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Carriers of the Troublesome Violence - The Social Services' Support for Female Victims of Domestic Violence

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In Sweden, the social services' responsibility for abused women has been reinforced and clarified on several occasions since the 1990s. At the same time, the knowledge of their work is undeveloped. This article analyses the social services' support for female victims of domestic violence with a focus on organisation, based on the concepts of specialisation and specialists. The study consists of qualitative interviews with 16 social workers in 11 municipalities. The study shows great organisational variation between the municipalities, although most have some sort of specialised units or person-bound specialisation. Colleagues, training and external supervision are factors the social workers emphasise as important in working with female victims of violence, a social problem described as both special and difficult. The different forms of organisation and specialisation influence the support the social services offer abused women.

Keywords: domestic violence; social services; crime victims; specialisation

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Introduction

Even though men's violence against women has been acknowledged as an important social and political problem, and abused women's need for support has been recognised, there is still an ongoing struggle regarding what this support should consist of and how it should be organised. Mullender and Hague (2005) discuss how abused women have not been considered to be entitled to services from the statutory sector of welfare in their own right. These women have therefore depended on civil society and volunteers instead. In Sweden, the social services' statutory responsibility for abused women has been clarified on several occasions since the early 1990s. The so-called crime victim amendment to the Social Services Act (SSA) has been described as mostly symbolic (see e.g. Ljungwald, 2011), but seen in relation to the investments made, and the new binding regulations from the National Board of Health and Welfare (SOSFS 2014:4), there is no doubt that the Swedish government considers the social services' work in this area important, but also in need of improvement. Social workers and social work have been criticised for failing to adequately address violence against women and recognise abused women as victims of domestic violence (Haeseler, 2013; von Schantz Lundgren, 2011; Münger 2009; Mullender & Hague, 2005; Pyles & Postmus, 2004; Seith, 2001).

This article examines a distinct aspect of the social services' support for female victims of domestic violence, namely how this support is organised. This aspect is important because it affects the priorities of what social workers do, how they do it, how they cooperate with other social workers, and ultimately what kind of support abused women receive. The article answers

questions about social workers' perceptions of the impact of organisation type and the extent to which they can become specialists in the field of domestic violence.

Previous research and theoretical underpinnings

The social services' support for abused women

There is a great amount of research on abused women's needs (see e.g. Clough, Draughon, Njie-Carr, Rollins & Glass, 2014; Hahn & Postmus, 2014; Gillis et al., 2006; Goodman, Bennett & Dutton, 1999; Hydén, 1999; Ekström & Lindström, fc), but little is known of how the support is handled within the social services. According to Haeseler (2013), the social services' support is not sufficiently holistic to meet the complex needs of abused women. For women with previous negative experiences of the social services, it can be difficult to ask for help (Weisz, 2005; Ekström, 2015). This is also the case for women who do not categorise themselves as clients or as part of the social services' target group (Ekström, 2015). Keeling & van Wormer (2012) argue that, from the abused women's perspective, the social services' tactics accentuate their sense of powerlessness.

The few existing studies on the Swedish social services' support for abused women show that the social services tend to focus on women with children (Hammerin, 2010; Ljungwald & Svensson, 2007). The social services' statutory responsibility for child protection can be experienced by abused women as negative, as they feel their parental abilities are questioned (Agevall, 2012). Many, though not all, women express discontent with the social services' support (Ekström & Berg, 2008; Münger, 2009; von Schantz Lundgren, 2011). Studying a gender-integrated department specialised in domestic violence, one of Mattsson's (2013) conclusions is that domestic violence tends to be invisible and neutralised; the women's vulnerability is ignored in favour of the male perpetrators. Holmberg and Bender (2003) have examined municipal politicians' attitudes, as well as those of the social services, regarding violence against women.

