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## SUPPORTING YOUTH IN CRISIS – THE EXAMPLE OF THE COMMUNITY-BASED SUPPORT MODEL IN LEIMBACH, GERMANY\*

**Introduction:** This article examines the support provided to adolescents and young adults in crisis, particularly those struggling with addiction, within a specialised therapeutic facility for young men in Leimbach, Germany.

**Research Aim:** The article aims to present a support model for youth in crisis, based on the principles of self-help and the therapeutic community approach.

**Research Method:** The article employs a case study approach, incorporating an analysis of existing data and a semi-structured individual interview

**Results:** The Leimbach Centre operates as a therapeutic community, with self-help as its core principle. Support includes group therapy, individual assistance, Naikan meditation, and structured work to foster independence and social competence. Collaboration with local institutions enables participants to undertake vocational internships, enhancing their prospects for social reintegration. However, challenges remain particularly the high dropout rate (40% within the first 90 days) and emotional difficulties stemming from adverse family experiences.

**Conclusions:** Combining self-help groups with various therapeutic interventions, supported by professionals and operating within a certified public system, reduces the risks associated with unsupervised self-help groups. However, high dropout rates persist due to low motivation and adaptation difficulties. Methodological limitations hinder precise evaluation, yet available data suggest that most former residents maintain abstinence. The presented solutions hold both cognitive and practical value. The therapeutic community model, recognised in Poland and Germany, continues to inspire professionals working with youth in crisis. In the context of migration between these countries, understanding the functioning of such organisations abroad is particularly valuable.

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**Keywords:** youth in crisis, self-help, therapeutic community, addiction, therapy instead of punishment

## INTRODUCTION

Research on issues concerning young people in crisis has been an area of intense scholarly exploration in recent years. For instance, entering the term “youth in crisis” into a search engine on an international social network for researchers (Academia, n.d.) yields 2,342 results, of which 1,611 originate from the last decade. This figure represents the total number of scientific publications containing the searched phrase in their titles.

Taking the Polish context as an example, the activities of aid institutions and organisations that provide support to children, adolescents in need, and their families not only constitute a significant element of the welfare system and a subject of academic inquiry (Pawlak & Srokowski, 2015) but also periodically become topics of public debate and legislative amendments, such as the recent revision of the Family and Guardianship Code (Poselski projekt ustawy..., 2023).

For this study, a crisis is defined as “feeling or experiencing an event or situation as an unbearable difficulty, exhausting one’s resilience resources and compromising coping mechanisms” (James & Gilliland, 2006, p. 26). Furthermore, within this analysis, the concept of crisis pertains to situations in which parents, carers, and children receive support from the current parenting support provisions in Germany, which are elaborated upon later in this paper.

In the context of young people in crisis, their circumstances are primarily viewed through the lens of addiction issues and psychosocial challenges, which frequently constitute key aspects of their lived experiences. Particular emphasis is placed on the role of emotional difficulties and psychosocial challenges, which young people may overcome through community support and engagement in therapeutic and self-help activities.

(Self-)help communities, in this context, are understood as groups and associations of individuals who, applying the concept of self-help (German: *Hilfe zur Selbsthilfe*), strive to alleviate or overcome adverse life situations. These communities operate based on principles of solidarity and togetherness, equality and voluntariness, regularity of meetings, and a lack of financial gain as a primary objective (Borgetto, 2002, as cited in Fredersdorf, 2019). Similar defining characteristics of self-help groups are also emphasised by Jacobs and Goodman (1989, as cited in Juros, 1999), who highlight the communal nature of the problems affecting all members, the provision of mutual, including psychological, support, equality in participation, and the absence of significant financial contributions as a prerequisite for involvement. Additionally, these groups have the opportunity to draw on

professional support and gain inspiration from the models and experiences of other self-help initiatives.

As already mentioned, this study deals with young people in crisis situations, entitling them to support, the forms of which are regulated by law, more specifically the German Social Code, Book Eight (*Sozialgesetzbuch – SGB VIII 1990; Kinder- und Jugendhilfegesetz – KJHG*, 2019;). This support is often implemented in combination with other forms of assistance, in the case of the Leimbach Centre these are:

- the right to care in an educational institution (*Heimerziehung*) (SGB VIII, § 27 and § 34);
- the right to integration assistance for children and young people with mental disorders (*Eingliederungshilfe für seelisch behinderte Kinder und Jugendliche*) (SGB VIII, § 35a);
- socio-pedagogical support in vocational training (*Sozialpädagogische begleitende Berufsausbildung*) (§ 13(2) SGB VIII);
- support for young adults (*Hilfe für junge Volljährige*) (§ 41 SGB VIII);
- the right to shorten or avoid pre-trial detention, in the case of children and adolescents in conflict with the law (§ 35 BtMG, § 71(2) and § 72(4) – German Narcotics Act).

This last aspect warrants clarification. In fact, the aforementioned regulation applies to specific cases in which individuals sentenced to a custodial sentence not exceeding two years (or where the remaining part of the custodial sentence or of the joint custodial sentence to be served does not exceed two years) may request a deferment of the sentence. A condition for this deferment is that the offence was committed due to drug addiction. Such deferral can be carried out in centres designed for this purpose, such as the facility in Leimbach.

Returning to the support regulated by the aforementioned German legislation, it aims to provide young people with comprehensive assistance in crisis situations, covering different areas of potential difficulties, such as mental disorders, addictions, conflicts with the law, or challenges related to independence.

