



AVEC

The IDEAL model of child centred
multiagency coordination

Experiences of development and implementation

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Contents

- Introduction 4
 - Points of departure5
 - The report.....5
- Critical issues..... 6
 - At placement in a shelter7
 - During placement in a shelter 8
 - When placement ends10
 - Post-placement services10
 - Other services..... 11
- Developing a model14
 - Designing the model.....14
 - Trying the model out15
- The IDEAL model of child centred cooperation 17
 - In (I): When coming into the shelter 17
 - During (D): During placement.....19
 - Exit (E): Planning for leaving and leaving the shelter.....20
 - After (A): The transition to life outside.....22
 - Long term (L): Securing a situation aiding the child’s recovery23
- Conclusions25
- References 26

Introduction

Every year, thousands of children stay at least one night at women's shelters in Sweden with their guardian. At shelters the violence stops, but children's rights are at stake. To be exposed to violence against a parent or be subjected to violence directly can lead to trauma later in life. A safe environment with healthy relationships with adults that understand the consequences of abuse may be a support for the child's recovery. However, children may have additional needs of support while staying at the shelter or there might be gaps in services when children leave the shelter.

During 2021-2022 five organizations have been working together in the project AVEC – After the violence to improve the situation for children in shelters: Save the Children Sweden, Children's Welfare Foundation Sweden, the Gothenburg Church City Mission Foundation, Marie Cederschiöld University (former Ersta Sköndal Bräcke University College) and Barnafriid -National Centre on Violence Against Children at Linköping University. The project was based on the Convention on the Rights of the Child, the EU Charter, Directive 2019/29/EU and the Istanbul Convention. The overall objective of the AVEC project was the following: With a child rights approach, increase and improve protection and support for children at women's shelters who are victims of domestic violence; increase the children's mental well-being during and after their stay at the shelter.

Through the AVEC project a working model called the "Puzzle" has been developed. The Puzzle consists of five puzzle pieces: 1) trauma informed care, 2) participation and information, 3) play and activity, 4) child centred cooperation, and 5) violence informed case management. The current report concerns the piece "child centred cooperation" (4). The report describes the work to design, pilot and evaluate model for multi-agency and multi-disciplinary coordination involving women's shelters and social services, based on a child rights perspective, current research, and existing legislation.

The work resulted in the IDEAL model for child centred cooperation which is outlined in the second part of this report. The model concerns different stages of the placement process, specifically aims and activities when children are coming into the shelter (I), during placement (D), when planning for and exiting the shelter (E), at the transition to life after the shelter stay (A), and finally activities securing a more long-term situation that aids children's recovery (L). The model is focused upon cooperation between statutory services, that is, agencies making decisions on placements of adults or children at a women's shelter and agencies responsible for child welfare investigations, as well as agencies offering support to victims of violence, and women's shelters and similar.

Points of departure

The AVEC project is based on a child's rights perspective and draws on previous knowledge on violence in close relationships. In terms of the puzzle piece "child centred cooperation" these points of departure have been interpreted as warranting a holistic view on children in shelters. Children in shelters have a right to both protection, provision and participation in all matters that concern them. The right to protection from further experiences of violence is the very point of the stay in a shelter. In terms of provision, research documents the detrimental effects of exposure to violence for children's health and well-being both short and long term (Eriksson et al. 2022). Thus, support and other interventions may be warranted in addition to the protection provided by the stay in the shelter. However, research also shows that the situation and consequences of exposure to violence for the individual child will vary, and careful consideration of the needs of the individual child is necessary for any agency intervening in the family. Furthermore, children are not 'passive' victims of situations with violence; instead, they may attempt to intervene and manage these situations. They also have their own views and interpretations of the violence and events preceding and following upon situations with violence.

In addition to this knowledge base from research, the research team has been drawing on both developmental psychology and psychopathology and childhood sociology respectively as a theoretical framework. The work to develop a model for multi-agency cooperation has thus approached children in shelters as both as both "developing" and as "social actors" (see Eriksson 2017), that is, as subjects in their own lives with their own ways of creating meaning and acting to tackle their life situation. From this double approach to children follows, among other things, that children's agency and participation is a central concern. Furthermore, that also services here-and-now need to take possible long terms consequences of violence into account, to reduce risk for long-term negative effects of previous experiences of violence.