According to the local politicians and managers, violence is a family matter, even though the issue has been defined as a social problem in a national context. The responsibility is transferred to the social services or individual social workers, without political directives or targets. Men's violence against women becomes an untouchable issue, as Holmberg and Bender put it (2003).

In summary, research on the social services' support for female victims of domestic violence is limited. The available research indicates that organisation is important for, for example, cooperation between different departments within the social services, support for abused women, and how the violence is perceived. The impact of organisation, however, has not previously been specifically investigated.

Organisation of the social services and social problems

Values, norms and societal beliefs underlie the various positions on who should have their needs covered by the welfare state (Fraser, 1989). First and foremost, the needs must be regarded as a political matter. Then, the question of who should meet the needs has to be resolved. Fraser (ibid.) argues that when a specific need has been politically accepted and it has been made clear that the welfare state should solve it, the problem becomes depoliticised and the underlying political struggle is made invisible. In a welfare state the state plays an important role, along with the market, civil society and the family (Arts & Gelissen, 2002). Differences in welfare systems affect the range of support activities organised in the community, offering women different options when it comes to the active choice of where to seek help and support (Peter, 2006; Strand Hutchinson & Weeks, 2004). In welfare states like the Nordic countries, the government's role is central and social policy reforms are based on universal principles, compared to liberal or conservative welfare states (Esping-Andersen, 1990). The welfare sector in Sweden has had a relatively small, albeit important, voluntary sector, aiding certain kinds of vulnerable groups such as abused women, vulnerable children and homeless people (Lundström & Svedberg, 2003).

Even though the social services' responsibility for supporting female victims of domestic violence has recently been fortified, the volunteer work done by the women's shelter movement – funded by both the government and, in most municipalities, the local authorities – is regarded as important (Ekström, 2012).

Men's violence against women has evolved from a private affair into a political problem for the welfare state to handle (Enander, Holmberg & Lindgren, 2013; Mullender & Hague, 2005; Wendt Höjer, 2002). The social services, through the strengthened legislation, have been identified as key actors in this; however, they are currently undergoing a great deal of reformation. One aspect of this reformation is the long, ongoing debate between genericism and specialism, which is not unique to Sweden. Over the past two decades, the Swedish social services have changed from integrated working groups to almost exclusively specialised departments (Perlinski, Blom & Morén, 2012; Bergmark & Lundström, 2005). This means that although the SSA emphasises a holistic view on the client and social services, the social workers themselves work within specialised units of social assistance, child and youth work, alcohol and drug treatment, etc. However, specialisation is not dichotomous or unambiguous in this context. Lundgren, Blom, Morén & Perlinski (2009) present five categories that describe the forms of organisation:

1. Integrated organisations. Municipalities organise departments geographically, based on municipal or city areas, but all social workers work with all social problems.

2. Organisations with person-bound specialisation. The basis is the integrated organisation, but certain types of cases are handled by a specific person or position.

3. Organisations with problem-based specialisation. This is the most common form of organisation. Clients are handled within different units depending on the social problem. Abuse, social assistance, child welfare, etc. are separated into different departments.

4. Organisations with feature-based specialisation. In these organisations, investigation and intervention/treatment are separated.

5. Multi-specialised organisations, emanating from both problems and function.

Specialisation can therefore look different and occur to varying degrees. One explanation for the increased specialisation is the marketisation of the social services (Blom, 2006). The separation between assessments and interventions is one aspect of this. Specialisation has made it more difficult for clients to access support (Bergmark and Lundström, 2007), and they are forced to have multiple contacts with different social workers, who collaborate poorly (Lundgren et al., 2009). Morén, Blom & Perlinski (2010) have shown that many social workers in specialised organisations seek collaboration and work from a holistic perspective, despite the organisational specialisation. According to Perlinski (2010), many social workers claim that organisational specialisation leads to a loss of competence in the ability to perceive and interpret the client's whole situation. He questions whether specialised organisation allows social workers to actually specialise in a certain social problem and achieve excellence in this field, that is, become an expert. Both specialisation and the possibilities to become a specialist will be examined in this article.