The aid institution in question emphasises that it pursues these objectives through the integration of alumni, offering education, vocational training, and participation in internal social life while promoting self-help and humanistic values. It also collaborates with various organisations to effectively prepare young people for responsible lives in society.

The concept of the Leimbach Centre primarily represents a response to a specific social need, providing a place for individuals experiencing crisis. The structures and methods described in this article for supporting young people (and adults) in crisis and with addictions grounded in the idea of self-help and community-based working approaches constitute one way of supporting youth. This is particularly relevant for those at risk of imprisonment, for whom such an institution may offer the only legal alternative to avoid a custodial sentence.

## RESEARCH AIM AND QUESTION

The aim of the present research is to analyse the operation of the German youth welfare centre in Leimbach (*Jugendhilfe Haus Leimbach*), run by die Fleckenbühler e.V. (hereafter: the association), and to present an aid concept based on the idea of community-based self-help aimed at young men in difficult life situations, including those at risk of imprisonment.

The research problem centres on addressing the following questions: How does the analysed organisation support individuals in need, particularly in responding to crisis situations faced by individuals and families seeking help? What are the perspectives of the organisation's experts on this subject? What is the structure of the organisation?

The main thesis of this article is that the aid solutions presented herein can serve as an example of good practice, with elements that – following appropriate adaptation – may be applied elsewhere. Moreover, solutions tested in international contexts can serve as inspiration for practitioners and theorists working with youth and adults in crisis, which constitutes an additional value of this analysis.

## RESEARCH METHOD AND SAMPLE CHARACTERISTICS

The research strategy employed in this analysis is the case study approach, which is particularly useful when the objective is to capture the uniqueness and complexity of a given case within its natural social and cultural context. As Stake (1997) argues, a case study enables an in-depth exploration of a single case, which may take the form of an institution or programme (Stake, 1997), while employing multiple methods of data collection (Simons, 2009). Importantly, the goal of such a study is to enhance understanding of a particular issue and generate knowledge that can inform practice and support decision-making.

This approach is particularly beneficial in the study of institutions such as youth rehabilitation centres, as it allows for an examination of both the general characteristics of a centre and the detailed processes that shape its functioning. As part of this study, an interview was conducted with the expert with the longest tenure at the centre, who played a key role in its establishment and development. This respondent was chosen due to his unique expertise and direct involvement in shaping the centre's profile, providing valuable first-hand insights and enabling a nuanced analysis of the perspective of the individual who has had the most significant impact on the institution's operations. This methodological choice aligns with the case study approach, which recognises the crucial role of key individuals within an organisation.

The boundaries of the case were defined in terms of both its physical and thematic scope. The analysis focused on the activities of the Leimbach Centre, exam-

ining its structure, operating model, and forms of support provided. Additionally, it considered the activities of die Fleckenbühler e.V. – the centre’s coordinating body, particularly in areas directly related to the centre’s operation or serving as the broader context for its activities.

Defining the boundaries of the case (Yin, 2015) facilitated a targeted examination of key aspects of the centre’s operation, taking into account its legal and cultural framework. This approach enabled a multidimensional analysis within a clearly delineated research context. To achieve this, foundational data on various aspects of the Leimbach Centre and die Fleckenbühler e.V. were examined. The study also incorporated data from a semi-structured individual interview conducted with an expert who managed the Leimbach Centre for many years, made key strategic decisions, and currently holds an advisory role (expert interview W01, 2022).

In accordance with the adopted approach, the initial phase of the study involved gaining a broad understanding of the organisation’s functioning. This was followed by establishing contact with the expert mentioned earlier and systematically gathering information from a wide range of sources as part of the data collection process. A significant milestone in this procedure was the study visit conducted at the end of 2022, during which a substantial amount of data was collected. Further analysis of the research material took place in 2023, facilitated by the author’s proficiency in the German language, which proved advantageous in comprehending and interpreting the collected material.

The data analysed in this study encompass a variety of sources, including materials available on the association’s extensive website. These documents provide insights into the organisation’s history, operational conditions, range of services, location of the Leimbach Centre, organisational structure, staff composition, current events, press releases related to the centre’s activities, and opportunities for external support. In addition, the study incorporated the association’s periodical *Fleckenbühler Zeitung*, covering the years 2022, 2023, and 2024, comprising a total of nine issues, each consisting of eight pages. Other sources included the association’s statutes, mission statement, and annual reports for the years 2019 to 2023. Furthermore, an expert report on the effectiveness of self-help in addiction treatment, consisting of 40 pages, was also reviewed. Following the collection process, the data were examined using qualitative content analysis (Maj, 2013). The choice of this analytical approach was determined by the characteristics of the research material, which varied in structure, originated from diverse sources, and differed in nature (Makowska, 2013). This method facilitated a systematic and detailed examination of documents, reports, and statistical data, enabling a comprehensive understanding of the phenomenon under investigation (Makowska, 2013). The analysis proceeded through a series of interrelated stages, beginning with defining the research purpose and topic. The material was then selected, and units of analysis were identified, ensuring that multiple sources were accounted for within the research scope. Analytical categories

were developed, and the collected content was assigned to these predefined categories. A categorisation key was subsequently established, emphasising the most relevant aspects of the material. Finally, the gathered data were systematically organised, leading to the formulation of conclusions (Mayring, 2014).