The report

The report consists of two parts. Firstly, practitioner experiences and views on issues and challenges in cooperation regarding children in shelters are summarized. These experiences and views formed the starting point for the development work, and the basis for the aims and activities of the model for collaboration developed in the project. In the second part of the report, the different components of the IDEAL model for collaboration are outlined, as well as experiences from the work to develop this model.

Critical issues

The first step of the work to develop a model for multi-agency and multi-disciplinary cooperation was to map the experiences of cooperation regarding children in shelters among relevant groups of practitioners in the local authority involved in the development work. The mapping was carried out through interviews as well as a questionnaire on views on cooperation.

In total, 15 staff members from five agencies relevant to the specific local context were interviewed. Apart from a women's shelter these agencies included statutory social services working with violence in close relationships among adults. Under the current Swedish legislation this is the kind of agency formally responsible for assessment of needs and the provision of public support to adult crime victims, including placement of adult victims of violence in a shelter in needed. Staff from statutory child welfare services were interviewed, as this agency is responsible for child protection investigations when children are exposed to intimate partner violence, including when children are accompanying a parent (adult victim) placed in a shelter. In the local context investigated, support and treatment interventions in the context of violence are offered to children and families by two different public agencies: one specialized social services agency aimed at support and treatment in relation to violence in close relationships, and one public agency offering general social services/support and treatment to children and families. Staff from both of these agencies were interviewed.

While the women's shelter included in the development work is run as a public institution, as the other agencies involved, it had a considerably broader area of uptake than the other agencies. The specialized support and treatment services also had a broad area of uptake, only partly overlapping the area of the statutory services (adults/children) and the general family support and treatment services.

The questionnaire on experiences of cooperation regarding children in women's shelters consisted of nine questions where respondents were asked to assess key aspects of cooperation (Danermark et al. 2013). The overall assessment of cooperation by the respondents was that it at present is somewhere between "bad" or "neither good nor bad". In summary, the answers clearly indicated that there was room for improvement, especially seen from the women's shelter staff point of view (see Eriksson & Jonsson, 2021). The interviews indicated in more detail what the difficulties can be and pointed to critical issues in cooperation at all stages of the placement process, that is, at the point of placing a parent with children at a shelter, during the children's stay at the shelter, at the point of leaving the shelter and in the period after leaving. The issues brought to the fore are summarized below.

At placement in a shelter

Due to the legislation in force during the project period, as well as the organization of the social services in the current municipality/local authority, formally it is the adult victim of violence that is placed at a shelter, and the children are “only” accompanying their parent. Under this legislation, the statutory social services only make a formal decision regarding the adult, while the decision regarding the children and their stay at the shelter rests with the parent as a custodian of the children. Furthermore, as the statutory social services in this local authority is divided into sections dealing with “adults” and “child welfare” respectively, the case workers making the decision regarding the adult are not mandated to also make decisions regarding the children. It is of course possible for child welfare services to make decisions regarding placement of children. However, they tend not to do so if the parent is placed in a shelter by another part of the social services.

As there is no formal decision made about the children, there is no formal plan made for the placement either, and no follow up regarding the placement itself from the child welfare services. This way of interpreting the law and established practice is not unique for the local authority involved in the project. On the contrary, it is quite typical for local authorities in Sweden and has been criticized in a public inquiry regarding children in shelters (SOU 2017:112). Amendments to the law were suggested several years prior to the AVEC project, to make it mandatory for the social services to make formal decisions regarding children in shelters. However, during the project period, no legal change was initiated by the government.

