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## Social worker motivations and organisational prerequisites for care of children who commit crimes – the best interests of the child or the protection of society?

## Socialarbetares skilda motiv och organisatoriska förutsättningar för vård av barn som begår brott – Barnets bästa eller samhällets skydd?

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### ABSTRACT

The Swedish juvenile justice system's placing of children aged 15–17 under one roof in Secure Youth Care institutions presents a dilemma for social work officers attempting to resolve delinquency cases in the best interests of the child. Retrospective interviews were conducted in 2015 and mainly in Stockholm County with six professional social services officers (SSOs). The data were processed using Interpretative Phenomenological Analysis (IPA), social science theory, relevant law, the UN Convention on the Rights of the Child (CRC) and material from the National Board of Health and Welfare. Main results show that SSOs were concerned about the risk of faulty assessments, the inadequacy of methods and insufficient attention being paid to relevant scientific knowledge. All in all, the task of protecting the child vis-à-vis protecting society becomes a major challenge in an institution where there is no clear line of demarcation between punishment and care and rehabilitation efforts. Sweden's ambition to incorporate the CRC into Swedish law requires more focused education of personnel and national guidelines concerning the best interests of the child, as well as the allocation of more adequate resources to allow for more time with each client.

### ABSTRAKT

Det svenska påföljdssystemets användning av straff och behandling för barn mellan 15 och 17 år på särskilda ungdomshem kan medföra dilemman för socialtjänstemän i deras försök att tillgodose barnets bästa i sina vårdbehovsbedömningar när unga genomgår sluten ungdomsvård som ersätts med vård enligt LVU. I den aktuella studien genomfördes retrospektiva intervjuer med sex professionella socialtjänstemän i Stockholms län eller en närliggande stad 2015, alla med erfarenhet av att avgöra barnets bästa i sådana fall. Intervjuerna analyserades genom tolkningsfenomenologisk analys (IPA) och samhällsvetenskapsteori, lag och lagförarbeten, FN:s konvention om barnets rättigheter, CRC och Socialstyrelsens Allmänna råd. Huvudresultaten visar att socialsekreterarna

### KEYWORDS

Juvenile delinquency; social care; criminal justice; UN child convention; rehabilitation; compulsory care; punishment

### NYCKELORD

barn och ungdomsbrottslingar; socialt arbete; straffrätt; barnkonvention; behandling; tvångsvård; straff

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oroad sig över felaktiga bedömningar, genomförandet av adekvata metoder och vetenskaplig kunskap framstår som problematiskt, och de verkar också underordnade institutionernas överordnade makt, allt som allt, framstå skyddet av barnet vis-à-vis skydd av samhället bli ett verkligt dilemma vid sådan blandning av straff och vård. Vi drar slutsatsen att Sveriges ambition att införliva barnkonventionen i svensk lag kräver mer fokuserad personalutbildning och mer tid i klientarbetet liksom nationella riktlinjer för bedömning av barnets bästa, tillsammans med mer adekvata resurser för socialtjänsten.

## Introduction

Since 1999, the Swedish juvenile justice system has incorporated a unique, though rarely used, a mix of punishment and compulsory social care under the very same roof to handle delinquent children aged 15–17. When a child commits a serious crime, the criminal court may sentence the child to punishment in a closed Secure Youth Care institution (hereafter SYC). After the confinement, the local social services officers (hereafter SSOs) may decide on further compulsory rehabilitation, if deemed in the child's best interests (Tärnfalk & Kaldal, 2012). So regardless of whether the child is serving a sentence or receiving care, the child remains at the same SYC institution. However, there are different – and variously opposing – motives for punishment and for care. Punishment and the 'just deserts' discourse aim to deter lawbreakers from repeating criminal acts by rightfully suffering *in proportion to the crime* and hopefully *protecting society* from further transgressions (Garland, 2001). In all social care assessments, 'the *child's needs and best interests*' are the decisive factor, intended to *protect children* from deeds harmful to their health and development (Tärnfalk & Kaldal, 2012). How social services balance this mix of punishment and care and assess the best interests of the child is crucial.

As far as we know, there are no previous studies that have investigated this complex situation. We present unique results from a retrospective qualitative interview study of six SSOs' perspectives and motivations when deciding on the best interests of the child, concerning five boys in the transition from punishment to care in the year 2012. The research question is: what is the main motivation for the child's transition from punishment to care in the assessments of these SSOs – the best interests of the child or the protection of society? This issue strongly urges an interdisciplinary analysis combining law and social science theory with a social work practice perspective (Rap, 2015; Stang Dahl, 1978).