The data from various sources were integrated according to unified categories defined within the categorisation key, ensuring a coherent structure for collation and analysis. The main conceptual categories developed in the study were created by the author in alignment with the adopted research approach. These categories are discussed sequentially in the analysis, beginning with an exploration of the organisation's positioning within the German aid system, which provides the broader institutional context. The discussion then shifts to an examination of the organisation's operating principles and overall model, offering insights into its structural and functional framework. This is followed by a detailed description of the key support activities provided by the centre, outlining the specific forms of assistance available to young people in crisis. The selection of categories and the structuring of the centre's description were informed by the available data and refined to ensure analytical clarity.

The analysis was further enriched by the perspective of an expert representing the centre's management. The expert interview focused on several key themes, including the origins and development of the organisation, its guiding philosophy, and reflections on working with young people from a managerial perspective. The content analysis of the interview transcript was meaning-oriented, focusing on condensing and interpreting meaning to extract key insights (Kvale, 2010). Through this approach, the study provided a multidimensional exploration of the organisation's functioning, integrating institutional perspectives with empirical findings.

## RESULTS

Following the case study guidelines outlined by Stake (1997), the analysis of the Leimbach Centre is conducted within multiple contexts, including its general characteristics, physical environment, and the broader legal, economic, and political framework in which it operates. Consequently, the selection of content begins with an overview of the centre's general characteristics, emphasising its legal and systemic anchorage. This is followed by an examination of the operational model, detailing the structure and principles guiding its functioning. A comprehensive characterisation of the assistance offered is then presented, providing insights into the specific forms of support available. These aspects are further enriched by the perspective of an expert closely associated with the centre – a co-founder who served as a manager for many years and continues to play a key role in shaping its profile and defining the framework for its activities.

### **The Residential Youth Support Centre in Leimbach, Germany – integration into the support system and operational principles**

Under the German Child and Youth Welfare Act, parents, guardians, and their children are entitled to educational support (German: *Hilfen zur Erziehung*) (*Kinder- und Jugendhilfegesetz – KJHG*, 2019). This applies in cases where, according to the law, “an upbringing appropriate to the welfare of the child is not ensured and the child requires assistance that is appropriate and necessary for his or her development” (*Sozialgesetzbuch – SGB VIII*, § 27). In such instances, parents, guardians, or, if the child has reached the age of majority, the young person themselves, may apply to the relevant Children and Youth Welfare Office (German: *Jugendamt*) for support. The available forms of assistance range from incidental counselling directed at the family to comprehensive socio-educational support and, in more severe cases, out-of-home care. The latter category of support is the focus of the organization analysed in this study.

The concept of addiction in this context refers to situations in which an individual has been sentenced to imprisonment and it is evident, based on the reasons for the sentence or other judicial findings, that the offence was committed in connection with drug dependency. According to the German Narcotic Drugs Act (*Betäubungsmittelgesetz – BtMG*), individuals in such circumstances may, with the approval of the court of first instance, have their sentence postponed or suspended in favour of placement in a specialist facility offering appropriate therapy. This provision is a defining characteristic of the Leimbach Centre, which functions as an inpatient facility for young men aged 14 to 21, although, in practice, it also accommodates older individuals. The centre provides structured support for young people struggling with addictions, facing the risk of imprisonment, and experiencing various crisis situations.

German regulations stipulate that, in addition to medical stabilisation and therapy, such facilities must offer preventive interventions aimed at reducing harmful behaviours, as well as vocational training and other measures designed to promote the long-term social and professional reintegration of residents (Patzak, 2012).

It is also relevant to consider the general profile of recipients who benefit from support under the aforementioned regulations. Reports on parenting support services in Germany over recent years indicate a gradual but consistent increase in the number of beneficiaries, reflecting a growing demand for structured assistance within the youth welfare system. According to the most recent data, 1,127,869 people benefited from this form of support in 2021, compared to one million in 2012 (Arbeitsstelle Kinder- und Jugendhilfestatistik, 2023; Statistisches Bundesamt, 2023a). The proportion of different forms of support has been changing, with fewer children and young people being placed outside their family of origin and an increasing preference for providing support within the family environment, allowing children to remain with their families while receiving external assistance.

In 2011, the most recent year for which data are available, 196 facilities in Germany provided therapy as an alternative to a prison sentence (Zurhold et al., 2013). Even at that time, there was a noticeable decline in the number of admissions of individuals meeting the formal criteria for a conviction related to addiction, accompanied by an increasing reluctance among law enforcement authorities to recognise a causal link between the offence and drug dependency, as required by the relevant legislation. Simultaneously, the statistics on educational support (*Hilfen zur Erziehung*) indicate a declining number of interventions resulting in placement in educational institutions. Although the Polish legal system also provides various forms of support and rehabilitation for individuals with addictions, such as those outlined in the Act of 9 June 2022 on the Support and Rehabilitation of Minors and others (Ustawa o przeciwdziałaniu narkomanii, 2005; Ustawa o wspieraniu i resocjalizacji nieletnich, 2022), which mandates participation in education, employment, or therapeutic activities, including addiction treatment, these measures do not fully correspond to the German approach.

