised violence against boys, these study results were mirrored. Most of the concepts and ideas that emerged in the narratives were circling around barriers of disclosure. Some of the professionals were sure that being a male victim of sexualised violence is perceived as ‚unmanly‘, especially in a traditional male context, where masculinity ideals of power, security and sovereignty disallow inevitable emotions like shame, fear and insecurity (Bange 2007; Scambor 2017). Not only the fear of an ascribed ‚unmanliness‘, but also also an assumed potentiality to become an offender, as well as an ascribed and devalued homosexuality (Mosser 2009) were mentioned by all three expert groups.

Furthermore, the issue that the victimization of boys is barely recognized in public discourse in Austria was raised. In contrast, a heteronormative image of sexualised violence prevails in society, one that constructs offenders as male and victims as female. Men as perpetrators and female victims were mentioned as a well-known pattern. Male victims of sexualised violence are publicly discussed mainly when violence settings, especially in catholic boarding schools, were disclosed in the past. Therefore the male-perpetrator-male-victim constellation is somewhat familiar to Austrian society. When it comes to female perpetrators, the professionals were sure that this constellation is beyond imagination for many people (including FPC) and therefore cannot be detected. That also means that signals cannot be read in an adequate way by FPC. In relation to female perpetrators, boundary crossings between care and abuse (unclear boundaries, touching & washing, partner substitute) were discussed.

Especially boys workers discussed the issue that children and youth affected by sexualised violence are often limited in their ability to evaluate what has happened, a phenomenon which is also discussed in literature (see Bange 2007). Limitations occur with regard to possibilities of classification and articulation, due to a lack of knowledge (e.g. in respect to sexuality), which contributes to the fact that sexualised violence is often not recognized as such (Scambor, Rieske, Wittenzellner, 2017). The professionals pointed towards the fact that sometimes boundary transgressions are unintended during sexual interactions among peers, especially when children and youth take first steps into sexual practices, mostly accompanied by low level of knowledge (or knowledge derived from porn) and experiences.

2.2.2. In which ways are professionals confronted with boys who are victims of sexual violence?

Boys & sexualised violence ... still a hidden figure but suspicious phenomenon in the diagnostic setting

Some of the professionals in the MSG, who are confronted with children who are victims of violence as an everyday issue, pointed out that sexualised violence is framed as a 'female issue', while being a victim of physical abuse is framed as a 'male issue' in their diagnostic centre (e.g. discourses, symbols).

Nevertheless they referred to signs which raise suspicion; e.g. a strong symbiotic relation between the mother and the son, which may for example become manifest in constellations of sharing the same bed with the mother as a 15-year old boy or to be bathed by the mother as 12-year-old boy: *"I think that it is still very shameful for young men to be aware of the fact that it could be sexualised violence. This is always very hidden."* (Psychologist/Psychotherapist MSG)

Furthermore, professionals in the MSG pointed towards strong sexualised habits, especially in the group of young boys – in many of these cases, the boys have witnessed sexualised violence against their mothers, this is what mainly becomes clear through psychological anamnesis.

But also sexualised violence among male peers becomes a topic of increasing relevance at the diagnostic centre (from experimental try to serious assaults).

Why is the issue hidden?

"Boys grow up in a society which tells them 'you are invulnerable', not weak" (lawyer, MSG). In such a context, a boy *"cannot identify himself as victim"* (Psychologist MSG). Professionals in the MSG were sure that such gender ideologies and concepts of masculinity hinder the process of disclosure, a fact which is also confirmed in research: Boys and young men who have been victims of sexualised violence, and thus were powerless, deviate from the hegemonic image of masculinity (Connell 2000) as sovereign and powerful, secure, and heterosexual, and are marginalized (Lenz 2014; Rieske 2016; Sorsoli et al. 2008;).

Gender stereotypes of violence are being reproduced, a process that has been described by Jungnitz et al. (2007) in the study *Violence Against Men: Violence against boys and men is either sorted into a heteronormative grid and normalized, or it is silenced because it violates masculinity norms and evokes shame. In the face of resulting ambivalence and anticipated (negative) social reactions, silence can be seen as the better alternative initially* (Scambor, Rieske, Wittenzellner 2017).

Apart from the 'masculine-barrier', the relationship of co-dependence and hierarchy to perpetrators

Secondary traumatisation: *"... usually the victims lose everything ... and I say 'victims' now very consciously ... usually the victims will be separated in order to protect them, but they lose 'ground'. And then the avalanche overruns them."* (Psychologist, MSG)

Disclosure Barriers for Boys

- *The **strong gender ideology topic** (You are invulnerable)*
- *The **self-defense topic** (Why didn't you defend yourself?)*
- *The **sexual orientation topic** (Are you gay?)*
- *The **shame topic** (I think that it is still very shameful for young men to be aware of the fact, that it could be sexualized violence. This is always very hidden.)*
- *The **men don't talk about this topic** (less possibilities to talk with others about the experience)*

(e.g. mother, father), the lack of information about defence strategies, and about the possibility to talk with others about the experience were mentioned as relevant barriers in the process of disclosure. But also secondary traumatisation has to be

expected and critically reflected: *“You have to be aware to not victimise those who are concerned with sexualised violence ... don’t denunciate, don’t force to disclose the experience.”* (Psychologist MSG)

Furthermore, professionals in the MSG pointed towards the special challenge in working with refugees. Usually the situation of translation is not easy for refugees. The fact that many people take part in diagnostic situations at the hospital (medical doctor, psychologist, translator, ...) is a challenge for refugees with traumatic disorders. Apart from the issue of ‘overstaffing’ it was mentioned that another challenge is *“to find the bridge into the other language”* (Psychologist, MSG). Here the ‘other language’ includes both, translation of words but also societal codes.

.... an issue in school settings

Reflecting on the issue of male victims of sexualised violence in everyday work, professionals in the SSG as well as in the BWG talked about school-related examples.

One school social worker talked about sexualised violence between boys as kind of an everyday habit: *“And sexuality was the top issue ... homosexuality, sexism, they really learned to question and attack masculinity, as they said ‘girl’ or ‘fag’ ... when someone bend down, another one topped him. They were making jokes but it escalated into hierarchical fights among them. That was in primary school”* (School social worker, BWG). It was described as a challenge for teachers and social workers to deal with these everyday situations in school. But when the school social worker talked about the different reactions in school, some important aspects became visible, which were directed towards a critical reflection of violence, clear boundaries and rules but also structural conditions which should strengthen a culture of attention and open up a room to talk:

- There seems to be an **agreement among teachers** who show that they are aware of violence and that they provide a room to talk: *„When it becomes clear that these are strategies of subordination, if a boy wants to oppress another boy, verbally or through acts ... talk about it.“*
- Therefore, the school social worker is convinced, teachers **did not ignore** steps across the border of limitations, such as e.g. watching porn in school – in this case teachers mainly talked with the kids, told them why they did not want them to watch the movies and set clear rules and limits.
- The strategies in school **were directed towards perpetrators but towards victims as well:** *„In any case [the strategies] were directed towards perpetrators, because it is often urgent and it disturbs group dynamics. But I admired that victims have been acknowledged as well.“*
- **Networking.** Teachers have worked with kids, parents, with people from the hospital and other people in the social surrounding of the kids (*„But there could always be more networking“*).

The conditions described above show victims and perpetrators, recognized by adults (teachers) who are aware of what happens; the children (their feelings) seem to be taken seriously and sexualised violence seems to be acknowledged by the teachers and social workers. The reactions laid out above should help those who experience sexualised violence to overcome feelings of guilt and/or insecurities and empower to set clear boundaries.

... and an issue in training sessions

Professionals in the BWG pointed out that training-sessions with boys may open up a room to talk about issues like sexualised violence. Training-sessions were described as safe spaces, which provide

anonymity, independency from school, the opportunity for distance and information about supportive opportunities in the closed social environment (network). A boys worker talked about a workshop situation, in which it became clear that sexualised violence was an issue for two of the participants. Both answered the question „Does anyone of you know someone who is, or has been, victim of sexualised violence“ with „yes.“ Afterwards the trainer used different strategies to open space for conversation, e.g. the anonymous black-box method³¹ and discussions about the support system („Who in your close environment can help? In which way? To whom can you go to?“). The boys asked a lot of questions, strong attention was on the topic of sexualised violence, which was interpreted as a ‘strong signal’ by the boys worker.

Apart from these different experiences of professionals working with children and youth in different settings, a general statement was given in the SSG and underlined by all professionals in the group: professionals talked about changes in disclosure processes of sexualised violence. They agreed that disclosure of sexualised violence happened more often, and also more detailed, in the last years. It seems that people are less shy to talk about sexuality in general and specifically about sexualised violence. In the process of risk assessment, it is possible to talk about sexualised violence. Also for boys.

This experience is mirrored in research. The development of public discussions of sexualised violence in childhood and young adulthood in the German-speaking countries is characterised by two waves of publications (Kavemann et al. 2016). These contributed to the fact that the topic of sexual violence slowly arrived “*in the center of society*” (Kavemann et al. 2016, p. 15). In 2010, child sexual abuse received huge media attention in the German-speaking world following the uncovering of numerous cases of sexualised, physical, and psychological violence within catholic and alternative boarding schools over decades. Research (Keupp et al. 2015, Keupp et al. 2013) and reports of survivors (Dehmers 2011) have shown that public discourse of sexualised violence is linked with dynamics of occlusion and disclosure.

Changes: *the recognition of sexual violence slowly arrives “in the center of society”* (Kavemann et al. 2016, p. 15)

2.2.3. How do professionals recognise sexualised violence in their daily work?

Being confronted with male victims of sexualised violence means that professionals have to be aware of signals. Being aware of signals means for FPC that knowledge about different forms and constellations of sexualised violence have to be evident as a basic foundation. But not just FPC, also boys concerned with sexualised violence experiences sometimes need active initiatives and first steps from adults in order to recognise and define their experiences in an appropriate way (“*Something has happened to me. I don’t know what it was*”).