Method

Empirical material

The study is based on semi-structured interviews with 16 participants, referred to in the article as social workers. Their formal titles are, for example, social secretary or counsellor. Two participants were interviewed together, and some work within the same municipality. In total, the material consists of social workers from eleven municipalities. The data collection was done in two stages. In the first stage three interviews were conducted, and these constitute a pilot study. After the first three interviews were analysed, an additional 13 social workers were interviewed. To get as rich material as possible, municipalities with varying forms of organisation of work with domestic violence were selected, e.g. those with special departments for domestic violence, those

with special support centres, and those lacking any special organisation for domestic violence. The pilot study was conducted in spring 2014, and the remaining interviews were conducted during the period October-December 2014.

Prior to the first interview, a semi-structured interview guide with open questions was developed. The guide was modified after the three pilot interviews were analysed. Examples of the questions used are: *What kind of problem is men's violence against women? What is the social services' responsibility in relation to this problem? How is the work organised? What is difficult or challenging?* The interview guide was sent out in advance of all interviews, except the first two. The interviews were digitally recorded and transcribed verbatim. The empirical data are therefore extensive and rich, and will be reported in several separate articles.

Analysis

Malterud (2001) points out that the analysis of qualitative research must be thorough, well prepared and documented. I have used a form of content analysis (Hsieh & Shannon, 2005). The first step was to read all the interviews from beginning to end. Then, the interviews were put into a program for qualitative analysis, Open Code 4:02. The interviews were then reread; this time verbatim, line by line, with statements coded continuously. The codes were developed during the work. After the first screening and coding, the procedure was repeated to verify that the codes that were developed later had not been missed in the earlier coded interviews. The codes allow the material to be sorted and read in different ways, which facilitates the analysis.

Credibility, reliability and transferability

Graneheim & Lundman (2004) highlight three concepts in relation to trustworthiness in qualitative research. *Credibility* concerns the purpose of the study, and how well the empirical

material and analysis process correspond to this purpose. As an example, choosing interview participants with different experiences increases the possibility to reveal different perspectives on the research question. The participants in this study work in different places, with different tasks and different conditions. I have chosen to highlight quotations in the article to strengthen the credibility. *Reliability* is another key concept, according to Graneheim and Lundman. They highlight the amount of data as an important aspect in discussing this. This study consists of semi-structured interviews with 16 participants, which has resulted in a fairly large amount of empirical material, seen from a qualitative perspective. At the same time, the body of material is not so large that it is impossible to survey. A study's reliability also depends on whether the data change over time, for example during long data collection periods. This is not a dilemma in this study since the data collection, processing and analysis have taken place over a period of a year. Finally, Graneheim and Lundman discuss *transferability*. Can the results be transferred to other social services in other municipalities than the 11 that are represented in the study? As Graneheim and Lundman point out, the individual researcher can discuss this, but the assessment must ultimately be made by the reader. This is facilitated through comprehensively describing who has been interviewed, the context, the interview questions, etc.

During the study, I critically examined my own interviews and revised the interview guide. To minimise the risk of confusion or misinterpretation, I critically discussed both the study design and the actual interviews with other professionals in academia. As the study is qualitative and the selection was not made to achieve representativeness, the point is not to be able to generalise from these interviews in any simple way. What is possible, however, is to make a theoretical generalisation and compare the results with previous studies, although the dilemma in this case is that there are few previous studies.

Ethical considerations

Because the study does not contain sensitive personal information, it does not fall under the requirement for approval by an ethical board; however, the the specifications of the Swedish Research Council have been followed. The social workers participated voluntarily and received information about the study's purpose. They were anonymous, and were informed that they could withdraw their participation at any time. They also received information on how the interview material would be used and reported.