In 2022, a total of 209 individuals, including 16 women, were admitted to such facilities, with all of them receiving suspended sentences. These numbers have remained relatively stable in recent years, with 190 admissions in 2020, 243 in 2018, and 248 in 2016 (Statistisches Bundesamt, 2023b). The proportion of women has consistently remained below 10%. On the one hand, these figures suggest a rather stable situation, possibly linked to demographic trends and the declining proportion of young people in society. However, statistics indicate a growing prevalence of drug-related problems in Germany. This trend is evidenced by a significant increase in drug-related deaths, which rose from 944 cases in 2012 to nearly 2,000 in 2022 (Der Sucht- und Drogenbeauftragter der Bundesregierung, 2023). Furthermore, Germany has the highest amphetamine consumption rate in Europe, with a 0.9% prevalence among individuals aged 15–34 in 2022. Additionally, methylenedioxymethamphetamine (MDMA) consumption reached 2.1% in 2021 (The European Monitoring Centre for Drugs and Drug Addiction, 2023).

The profile of individuals entering the Leimbach Centre in 2022, according to the facility's annual report (Jahresbericht, 2022), indicates that out of the 151 individuals who began their probation period that year without breaking it, 75% were diagnosed with polytoxicomania (multi-substance addiction). Among the remaining individuals, 10% were addicted to alcohol, while the most common addictions among the rest included heroin (5%), hashish and methamphetamine (3% each), cocaine and amphetamines (2% each), and gaming or gambling (1%). Similar patterns emerge from the 2019, 2020, and 2021 annual reports, with multi-substance addiction consistently accounting for approximately three-quarters of all cases. Alcohol dependency ranked second, varying between 10 and 17% of admissions each year. Other forms of addiction, including heroin, hashish, cocaine, amphetamine, and methamphetamine, were less prevalent.

The stationary youth support centre in Leimbach, located in the state of Hesse, approximately 130 km from Frankfurt am Main, is operated by the non-profit association die Fleckenbühler e.V. In addition to this facility, the association runs two other centres in Frankfurt am Main – one providing support for adults struggling with addictions and the other functioning as a kindergarten for children of parents affected by addiction. Across all three locations, the association offers accommodation and employment opportunities for approximately 200 individuals.

Admission to the Leimbach facility is open to anyone experiencing addiction-related difficulties, with entry being voluntary but subject to approval from the relevant social services. The cost of residency is covered by the association and public grants, and if a resident earns additional income, it is allocated to cover operational expenses. The duration of stay is individually determined but typically lasts no less than one or two years. A key rule for new community members is a six-month break from external contacts. Only after this period are visits and independent leave from the centre permitted, and even then, these activities are subject to specific regulations. The earliest written contact with family is allowed three months after arrival, although family members may obtain updates on the resident's condition at any time with their consent.

At the time of the study visit at the end of 2022, there were 19 residents at the facility, three of whom were in the process of resigning. The majority of resignations occur within 90 days of completing the probation period. For instance, in 2021, 40% of newcomers resigned within this timeframe, a figure that has remained relatively consistent over the years (Jahresbericht, 2021).

As previously mentioned, the primary target group for support at the Leimbach Centre consists of young people, typically up to the age of 27. However, within the broader structure of die Fleckenbühler e.V., young people do not constitute the majority, despite the organisation originally being established with this group in mind. In 2021, individuals aged 18–25 accounted for 27% of all residents, while those aged 26–35 made up 34%, followed by those aged 36–45, representing 26%. The oldest age group, comprising individuals aged 56–65, accounted for 3% of the total population (Jahresbericht, 2021). However, these aggregate figures reflect the association's broader activities, which include support services for adults, in addition to the youth facility in Leimbach. While the present analysis focuses on youth rehabilitation, it is worth noting that die Fleckenbühler e.V. also supports adults facing addiction-related challenges, applying the same community-based approach.

The long-term objectives of support include social and professional reintegration, the development of self-organization skills and responsibility, as well as an individualized approach to each program participant. In simplified terms, it can be stated that for young people, additional emphasis is placed on education and preparation for adulthood, whereas adults focus on stabilization and the return to self-sufficiency. The model of interventions aimed at youth is described below.

### Operational model

The concept of self-help implemented at the Leimbach Centre is part of a broader and widely recognised approach in Germany. According to the German umbrella organization NAKOS (German: *Nationale Kontakt- und Informationsstelle zur Anregung und Unterstützung von Selbsthilfegruppen*) there are currently between 70,000 and 100,000 self-help groups operating in Germany, bringing together approximately 3.5 million people engaged in addressing a wide range of health and social issues. Additionally, around 300 facilities nationwide specialise in providing self-help support as their primary function. Germany ranks among the leading European countries in terms of self-help system development (Meierjürgen, 2015).

The self-help philosophy at the Leimbach Centre is rooted in the belief that individuals facing addiction or crisis are the best experts on their own problems. The core principle is that every person has the capacity to acquire the necessary skills and knowledge to lead a fulfilling, addiction-free life.

The centre's community, comprising both residents and staff, is highly diverse, particularly in terms of life experiences, social capital, economic status, age, and ethnic background. This diversity mirrors the broader heterogeneity of contemporary German society, fostering an inclusive environment that reflects the complex social landscape of the country.

Facilities such as the Leimbach Centre operate at the intersection of multiple policy domains, including social, educational, health, and integration policy. Their activities are state-regulated and co-financed, aligning with Germany's key policy objectives in supporting individuals at risk of social exclusion (Meierjürgen, 2015). Beyond social reintegration, these centres also serve as educational and vocational platforms, addressing challenges related to migration and refugee integration.