## Prerequisites for and obstacles to social work in the mix of punishment and care

A common feature in research on the Nordic model is that punishment is intertwined with care. There is some risk, therefore, of displacing the child's needs and interests in favour of the protection of society (Lappi-Seppälä, 2011).

In Sweden (Tärnfalk & Kaldal, 2012), the Nordic countries (Lappi-Seppälä, 2011; Storgaard, 2009) and in Europe, social workers play important and complex roles in the juvenile justice system (Bradt & Bouverne-De Bie, 2009; Rap, 2015). However, contradictory conditions and vague rules cause problems for SSOs in their assessments of the child's best interests and subsequent decision-making (Leviner, 2014). In addition, the Swedish social services show low inter-professional agreement, lack of knowledge of effective intervention methods and little know-how about needs assessment, especially of children and criminal youth (Andershed & Andershed, 2016; André Löffholm, Brännström, Olsson, & Hansson, 2013; Åström, Jergeby, Andershed & Tengström, 2013; Ginner Hau & Smedler, 2011a, 2011b; Kaunitz, 2017). Institutional treatment with therapeutic programmes may have positive effects compared with methods based on control and punishment, but this is generally disputed (Howell & Lipsey, 2012). Youth in secure accommodations, like SYC, also show a high risk of recidivism (Pettersson, 2010). Hence, of major importance is that, according

to research, SSO interventions would be more successful if evidence-based practice (EBP) were implemented (Andershed & Andershed, 2016).

## The protection of society vs. the best interests of the child

Children – mainly boys – sentenced to SYC varied from 69 cases in 1999–115 cases in 2004 (145 cases if counting youths aged 18-21), yet in 2014 were only 42 (Brottsförebyggande rådet Crime Prevention Council tab. 440). In 2015, the number of children sentenced to SYC was just 34 (44 if counting youths aged 18-21), but 2016 saw a nearly 100 percent increase to 64 sentencing (84 if counting youths aged 18-21) (Brottsförebyggande rådet Crime Prevention Council tab. 440). SYC as a form of incarceration has almost totally replaced traditional prison as a criminal sanction for young persons in the age category 15-17. Nevertheless, the alternative of compulsory social care after punishment is rarely used, remaining at only 7-8 cases per year (Tärnfalk & Kaldal, 2012).

### Relevant laws and CRC<sup>1</sup>

In order to uphold the protection of society, the criminal court may under very restricted rules sentence a lawbreaking child from 15-17 years of age<sup>2</sup> to an SYC institution for between 14 days and four years, in proportion to the severity of the crime, regardless of the child's needs (Lappi-Seppälä, 2011). The transition from punishment to compulsory care begins after the punishment is completed if the child is 'in need of care', and if treatment is considered the best alternative for the child at that time. This aims to avoid the risk of damage to the child's health and development due to illegal use of drugs, criminal activity or other such degradative social behaviours. The best interests of the child shall be decisive in all social services measures for a child (Tärnfalk & Kaldal, 2012). Voluntary care is always the first alternative and all measures must be made in agreement with the child and its guardian. Compulsory care may apply until the child reaches the age of 21. According to the law and to the UN Convention on the Rights of the Child (CRC), the child has the right to participate in any decision-making (Leviner, 2014).

Staten institutionsstyrelse The National Board of Institutional Care (hereafter SiS) governs the SYC institutions. If the social services apply for a placement, SiS shall designate a place in such an institution (Tärnfalk & Kaldal, 2012). Every child has the right but also the obligation to attend school until his or her basic education is completed, regardless of whether placed in an institution or at home (the Swedish Education Act (2010: 800) [section 8(1)]).

Socialstyrelsen The National Board of Health and Welfare (hereafter SoS), proposed a model in the Social Services Act for assessing and balancing the best interests of the child as follows:

- the *subjective perspective* emphasises the child's perspective in matters concerning itself: including participation in all decisions;
- the *objective perspective* emphasises the need for research and professional experience to support the child's best interests in any situation;
- the *need principle* implies that the child's needs should be taken into account in all decision-making;
- the *will principle* emphasises respect for the child's own will in all decisions (SoS, 2006, pp 17–18).

### Theoretical perspectives

The professional balancing in the law of various interests is complex (Braye & Preston-Shoot, 2006) due to different possible interpretations of how the law views the different needs of children and of societies (King & Piper, 1995). The SSOs are responsible for the children's needs, vis-à-vis SiS institutions where they have no control. Theoretically, the SSOs and the SYC institution staff are seen as 'street-level bureaucrats' with discretionary power in human service organisations, whose task is to change people within organisationally framed contexts (Hasenfeld, 2010). The application of such discretionary power, for example upon intervention in a child's life, is interpretable (Lipsky, 2010) and may lead to different

outcomes. Hence, the transition from punishment to compulsory care constitutes a precarious situation – legally as well as organisationally – where the child’s needs and interests vis-à-vis an available placement may answer to society’s need to keep the child locked up, but does not necessarily concur with the child’s needs and interests (King & Piper, 1995; Stang Dahl, 1978; Storgaard, 2009).