Results

The results are presented and analysed in three sections. The first describes organisation, based on different aspects of the concept of specialisation and the social workers' perceptions of what impact organisation has on their work. The following section analyses the significance of specialisation for the social workers' cooperation with other professionals within the social services. The last section deals with the social workers' possibilities to become specialists.

Specialisation within the organisation

Among the 11 municipalities in this study, a variety of organisational models are represented. While 10-15 women per year seek support in the smallest municipality in the study, in one of the larger urban municipalities approximately 350 women seek assistance annually. Obviously, this creates different organisational conditions. Having few cases means that there is no basis for creating special departments or teams, or even specific full-time positions to work with domestic violence. One of the municipalities has chosen no particular specialisation for the exercise of authority in matters regarding domestic violence; investigations and decisions concerning both social assistance and other kinds of support are handled by regular social workers at the department of social assistance. However, the municipality cooperates with a number of other municipalities in a joint support centre for treatment. In other words, there is function-based

specialisation insofar as the investigation is separated from the treatment, but problem-based specialisation on the treatment side, where domestic violence is distinguished from other forms of social problems.

In the smallest rural municipality, one social worker in the department of social assistance and one in the treatment department each have 10% of their work time earmarked for working with domestic violence. This is an example of person-bound specialisation based on both function and problem. The social services in another mid-sized municipality have chosen a model whereby two social workers in the adult department, which works mostly with drug abuse, have been given the primary responsibility for domestic violence. However, they are expected to work not only with domestic violence but also with cases of drug abuse like their colleagues. The social services have an independent department of treatment, working exclusively with domestic violence. In other words, there is specialisation that is both function- and problem-based, and in terms of exercising authority, even person-based. In one of the larger Swedish cities in this study, the social services have a special domestic violence unit. Three social workers investigate and assess needs and work with advice and support, and in addition there are two therapists. This is an example of problem-based specialisation for which violence is the social problem that forms the foundation.

One of the specialised departments for domestic violence is divided into two sections. One works only with public authority, which in Sweden translates into investigating the women's need for support and makes decisions regarding assistance and other interventions, such as placement at a shelter. The other section works only with counselling. Here, problem-based specialisation on an overall level has been chosen and, within this, function-based specialisation.

At the same time, the specialisation is rarely absolute. Even if one aspires to, for example, gather the support in a special department focusing on domestic violence, part of the work is still

handled by social workers within other departments in the social services, and specialised on problem-based aspects. The clearest example of this can be found in the child welfare investigations, which in all the municipalities in this study are handled by the department of child welfare. Interventions for children who have witnessed violence are also very often handled in special departments of child intervention. Another example is social assistance, which is usually not included in the special departments for domestic violence but is instead dealt with in departments of social assistance.

When asked if it matters to abused women whether they meet a specially appointed person, one of the social workers at a specialised department emphasises the knowledge and competence regarding violence:

> I think it makes you come closer. I think that when you meet a social worker who is specialised in domestic violence and you've been informed about it and we can prove with real knowledge that we know this problem. We don't ask stupid questions and we can say things that she recognises the first time we meet. I think it makes all the difference in the world if we're to continue to talk or if you should go. I hear that very often from clients. I hear this: God what a relief that you don't have to explain. Because you may have already explained to your best friend or your mother and the man's social worker, and it's very nice not having to explain something that to yourself can be completely inexplicable.

While specialisation – at least in some cases – means that the abused woman encounters an "expert" on domestic violence, one result of the organisation within the social services is that the women are in contact with many different social workers in different departments. Another social worker, also working in a special violence unit, emphasises this fragmentation as a clear disadvantage:

> The disadvantage is absolutely that there will be a lot of contacts. It's sprawling. I think the cooperation is failing partly because they don't have that cup of coffee together or chat. And it

> gets messy for women in certain situations. If she's been in touch with us and she has young children then it's the child department, and if she has older children it's the youth department. And then if she has social assistance it's that department. And she lives in a shelter and has a contact there. It gets to be so incredibly many contacts for the individual so we're definitely a part of it. Fragmenting all this.