A crucial aspect of the centre's operations is its collaboration with the local public and private sectors. One of the most significant components of the rehabilitation process is work, which plays a fundamental role in social and professional reintegration. The Leimbach Centre, set in a picturesque rural environment, is structured as a farm, incorporating traditional agricultural infrastructure. Some of the former farm buildings now serve as residential quarters for residents and staff, while others continue to be used for agricultural activities, particularly crop production. Additionally, the centre operates a large fruit and vegetable garden, featuring several greenhouses, and keeps domestic animals, including poultry, rabbits, and donkeys.

In recent years, environmental sustainability has gained increasing importance within the centre's operations. Efforts have been directed towards minimising the ecological impact of its economic activities, promoting sustainable development, and ensuring the efficient use of natural resources. In alignment with these principles, the association also operates an organic food shop, a restaurant, and a café with a bakery in Frankfurt am Main. This multifaceted structure gives the organ-

isation the appearance of a sizable enterprise, enabling it to maintain a degree of financial independence. However, approximately one-third of the required funds still come from grants, public subsidies, and donations.

### **Support offer – description of key assistance activities in addiction treatment**

#### *Initiating the salutogenic effect of the peer group*

Each new resident joining the Leimbach community receives individual support from an assigned peer, a system referred to as “service to the people” (German: *Leutendienst*). This structured approach ensures that newcomers benefit from peer mentorship, guidance, and emotional support, fostering a sense of belonging and structured integration within the community.

During the first three months, new residents primarily engage in simpler, repetitive physical tasks, allowing them to adjust to the daily routine and gradually familiarise themselves with the centre’s functioning. From the fourth month onwards, they transition to more complex activities, progressively taking on greater responsibilities within the association’s operations. This staged process supports vocational development, discipline, and personal growth while ensuring a smooth integration into the rehabilitation environment. Within the framework of “service to the people”, key activities include:

- coordination of the cold turkey process, ensuring structured support during withdrawal;
- coordination of the trial period, which spans the first four months and allows new residents to familiarise themselves with different areas of the association’s work. From the fourth month onwards, they are expected to select a primary field of activity, fostering a sense of responsibility and long-term engagement within the community.

Additionally, new residents undergo a four-month trial period, during which they explore various areas of the association’s activities before selecting a primary field of engagement. From the fourth month onwards, they are expected to commit to a specific area of work, reinforcing their sense of responsibility and stability.

Beyond their assigned tasks, the designated peer mentor plays a crucial role in facilitating social adaptation. Acting as the first point of contact in conflict situations, they provide guidance and emotional support, accompany the newcomer on external visits to medical appointments, court hearings, or other necessary procedures, and, if required, relay health-related information to family members with the resident’s consent.

This peer mentorship model is designed to maximise the positive influence of the group, stimulating constructive social mechanisms and promoting the development of essential life skills. By offering a structured, supportive alternative to previous adverse experiences – such as homelessness, psychiatric institutional-

sation, or imprisonment – the programme fosters long-term social reintegration, personal stability, and independence.

#### *Social-emotional support for addiction through “play”*

The term “game” refers to a structured discussion group, typically involving 12 to 15 residents, aimed at facilitating social-emotional support in addiction recovery. These sessions address a variety of topics, including the sharing of personal experiences related to addiction, discussions on problem situations, and issues relevant to the functioning of the community.

A standard discussion session lasts two hours, providing residents with a safe and structured environment for reflection and peer interaction. Participation is mandatory for newly admitted residents, who are required to attend four sessions per week for the first six months. In the following 1.5 years, attendance is reduced to two sessions per week, eventually transitioning to one mandatory session per week.

The concept of the “game” is closely aligned with the therapeutic community approach, integrating group-based intervention techniques to promote emotional regulation, self-awareness, and mutual support in the addiction recovery process.

#### *Elements of the biographical method within Naikan meditation*

An additional component of the centre’s rehabilitation programme is meditation based on the Japanese Naikan method. This practice is designed to facilitate introspective exploration, encouraging individuals to adopt a meditative posture of body and mind in a low-stimulus environment. During Naikan sessions, participants engage in a structured reflection on their past life experiences, analysing them within defined biographical intervals.

Naikan meditation sessions take place twice a year, each lasting seven days. Additionally, three staff members at the centre are certified trainers in this method, ensuring professional guidance during the practice. Participation in Naikan meditation is voluntary and is available to residents from the sixth month of their stay onwards.

#### *Support through RST groups*

In addition to the regular “game” meetings, the centre offers Rational Self-Support Training (RST) groups, which are based on Jack Trimpey’s Rational Recovery (RR) approach (Trimpey, 1996) and Albert Ellis’ Rational Emotive Behaviour Therapy (REBT) (Ellis & MacLaren, 2020). The Rational Recovery approach utilises various cognitive techniques to enable individuals to autonomously manage, achieve, and maintain abstinence, while also fostering the internalisation of positive humanitarian values (Galanter et al., 1991).

### *Advice and thematic information for residents*

Residents of the community have the opportunity to participate in additional meetings and consultations, organised as so-called “tea breaks”, which take place during the day. During these sessions, long-term residents provide information on various aspects of life at the centre, including work responsibilities, social and health-related issues, healthy eating, sports, and topics such as HIV and AIDS. This initiative also includes regular training on health and hygiene, particularly in areas relevant to the centre’s operations, ensuring that residents are well-informed about essential aspects of personal and communal well-being.