## Material, method and research design

This article is part of a larger project entitled, ‘The best interests of the child when the child has committed serious crimes’, financed by SiS (Tärnfalk & Kaldal, 2012) and approved by the Swedish Regional Ethical Committee (hereafter EPN, reference number 2013/168-31/5). The total project analyses legal documents concerning all children and young persons sentenced to secure youth care and transitioned to compulsory treatment/care from 1999 to 2012. The analysis concerns criminal law as well as social work law: frequency and type of crime; drug use; SSO investigations and assessments compared with criminal and administrative court evaluations; how the child’s best interests are assessed, etc. (Tärnfalk & Kaldal, 2012). The sample criteria for each case were full documentation from both criminal courts and administrative courts in cases where a young person had transitioned from SYC to compulsory care (Tärnfalk & Kaldal, 2012). The total number of possible cases (a person could be sentenced more than once) from 1999 to 2012 was 95 (seven females, no duplicates) aged 15–19 ( $M = 16.7$  years). Yet from 2007 to 2012 only 31 cases (boys only) met the full sampling criteria due to major deficiencies in the documentation. No female cases met all criteria. A legal reform in 2007 also changed the grounds for document content analysis. Each case has at least one, often two, SSOs. The present interview study aims at exploring how the children’s needs and best interests are perceived and assessed in practice.

After approval by the EPN, all material and data were anonymised by removal of all identity markers such as names or collegial cooperation, places and other pertinent information, to hinder identification, direct or indirect. However, information important for the understanding of the results has not been changed or excluded.

## The informants and their work situation

The informants, chosen from the document material and based on prior experience of being responsible for cases of transition from SYC to compulsory care, were at the time employed at four local social services offices in Stockholm County and a nearby town, of which two had worked with two such cases before and four had worked with one case each. As mentioned, these cases are rare in the generic caseloads for which the SSOs are responsible. We aimed at 10 informants. Due to certain difficulties, for example, change of workplace or unwillingness to participate, in the end, there were six experienced female professionals aged 36–64 ( $M = 47.17$  years) who responded positively. The informants are here presented under pseudonyms; Amanda, Katarina, Linda, Matilda, Patricia and Sandra. All hold a bachelor’s degree: four in social work, one in social pedagogy and one in human resource management and labour relations. All had been working with children and their families for 5–10 years, one of them as a professional social worker for some 30 years. Their work situation is typically characterised by a large number of cases of wide variation but with short of time for each case, along with a hierarchical organisation with superiors and a local political committee as main decision makers, leaving less individual decisive power in the hands of the SSO.

Two of the informants had worked as a pair on three of the current cases. In retrospect, they did not always agree about their previous work. Due to EPN restrictions, the pairing of case/boy with SSO is inappropriate, of concern for untoward identification of the informants or the boys.

## The boys in transition

Social Services documentation of the boys’ ethnicity is often lacking or unclear, but taking into consideration the names of the boys and of their parents, it seems that about one-third (10 out of 31

boys) are ethnic Swedes, whereas the remaining boys have non-Swedish ethnic backgrounds from Africa, the Middle East, Central Europe, South America and Eurasia.

Approximately 25 of the 31 boys were diagnosed or suspected of having (insufficiently recorded) neuropsychiatric problems such as ADHD, ADD and/or autism spectrum disorder, suicidicity, depression, mental retardation, conduct disorder, high risk for criminal recidivism or the like.

The criminal offences in their court sentence exhibit violent conduct, such as attempted manslaughter, robbery and aggravated assault, as well as sexual crimes such as rape, sexual abuse of children and child pornography, blackmail, threats and interference in juridical matters. Many have single mothers and no or little contact with their fathers. Unemployment is common, as well as economic or other kind of support from the local social services. Taken together, they are a very vulnerable group of children and youth.