Several of the municipalities included in the study have support services working only with domestic violence, which can also be seen in terms of organisational specialisation. One example of this is social workers employed as counsellors at a special domestic violence unit. Women can go there anonymously and are also offered consultation meetings with lawyers, neither of which falls under the authority or requires a formal decision. However, placement at a woman's shelter requires a decision by a social worker at the authority department. Others have special support centres for domestic violence, sometimes in cooperation between several municipalities, where women can go for various forms of support without approval or decisions. In one of the municipalities with a special centre for domestic violence, there is even a shelter women can turn to anonymously for protection without authority decisions. The possibility to be anonymous is emphasised as an important argument for support services without prior needs assessment or decisions from the authority. Among the arguments against open access to support that are mentioned by the social workers is that this makes it more difficult for them to show what they do, as they do not keep records. Another argument cited for limiting open access to support services is that contacts are likely to go on year after year, whereas the monitoring and evaluation of more formalised interventions will create more clarity. Protecting legal rights is another argument, asserted by a social worker who works in a special domestic violence unit where all support requires a formal investigation and decision, which she believes is good:

> It's authority decisions for support, both counselling and shelters and the like, and then you can appeal a negative decision. It's a part of protecting your legal rights. We've legally decided that these crime victims are entitled to this support, and we must see to it that they are entitled

to support everywhere and not just in certain places or on the basis that they know someone
who can help.

In some cases, the social workers actually do a variety of things that cannot be said to be part of the formal investigation, but are not offered as support after a formal decision. This can include everything from counselling to practical advice or accompanying the woman to meetings with other agencies, and so on. It is sometimes classified as a form of support called, e.g., "Advice and Support" or "Social Worker Contact" – but not always. In other words, what actually does or does not constitute formal support is somewhat blurry.

Specialisation and cooperation

No matter the form of organisation or the degree of specialisation the local social services have chosen, the social workers cooperate with others, both within and outside the social services. One interpretation of the results of this study is that the work can be based on one of two principles: it can be either integrated or parallel. In social services characterised by the integrated approach, social workers from different departments might, for example, meet the abused woman together at the first meeting. In the interviews social workers use descriptions like co-investigating, or describe extensive collaboration meetings. In municipalities where the work is parallel – like in silos – the social workers emphasise confidentiality between departments. They have little insight into other departments' routines, and cooperation regarding individual clients rarely occurs.

If a woman who has children turns to a social worker at, for example, a drug abuse department or a specialised domestic violence department, they must notify the child welfare department. As women may perceive this as threatening or intimidating, some social workers try to motivate the woman to seek support for her children. This gives her more positive input in relation to the child protection investigation that will be conducted, says one of the social workers. Clarity, e.g.

emphasising that they always submit a notification regarding children, is a strategy that is mentioned. Explaining that the social services are not trying to take a woman's children away is another strategy used by the social workers. The child welfare social workers' attitudes towards women subjected to violence are not always unproblematic. Lack of knowledge about violence is mentioned as an explanation for this. Another explanation is that it may be difficult for social workers in child welfare to relate to both the mother's and the father's stories. This carries the risk that the violence will "disappear", which, from the woman's perspective, can be perceived as strange or offensive:

> Somewhere along the way the violence disappears when we've notified the child welfare department. It's filtered so nicely and suddenly it's about parents who disagree. And that's partly because we're so divided.

Cooperation with the social workers at departments of social assistance is described as somewhat more difficult than with the child welfare departments. When the social workers feel that the woman needs to stay at a shelter, or should receive social assistance or help moving out of a shelter, it sometimes happens that those at the social assistance departments make a different assessment. The interviewees describe having "fought themselves bloody", and say they often have to "entangle" themselves quite a bit. One of the social workers in a special violence unit says:

> Food allowance and what's urgent, most often it dissolves. The hassle starts when, for example, you may not need protection anymore and you should move to another temporary accommodation. Or if you need to apply for the extra things we think you need based on the fact that you've left your house and home with nothing, and that's where it can get tangled.