### *Activities aimed at external stakeholders*

An important aspect of the activities carried out by the association, including the Leimbach Centre, is the organisation of regular open days, which involve participation from external individuals and organisations. These events cover a wide range of activities, including guided visits to gardens, greenhouses, and animal enclosures, as well as cheese-making workshops, culinary sessions, and other hands-on experiences. Another regularly occurring initiative is the agricultural produce market in Leimbach, where the association engages with the local community.

Each year, the association organises more than 50 group events, all of which are open to the public. Some of these focus on educating visitors about the centre’s support programmes and the self-help approach, which is central to its philosophy. As a result, the centre frequently hosts study visits, particularly from social science students, during which detailed information is provided on the forms of assistance offered and the centre’s working methods.

### **The expert’s perspective**

As previously mentioned, this study includes an interview with the expert with the longest tenure at the centre. His extensive experience and direct involvement in the facility’s development provided valuable insights, aligning with the case study methodology. Reflecting on his professional background, the interviewee emphasises the diversity of his work experiences, which have significantly shaped his approach to his current role. Initially, his career was unrelated to the helping professions, as he worked in locksmithing, welding, and construction machinery engineering. It was only later that he pursued studies in pedagogy and Gestalt therapy, a path influenced by personal life experiences, including growing up in a large family, raising a son on the autism spectrum, and facing severe health challenges such as temporary blindness and requiring a wheelchair.

He states, “I was also at the bottom, but a lot of good things happened to me too”, adding that now “I don’t have to prove anything anymore”, and that while “I change every day but I’m fine with it” (W01, 2022). He highlights the importance of clear communication, honesty, and preventing misunderstandings, though he

acknowledges that disagreements, arguments, and disputes are inevitable in this type of organisation. From his perspective, a key responsibility of his role is to “bring people together”, ensuring a balance between “giving and receiving”, which he considers a valuable aspect of the job (W01, 2022).

According to the interviewee, the main tasks of the centre, given its specific nature, include:

- guaranteeing young people structure, rules, and responsibilities;
- giving time, e.g. for decision-making;
- showing the way: “We are developing together but the decision [what you want to do next – author’s note] is yours”;
- tolerance, which is essential due to the diverse backgrounds of individuals within the centre.

This aligns with the organisation’s philosophy of setting boundaries while simultaneously supporting young people, ensuring that they are “not punished but shown what they can change” and shown that “they need to be shown something that will interest them, that will give their lives meaning” (W01, 2022).

Setting boundaries also applies to the staff, who must establish them clearly and directly. This includes maintaining their own professional limits, particularly regarding emotional involvement in supporting residents. Awareness of the risk of co-dependency is crucial in ensuring that assistance remains effective and sustainable.

As the interviewee emphasises, the centre’s approach must allow room for failure and the possibility of returning if needed: “If you fail you can come back, give yourself the space to do so”. However, such an option requires awareness of what one is returning to and why, as “we will not change our way for your sake but we will offer our way to you”. At the same time, the interviewee points out that “those who return certainly do not want to go back” (W01, 2022).

There are more requirements for the staff. In a team, individuals who have experience overcoming crises and addictions and are willing to help young people – literally “go to hell for a young person” – are highly valuable. At the same time, it is important that such a mentor “does not require young people to do things that they themselves have a problem with” (W01, 2022).

Another challenge for staff is the need to distribute time proportionally among residents, which can be particularly difficult when some individuals require significantly more attention than others. An open and stereotype-free approach is also essential. During routine assessments, which involve reviewing police reports and other documentation, biases can sometimes emerge.

The interviewee stresses that maintaining an objective perspective is crucial. Additionally, a sense of humour and the ability to admit mistakes when necessary are valuable qualities in this work. As the interviewee highlights, it is crucial to remember that the residents of the centre are individuals for whom the alternative is imprisonment. They function in what is described as “constant crisis mode”, which

presents an additional challenge, as “a crisis does help you survive but it doesn’t allow you to grow”. This sense of uprootedness and lack of inner peace presents a significant challenge (W01, 2022).

A particularly important issue raised by the interviewee is the disapproval of psychotherapy for newly admitted residents. In his view, at this stage, young people primarily need peace and security, rather than being forced to confront traumatic experiences too quickly. Many residents arrive at the centre with gaps in their personal histories, as “there are only black holes in their lives”, making it difficult for them to process their past effectively (W01, 2022).

To fully grasp the context in which the centre operates, it is essential to consider the educational and family backgrounds of the residents. A major challenge arises from the significant variety of upbringing experiences among those who arrive at the centre. A substantial proportion – between 30 and 40% – come from families where addiction is present, often accompanied by high levels of parental conflict. Additionally, many residents originate from what the interviewee describes as “good but cold homes”, environments where material stability did not compensate for emotional neglect. He notes with concern that “most of the boys here have the conviction that actually nobody wanted them in this world”.

Whenever possible, the staff make an effort to learn about the residents’ parents and previous family relationships. They seek to understand what the interviewee refers to as their “normality and routine”. This information helps the team provide more tailored support, taking into account the personal histories of the residents (W01, 2022).

The expert also highlights additional factors that contribute to the effective operation of the centre. One of these is a strong network of professionals – both practitioners and theorists – who collaborate to support young people. As the interviewee emphasises, “we all support and complement each other together”.

Another crucial element is the centre’s cooperation with the local community, particularly in Leimbach, where relationships with local authorities and institutions play an essential role. Residents who express interest have the opportunity to participate in internships at public offices and local institutions, which have proven to be valuable experiences for their personal and professional development (W01, 2022).