Due to this situation, cooperation between the different parts of the statutory social services (adult and child welfare services respectively) becomes a key issue in improving the situation when children are accompanying their parent – typically their mother- placed at a shelter. In the interviews, the shelter staff talked about recurring problems in communication and collaboration between these sections of statutory services, and much room for improvement. The interviewees from the statutory services in the local authority included in the project similarly described some problems. However, they also brought some more positive experiences to the fore, especially in “emergency cases” where placement is not planned and needs to be decided upon immediately, for example when a mother turns up at the social services reception desk with her children and asks for help, or a case is referred to the social services from the police. In emergency situations, case workers from both statutory sections tend to get involved, communicate with each other and get a similar picture of the case, according to the interviewees. In cases where they have both been involved from the start, cooperation in the continued process tends to be easier, interviewees from both sections agreed. The statutory services interviewees also pointed to some pre-existing local written routines for

cooperation in cases where children are accompanying their parent to a shelter, that could be part of a base to a more comprehensive model developed through the ACEV project.

During placement in a shelter

The overall picture that emerged through the interviews with staff from all agencies was that although they have some positive experiences of cooperation at the placement stage, cooperation tends to “fade out”, decrease or stop further along in the placement process.

From the shelter point of view, there are several issues that need to be addressed to improve the situation. A key issue is that although the national guidance in force at the time of the project mandated the statutory child welfare services to open an investigation regarding children subjected to violence (including in the form of witnessing violence to a parent) and the child welfare services generally tend to do so, the way the investigation is carried out can be problematic. One recurring problem is that the statutory sections do not talk to each other and, for example, the “child people” asks the shelter staff about what the “adult people” plan to do, how long the placement will be and so forth, instead of staff from the statutory sections talking with each other, according to the shelter interviewees.

The staff from the statutory services tended, to some extent, to paint a similar picture during the interviews, adding that even though they would like to cooperate more and, for example, make investigation visit to the shelter jointly and interview the mother and the children at the same time, it is often not possible to synchronize time schedules due to their case load and working conditions.

A related issue was that sometimes it takes time before the case is referred to the child welfare service and a case worker is assigned the case, according to the shelter staff. There seems to be an issue here with the practices of the referral section of the statutory services that tends to be the first point of contact and the first ones to be involved in the case. While the case is referred to the adult section quickly (the one that decides regarding placement in a shelter), the case does not seem to be referred to the child welfare services with the same speed, according to the interviewees. Thus, it becomes harder to achieve a joint handling of the case in the early stages of the investigation.

According to interviewees from both the shelter and the adult statutory services, another problem is that the child welfare investigation may be shut down fairly quickly when the mother and children end up in a shelter, with the motivation that the mother has protected her children by seeking help at a shelter, her capacity for care is good-enough and no further action is needed from the social services. As described by the interviewees from the other agencies, the consequence of such practice by child

welfare services might be that the child's situation and needs of support outside of the shelter context, including needs when moving out, are not investigated nor assessed properly.

The same can be said about the parent's capacity for care, as there can be a big difference between caring for children in safety and with staff around all hours, compared to caring for children by yourself in some insecure housing situation that abused mothers with children often end up in after leaving the shelter. Furthermore, the children's needs may change at the point of moving out, however, if a case is closed from the child welfare services point of view they do not get involved in planning for "aftercare" and support after leaving the shelter.

A third issue raised by the shelter staff was support during the stay at the shelter. The shelter involved in the project offers support to both mothers and children during their stay, as many shelters in Sweden do at present. However, there are limits to how much work this shelter can do in relation to parenting issues, and in some cases more support is needed, the staff said. According to the shelter staff, statutory services are reluctant to make decisions regarding further interventions while one intervention (the placement in a shelter) is ongoing. The staff from both the child welfare services and support services claimed that it would be possible to get further support to a parent while the family is staying in a shelter.

These different views on the possibilities to get additional services during the shelter stay coming across through the interviews, may be a result of a lack of clarity about who has the overall responsibility for the child's situation discussed above: if an abused mother needs extra support during the shelter stay, is it an issue for the adult services (focusing on her as an adult individual/abused partner) or the child welfare services (focusing on her as a parent)?