The social workers have different answers as to why things happen this way. Lack of knowledge

about violence is a possible explanation mentioned, as are stricter guidelines and a heavy workload for social workers in social assistance. Belonging to different departments and working in different places is also a recurring explanation. Some have experiences from previous organisations, where a co-location or co-organisation had meant fewer conflicts and smoother cooperation. The social worker in the quote below describes how the new organisation with special social workers for social assistance within the domestic violence unit facilitates things:

> It's so that we can get away from it taking a long time to receive social assistance. Partly that you shouldn't have to wait so long, and partly because there are women who come here who've run away from home. Or who've been placed at a shelter and perhaps might have an income and who might have money, but they've left everything at home. And they have to be able to buy food and all that. So it's much easier if we can pay the money here. We can take a shortcut, because there are very strict rules for getting social assistance. We can circumvent the rules in some cases.

One of the social workers in a special domestic violence unit says that when the department was originally founded, the idea was that the local social services would take, and share, the responsibility for domestic violence. The violence was to be "jointly carried", and the domestic violence unit would be one of several "legs of the table". However, the social worker's experience is that they have become an alibi for the others to escape responsibility:

> When we started, it was said that we would carry the violence together, and that our department was one of the legs of the table, of this table top that is violence. That hasn't happened. Instead, it gets passed to us. "This is violence. Your table."

In this case, the specialisation in the form of a special department has rather meant that they are the sole carrier of the violence. This description appears in several interviews: colleagues distancing themselves from issues of violence because it is perceived as unpleasant or difficult,

which also contributes to the responsibility for violence having to be carried by individual social workers rather than the whole of the social services. In several of the interviews, the social workers talk about difficulties in relation to colleagues within the social services. The quote below, from a social worker at a special violence unit, illustrates this:

> It's no secret that social workers have very different knowledge about violence. Just like in the rest of society. It reflects quite a lot, and also that there are norms concerning this issue. It's so incredibly personal for a lot of people. Even if you yourself haven't been exposed. But people generally have a lot of opinions about men's violence against women. More than what you have on so many other issues.

In a unit with appointed social workers responsible for cases of domestic violence, a social worker believes her less experienced colleagues would be "mortified" if they had to deal with a domestic violence case. Another social worker, who works at a drug abuse unit, describes how her colleagues relate to violence. It is a "very sensitive issue" and her colleagues are afraid, she says. Social workers express the same kind of "untouchability" in their colleagues that Holmberg & Bender (2003) find among local politicians and managers.

In one of the larger cities in the study, the social services have offered training for all personnel regarding domestic violence, irrespective of their position within the social services. This has been good and effective, according to the interviewed social worker; a dilemma, however, is the high degree of staff mobility, which makes it difficult to maintain the knowledge.

In municipalities with a special open access support centre, sometimes in cooperation between several local social services, in some cases the social workers have insufficient insight into what the centre actually offers. They refer women there, but do not know if they actually go or what support they receive. The social workers describe this as a dilemma, and express a desire for

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better cooperation. Women risk falling through the cracks, and if they do not go to the support centre they are faced with social services with its one-sided focus on formal investigation and needs assessment.

Specialists in violence

The municipalities in the study differ in terms of size and population composition. The social workers are also a heterogeneous group, although there are aspects that unite them. All of them are women, and most are trained social workers. Experience from other kinds of work within the social services is common, but varies. Some have actively sought to work with domestic violence, and started working in their current office for this particular position. Others have expressed interest when the question was raised as to whether anyone in the department would like to have responsibility for domestic violence or participate in a collaboration committee. In other words, the social workers, to varying degrees, are recruited based on their specific expertise. Their possibility to develop into specialists is affected by several factors.