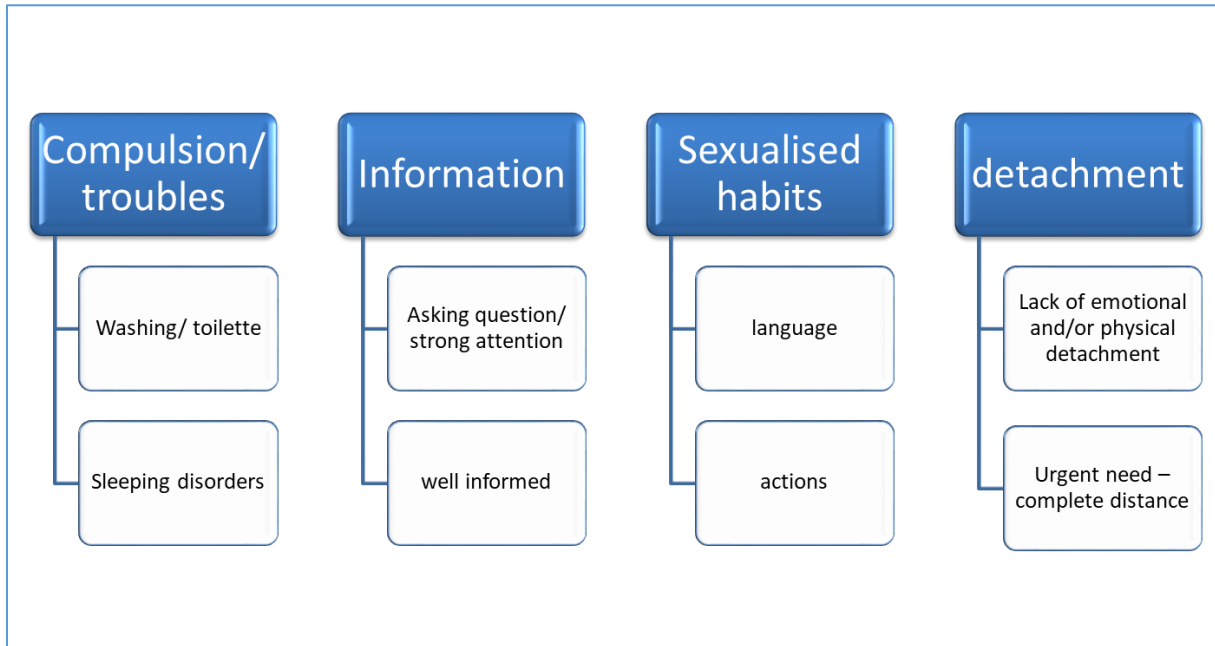
Alaggia (2004) developed a typology of disclosure processes based on an empirical study, in which different manifestations of coping strategies were described. In some cases, children try to draw adults’ attention non-verbally but intentionally towards the fact that something has happened (e.g. urgent distance). Sometimes children give signs verbally without talking about the violence experiences (e.g. sexualised language, ‘telling stories’) while in other cases, children talk about their own experience. These different signals and coping strategies were discussed in all of the three focus

³¹ A box in which questions can be dropped in an anonymised way; these questions then become an issue during the workshop.

groups. There is a common understanding: It is not always easy to recognise the signals and sometimes FPC seem to fail in the way they interpret certain behaviour. But it is better to open up space to talk about these behaviours and experiences than to ignore signals.

Signals mentioned in the three focus group discussions were systematised in the following figure:

Figure (1) Signals



Especially in the diagnostic setting and in child protection centres in the hospital (MSG), a wide range of different signals was mentioned and discussed in the focus group. At the hospital, psychosocial diagnostics but also supervision of behaviour (How does a child behave in groups? in sports?) are evident. These diagnostic strategies focus on some of the most well-known signals, such as ...

- over-sexualised language (not age-appropriate)
- in-appropriate sexualised actions
- dissociative moments, *Raptus* (boys especially)
- compulsions (e.g. to wash, to go to the toilette)
- social boundary violations, sleeping disorders, flashbacks
- medical diagnosis: „If a girl has the third urinary tract infection“ (Medical Doctor, MRG)

Especially in the SSG lack of emotional and physical detachment and sometimes an urgent need for complete distance directs the attention of FPC to the issue of sexualised violence. For example: In a primary school first class level, the teacher asked the children about their wishes („What do you wish?“). One of the seven-year old boys answered: „I wish that my mother was dead.“ In this short answer a need for complete irreversible distance to the mother was expressed which raised suspicion on the teachers side.

Apart from compulsions, detachment needs or sexualised habits (incl. language) the level of information about sexual practices could lead to a bigger attention of FPC. One of the social workers in the SSG made experienced how comprehensive and in-depth knowledge about sexuality (language, knowledge about sex practice) can be a hidden signal for sexual abuse: *„In think, boys have problems to find a language for what happened to them ... they rarely have friends who listen and provide room for disclosure ... therefore they brag about [sexuality] ... already knowing much about it ... the question is: how come they know these things?“* (Social worker, SSG)

Information: „How comes they know these things?“ (Social worker, SSG)

Similar findings were pointed out in current studies around disclosure processes of sexualised violence against boys (Scambor, Rieske & Wittenzeller 2017). In a self-reflective retrospective way, some men who were affected by sexualised violence when they were boys asked themselves, why they had such a profound knowledge of sexual practices already in the ages of 10 to 12 years. The difference between their knowledge and the knowledge of others became visible when they first talked about sexual practices with their peers. The different levels of knowledge raised suspicion on the side of the supervisors.

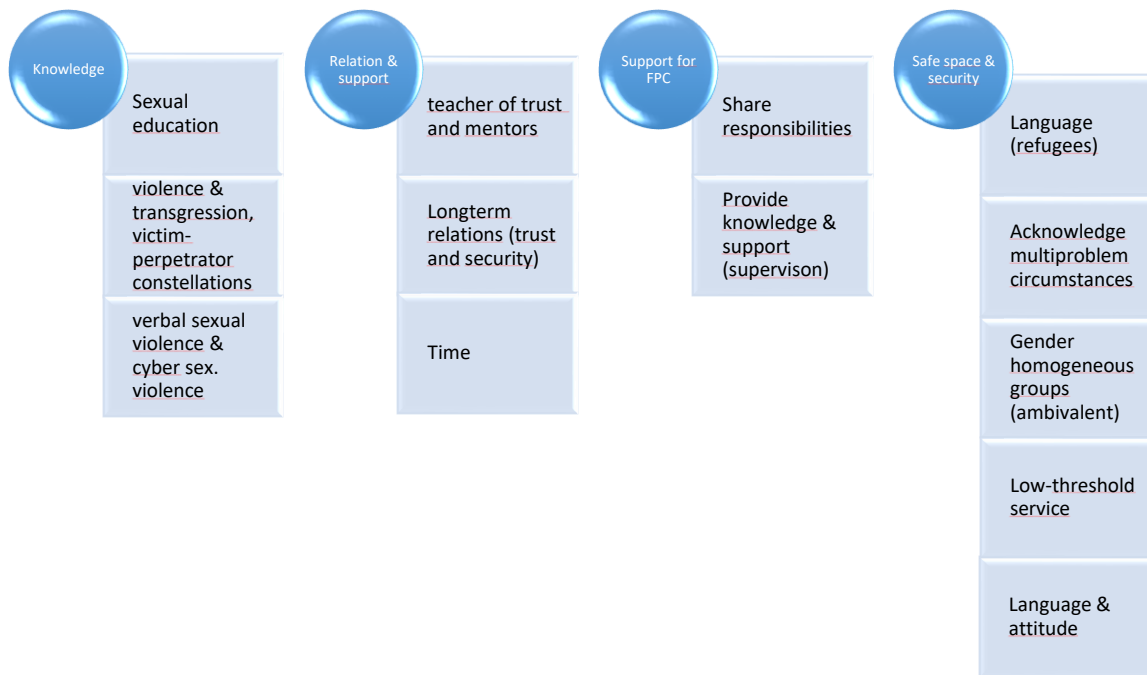
In some cases it was the need for information about sexualised violence, which was taken as a signal. In the training session of the boys workers (described above) two of the boys put strong attention on the topic of sexualised violence, raised a lot of different questions without talking about own experiences. The boys workers paid attention to this „strong signal“ and used different strategies in order to provide a safe space to talk, but they did not force the boys to talk about sexualised violence.

2.2.4. Supportive conditions for processes of disclosure

The qualitative study in the CoC project put a special focus on supportive conditions for processes of disclosure: Who helps? What helps? Which structural setting provides good conditions for disclosing processes? Are there significant differences between certain FPC (e.g. social worker vs. teacher in one school)?

The numerous indications of helpful factors and supportive conditions in the narratives of professionals in the three focus groups were systematically collected and analysed. This analysis yielded four factors which are shown in Figure (2) and described below.

Figure (2) Supportive Conditions



Provide knowledge and information

The CoC focus group results show that knowledge is an irremissible precondition for disclosure of sexualised violence. Lack of knowledge (e.g. in respect to sexuality, injustice, rights of children) contributes to the fact that sexualised violence is often not recognized as such. Therefore children, but also FPC, need specific knowledge about sexualised violence, which helps to critically reflect traditional concepts of male-perpetrator-female-victim constellations. Professionals in the three focus groups pointed out different forms of knowledge ...

- about different perpetrator-victim constellations; one of the school social workers (SSG) talked about the way she introduces the issue of sexualised violence in the classroom: „I’m there for those who have a bad secret ... What is a good, what a bad secret? ... then I say: sexualised violence. Usually girls start to giggle and boys are shocked: Are we now perpetrators? ... then I refer to boys as victims. Reaction: that’s possible? ... if I talk with them in an open way, they wake up and they start to listen attentively.“
- about violence and transgression: „The fact that every form of transgression is a form of violence is astonishing for most of the kids Ah, yes ... I feel uncomfortable about it, but I did not know it [was sexualised violence].“ (Social worker SSG)
- about verbal sexualised violence and cyber violence („They use derogative terms but sometimes don’t know that this hurts“ (Street worker SSG).