A fourth issue is children's access to school. Even though the shelter in question offers school at the shelter for a few hours a day, this service can be regarded as at a "minimal level". Also, the issue of school comes across as a somewhat conflicted issue in the relationship between the statutory sections, at least as described by the adult services. As the adult services staff are not allowed by local guidance and legal advice to make any formal decisions or write any supporting documents regarding children, all issues related to school must be handled by the child welfare services. However, there seems to be different views on how much the child and youth section does get involved in securing access to school (including preschool), for example, by writing supporting documents to enable school placement in a different municipality in cases where the mother and children need to move for safety reasons.

The issue of school also comes across as at least partly linked to different approaches to the perpetrator of violence, when he (as it is in most cases) is the children's father. Especially staff from

the adult section and shelter interviewees talked about the child welfare services sometimes being too deferential in relation to the perpetrator, while the child welfare services' interviewees talked about other sections only involved with the victim/mother not always recognizing the role of the child welfare services as responsible for the whole of the child's situation, including the relationship with the other – violent - parent.

When placement ends

A general tendency of decreasing cooperation along the placement process was described, including cooperation often lacking in relation to the ending of the stay in a shelter.

A significant problem brought to the fore by the shelter staff is the practice by the adult statutory services to make decisions in placement only for one week at a time, and often making decisions at the last minute, leaving mothers and children in insecurity of where they should stay until late Friday afternoon, when their placement ends on a Friday, for example. This creates a lot of anxiety and makes it difficult to plan and prepare children for leaving.

In addition, only making decisions for one week at a time makes it harder to offer services during the shelter stay, as it is hard to start a process if it is unclear how long the child will stay. Consequently, also children staying for a long time in a shelter may end up being left without the support interventions they need, due to short-time decisions. In addition, decisions about short periods of stay only, last minute decisions and lack of cooperation between the statutory services mean that it becomes harder for the child welfare services to plan and prepare for services for children when leaving the shelter.

Post-placement services

A consequence of a lack of cooperation and often hasty or non-planned exit processes from the shelter is insufficient planning for post-placement services, especially for the children. Staff from all agencies seemed to agree that there is a need for some kind of planning conference or similar in relation to post-placement services.

One idea brought to the fore in the interviews was to use a pre-existing measure, a "coordinated individual plan" (Sw. samordnad individuell plan, SIP), to enhance cooperation. However, some interviewees also talked about negative experiences of such a measure as everything written into a SIP-plan is to be considered a positive decision by a statutory service – which a services user the becomes entitled to - and agencies may therefore be reluctant to put anything in writing into the plan. Moreover, SIP-meetings can turn into "everyone wanting to do as little as possible" and are not always experienced as positive by service users, according to the interviewees. In addition, a SIP normally

concerns the adult, which means that the situation of the children would not necessarily be at the centre of attention in a SIP-meeting. Therefore, the collaborative model of “Barnahus”, the Swedish version of a Child Advocacy Centre (see Johansson et al. 2017) would perhaps be a better option to look at for inspiration, some argued.

There was general agreement among the interviewees that there is a big gap in services when mothers and children leave the shelter. Some had other experiences when the family was previously known to the social services and already had support interventions ongoing, prior to the shelter placement. In such cases, the support interventions could continue during the placement and/or be continued immediately after the end of a placement. In other cases, it could take a long time before any support was put in place.

One reason for the gap in terms of time could be waiting lists at the social services specialized in violence. Another reason could be that the child welfare investigation had been closed before the mother and children would leave the shelter, and a new case would have to be opened before services could be decided upon by the statutory child welfare services. A third reason could be difficulties in finding appropriate services. Especially staff from the statutory child welfare services talked about problems in transferring cases if they, for safety reasons, need to be offered by another municipality. If the staff can make a referral to their “own” support services offered by the municipality, the situation is a bit easier, according to the interviewees. If the family cannot stay in the area but need to move elsewhere, it can take a long time to get another local authority to accept them as service users, the interviewees claimed.

One of the interviewees described more positive experiences of the processes of exiting a shelter. Referring to another way of organizing the violence work than the one of the current social services, statutory services had special pedagogues employed who would try to make daily home visits during a family’s first week out of the shelter, to help both with practical matters and the process of transition from the shelter to a life outside. The pedagogues’ work would include helping children making sense of the move out of the shelter and helping the mother and children developing a shared narrative about the move to a new home.