One factor affecting the social workers' working conditions, and ultimately whether a specific social problem gains the status and legitimacy that makes it relevant to be a specialist, is the financial resources that managers and politicians choose to allocate. Most social workers in the study describe a situation in which it is possible to, for example, get funding to place women in protected shelters. There seem to be tougher restrictions and demands for saving money in other departments. Some of the interviewees compare themselves to social workers in child welfare departments, and say that their own work situation is at least not that bad. One interviewee describes how her own domestic violence unit has been given a larger budget and can employ more social workers, while the child welfare department has been forced to cut back. Most perceive that there is a political will to invest in work with domestic violence, although they say

they could use more financial resources. According to the social workers, cases of domestic violence take a longer time than other types of cases. They could do more if there were more social workers. Lack of time can also make it difficult to discuss issues with colleagues. Many more cases will likely arise in the future since domestic violence is receiving more public attention, and as a result of the new guidelines from the National Board of Health and Welfare, according to some of the social workers. They might be forced to limit their support contacts and motivational work if their workload increases. Spreading information and doing preventive social work are examples of what they would do in addition to client work if they had more time.

Being able to increase your competence is another prerequisite for becoming a specialist. The amount of training the social workers have received during their current position varies. Some have virtually no training at all, besides what they received to become a social worker; after being hired, they have only had briefer opportunities, such as one-day conferences arranged by the County Administrative Board or the National Board of Health. Others have earned a college degree in domestic violence.

External supervision[2] is another factor that affects the degree to which the individual social worker is given the tools to both do their work and develop their skills. Access to the external supervision is uneven. In some of the specialised departments for domestic violence the social workers describe regular and qualified supervision, with specialisation in domestic violence. It is described as important and worthwhile:

> External supervision is very important and you cannot really get enough guidance, I feel. It's
> our saviour. It's quite difficult to find a consultant who also has knowledge about violence.

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[2] External supervision (In Swedish *handledning*) refers to regular group supervision between social workers within a work group and an external consultant. These consultants work with difficult cases, but also address the mental process the social workers go through. The consultant is normally an experienced social worker or a therapist, who has undergone special training to qualify as a supervisor. See also Bradley and Höjer (2009).

Thus, we've looked around and we've had some variety. They know treatment, they know children, they know about vulnerable people, but not the actual violence. Then it hasn't given us quite what we need…we probably mostly need knowledge about the violence because we're so different in that. There are so few of us, and someone has to understand it. Otherwise, after all, we just…just as alone as you can feel – that's how you can feel then.

In one municipality the social workers in the counsellors' section of the domestic violence unit have not had external supervision for a year, but the social worker in the interview says this should hopefully resolve itself in the near future. They had been dissatisfied with the previous consultant, and the process of finding a new one had been delayed. The lack of external supervision has negative consequences, she says:

The consequence is that you don't take the time to reflect on how it affects you whatsoever. Not so much that you go home and cannot let it go and lie there sleepless, but more that you forget to reflect on what it's actually doing to you, working with violence. After all, you are your own tool. You don't have any other work tools than yourself. It becomes very much me and my client, instead of me and my support from the organisation and my client. Absolutely. There will be more pressure on me to fix it, I have to manage. It gets a little lonelier on the job. That's what I think. We do have meetings, colleagues and I, but it's not so…it's not always the same thing.

Those who do not work in special departments dealing with domestic violence have access to the regular external supervision in their department, that is, with colleagues in the social assistance department or the drug abuse unit. However, one social worker in a drug abuse unit describes that she and her colleague are not allowed to talk about their domestic violence cases in the sessions on the grounds that it is "confidential information". She believes the lack of external supervision means that they do not get the support they need to conduct their work. "But we'll solve it in a good way. Of course there are days when everything's just yuck", she says.