The six SSOs had together been responsible for giving compulsory care to five boys. These five boys,<sup>3</sup> as identified from the documents, all have immigrant backgrounds: one from Africa, two from Middle Eastern countries and two with the unspecific background (not registered in the text material). These 5 boys were between 16 and 18 years old and sentenced to SYC for between 3 and 8 months (in the 31 case material, the variation in sentences ranged from 1 to 24 months with a mean of 6.6 months in secure youth care). Four out of the five boys come from very impoverished families, basically living on social assistance, had problematic home conditions and non-compassionate parents, and lacked school education. The fifth boy, however, had well educated parents, both with solid incomes. All of the boys' highly criminal records exhibit violent conduct: attempted manslaughter, robbery, aggravated assault and blackmail, as well as interference in juridical matters, along with drug use/offence (cannabis). Two boys were in addition diagnosed with ADHD (attention deficit hyperactivity disorder) and/or autism spectrum disorder, and another with mental retardation (later discovered to be a false diagnosis). One boy was assessed as a high risk criminal in a SAVRY (Structured Assessment of Violence Risk in Youth) evaluation. The boy who came from an academic, stable home with loving and caring parents had no such problems at all but had taken to socialising with criminal peers. The social services later aborted his compulsory care, due to negative treatment results, and successfully relocated him to his home. For the other four boys, treatment failed, and the SSOs later lost contact with them. Research shows that boys committed to SYC have a high risk of recidivism and are difficult to treat successfully (Pettersson, 2010).

### ***The institutions***

There are six SYC institutions with room for 56 young persons, boys and girls, in closed, separate departments. Psychologists, educators and therapists chart the need of care and treatment in individual enforcement plans, both during placement at the institution and for some time after. Different treatment programmes aim at counteracting future criminality, meaning that they do a needs and risk assessment. After the punishment, the young person may remain at the institution, return home or receive a new placement at a foster home or the like. The institution may also plan aftercare in cooperation with social services. During the SYC period, they also attend school (see SiS homepage).

### ***The interviews, interpretation and analysis of content***

All interviews were recorded, transcribed verbatim and then processed using interpretative phenomenological analysis. IPA – the theoretical underpinnings of which are phenomenology, hermeneutics and ideography – seeks to understand the essence of phenomena, which can be reached only through people's experience of them and thus is a process of making sense of participants making sense (Smith, 1996). The interviews ranged from 84 to 115 min ( $M = 95.83$  min) using a semi-structured interview guide, including 10 questions to ensure that the order and wordings of each question were allowed to vary (Smith, Flowers, & Larkin, 2012). Background questions

concerned about education and age. A general probe, added to all interview questions, was 'can you tell us more about ...': your knowledge of social work law and criminal law; your perception of SYC as punishment or care or both; your experience of assessment in such cases; who suggested care after the punishment; what needs of the child/young person are of particular importance to consider; how you came to what was the best interests of the child; if you want to address something that we've not asked about?

The analysis of these questions followed the IPA principles (Smith, Jarman, & Osborn, 1999) in order to identify master themes and subordinate themes (Smith et al., 2012). This produced a rich material, as answers sometimes ranged widely. In the transcriptions, we have used ./ to denote shorter omissions of interview text, and /.../ to denote longer omissions. During the interviews, the informants often first responded with great certainty to a question, then modified or changed their answer before arriving at a final, sometimes contradictory, standpoint. To ensure that we had correctly understood the content of the informant's utterance, we sometimes presented an interpretation, to which the informant could respond. We mostly present the SSOs final responses but point to the uncertainty in their own perceptions and motivations by giving examples of such contradictory statements. The analysis was conducted by listening to and reading the transcribed interviews several times while making notes in the margins to form a basis for defining preliminary themes. The more the reading proceeded, further themes appeared, along with different variants of the same, that is different expressions forming grounds for a number of subordinate themes (Smith et al., 2012). Through this process, grounded in the interview questions and analysed and categorised through law and theory (Tärnfalk & Kaldal, 2012), preliminary theoretical master themes emerged, while others were reformulated.

The final master themes that emerged are the following: the social workers' interpretation of the best interests of the child as basis for assessment; organisational conditions for the transition from punishment to compulsory care, i.e. how the law and other organisational factors facilitate or counteract the child's best interests in terms of treatment and cooperation between the authorities involved; and finally, protection of society or protection of the child as the core motivation for the extended institutional placement.

### ***The question of analytical generalisability***

The results do not constitute a complete picture of social services experiences or cooperation with SYC institutions and are not statistically generalisable. However, the results do illuminate an important social service and societal dilemma. The six SSOs who are in focus in this article as informants are educated and experienced. They come from four different municipalities and express professional problems in line with research (Andershed & Andershed, 2016; Andershed & Andershed, 2013; Ginner Hau & Smedler, 2011a, 2011b; Leviner, 2014).

The laws, as well as the CRC, apply nationally and there are only six SYC institutions nationwide.

Also, the current five boys cases exhibit both similarities and differences compared with the population in Pettersson (2010) study and with our full population of 31 cases of boys in compulsory care or SYC. For instance, in the full population only about one-third are ethnic Swedes, whereas all five current cases have non-Swedish ethnic backgrounds, although the current cases all have high criminal records similar to most cases in the full population of 31 cases. Without further statistical register analysis, it is not possible to assess to what extent these five boys are representative of the whole population in SYC or compulsory care.