## DISCUSSION

The centre’s activities are designed to address the needs of an increasingly diverse society, for example, in the context of migration. They are targeted not only at young people but are also increasingly extending to adults.

The facility’s structure is designed to support the therapeutic community model, providing a broad range of services that help residents restore life balance and

develop vocational skills. Additionally, the centre extends support to residents' families, offering legal aid and counselling, which enhances the effectiveness of the rehabilitation process. Collaboration with external experts and local institutions ensures that assistance remains relevant and adaptable to both internal developments and external socio-political changes.

The expert's reflections provide valuable insights, demonstrating years of experience, a clear understanding of priorities, and a commitment to supporting residents. At the same time, there is a recognition of staff well-being and the importance of maintaining strong relationships within the organisation. However, as the expert emphasises, success is never guaranteed, even under the most favourable conditions. Assessing the effectiveness of the centre's interventions remains challenging, even with the available data, though this was not the primary objective of the analysis. The association managing the centre refers to an internal study conducted in 2011 among former residents. According to the findings, almost 89% of former residents reported continued abstinence from illicit substances, while 51.4% had sought additional addiction support services after leaving the self-help programme. Additionally, 47.2% were in stable relationships, and half of the respondents were engaged in professional employment at the time of the survey. However, the methodological limitations of the survey, particularly its lack of precision in measurement, indicate the need for further refinement to produce more reliable catamnesis results (Fredersdorf, 2019).

The association die Fleckenbühler and its youth facility in Leimbach provide support for addicts based on the concept of therapeutic self-help communities. The main forms of support include group therapy, the development of social skills through community living, and vocational education. Importantly, especially for outsiders, help is available around the clock with minimal formal requirements, allowing for a quick response in crisis situations.

This concept has many advantages. Self-help groups offer valuable support for people struggling with addiction and other life challenges. Their strength lies in the development of social competence and responsibility through mutual support. As Fredersdorf (2019) notes, therapeutic communities support social reintegration by providing a safe environment to learn new behaviour patterns, helping young people rebuild resilience and develop effective coping strategies (expert interview W01, 2022; Fredersdorf, 2019). De Leon (2000) emphasises that their structure promotes self-reliance and facilitates social and professional integration. According to Bandura's (1977) theory, participation in such groups fosters self-confidence and a sense of agency, which supports recovery from addiction and social adaptation (Stationäre Jugendhilfe Leimbach, 2020).

Despite many benefits, self-help groups also have limitations. One challenge, for example, is the lack of professional supervision (Włodarczyk, 2010). While facilities like Leimbach have professional staff, even in centres with expert support,

the diversity of participants' experiences and needs remains a challenge, making uniform outcomes difficult to achieve (Gerasch, 2009; Siwiak-Kobayashi, 2013). Additionally, high participant turnover and a variety of problems make it harder to tailor activities to individual needs (Soroko & Jankowiak, 2020). However, profiling the Leimbach Centre specifically for young men helps address this issue.

Another challenge is non-adherence to group norms and difficulties in the free exchange of information (Siwiak-Kobayashi, 2013). Addressing these issues requires commitment from both participants and therapists. The effectiveness of self-help groups depends on coherence, participant engagement, and the integration of different therapeutic approaches. However, outcomes vary depending on the group's characteristics and the nature of the illness (Borgetto, 2002).

In its information materials, the Leimbach Centre outlines the benefits for participants, declaring that those who complete the programme obtain school-leaving certificates, undertake work placements, and have access to crisis support. These offerings seem appealing to young people and their caregivers, but the lack of comprehensive data makes it difficult to assess whether these benefits materialise consistently (Die Fleckenbühler, 2025)

Regarding the "Therapy Instead of Punishment" programme, which plays a key role in the centre's operation, the presence of an alternative to imprisonment is a significant factor in promoting social adaptation (Sevdiren, 2011). However, the programme also faces challenges, including a lack of motivation among participants and difficulties in adapting to the therapeutic environment. This is reflected in the high rate of interrupted therapies – for instance, in Hamburg, the completion rate for therapy is around 50% (Zurhold et al., 2013). Another issue is the lack of uniform judicial standards in sentencing, which impacts the programme's implementation (Stübner & Kaspar, 2022).

The success of therapy depends largely on its duration and participant motivation. Programmes lasting longer than 16 months show higher success rates in terms of abstinence and social reintegration (Fischer et al., 2007). Additionally, voluntary participation and preparatory support significantly improve outcomes. Participants who complete the programme report improvements in housing stability, employment, and personal relationships, highlighting the long-term benefits of structured rehabilitation.

## CONCLUSION

The findings presented in this study draw on the rich tradition of therapeutic community methods and align with the scientific consensus regarding their effectiveness in addressing crises, while also recognising the limitations of this approach (Bukowska, 2013; De Leon, 2000; Kooyman, 2002; Siwiak-Kobayashi, 2013).

The origins of formal addiction self-help organisations in Germany date back to 1971 (Fredersdorf, 2019), whereas in the United States, such initiatives emerged as early as the 1950s (Fogarty, 2003). Currently, this concept is applied in Poland by the Monar Association and in Germany by the Synanon Foundation. However, this study does not seek to conduct a comparative analysis of similar institutions in these two countries. Instead, using the example of the Leimbach Centre, it aims to provide insight into the German system for supporting young people struggling with addictions and at risk of imprisonment.