These different and specific forms of knowledge help victims of sexualised violence to recognise what had happened to them. This cognitive contextualisation is pertinent for conscious coping with victimisation. In current studies this knowledge was described as factual knowledge; knowledge that sometimes gets ‘lost’ and survivors seek to access this knowledge through memory work. Public discourses about sexualised violence facilitate these processes. Another form of important knowledge is processual knowledge, including knowledge about professional agencies of help (e.g. counselling setting) and about consequences of disclosures are preconditions for disclosure for some



survivors. Furthermore victims need structural knowledge about which help systems are existent and how to access those in their quest for help (Rieske, Scambor, Witzenzellner 2017).

Relationship and support

Professionals in all three focus groups were sure, that FPC should be able to acknowledge needs but also coping strategies of survivors. Acknowledging social stigma helps victims of sexualised violence to overcome feelings of guilt and/or insecurities. Especially male victims are often confronted with the sentence: *“Why didn’t you fight back?”* or with a reversal of the victim roles, when survivors have been stigmatized as potential future perpetrators. It thus does not come as a surprise that being acknowledged and taken seriously is perceived as helpful by survivors (Scambor et al. 2016).

One of the structural measures, which can be implemented in schools, is the concept of *Teachers of Trust (Vertrauenslehrer)* and mentors. Professionals in the MSG pointed to teachers of trust as structural measure on school level. Teachers of trust are FPC for children, people whom they can trust, to whom they can talk to about violence experiences or other problems and topics children may not want to discuss with their parents. One of the professionals pointed to poster campaigns in schools (‘Here you can talk about everything’) as supportive measures through which teachers of trust and mentors can become visible. Furthermore one of the boys workers was sure, children should be told that it is ‘good-friends-ethics’ to tell others (adults) about the problems of a friend – it should become clear that being a good friend sometimes means searching for help for others. In some schools in Austria, guidance mentors are already in place. Guidance mentors are usually peers from secondary school second level (15 to 18 years) taking care for younger pupils secondary school first level (10 to 14 years).

Supportive and mindful people have an important role in disclosure processes. Especially long-term relationships were highlighted during the focus group discussions in this context. They lead to an atmosphere of trust and security.

Therefore time is a key issue. Time is needed to develop rapport and time is needed to start the healing process. One of the social workers in the SSG talked about the importance of first reactions (‘*You can destroy everything or open up a space to talk*’). Sometimes the boy just needs time and the offer that there is space for conversation at any time. It is important to send the message *“you don’t have to talk now, take your time, you control the process.”*

Safe space and security

To engage in relations of trust is certainly difficult for survivors. Continuous offers by accessible individuals who listen and who create ‘spaces to talk’ and opportunities for open conversations on a safe, level, playing field are important. Current studies with male survivors show that pedagogical personnel is not always able to recognize boys’ need for help (Scambor 2017). Gender-sensitive and violence-reflective content is needed in pedagogical training settings as well as specific assistance programs, which grant a low threshold for service provision. Service providers need to be aware that often other problems interfere with and overlay sexual victimisation (see Mörchen, 2014).

How can a safe place look like? Under which conditions can offers to communicate and support been taken by survivors? One of the boys workers, a translation coordinator in a refugee camp in Styria, has been FPC for a young woman from Afghanistan, who disclosed a sexualised violence experience during her migration journey from Afghanistan to Austria - just after she arrived in the camp (‘*She*

had a breakdown, she cried and said, that it is the first time since 30 days, that she is able to understand someone [the translator spoke Farsi]“). Related to this example, professionals in the BWG discussed safety conditions under which this disclosure process took place:

- Language. The women used the first opportunity for disclosure.
- Security. She reached a secure place for the first time since she left Afghanistan.
- Arrival. The arrival in the camp might have been the first opportunity to ‚breathe deeply‘, to release a load.
- Support & vibes. Maybe it’s the first time that someone provided support without expectations (sexual violence), without weapons.

Supportive relation: „It depends on you, on the positive vibes, non-verbally. You’re not a soldier.“ (Boys worker, BWG)

For some children it was highly recommended to provide a safe space outside of their families. Professionals from the diagnostic and child protection centre in the MSG said, sometimes this might be the only possible way to stop sexualised violence - when there is a suspicion for perpetration in the family. If the victim is of full age, there is solely the possibility to make a report in cases of heavy physical violence.

Experiences of boys counselling centres have led to a further development of social service offers for

‚Salami-tactic‘: *disclosure processes from non-sexualized to sexualized violence*

boys, directed towards step by step disclosure processes. Multiproblematic circumstances are well known in boys work and counselling, which lead to a so-called ‚salami-tactic‘: first disclosing of non-sexualised violence and later disclosing of sexualised violence experience. On the way from the ‚outside‘ to the ‚inside‘ an increasing awareness for different forms of violence can be developed (Mörchen 2014). Refugees also face a situation of multiproblematic circumstances, therefore first other problems should be solved - this was a corresponding reference from professionals in the MSG. If people have to fight for surviving, the topic of sexualised violence is usually not the first and most important issue. First refugees fight for their lives, they are in need for a safe place, a secure asylum status. In this situation the issue of sexualised violence can’t be the first priority. Nevertheless a screening of the dimensions of traumatising is important (MSG).

Professionals in the SSG and MSG raised the importance of clarity and articulateness in language and attitude. This is connected to other supportive conditions, such as being able to listen and being able to stand the situation. It is well known that children are able to ‚screen‘ and ‚choose‘ potential FPC based on these criteria.

Be clear about the issue: („I made the experience ... if I am not shy to talk about it, to clearly name it ... if there is no taboo, it is possible to talk about it.“ (Social worker, SSG)

The provision of low-threshold services was discussed as another characteristic of a safe place. Anamnesis at the diagnostics institute (hospital) is free of charge and not official and formalised at all (no insurance card is needed). This means that everyone can take the opportunity to use these social and diagnostic services in a secure space.

Different approaches were to be seen in relation to gender homogeneous groups. At the child stationary protection centre (hospital) some conversation groups for children, who meet on a regular basis, are carried out in gender homogeneous settings in order to provide a safe space for talking about intimate gender topics (sexuality, contraception strategies). On the contrary, one of the social workers (SSG) was sure, that boys have more problems to talk about the issue of sexualised violence in gender homogeneous boys’ groups: „My experience is, that the issue is treated on the surface level



or with bad sexualised jokes and half-knowledge ... that has to do with: how male-like do I feel?“

Related to the experience of this social worker, boys groups may be critically reflected as insecure settings, especially if these groups are not accompanied by a qualified boys worker and masculinity performance is policed by peers in hegemonic ways.

And last but not least, professionals pointed towards supportive networks, which are supposed to be of special importance for disclosure processes. The experts from the hospital pointed out that every support network is case related – nevertheless the ‚threads‘ are all directed towards the youth welfare service. The hospital works together with teachers and social workers in schools, with parents, other therapists, early childhood intervention services, social workers, etc.

‘Child-centred‘ in this context means that special attention is put on the needs of the child (Should the therapist be a woman or a man? Is empowerment an important target or should the therapy rather focus on a ‚cluck-style‘?). Different settings imply different goals, which allows a more or less safe space for children: e.g. psychologists and medical doctors in the hospital do not have the duty to find the truth. These FPC can work with the children’s experiences and coping strategies of the children.

Support for FPC

Don’t panic: *FPC „... should not lose their nerves and panic. They must act in a clear and understandable way“ (Boys worker, BWG)*

Experts from the different focus groups were sure that FPC should be able to stand the issue and support the child. Therefore FPC also need support, e.g. a person of trust in order to not be alone with the issue. Supervision (single and

team), exchange of experiences and peer counselling are important aspects raising professional work of FPC. Beside the formal meetings, it is important and supportive for professionals to have possibilities for informal communication with colleagues. Often the informal talks are very helpful, because they offer new and important perspectives.

In some settings shared responsibilities protect professionals from attacks. In the hospital, physical signs as well as psychosocial signals are detected and documented and in case of suspicion, the responsibility will be shared with other colleagues. This strategy is of special importance in working with parents as it protects FPC from attacks: *“In general, the whole centre is a child protection group. But there is a special label for it, ‘child protection group.’ This is of relevance because it protects those [e.g. social pedagogues], who were in contact with the child, worked with the child. Then they can say to the parents: ‘The child protection group has recommended to make a report.’“* This example shows that shared responsibility can protect the FPC, which makes it easier to handle the disclosure process.

Professionals also pointed towards the necessity of a well-developed work-flow, which should be a guarantee in the social work context (information-flow, good documentation, short hand-over meetings). Professionals shared the perspective that especially work with children and youth needs certain information management and briefing standards, e.g. all staff members should have the



opportunity to share knowledge and support each other (incl. informal talk settings) and important decisions need to be made in the whole team.

2.3. Summary: Needs, competences and recommendations for Capacity Building Program (CBP) and Awareness-Raising Campaign

Considering the results of the *Culture of Care* focus group analysis in Austria, a CBP aiming to enable FPC to work with young people who have experienced sexualised violence as well as the support actions and an awareness-raising campaign aiming at boys who may be concerned should cover the following topics.

Raising awareness should focus on the impact of **low threshold opportunities** for disclosure processes. Low-threshold here means actions on 'eye-level', like for example spending time together in sports activities. This is usually not easy to realise in schools, and therefore some experts pointed to the necessity that social workers should be present at school. Apart from the school-setting, easily accessible low threshold actions should also be provided in settings outside of school (e.g. street events).

The **gender perspectives** should be included in the CBP activities as gender norms strongly influence the awareness and the recognition by those who are concerned with sexualised violence, particularly if this violence itself was based on gender norms and hierarchies (some boys may want to talk to women or they may want to talk to men if perpetrators are women). Different pedagogues offer different positions and perspectives in society – this should be reflected during the CBP.

On the structural level of institutions, low-threshold occasions may include a **Teacher of Trust-system**, a set of clear rules and advices for FPC about how to deal in cases of suspicion or disclosure, jour fixe settings and space for students to talk with others about problematic experiences.

Knowledge is necessary for FPC that helps them to understand the importance of independency in disclosure processes. FPC could be teachers, peers, social workers in schools or boys workers. Especially social workers can be 'door opener', due to their external position. FPC are supportive and mindful people who are able to understand signals, which are sent by children, intentionally but also unintentionally. Offers to communicate and help are necessary and these offers have to be made repeatedly, so that they can be accepted by children and youth concerned.