For our present purposes, the six SSOs were sampled purposively with the aim of giving insight into the decision processes, motives and perceptions of social workers with the unique experience of working with such cases.

We present a context for an understanding of what *may* happen in cases of transition from SYC to compulsory care.



## Results

### *Perceptions of the best interests of the child, 'gut feeling' and research as basis for evaluation*

The informants' workplaces had no explicit system for implementing research in SSO work at the time, but at the workplace of two informants, there was a so-called method developer employed. This person did not satisfy the SSOs' needs of implementing specific research knowledge, however. One said that the workplace once ordered all SSOs to attend a methods course for social workers, which turned out to be neither appropriate to the type of work situation nor to their type of clients. If the SSOs needed to implement client-specific EBP in their work, they were individually responsible for doing that. None of the informants referred to the mentioned assessment model (SoS, 2006) nor explicitly mentioned the CRC articles, except that of the best interests of the child (art. 3) familiar to all the SSOs. Due to the lack of a clear definition of 'a child's best interests', great difficulties arose for the SSOs in deciding 'best interests' beyond more general considerations such as 'to live with one's parents in one's own home' and to grow up with 'loving and caring' parents. The informants referred to collegial discussions as a source of information and offering some sort of a 'frame of reference' concerning decisions about the best interests of the child, as is evident from Sandra below.

Interviewer: ... what is your frame of reference for what is best for the child?

Sandra: What can I say? It's very dependent on oneself, personally; what I think is the best for the child, or possibly what I can arrive at together with a workmate. But we also have team discussions every week, where we take up our cases and talk about them.

Sandra's frame of reference for assessing 'a child's best interests' seems less theoretical and more pragmatic, based on her and a workmate's experiences. It's about personal beliefs and collective opinions from weekly team discussions, she says.

Matilda, who seems more critical, plainly states that assessments are based on 'gut feeling', a concoction, as a complement to her professional experience:

Interviewer: ./ what significance, if any, does your professional experience as a social worker play when assessing what is in the best interests of the child?

Matilda: I think that's what I do, all the time. I think it's a concoction, we often talk about it, maybe not just in connection with your question, but we often talk about this gut feeling (laughs). But that's an expression I don't really like to use because it sounds so unprofessional ./ It's about risk and well ... gut feeling, that sounds ./ so arbitrary ./.

In the next quote, Sandra further contextualises the difficulties of assessing the content of a child's best interests:

Sandra: ... I think we're just trying to do the best we can. I can't say that during my education and over the years, not only at this workplace ./, that [we] specifically discussed what we mean by the best interests of the child, nah, it's just a feeling deep down, in your gut.

Sandra points out as an explanation, somewhat contradictory of her first statement about team discussions, that neither her education nor any of her workplaces have contributed specifically to defining what is the best interests of the child. Matilda's and Sandra's statements seem less theoretical and more personal or emotion based (Lipsky, 2010). Both say that it's a 'gut feeling', even though Matilda is reluctant to actually using the phrase since it strikes her as 'unprofessional' and 'arbitrary'. Thus, even though 'gut feelings' may be problematic and arbitrary, perhaps due to incompatible interests as defined by law (Braye & Preston-Shoot, 2006; Leviner, 2014), it may also be a tool used professionally by experienced SSOs in complex situations.

Katarina illuminates an aspect of this prognostic assessment.

Katarina: ... it may not show up until after many, many years. ./ This is one of my greatest anxieties as a social worker, how do I know that this assessment is the right one? ./ Because of this I think many SSOs have a lot of anxiety about putting their assessments into writing.



In sum, assessments of the child's best interests, lacking adequate theoretical guidance or any clear definition, appear to be situational and emotionally driven.

Another theme is the need in decision-making to respect the child's and its legal guardian's opinions and right to participate. All SSOs share the view, however, most frankly put into words by Sandra, that these children's exceptional immaturity, or drug use, should exclude them from any right to participate in decision-making:

Sandra: Well, they're not mature enough for that, I'd say. It's a damn strange thought, isn't it? That one must assume the child's development. // It's a very strange way of thinking, that children should have a say in everything ...

All the SSOs share Sandra's opinion on this theme, which is striking and seems contrary to both extant law and the CRC. However, these juveniles are often very difficult to treat. If the young person, or his legal guardian, resists or objects to treatment deemed necessary, professional opinions and experiences may question the child's and his parent's legal right to participate (SoS, 2006), but must still comply with the law as well as meet the child's needs and, hopefully, be in the child's best interests. Yet, children's cognitive deficits, such as mental retardation, ADHD, drug addiction and/or parents lacking in stability or using inadequate upbringing methods, may exclude them from participation due to the SSOs' aim of protecting the child from its own or its parents' destructive behaviour. This implies that assessments are often problematic, due to such incompatible interests (Braye & Preston-Shoot, 2006).