At the same time, the peculiarities of the institution itself are noteworthy. Operated by a non-governmental organisation, it remains independent from both state and Church structures. Due to its unique organisational model and management structure, it enjoys a significant degree of financial autonomy, which is a relatively rare situation in this sector.

The practical solutions and examples of activities discussed in this study may serve as inspiration for practitioners and researchers working with youth in crisis. The objective is not to replicate these solutions exactly, but rather to draw inspiration from them, adapting them to local conditions. This could be particularly relevant in the context of further qualitative and quantitative research. Such research would be highly desirable, as the Leimbach Centre's model has not been without its critics. In particular, during the 1980s and early 1990s, when its structures were being established, concerns were raised regarding its radical approach, including a reluctance to employ professional therapists and strong isolationist tendencies for residents. Today, all facilities run by the association are subject to official inspections and adhere to the statutory standards applicable to all similar centres in Germany. However, some elements of its earlier operational philosophy, such as scepticism towards therapy, especially at the initial stage of a resident's stay, appear to remain present.

A promising avenue for further research could involve a comparative analysis of institutions employing similar methods or an evaluation of the legal and institutional frameworks governing therapy as an alternative to punishment in different countries.

The analysis of such rehabilitation centres abroad should also contribute to discussions on good practices in supporting individuals in crisis, including those with addiction issues in Poland. This is particularly relevant given that Polish legal regulations in this area are relatively similar to those in Germany (Ustawa z dnia 29 lipca 2005 r. o przeciwdziałaniu narkomanii, Art. 71, Dz.U. 2023 item 172).

Finally, it is important to highlight the untapped potential for cross-border collaboration between support institutions and organisations in both countries. Such cooperation could take place through joint partnerships involving non-governmental, public, and religious organisations. Opportunities for financing such initiatives exist through various national and international funding schemes. These

partnerships could facilitate the exchange of experiences, the development of new competencies, and further innovation in the field of addiction rehabilitation and youth support.

## STUDY LIMITATIONS

The limitations of this study primarily stem from the research strategy employed – the case study approach. These limitations include the inability to generalise the findings to other contexts (Stake, 1995; Yin, 2015) and the subjectivity of the researcher, which may influence data interpretation (Simons, 2009). Challenges also arise about the complexity of data analysis, the need to maintain methodological consistency (Mizerek, 2017), and the definition of case boundaries. Another constraint is the selection of research material, which primarily covers the last five years of the centre's operation, as accessing older materials proved difficult.

Nevertheless, despite these limitations, the advantages of the study outweigh the constraints. The case study approach provides a multifaceted perspective on the organisation's operations while also contributing to the dissemination of knowledge and practical solutions implemented in the field.

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## WSPARCIE MŁODZIEŻY W KRYZYSIE – PRZYKŁAD MODELU WSPÓLNOTY POMOCOWEJ W LEIMBACH, W NIEMCZECH

**Wprowadzenie:** Przedmiotem analizy jest oferta pomocowa, skierowana do młodzieży i młodych dorosłych w sytuacji kryzysowej, zmagających się z uzależnieniami i korzystających ze wsparcia specjalistycznej placówki terapeutycznej dla młodych mężczyzn w Leimbach, w Niemczech.

**Cel badań:** Celem artykułu jest przedstawienie koncepcji pomocowej skierowanej do młodzieży w kryzysie, bazującej na idei pomocy do samopomocy i pracy metodą społeczności terapeutycznej.

**Metoda badań:** Wykorzystane podejście badawcze to studium przypadku, analiza danych zastanych i częściowo ustrukturyzowany wywiad indywidualny.

**Wyniki:** Działalność ośrodka w Leimbach opiera się na społeczności terapeutycznej, której fundamentem jest koncepcja pomocy do samopomocy. Wsparcie obejmuje terapię grupową, indywidualne działania pomocowe, medytację Naikan oraz prace, które rozwijają samodzielność i kompetencje społeczne mieszkańców. Współpraca z lokalnymi instytucjami umożliwia praktyki zawodowe, zwiększając szanse na reintegrację społeczną. Główne wyzwania to wysoka rezygnacja uczestników (40% w ciągu 90 dni) oraz problemy emocjonalne wynikające z trudnych doświadczeń rodzinnych.

**Wnioski:** Połączenie idei grupy samopomocowej z różnymi formami terapii, wspieranych przez profesjonalną kadrę i funkcjonowanie placówki w ramach certyfikowanego systemu publicznego, minimalizuje ryzyko wynikające z braku profesjonalnego wsparcia w samodzielnie działających grupach samopomocowych. Nadal jednak problemem pozostaje wysoka rezygnacja uczestników z powodu niskiej motywacji i trudności adaptacyjnych. Ograniczenia metodologiczne dostępnych danych utrudniają dokładną ocenę skuteczności działań, jednak dostępne dane wskazują, że większość byłych rezydentów utrzymuje abstynencję. Przedstawione rozwiązania mają przede wszystkim wartość poznawczą i praktyczną. Metoda społeczności terapeutycznej, znana w Polsce i Niemczech, nadal może inspirować specjalistów pracujących z młodzieżą w kryzysie. W kontekście migracji między tymi krajami wiedza o działaniu takich organizacji za granicą może być szczególnie cenna.

**Słowa kluczowe:** młodzież w kryzysie, samopomoc, społeczność terapeutyczna, uzależnienia, terapia zamiast kary