For some children it is easier to talk to **someone they are not dependent at** all – this may not be a person indicated as 'persons of trust.' For some children, it is easier to avoid a face-to-face contact when disclosing sexualised violence: **telephone or e-mail counselling** was recommended.

Professionals have shown that there is still a need for FPC to **learn how to create safety**, how to provide care and form trustful bonds. This includes tools on how to recognize signals of sexualised violence at an early stage, on how to deal with the issue in a persistent way, and on how to prevent the reproduction of violent and unhealthy behaviour. Furthermore knowledge and transparency about different responsibilities (e.g. teacher, social worker, court assistance) has to be provided in order to support children on a safe ground. But also a critical self-reflection about gender norms and violence is seen as necessary, as well as the development of clear attitudes and a clear language. Furthermore tools are necessary on how to support the active involvement of boys after disclosing and providing a feeling of control as well as safety.



An issue that was found in the needs analysis with professionals was the pervasive normative construction of sexualised violence with men as perpetrators and girls or women as victims. Such normative concepts of sexualised violence make it difficult for FPC to recognise (potential) male victims of sexualised violence (especially with female perpetrators) and influence the recognition of concerned boys, who may not think about sexualised violence due to the fact that perpetrators are peers or women. **Knowledge** is needed that goes **beyond these normative constructions** and moralising strategies. This also includes strategies to disrupt and de-normalise gender stereotypes which often legitimise violent relationships and/or are enforced through violence. Masculinity ideals of power and sovereignty may hinder disclosure processes because they disallow boys to see themselves as ‚victims‘.

Knowledge for children and youth is seen as necessary. Experts recommended integrating workshops in schools settings, which allow to critically reflect on sexualised violence. Also sex education should be provided by external experts in school (independency, more security and safety). Children and youth need also knowledge about support services and about support processes (how does a counselling session look like?). Furthermore knowledge about children’s rights is necessary, but also about issues of dominance and subordination, group dynamics and exclusion, and how these characteristics are related to different positioning and dynamics of ascription and self-ascription (‘othering’).

But also **FPC are in need for support**. Tools for self-reflection, supervision, ‚team counselling‘ and ‚safe spaces‘ for communication should be provided for FPC (incl. telephone-hotline). Sometimes experts familiar with the issue of sexualised violence should support FPC.

Related to **campaign and awareness-raising**, some of the experts pointed towards the necessity to focus on boundaries (Where are my limits?) but at the same time the issue of sexualised violence against boys should become a topic visible in society. Therefore a critical focus should be put on concepts of masculinity (taboos, weakness). Posters should include a ‘room for disclosure’ (e.g. a hotline number) and it should at the same time serve as a safe place (work with codes). Related to poster information, some of the experts were sure that less (information) is more (attention).

3. Results of the Quantitative Data Analysis

3.1. Sampling and Method

In Austria needs of FPC were assessed with three qualitative focus group discussions (results see chapter 2) and with a quantitative questionnaire. The basic questionnaire was developed by the transnational project team and translated into German for Austrian respondents.

Circulation and return rate

The questionnaire was circulated in the province of Styria via printout and online between June and July 2017. Printed copies were distributed in the network of experts against sexualised violence in Styria with around 30 members (child protection centres, work with boys, work with girls, sexual assistance services, violence protection centres, women centres, work with perpetrators, sexual education, ...) and to the participants of the three qualitative focus groups. These experts also



distributed the questionnaire within their institutions in a snowball system. Experts of the *Department of Boys Work* were addressed as well. Altogether approx. 60 printed questionnaires were distributed. Furthermore, the questionnaire was distributed via e-mail to teachers, to sex education experts in different organisations, and to youth sports associations (approx. 15). All in all approx. 85 experts were addressed, 27 filled in the questionnaire and returned it per letter mail or via e-mail. The return rate was approximately 30%.

In qualitative and quantitative research, similar experiences were made getting in contact with potential FPC. It was a challenge to get in contact with FPC in schools, especially with teachers in primary and secondary school. Reasons were end of the schoolyear and the *availability bias* (see chap. 2). The *availability bias* (including 'blind spots' in relation to gender and sexualised violence) was also evident in youth football clubs. One of the representatives did not fill in the questionnaire because he thought sexualised violence in youth football was mainly a girls' topic, and so he solely forwarded the questionnaire to the girls' youth football department. The basic population for all potential FPC in Styria can't be estimated, but it is obvious that some groups like teachers, social workers in schools or officials and trainers of sport clubs are underrepresented in this survey, whereas professionals in youth counselling centres and violence protection centres are well represented. The results of the quantitative survey, frequencies and summarised answers to open questions, can be regarded as a valuable explorative part of the needs assessment. In the summary chapter, results of qualitative, quantitative needs assessment methods are triangulated.

It should be highlighted that the quantitative and qualitative survey of the *CoC* project had an impact on discussion cultures in organisations and raised awareness among potential FPC.

Sample description

27 professionals answered the quantitative survey. 18% came from small communities with up to 10.000 inhabitants, 15% from communities with more than 10.001 and up to 20.000 inhabitants, and the clear majority (67%) came from communities with more than 20.000 inhabitants. Compared to the whole population structure in Styria obviously urban respondents are overrepresented. In the whole population of Styria 62% live in small communities (under 10.000 inhabitants), 11% in communities between 10.001 and 20.000 inhabitants, and only 27% live in communities with more than 20.000 inhabitants (see Statistik Steiermark 2016).³² Furthermore representatives of organisations showed a higher response rate and these organisations and NGOs are more likely to be found in urban areas.

It should be verified if this result could be regarded as indicator for differences in the grade of awareness to the topic between cities and the countryside as well. It can be assumed that there are less or at least other FPC offers on the countryside than in cities and that there is a need to adapt further training to these different situations (see also chap. 1 and chap. 4).

74% of the respondents are women, 26% are men. Most respondents work with both female and male children (66%), 15% mainly with girls, 19% mainly with boys. There is no evidence that other genders beyond male and female (LGBTIQ) is a topic for respondents. None of the respondents stated a gender beyond male or female; the prevalent genders of youth they work with are either female, male or both female and male. In all open questions gender is only discussed as either male or female. This result could be an indicator that young people who feel insecure about their gender

³² <http://www.statistik.steiermark.at/cms/beitrag/10004611/103034729/>, own calculations, Download 26.10.2017

or who do not define themselves as male or female have much more difficulties to find a responsive FPC for themselves.

Most of the respondents were between 30 and 59 years old (90%), none under 25. Their most frequent profession was psychologist. 19% were social worker, 15% teachers and 11% social pedagogues. Other professions were theatre pedagogue, (sex) pedagogue, medical doctor for paediatric psychiatry, paediatric psychiatrist, scientist, school social worker, and psychotherapist. This shows a wide range of different professions who could be FPC. Maybe there are specific needs for these different professions – this should be considered when developing trainings on this topic.

The highest level of formal education respondents had completed were master's degree (30%), PhD (26%), Magister (26%), Bachelor (11%) and secondary school education (seven percent). Most of the professionals have been working in their actual role for three to five years (26%), 14% were in their first or second year of work in this role, all others more than five years. Analysis of the survey showed that their time of work experience in a special institution had no influence on their knowledge about the topic of interest.

59% of all respondents work in a NGO association, 33% in public institutions, and seven percent in private companies. The work areas of the NGOs in the sample cover the fields of education (e.g. workshops in schools, but no regular courses) and counselling centres (like association for prevention of sexualised violence, men's counselling centre, girl's counselling centre, children rights counselling centre, child protection centres). Some respondents also work in hospitals or medical centres.

Most of the respondents work with children in protection services centres/health services or phone consultations (52%), 11% work in residential care facilities in the youth welfare service, 11% with children in informal settings (e.g. street work). 11% of the respondents teach regular courses and are teachers (e.g. for maths). Four percent work in sport centres. Other respondents work as school social workers, medical doctors for paediatric psychiatry, paediatric psychiatrists, scientists, psychotherapists, counselling for girls, counselling for men/boys, individual coaching, public youth welfare office (see Figure (3) *Kind of Work (N=27)*)

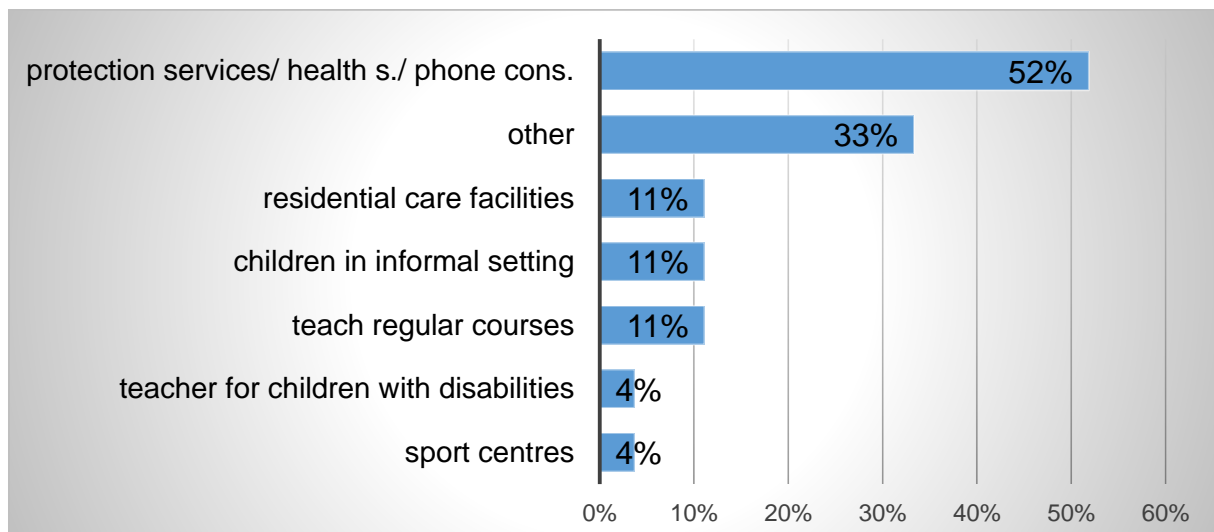
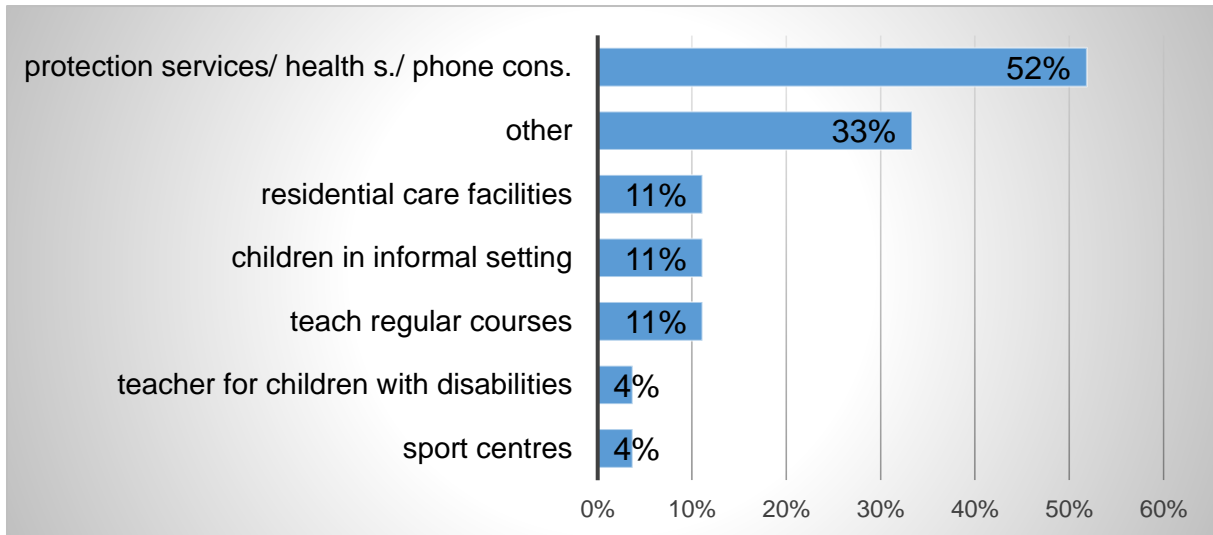