A subordinate theme concerns the implementation of research. All six SSOs, in theory, acknowledge the importance of using research in professional social work, hence the application of specific assessment instruments such as SAVRY, explicitly referred to by Amanda, Linda and Patricia as a means used by them to assess a child's dangerousness. Alternatively, at Sandra's workplace, they had started using a risk assessment manual called Signs of Safety.

Sandra: Yes, we do, clearly we make risk assessments. Right now we're working a lot with Signs of Safety, which involves specific risk assessments ... It's the new thing in our community, so now we're working with Signs of Safety.

However, research on Signs of Safety seems scarce. As far as we know there are no Swedish studies that have evaluated the effect of this programme and it is not yet recommended by the scientific community for investigations of delinquent youth problems in Sweden. In the next quote, Sandra adds a further explanation to her earlier statement:

Sandra: But that goes in cycles. We're, well, using it right now, depending on who's the present guru in the business. It's basically the same thing we were doing before, but now we call it by a new name, and so, yes, that's what we do.

Sandra's answer raises questions about the implementation of research. It seems that she perceives most assessment manuals as fairly similar, just having different names. Here she seems to be genuinely expressing her pragmatic opinion that 'gurus' come and go, but that nothing is new under the sun. Another interpretation may be that she is indeed quite ignorant that any research is being carried out in the area (Andrée Löffholm et al., 2013). So further delving is needed in order to disentangle these issues concerning the application of research in social work practice.

A further aspect, reflected in Matilda's critical comments on the implementation of methods in social work, concerns Multi Systemic Functional Therapy (MSFT) and Aggression Replacement Training (ART). There is little discussion, she said, about the contexts of implementation or on whom they are used. She continues:

Matilda: ... all of these different methods // there is no reason why they are supposed to work, yet we continue using them. Can you believe that, what it's like?

Interviewer: Mm, yes? What do you think?

Matilda: I think it's very strange, very strange indeed. Particularly ART, I know so well that they've said that there's no reason why this method should function at all.

Matilda's critical statement on ART seems to reflect some knowledge about ART's methodological flaws and results as discussed in research (Kaunitz, 2017). This criticism, alongside Amanda's (below), is also coupled to an awareness that without robust methods, social work is hardly more than a 'trial and error' affair.

Amanda: ... then it's been a matter of trial and error ./ It's very much so the social services work ... and that, one could think, is a disaster!

All six SSOs seem to embrace the ideals of using research, but in practice, they raise questions regarding flaws in some methods, for example, ART (Kaunitz, 2017), or how and what to implement. Further, no one states that they make use of the presented assessment model (SoS 2006).

We will now go on to show how organisational factors give an understanding of how the SSOs relate to the above described uncertainty in assessing children's needs and interests, and in motivating that the child is required to stay at the same institution where its punishment has just been concluded.

### ***Organisational prerequisites, and protection of the society versus protection of the child***

The mixed context of 'care and punishment' constitutes subordinate themes of further uncertainty in the assessment of a child's best interests. Not surprisingly, all SSOs embrace the rehabilitative ideal of care and treatment as a general means to treat delinquent boys. The focus here is on how the organisational context (Hasenfeld, 2010) impacts on the prerequisites for the assessment and accomplishment of the best interests of the child *in the transition* from punishment to care at these institutions.

However, in the following two themes, Linda first expresses her own difficulty in fully grasping this mix and, secondly, her difficulty in explaining to the child that he needs to continue to stay at the place where he recently was punished, for his own best interests.

Interviewer: They [the children] perceive it [compulsory care] as a punishment?

Linda: Yes, but it's not a penalty, though it's the same. No! I'm confusing it now, but I'm thinking that, for some needs, it's clear that because it's really unclear it's gonna be hard to explain to young people what the whole sanctions system is and ... what is a penalty? Could it be like a punishment to have to remain for treatment?

The next theme illuminates how this apparently confusing mix of punishment and care also has an impact on the child, evident when he realises that he will not be released after the punishment as expected:

Linda: ... but it's clear that they can become so very angry and feel cheated.

Thus, not only does the combination of punishment and care cause confusion for Linda, but also feelings of anger and betrayal in the child.

However, the SSOs seem to share a pragmatic view of this problem: that, after all, they do something good for the child and for society. In the following two themes, Sandra and Patricia express a balance in the motives for the compulsory care as both protection of the child and the protection of the society:

Interviewer: ./ the purpose then, is it more to protect society from the young offenders or to protect the young from themselves?