The question is whether the social workers are allowed to become specialists or experts, which is not always the case in the social services, as Perlinski (2010) points out. It is only in some of the cases in this study that the interviewed social workers perceive that they have access to sufficient discretion and proper tools. Some of them have received relevant training, and attend regular external supervision. They have a clear idea of how work should be pursued and developed. Some describe that they are listened to, even if they have had to fight for this, while others mention that they have the discretion to take necessary decisions regarding their clients. But without training, external supervsion or colleagues, and with no discretion to design individualised interventions based on one's professional competence, it is certainly much more difficult.

Conclusion

In this article, social workers' descriptions of the organisation's relevance for their work supporting abused women were in focus, and were analysed from different aspects of specialisation. In Sweden today, the social services are almost exclusively organised in specialised departments (Perlinski, Blom & Morén, 2012; Bergmark & Lundström, 2005). Although violence against women is neither a new phenomenon in Sweden (Wendt Höjer, 2002) nor a problem the social services have not worked with before (cf. Ekström, 2012), recent legal reinforcements and policy debates have contributed to identifying abused women as a distinct and prioritised client group for them. This study shows that domestic violence and abused women comprise a social problem, and a client group that is not entirely easy to incorporate into existing organisational structures. The needs among abused women vary greatly, and many of these needs are included in other categories of social problems, such as issues related to poverty and vulnerable children.

Social workers highlight both advantages and disadvantages of organising the violence separately,

regardless of whether it involves function- or problem-based specialisation (or both). An example of a benefit that emerged in this study is that the separation of support for the abused woman and the social services' child welfare investigations reduced the risk of a one-sided child focus (cf. Hammerin, 2010). A clear disadvantage of specialisation entailing that efforts are separated from the formal authority and assessment (cf. Blom, 2006) is that when cooperation between departments is lacking or works poorly, the social workers responsible for the formal investigation and decisions have no knowledge of what the women can be offered, and experience uncertainty regarding what support they actually receive. Conversely, a social worker at a support centre can experience a lack of expertise or understanding of violence among the decision-makers. In some cases, flawed and conflicted cooperation between departments within the social services indicates a lack of consensus on issues regarding domestic violence.

The SSA emphasises a holistic view on the client, and Perlinski (2010) believes that specialisation in itself contributes to social workers losing the holistic perspective. The social workers' descriptions in this study confirm this, but only in some cases. Specialisation could mean a fragmentation and a need for abused women to have many contacts. There are also counter-images to this, with well developed cooperation and integrated approaches between different parts of the social services. However, competence, consensus and time are required across the organisation to achieve this. The issue of genericism and specialism in the field of support for abused women needs to be further investigated. An important aspect is what kind of competence and support social workers need in order to be able to provide adequate support for abused women.

Holmberg & Bender (2003) and Mattson (2013) have discussed how special the issue of domestic violence is perceived to be. In this study as well, domestic violence appears as something difficult. Social workers are treated like "disorderly feminists", according to some of them. Discussing their

cases at the external supervision sessions is prohibited, says another. They have to fight hard for their clients' right to get money for food, or placement at a suitable women's shelter. Violence is troublesome; thus social workers who take their work seriously are at risk of also being troublesome. In such a situation, it is not easy to carry this troublesome violence alone. The importance of training and competent external supervision cannot be emphasised strongly enough, and working closely with colleagues will be a key aspect not only in order to cope, but also for the possibility to develop real expertise.

The social services' organisation of their work has implications regarding what abused women face. The organisation affects issues such as the social workers' external supervsion and the fragmentation of responsibility for the different areas of support that abused women need. A social services organisation that focuses on investigations, formalities and authority becomes something qualitatively different than one where all support is located within the same department, or where cooperation works well between departments, discretion is high and the distance between decision and support is short. Seen from the abused woman's perspective, this can be crucial for both whether she chooses to seek support from the social services and what support she will receive.

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