Figure (3) Kind of Work (N=27)



Most of the respondents work with children of different age groups, and therefore gave multiple answers: 85% work with children aged 11-14, 78% with youth aged 15-18, 70% with children between 6 and 10. 22% work with preschool children (3-5 years old).

3.2. Results

Does gender of the children/youth influence your work?

As mentioned above most respondents worked with both female and male children (66%), 15% mainly with girls, 19% mainly with boys, none mentioned youth of other gender identities.

67% of the respondents answered to the question, if gender of children/youth influences their work. More than two third said that gender influences their work with children, 21% said 'no' and 11% were not able to make a statement. Those who said that gender influences their work mentioned the following explanations: They have different offers for male or female children and youth and/or work in gender- and age-homogenous groups. Some respondents mentioned that they decide for each person whether a male or female therapist fits better. Others referred to different communication styles of girls and boys, different language and behaviour or they saw different personal interests. Some respondents mainly worked with male clients. Some pointed towards gender differentiation on structural level (separate dorms for boys and girls).

Concepts about gender equality

Professionals have different ideas about how a society can reach gender equality. All respondents answered this question, but some chose more than one answer. Most of the respondents said that the dichotomous gender concept should be replaced by a concept, which includes the diversity of gender.

Table (1) Statements about gender equality

%	How can a society reach gender equality? (N=27)

11	Men and women are mainly similar and have to be treated equally in order to reach gender equality.
7	Men and women are completely different and have to be treated differently in order to reach gender equality.
85	The dichotomous gender concept (men - women) has to be replaced by a concept, which includes the diversity of gender. This should be the basic ground for measures directed towards gender equality.
37	Gender has to be considered in intersection with diverse social markers (gender, sexual orientation, ethnicity, ...) to reach gender equality.

Sexualised violence against boys

Respondents defined sexualised violence against children in different ways (response rate to this question 82%). Summarized respondents gave different types of answers:

Table (2) Definitions of sexualised violence against children

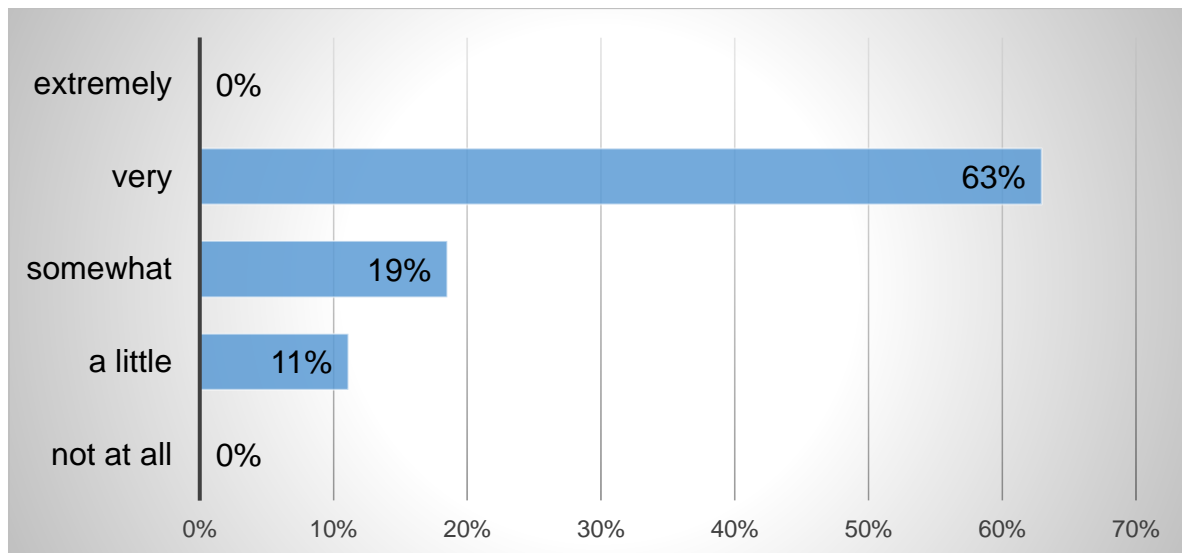
%	Sexualised violence against children is defined as... (N=27)
50	a wide range of forms of sexualised violence: sexual abuse, sexual assault and sexualised cross-border violations; there are different grades of sexualised violence
30	acts done against the will of a person
19	any form of sexualised action done on children – children can never give consent to sexual acts with adults as they are not able to oversee adult sexuality
15	unwanted touching, forced kissing
15	showing or producing pornography
11	cross intimate borders
7	used to exert violence
4	sexualised comments and remarks, direct or via phone or internet; men as perpetrators, perpetrators in the family, peers as perpetrators, structural violence (sexism); manipulation of the genitals, anal/ oral rap

30% defined sexualised violence as acts against the will of a person. 19% said sexualised violence against children is any form of sexualised action perpetrated to a child and that children can never give consent to sexual acts with adults as they are not able to oversee adult sexuality. No respondent mentioned the possibility of women as perpetrators. 15% gave very comprehensive definitions with different forms of sexualised violence, others only partial definitions.

How likely do you think is sexualised violence against boys?

In the former open question gender of children was not mentioned, but in the next closed question respondents were asked about the presumption that boys experience sexualised violence – and here most of the respondents said that it is very likely. None of the respondents said it is not likely at all or that it is extremely likely (see following Figure 4). This question only shows a tendency of interpretation, as there was no definition provided of what “*very likely*” meant.

Figure (4) How likely do you think is sexualised violence against boys? (N=25)



The vast majority of the respondents were sure that gender influences the experience of sexualised violence. Respondents mentioned the following reasons for their opinion that gender influences experience of sexualised violence:

Table (3) Reasons for gender influencing the experience of sexualised violence

	Mentioned examples/ aspects (N=18)
Girls are more affected	Respondents mentioned aspects like age and body which influence behaviour and experiences: the older the higher the presumption for female victims. Girls are more 'wispy,' that could easier 'tempt' to sexualised violence. Constructed images of women and men influence behaviour and experiences. In these images girls are more endangered because they have a higher sense of shame.
Gender and self-identity	Sexualised violence is a deep intrusion in consciousness and self-image. As sexuality has different meaning for genders also sexual abuse is perceived differently. Respondents named different re-processing methods and different influences on self-concepts.
Gender stereotypes	Girls and boys are 'prepared' in different ways: boys are not allowed to be frightened; they should manage it on their own. These stereotypes still exist.
Boys: fear of homosexuality	If a boy experiences sexualised violence from a male perpetrator he fears being (perceived as) homosexual and therefore doesn't tell anyone about it.
Male perpetrators	Women as perpetrators is a hidden issue in society.
Different perception in society	Different forms of abuse are still perceived differently by society. Statistically more girls are affected, but affected boys must not be overlooked.
Ritualised/covert abuse (boys)	Respondents pointed on ritualised/covert forms of abuse which affect boys. For instance, some club cultures and rituals in sports clubs could be regarded as forms of sexualised violence.

Those who said that gender does not influence the experience of violence emphasized that there are similar aspects of experience: the feeling of powerlessness and shame are the same – independently from gender. It is a traumatic experience for both genders. Two third of respondents thought that gender influences the main effects of sexualised violence, pointing out different impacts (Table 4).

Table (4) The impact of gender

	Mentioned examples/ aspects (N=18)
Male identity – gender-stereotypes	Male children/youth could feel 'less male.' Boys disclose themselves as victim more seldom due to traditional male roles (" <i>boys are strong and don't cry</i> "). In counselling it is very important that forms of violence are named, and due to gender-stereotypes this could be more difficult for male children/ youth.
Girls more concerned	Girls are taken more seriously, get more credibility and concern, also because girls being affected are due to the more hidden issue male affected children and youth better imaginable in society.
Fear of becoming a perpetrator	The male affected person fears that he will become a perpetrator himself.

Different psychological reactions	Girls tend to internalize while boys tend to externalize symptoms (gender concepts of respondents).
Different recognition through society	Basically there are no different main effects. Sexualised violence has consequences which are independent from gender, but reactions of society are different. There is different assessment of the abuse and of coping strategies, some exposures of boys are less perceived than those of girls or overlooked.