Sandra: Well, I'd say that's fifty-fifty, about as usual ...

Amanda: It's both, and of course it's about the child's need for protection, which in the long run means protection for society. And he was harmful to himself too, because he (sighs) did not have a developed sense of right and wrong, he was caught at least twice driving a car [without a license].

Sandra is specific: It's fifty-fifty, that is, both to protect society and the child, while Amanda points out how the child was being a danger to himself, in need to be controlled. These themes imply treatment aimed to meet the child's needs, and what is best for the child is considered decisive, but in practice, it also serves to protect society. The children are understandably confused about the mix due to the diffuse borders between punishment and social care (Lappi-Seppälä, 2011; Storgaard, 2009) and may feel cheated when not released.

The following three themes illuminate the institutions' failure of treatment, where the child's 'best interests' could not be met. Katarina first:

Katarina: ... he didn't respond to the care they offered / ... / ... but because of the children's best interests we were very upset that they did not go to school ...

Amanda, as evident in the next two themes, experienced a counterproductive treatment in a situation she had no influence over:

Interviewer: So the treatment was counterproductive?

Amanda: Yes I think so. Absolutely ... I think this was such a fragile young person.

/ ... /

Amanda: But we have very little influence. If they [the institution] say that 'tomorrow he needs to move to another institution', we will say, Oh, wait now, what? And then they say, 'Well, we can't hold him because we don't have the resources here, but they have in that place'. And then the child can be sent around to different places.

Interviewer: But what if you say no, then?

Amanda: The institution can just expel the child.

These three themes reveal disappointment about the failed treatment. Katarina was upset that the boy did not attend school, which violates his needs and interests, contrary to the law and the CRC, and Amanda says they have 'very little influence' over the institutions. Hence, the SiS institutions hold the upper hand is clear. In two other cases, the institution simply relocated the child without asking permission or informing the social services, or tripled the daily charge for the child from 400 euros to 1200 euros, motivated with the child's 'dangerousness'.

Katarina: I think these processes have also taught me, like how, even if you are in a position and think that you have ... that even if it is the social services' responsibility, you don't have the control that SiS has.

Katarina refers to social services responsibility by law but, in practice, the institutions can ignore social services demands. They have the control, she says.

In the next theme, Katarina makes an important point concerning this, that even though the social services searched high and low for something better suited to the boy's needs, they could not find any other place:

Katarina: / ... / nobody wanted him/ ... /

Consequently, if the social services are not satisfied with the treatment, it seems there is little they can do about it if the child has no good home to return to and because there are few alternatives willing to take a child with such grave problems. Katarina points to how her options depend on organisational prerequisites that lead to the situation where she will have to accept that the child remains at an unsuitable institution, sometimes without proper care and treatment, since there is no other place to put him.

However, as in the next theme, if the institutional treatment fails, then compulsory care may be interrupted and the boy may be relocated to his home, as in Matilda's case:

Matilda: But there was no good // he did not feel so good // And then we started out // to take him home.

Matilda interrupted the failed treatment, assessing it was the best option for the boy to go back home. However, this seems to be a rare event, occurring only once according to our informants' interview data, where the boy is sent back to a safe home environment. According to our informants, all but one of the boys implicated in these cases come from unsatisfactory homes, and often there are very few alternatives for them.

However, another SSO, Patricia, was satisfied with the structure that the SYC institution provided after the punishment since the child was then safely tucked away and could not leave:

Patricia: Yes, SiS is, I think, above all a structure that is ... the child or youth is where he should be.

Sandra shares Patricia's opinion, that 'the social services must stop these children. No one else will!', by putting them in secure institutions.

Our final theme illuminates other difficulties of catering to children's needs and accomplishing the best for the child. Sandra expressed that while trying to accommodate the needs of the boys, she was sometimes hindered due to internal organisational factors such as lack of support from superiors or the local political committee. Linda also expresses, in the next quote, how many other things there are that make this job difficult. Hence, in the interview we presented Linda with an interpretation, to see if we had understood her correctly.

Interviewer: If I may interpret you // the job is characterised by a lot of different things that make it, perhaps, not be the best thing for the child, but what else is there to choose from?

Linda: Yuck, how terrible! Yeah, yeah. But a little bit it's the same with the whole procurement and everything // It feels like one would like, or that one could have ... made all the judgments really thoughtfully and been able to refer to research and so on, it's just brrrrr, everything is so terrible since you have a thousand other cases ...

In essence, Linda is saying that it may be unrealistic to imagine accomplishing the best interests of the child due to the large workload and pressing time constraints.