Those who said that gender does not influence the main effects of violence, emphasized that it is in any case a very traumatic experience and that it leads towards heavy psychological consequences and coping strategies, such as drug- and/or alcohol abuse, phobia, promiscuity and unsafe sexual intercourse. They accentuate that there are different effects on individual level, which depend not only on gender but on the social environment too, which sometimes has more influence than gender.

What are the main needs of affected children?

Most frequently mentioned needs of affected children (not only male children) are a safe place and a competent and reliable FPC, who can provide the rapport in which the child feels taken seriously and gets sympathy. The FPC should be able to bear it ('stand the issue'). Other needs mentioned were specific therapies (like trauma therapy) and the pursuit of justice against the perpetrator (see following Table 5):

Table (5) Main needs of affected children

	Mentioned examples/aspects (N=24)
Safe place	Affected children have an urgent need to feel save and to find a save place, in which no abuse can happen. They need protection.
Talk in a safe room with a competent person who can bear it and who recognizes signals and whom the child trusts	They need a person they trust and with whom save bonding is possible. This stable reference person should offer the child bonding work, love, sympathy, compassion and stability. The trusted person should be able to recognize signals. In a safe room affected children have a need to talk and learn about their experiences. Children want to talk with a person who has an open ear for the child and who can bear their experiences and needs and who is able to deal with it. With the assistance of this confidential person the affected child can proceed stepwise.
Find language	Affected children need to name forms of violence, emotions and feelings.
Taken seriously	Affected children need to be taken seriously and be appreciated by a stable trusted person.
Structure	Affected children need structure and a working helper system.
Time	Building trustful relationship needs time.
Relief	Relief is needed and should be provided in a safe place.

Support and Therapy	Adequate support for development in different phases is needed, for instance trauma therapy. The child needs support to deal with burdens, with trauma and pain.
Normality	Affected children need “normality:” they want to be regarded as normal kids who need help. They don’t want to be only regarded as affected child or as victim.
Not becoming a perpetrator	The male affected person fears that he will become a perpetrator himself.
Justice	In the long run affected children need a form of justice against their perpetrators. They want clarification and consequences for the perpetrator.

About two third of respondents thought that gender influences the willingness to disclose sexual violence, mainly mentioning gender-stereotypes, like the public notion that women or girls are ‘victims’ of sexualised violence. Many people don’t believe or don’t know that boys could be affected (taboo, lower public recognition). Women as perpetrators is accordingly a hidden issue in society. Male victims are overlooked and more often trivialised. Therefore, they less frequently make use of support services – traditional male roles do not allow to look for help and to talk about problematic experiences. Boys are more often confronted with the ascription that they welcomed the sexualised action and/or that they are homosexual.

Those who thought that gender of the child/ youth had no influence on the willingness to disclose argued that it is difficult for both (girls and boys), that sexualised violence always emotionalises, that there are other influence factors (personal identity and education), and that it depends on the support a child can get (e.g. including feeling safe from the perpetrator).

Almost half of the respondents said that they were aware of all details of legal provisions and mechanisms for protection against sexualised violence of children and youth, one third thought that they are aware of some details but that they are not sure. More than 20% said that they are generally aware but don’t know details or that they are not aware at all. There is an obvious need for more awareness and communication of this knowledge on legal framework, service structures, and policy procedures. Maybe if a FPC is not a legal adviser it is not necessary for this FPC to know all details but at least the main legal provisions and mechanisms for protection and how these mechanisms are applied in the institution/organisation the potential FPC are implemented.

More than two third of the respondents recognised potential barriers for boys to report sexualised violence in their organisation or work setting, especially gender-stereotypes and low public awareness. But they also pointed towards specific organisational barriers:

- *“We are there only support for a short time. One workshop which lasts four hours and it is not possible to build enough confidence and trustful relationship with children. This would need more time and a calm setting which needed to include individual settings.”*
- For teachers it can be very difficult to build a relationship with students because of the hierarchical implication of the school setting. Their main task is carrying out lessons, giving marks and evaluating the performance of children and youth.
- There is a low representation of male reference persons in the social field.
- Often not enough time is provided for good counselling and relationship work.

- Prejudice against youth welfare system.

Those who said their organisation provides support for boys to disclose sexualised violence referred to specific counselling offers, to colleagues who keep eyes and ears open, to easy-access and low-threshold services including anonymous contact and to gender diversity of the counselling team.

Experiences as FPC and knowledge

A majority of respondents (70%) has already received training on the issue of sexualised violence against children, almost 90% have been confronted with a case of sexualised violence against children, and most of them have been confronted with a case of sexualised violence against a boy (78%).

Main concerns of the respondents dealing with a case of sexualised violence against a boy related to knowledge and network (see following Table 6). Special needs concerning the support system for boys under 14, as well as institutions like residential care facilities are also mentioned.

Table (6) Main concerns if you have to deal with a case of sexualised violence against a boy

	Mentioned examples/ aspects (N=16)
Knowledge: Support structure	What support can I offer the boy? Respondents need information on support structures: where can I connect him to? How can we provide a good, safe support system for him? A special need for an age adequate support system for under 14-old boys was seen. Downplaying in the system has to be avoided.
Knowledge: Process	Respondents need more knowledge on processes including possible results of court proceedings. In residential care facilities and institutions overreaction has to be avoided. Questions which respondents working in residential care facilities worry about are: what is an adequate reaction for the affected child, what is adequate for the perpetrator – suspending perpetrator or shifting to the next institution?
Knowledge: Signals	There is a need not to overlook something and to read signals. Respondents worry if they read signals in an adequate way. How can a FPC recognize needs, fears and vulnerability of affected children - especially if boys want to cover their vulnerability?
Knowledge: Methods	Which methods are effective and helpful? How can I avoid doing more damage? How can I trust the child? How can I deal with remaining traumatisation of the child? Trustful relationship: how can I reach the child?
Safety	How can the FPC prevent further violence and give him safety?
Networks: support system for kids - family, caregiver	How can we prevent him from the damaging milieu without losing contact to family or caregivers who are helpful for him? What effects has disclosing for the family system? Does it break the family system? If the family refuses clarification, how can we support the child? How can we deal with the fear of parents concerning his sexual development?

To support FPC for boys respondents need provision of more knowledge, supervision and intervision and a sharing of responsibilities with other professionals and professional institutions, especially in rural areas and in schools.

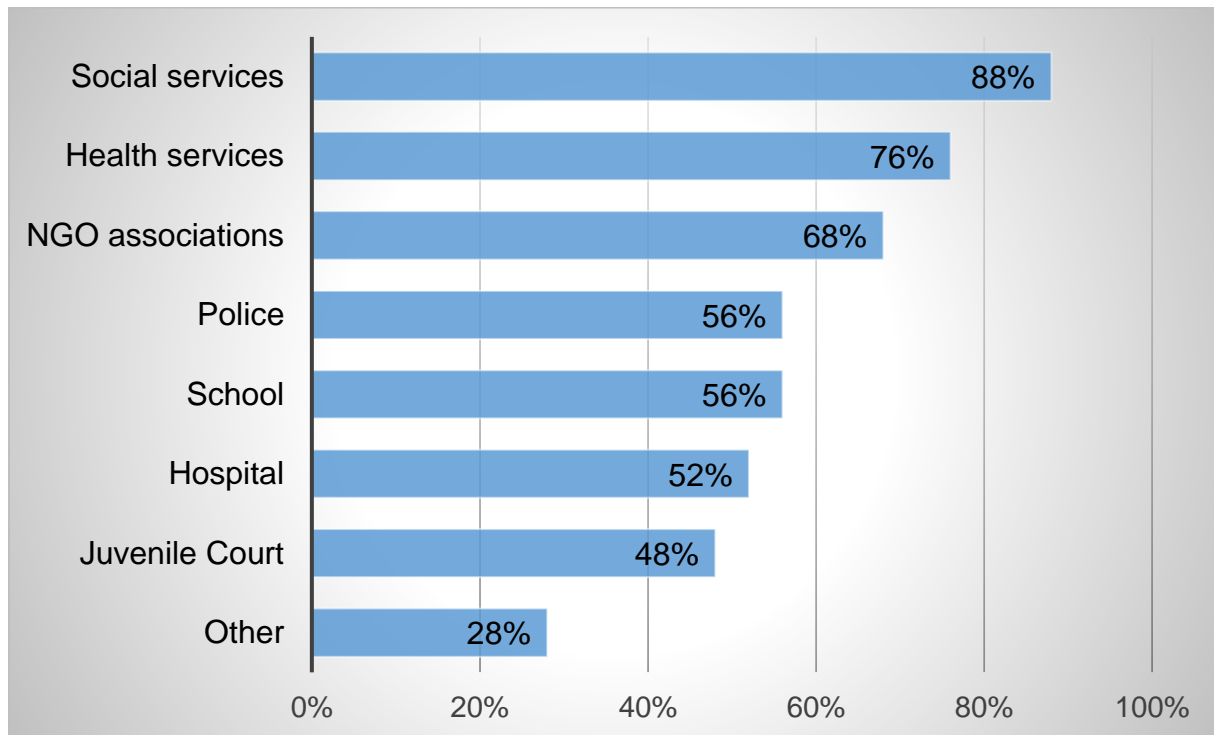
Table (7) Support needed for FPC for boys

	Mentioned examples/aspects (N=15)
Provide knowledge & support	Need for training was seen: more education in general, additionally supervision and intervision; a “catalogue of interventions” should be provided in each organisation.
Support for FPC: share responsibilities	The need for appointing at least one clearly named and visible contact person in each institution was seen. A good, clear and safe network for multipliers and clients, a capable support system is crucial for FPC. The need for good communication with caregivers, families and social workers was pointed out. More institutions for boys FPC can refer to were demanded – especially in rural areas. Victims’ support groups could support the work of a FPC. At school the presence of (male) social pedagogues, the help through the school team, through the headmaster and counselling institutions was demanded. Teachers of trust and mediators could support FPC. Provision of intense therapeutic offers for institutions are needed. If wanted by boys same-gender counselling should be offered.
Awareness-raising	Information in parents’ evenings would raise awareness.
Work with parents	Intense parents’ work is needed.
Structural support	Perpetrators should be separated and not the affected boy.

Cooperation with other institutions

Almost all respondents (96%) would cooperate with other institutions in case of sexualised violence against a boy. Most respondents would cooperate with social services, health services and NGO associations. Police, school, hospital and juvenile court would be cooperating institutions for about half of all respondents. Other possible cooperating institutions: justice (for training, further education in this field), youth welfare authority and victim protection groups (see following Figure 5).

Figure (5) Type of institutions you would cooperate with (N=25)



A standardised protocol

67% of the recipients said that there was a standardised procedure within their institution, which they would have to implement to deal with a stated or a suspected sexualised violence of boys, 19% said there is no such procedure and 15% said that they don't know whether there is such a policy or not. Further analyses showed that participants of the same institution gave different answers. These results show some further needs: the need to install a standardised procedure and instruction manuals in each institution and that all employees/members of the organisation should be informed about the existence of such policies and procedures and there is a need of further training to enable them to deal with these tools.

Table (8) Main contents of the procedures in your institution concerning sexualised violence of boys

%	Main contents of the protocol (N=14)
86	Description of the behavioural, physical and psychological signs, which may lead to a suspicion of sexualised violence.
79	How to behave with the child victim.
100	What to do for reporting case.
50	Description of the main effects of sexualised violence.
71	Description of the role of the various actors intervening for protection.

14	Other mentioned contents: when/ how to contact youth welfare authorities, legal provisions.
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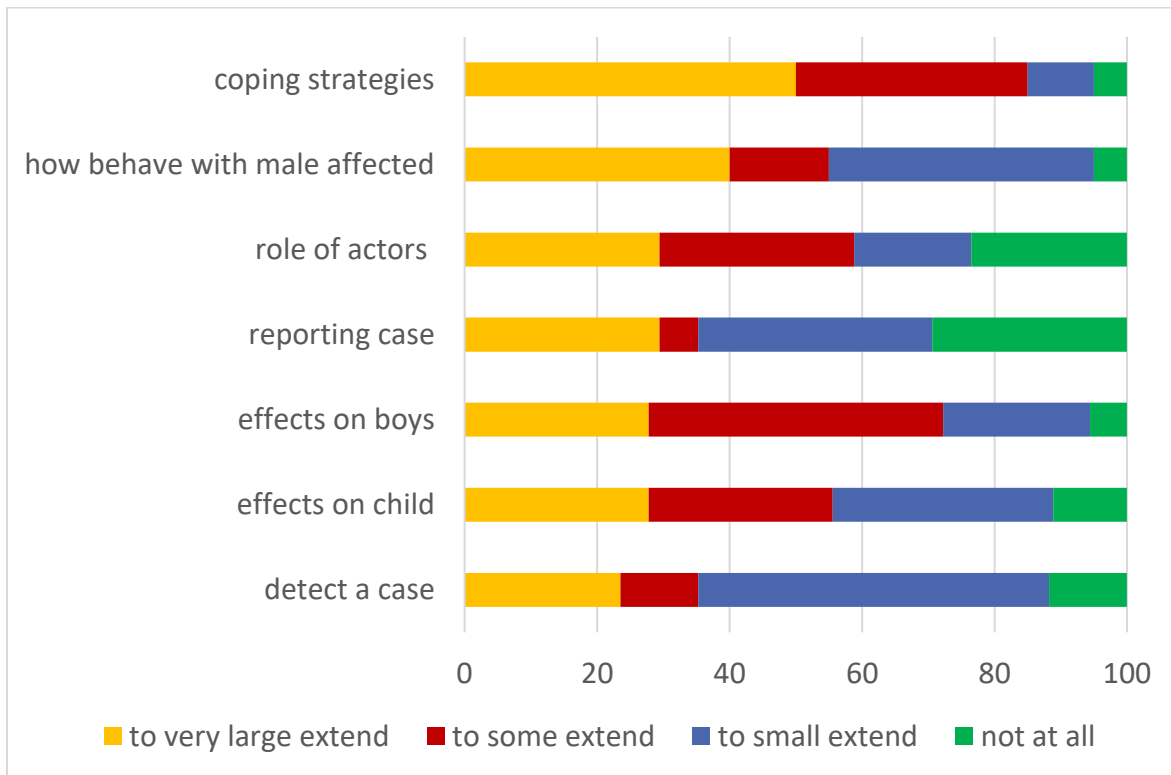
Main obstacles to intervene or detect cases of male children affected by sexualised violence were mentioned by 18 respondents. Especially the phase before disclosure was seen as a challenging time for FPC. Tabooing in society, lack of supporting network, especially in schools, and a lack of knowledge on sexualised violence in general and especially on signals were mentioned as further main obstacles to intervene and support affected male children (see Table (9)).

Table (9) Main obstacles to intervene or detect cases of male children affected by sexualised violence

	Mentioned examples/aspects (N=18)
Resources	How can we provide trustful setting to talk about it and a stable relationship with the child?
Support structure/ network	Not functioning networks are regarded as main obstacles to intervene. Resistance of individuals, institutions or influential persons (e.g. politicians) interfere intervention or detection. Further mentioned obstacles were low cooperation of all concerned parties/ persons. The younger the child the more difficult it was to sentence the perpetrator at court.
Processes	Having no clear guideline on how to deal with signals makes intervention or detection much more difficult.
Knowledge on sexualised violence, Signals	If a boy doesn't talk about it and he has not disclosed, is regarded as very challenging phase. It is needed to act carefully and not too fast especially if perpetrator is a relative. Low knowledge about boys being affected and about perpetrators hinder intervention and detection, especially in schools. One main obstacle of disclosure is the lack of knowledge about processes (e.g. reporting to court). Shame and stigmatization are further obstacles. How can the affected boy be protected? How can he find a trusted person?
Low public awareness	Tabooing the topic in the society, suppression and low consciousness are regarded as main awareness obstacles.
Resources	The anxiety to be confronted with that topic could be a main obstacle if the FPC needs more resources.

The clear majority (78%) said that training on the issue of sexualised violence against boys would be useful. Most demanded topics for further trainings were coping strategies and how to handle male victims (see Figure 6).

Figure (6) Need for training on following topics (N=20)



The most mentioned field to prevent sexualised violence against boys was to improve public awareness on that topic. Organisations should offer lower threshold work, inform parents and do more educational work on this topic. FPC should be supported by providing knowledge, supervision, intervision and by providing resources. Further social work at school was demanded as well (see following Table 10).

Table (10) What should our organisation do for prevention of sexualised violence against boys?

	Mentioned examples/aspects (N=17)
More public awareness-raising	The organisation should offer lower threshold actions (e.g. information campaigns) to better reach those FPC who don't listen to lectures, who don't attend trainings, who don't work at universities or don't read professional journals. The topic should be widespread in a good way, e.g. in information events, parents' evenings with parents' associations, by providing more educational work about the role and work of the youth welfare authority.
Support for FPC	More supervision and intervision on this topic, more transparency and further training are needed, e.g. further training on de-escalation strategies and communication. More resources are needed.
Share responsibilities	More social work in schools is needed. That would not prevent sexualised violence, but it could contribute to stop it.
Improve confidence-building methods	Building trustful relations means to remain in contact and discussion with children and to respond to the topic of sexuality as well. Also talk about personal boundaries and where affected children could get help. Fearless communication with caregivers is needed.
Develop safety- and prevention concepts	Safety- and prevention concepts have to be developed. More prevention work has to be done.

3.3. Summary

About two third of the respondents said that there are gender differences in experiences, main effects and willingness to disclose and that they see potential barriers for boys to report sexualised violence in their own organisation. Respondents often referred to gender stereotypes who in their opinion have great influence on the recognition of sexualised violence, on effects and coping strategies and on the disclosure process (incl. the willingness to disclose).

A high demand for public awareness-raising on this topic was seen as a very important aspect to encourage boys to ask for support. More than 50% of all respondents were not sure or know very little about legal provisions and mechanisms for protection against sexualised violence. Here further education for FPC is necessary.

Differences between rural and urban environments became obvious (more social service organisations in cities). There seems to be a higher need to raise awareness and make potential FPC visible on the countryside. School social work, better support networks and more parents' information on this topic were discussed as necessary factors to assist affected boys better.

Reducing barriers to get in contact with institutions who offer specific support for affected boys was regarded as necessary to build trustful relationships with children (time, infrastructure). Lower threshold to support institutions (like anonymous advice), work in multi-professional teams, further trainings to be up to date with legal provisions and mechanisms for protection and knowledge on sexualised violence on boys were seen as needs. Specific FPC in institutions (like social workers in all schools) were named as helpful for affected boys. The topic of LGBTIQ children as victims of sexualised violence was not mentioned at all in the answers. This can be regarded as another need for further training and public awareness-raising.

4. Summary and Recommendations

This report has presented the findings of the *Culture of Care* needs analysis which investigated knowledge and skills FPC already have to support boys as (potential) victims of sexualised violence and which they need in order to be supportive and create a caring and protective environment for (potential) victims of sexualised violence. Through this analysis the needs of FPC became evident. Based on these findings we are also able to develop recommendations how these needs can be addressed through the capacity-building program (CBP), the support actions, and the awareness-raising campaign.

The needs analysis methodology combined qualitative and quantitative techniques.

- At a qualitative level, three focus group discussions in different fields of social and medical work with children and youth were conducted in Styria (Austria). The focus groups are informal discussion groups, facilitated by researchers that are very useful to share and discuss perceptions, challenges, needs and expectations of professionals.
- At a quantitative level, a questionnaire, elaborated by the project partners, was distributed to potential FPC in Styria (Austria). These quantitative results accompany the qualitative information on needs, challenges and gaps of FPC when supporting male children and adolescents as (potential) victims of sexualised violence.

In the following, the findings as well as recommendations will be presented with regard to the capacity building programs and awareness-raising campaigns that will be implemented within the CoC project.