## Conclusions

We find three core conclusions intertwined in the interviews. First, the SSOs' stated uncertainty to grasp what the best interests of the child might be in any given situation, where it is said that 'nothing is clearly defined' and that there is only a 'general idea' to abide by. What guides the assessments seem to be an individual mixture of professional experience, personal and collegial opinions, ad hoc trial and error solutions, and common sense or 'gut feeling'. There seems to be little time or space for anchoring assessments in robust theory or evidence-based knowledge (Andershed & Andershed, 2016; Andrée Löfholm et al., 2013; Ginner Hau & Smedler, 2011a; SoS, 2006). However, as seen above, 'gut feeling' may be used as a 'professional' tool by experienced SSOs in complex situations. Perhaps the critique of a weak professional knowledge base can be explained by the lack of structural support, such as a guiding national systematic implementation of adequate research knowledge. Research-based methods are, for example, sometimes contradictory (Kaunitz, 2017). Instruments such as SAVRY may be interpreted as an instrument to scrutinise specific needs of high-risk youth, but also as a means to protect society from the dangerous child (Dominelli, 2009). Yet, research-based assessment of the child's needs and best interests is, of course, crucial, as well as access to adequate resources.

Second, SSO responsibility for the children also seems to fail due to both legal and organisational conditions. The mix of care and punishment in one setting seems problematic to grasp, both to the SSOs as well as to the children (Lappi-Seppälä, 2011). For example, the confusion we have seen about what is care and what is punishment – this constitutes a potential dilemma that is embedded in the mix of laws under one roof that needs to be clarified. Organisational prerequisites limit SSO ability to carry out their professional task. For example, the need to negotiate about social care with mixed care and penal institutions where they have no control. Other problems stem from a heavy caseload. Obviously, all SSOs embrace treatment goals as a means to provide high quality care and accomplish the best for the boys. Yet five out of six of the SSOs perceive a major lack of influence over the care and treatment offered, even when detrimental to the child's needs. The boys in SYC are, above all, a unique group, and very problematic to treat successfully (Pettersson, 2010). The SSOs' negative perceptions may be due to that experience. Further, the transition from SYC to compulsory care is a unique phenomenon, different from regular criminal punishment. These boys expect to be released after their punishment. Instead, they remain at the institution regardless of whether or not they have committed new crimes, causing feelings of betrayal and anger. It seems a precarious pedagogical task, to explain why a prolongation of stay at a penal institution is considered to be in one's best interests. Especially as rarely as this happens, it cannot be easy to develop the professional experience of

handling this situation. All in all, this illuminates a major SSO dilemma. In order to accomplish the demands of the law and satisfy a child's needs, but having few alternatives, the only possibility appears to be to accept whatever available placement is offered, even when this placement does not respond to the child's needs (Stang Dahl, 1978; Storgaard, 2009).

Third, in theory, the child's needs and best interests are said to motivate the transition from punishment to compulsory care, and all the SSOs try to accomplish the best for these boys. If that is not possible, it seems, they then try to do what appears least harmful. However, the SSOs seem to be largely abandoned to their own discretion in trying to solve this complex task (Braye & Preston-Shoot, 2006). Contradictory and confusing laws (Leviner, 2014) may explain the development of a pragmatic and arbitrary approach (Lipsky, 2010). The lack of knowledge or lack of access to sufficient research (Åström et al., 2013; Ginner Hau & Smedler, 2011a), in a situation with reluctant boys and/or parents who do not participate in treatment goals, cause other dilemmas. Taken all together, it seems that keeping the child in a secure institution in the interests of protecting society becomes the real practical *raison d'être* behind this type of placement (Dominelli, 2009; Stang Dahl, 1978). Further research is required to consolidate the results.

Lastly, Sweden has recently decided to incorporate into Swedish law the CRC (proposition 2017/18:186). However, taken all together, if the child's best interests by law and the CRC is not just an empty theoretical concept, our results suggest that important changes need to be made in SSO conditions regarding their responsibility for young delinquents. This requires a manageable working situation with lighter caseloads, research-based education on different methods for both assessing and catering to a child's needs, as well as adequate resources and better suited alternatives for these children. It further requires better support to SSOs and a national system for the adopting of and integration of scientific research in their generic case work (Andershed & Andershed, 2016; Ginner Hau & Smedler, 2011b; SoS, 2006).

## Notes

1. For a detailed description and discussion of the laws – see Leviner (2014), and Lappi-Seppälä (2011).
2. If the child has committed the crime before 18 but is prosecuted after his/her 18th birthday, the sentence may also be Secure Youth Care.
3. The person may have been a child at the time of the criminal sentence but over 18 when the transition to compulsory care started.

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