Most of professionals were sure that sexualised violence against boys is still a hidden figure in society and they mentioned different barriers for boys to disclose sexualised violence (e.g. *“strong boy fortify themselves”, “men don’t talk”, “shame”, the “male victim become perpetrator-topic”, “sexual orientation”*). About two third of the questionnaire-respondents recognised gender related influences to the effects of sexualised violence and to the willingness to disclose. Furthermore potential barriers for boys to report sexualised violence were evident in organisations. Knowledge, safe places and security, space to talk and positive rapport but also support for victims and for FPC were mentioned as supportive conditions for disclosure. An open discourse about boys as victims, a specific support system for boys, a clear language and attitude, and further knowledge are needed in order to deal with the issue. More than half of the questionnaire-respondents were not sure or knew very little about legal provisions and mechanisms for protection against sexualised violence of a child. Here further education for FPC is clearly necessary.

Considering the results of the *Culture of Care* needs analysis in Austria, a CBP aiming to enable FPC to work with young people who have experienced sexualised violence as well as the support actions and an awareness-raising campaign aiming at boys who may be concerned should cover the following topics:

Awareness-raising in order to promote low threshold occasions for disclosure. In particular, this includes raising awareness about the impact low threshold opportunities have for disclosure processes of male victims of sexualised violence. Providing common spaces, spending time together (climbing together, cycling, jogging, ...) in an easy-access, low-threshold setting on eye-level (instead

of a face-to-face vis-a-vis setting) is important here. This is usually hard to realise for a teacher in a school setting („*It is difficult with a teacher: first you talk to him about it [sexualised violence], in the next hour you have to write a class test in his lesson*“, Boys Worker, BWG). Therefore it is recommended that social workers, boys workers or other FPC are present at school. And it is recommended to provide low threshold settings outside of school, ‘out on the street’-events but also peer-projects like peers talking with kids on central transfer stations (bus, train, ...) were mentioned. Gender perspectives should be included in the CBP activities as gender norms strongly influence the awareness and the recognition by those who are concerned with sexualised violence. Low threshold occasions also include awareness and reflection of the gender of FPC. If perpetrators are men, boys may want to talk to women or they may want to talk to men if perpetrators are women. Low threshold occasions for disclosure should be mirrored on the structural level of institutions: a ‘teacher of trust’-system, jour fixe settings and space for students in which they can talk with others about troubling experiences is a first step in this direction. The ‘teacher of trust’-system has to be transparent, kids have to be informed about low-threshold opportunities with FPC, who provide safe conditions for disclosure. Therefore: Make FPC visible.

Teaching strategies and concepts that help to understand the importance of independency in disclosure processes. As mentioned above, FPC for children may not be teachers who are responsible for school grades. FPC could be peer group members, social workers in schools or boys workers who conduct workshops with boys. Especially social workers are more independent than teachers due to their external position and can therefore be ‘door opener’ for the topic of sexualised violence. It is also recommended to implement measures through which the opportunity for disclosure is given apart from face-to-face contact (e.g. telephone or e-mail counselling).

Foremost those who are FPC should be independent from perpetrators, otherwise they could not provide a safe space for boys. Supportive and mindful people have a special role in disclosure processes. They need to understand signals, which are sent by children, intentionally but also unintentionally. Offers to communicate and help are necessary and these offers have to be made repeatedly, so that they can be accepted by children and youth concerned. Nevertheless it is well known that children don’t always talk to the ones indicated as ‘persons of trust,’ they rather look out for people on whom they are not dependent at all (sometimes the cook) or disclose sexualised violence experiences in out-door settings.

Teaching strategies and methods that help FPC to develop social skills and expertise in order to provide support for those who are concerned. Professionals have shown that there is still a need to learn how to create safety, how to provide care and form trustful bonds. Possible strategies collected in this needs analysis include:

- Tools on how to recognize signals of sexualised violence at an early stage.
- Tools on how to deal with the issue in a persistent way („*It must really hurt when a boy discloses [sexualised violence]. It is rather common that he gives some hints and hopes that someone asks and is persistent, until he talks about it, although he wanted to talk much earlier about it ...*“, Street-worker, SSG).
- Tools on how to carry out secondary prevention (e.g. prevention of reproducing violent behaviour and non-healthy behaviour).
- Provide knowledge about different responsibilities. If jurisdictions are clear for FPC they can support children on a safe ground, not feeling helpless. („*As a teacher I have to know my*

jurisdiction. Is it my responsibility to make sure that sexualised violence ends in the family?"
Boys Worker, BWG).

- Tools on how to be able to ‚stand the issue‘ and support the boys („*They ... should not lose their nerves and panic. They must act in a clear and understandable way*“ Boys Worker, BWG). This includes a critical self-reflection about gender norms and violence but it is also a matter of attitude and language.
- Provide support for professionals facing ambivalences with the need to offer a safe space for young people and guarantee children’s rights at the same time (e.g. family relation with perpetrators) – especially if professionals have to betray the trust bond between them and the child, because they are obliged to make reports.
- Tools on how to support the active involvement of boys after disclosing. Boys disclosing sexualised violence need to have a feeling of control as well as the security that something will happen after disclosing. Therefore FPC have to provide a space of trust in which they should make clear what will be the next steps after disclosing. This information should be given before boys tell their stories.

Teaching strategies and methods that can help to recognise sexualised violence – both for FPC and for children.

An issue that was found in the needs analysis with professionals was the pervasive normative construction of sexualised violence with men as perpetrators and girls or women as victims. Both women as victims and men as perpetrators seem to confirm traditional gender roles in societies (e.g. men as active and women as passive). Such normative concepts of sexualised violence make it difficult for FPC to recognise (potential) male victims of sexualised violence (especially with female perpetrators) and influence the recognition of concerned boys, who may not think about sexualised violence due to the fact that perpetrators are peers or women.

- Knowledge is needed that goes beyond these normative constructions and moralising strategies. This also includes strategies to disrupt and de-normalise gender stereotypes which often legitimise violent relationships and/or are enforced through violence.
- Sexual education is important in which children learn to say ‚no.‘ Furthermore the use of terms has an influence on disclosure processes. Masculinity ideals of power and sovereignty may hinder disclosure processes because they disallow boys to see themselves as ‚victims,‘ Therefore it is recommended to use gender sensible terms like ‚those concerned with‘ but at the same time use terms in sex education in an age-appropriate but clear and understandable way (e.g. ‚penis‘).
- Integrate workshops in schools settings, which allow to critically reflect abusive (sexualised) language & cyber sexualised violence. Offer sexual education through external experts in school – due to independency these settings allow more security and safety for children.
- Knowledge is needed about support services/networks (Where can someone get help in case he was confronted with sexualised violence? With whom can he talk? Is there any help locally?)
- Knowledge about processes is needed by children and youth: How does a counselling session look like? What kind of help can you get where? What is the responsibility of a therapist, counsellor (e.g. anonymity)? The information about support processes should be provided in easy language.

- Provide knowledge about children's rights and training on the issues of dominance relations, group dynamics and mechanisms of exclusion and how these characteristics are related to different positioning and social markers (age, gender, migration, ...); e.g. dynamics of ascription and self-ascription ('othering').

Good Practice Example for Children's Rights in School

In a sex education workshop, the relation between pupils and one teacher became an important topic. The teacher touched a pupil on the backside and wanted him to clean his shoes. This was the power of degradation. The pupil talked to the social worker at school and she started to work with the class. *„Her intervention was exciting. She concentrated on the work with pupils, although the teacher did not want her to do so, she worked on children's rights. For example: pupils have the right to leave the class without justification and they can go to the school director and have a confident talk with her ... when it (sexualized violence or degradation) happened again, pupils got up, went out of class and made a report. The teacher asked them: 'Where have you been?' – 'That's not your business.'* [the pupils replied] *Through the intervention of the social worker, the whole class got empowered to protect the pupil who was degraded by the teacher. But also through the confident talks with the managing director of the school, who offered to possibility [to report] for all pupils in the class. She wanted pupils to report in order to be able to work with the teacher afterwards ... The openness with the topic has impressed me.*“ (Boys Worker, BWG)

Awareness-raising for efficient systems of support. The CBP should also pay attention to the diverse qualification and skills background of professionals in terms of their training, experience and attitude towards issues around violence, rights and gender that became visible during the needs assessment. Different pedagogues offer different positions and perspectives in society – this should be reflected during the CBP (*Privilege is invisible to those who have it*; Kimmel, 2008). There should be an awareness about different professions such as the police as possible multiplier and FPC (*„Some kids call the police before they talk to someone else“*, Boys Worker, BWG)

The information flow and cooperation among support systems should be provided and maintained: *„Support systems can derail and become very irrational. It can be that a youth victim is accompanied by eight different experts [from different institutions] ... in these cases we have the feeling that we have to provide protection for the kid, protection from the support system.“* (Boys Worker, BWG). FPC should be aware of the fact, that disclosure processes can fizzle out (someone talks about sexualised violence experiences, FPC informs relevant actors, but no support is given for the affected child).

Strategies related to support for FPC

- Supervision, intervention, 'team counselling,' 'safe spaces' for informal communication should be provided
- Tools for self-reflection should be provided for FPC
- Provide low-threshold support for FPC, maybe a telephone-hotline (*„I would like to have a hotline. In case that a six-year old boy talks about strange things happened to him, I, as a teacher or a youth worker or a cook at school, may like to talk with somebody about this.“* Boys Worker, BWG)



Experts familiar with the topic should support FPC (see above, „*Competent experts are necessary, who know how to deal with the information ... a short-term appointment for FPC should be possible ... and then an appropriate support can be provided*“ Boys Worker, BWG)

Ideas for campaign and awareness-raising

- A focus should be put on boundaries (Where are my limits? Are my limits infringed? What do I have to endure?).
- A critical focus should be put on concepts of masculinity (taboos, weakness, ...).
- Foremost the issue of sexualised violence against boys should get a topic visible in society.
- Movies about sexualised violence and disclosure have a greater impact than further education.
- Posters in schools should provide room for disclosure: include an appeal, a hotline number, work with codes (On the poster could be a message like „... send us an sms with the word ‚golfball‘. Then we know that you don’t feel well and we can call you back. Just in case that your mobile phone will be checked ... an sms can be erased more quickly than a phone number“ Boys Worker, BWG)
- Work with social media (*snapchat, instagram, whatsapp* ... media, children are familiar with).
- Less information draws more attention.
- Work with symbols, pictogram, (anime) comic short-stories, games and minigames, don’t forget *youtube* (stars).



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