Other services

In addition to the agencies represented in development project, the interviews made it clear that preferably other parts of the social services would also be included in a model for cooperation around children staying in shelters. This need of cooperation is partly created by the high level of specialization and internal division between different functions within the organization, typical for contemporary social services in Sweden (Stranz et al. 2016). The high level of specialization opens up

for professional boundary work (Gieryn 1983; Liljegren, 2008) that can be seen not just in Sweden but in policy and practice regarding intimate partner violence also in other contexts (e.g. Hester 2011).

One of the key agencies in a more developed model for multi-agency cooperation that the interviewees talked about is the referral sections of the statutory adult and/or welfare services, as this agency is the one who tends to be the first one in contact with the family and may be involved at the point of placement at a shelter. In one of the interviews, the interview persons described a case that “remained” at the referral section for the whole of the children’s stay at the shelter and was never transferred to the statutory child welfare services responsible for child welfare investigations. Thus, a child welfare investigation was never performed, as the child’s case was “stuck” at the referral stage.

Another agency is any section concerned with financial aid, as this part of social services in Sweden plays a key role in relation to post-placement housing and all matters that concern economic resources after leaving the shelter.

Thirdly, the “family law” section should be included. This part of the social services is performing investigations commissioned by the district court in legal disputes regarding child custody, contact or residence, or offer “cooperation talks” (a form of mediation) and aid formal agreements between parents who want to settle conflicts regarding children. A family law dispute is often ongoing parallel to any post-placement services, according to the interviewees. As has been documented in other contexts (e.g. the United Kingdom, see Hester 2011), family law social work tends to be separated organizationally from child welfare work, and this division may result in contradictory practices, and also creates a need for models and structures enabling cooperation.

During the interviews, referral pathways to specialized services were also discussed. In addition to the services specialized in violence within the social services, relevant specialized services can be found within the health system. In the Swedish system, specialized services with competence in child and youth psychiatry, performing assessment of, for example, possible trauma symptoms and offering treatment, belongs to the health system. Thus, the child and youth psychiatry services are organized even more separately from the other agencies involved with children who experience violence, as the health system is regional (21 regions in the whole of Sweden) while social services are municipal (290 municipalities in the whole of Sweden), and the regions and municipalities are run separately from each other politically, taxation and budgets are separate, and so forth.

A recurring theme in the interviews was that child and youth psychiatry services are hard to access in the case of children in shelters. There are several reasons for this, as described by the interviewees. Firstly, the child and youth psychiatry does not offer treatment if the situation around the child is deemed to be too unstable, which tends to be the case when children are staying at a shelter.

Secondly, the interviewees described the child and youth psychiatry as reluctant to carry out treatment without consent from both custodians. This is the case even when the social services board has formally decided that the child should be offered treatment also without consent from one of the custodians. Thirdly, there tend to be long waiting lists, and the child and youth psychiatry is generally hard to get in touch with.

As regards getting consultation from the child and youth psychiatry about children the shelter staff feel concerned about, the staff from the shelter participating in the project described how they have stopped trying to use the public health system to get advice and support to children staying at the shelter. Instead, they tend to turn to the NGO sector instead, to get access to relevant consultation when needed. In summary, in the Swedish context, including health care services in any model of referral pathways turned out to require development work to an extent that was not possible to manage within the constraints set by the project.

Developing a model

The next step was to design, pilot and evaluate model for multi-agency and multi-disciplinary coordination.

Designing the model

Representatives from four out of the five agencies formed a work group together with the researchers. The work group represented the women's shelter, statutory services for adults and child welfare services respectively, and the general services offering support to children and families. Drawing on the discussions in the work group, and also the situation of the agencies involved in the work, it was decided that the work would focus on the four kinds of agencies most likely to get involved in the case at the time of placement of the parent and child in a shelter. Although important to consider, support or treatment interventions provided by the specialized social services, or the health care system, are rarely offered during a child's time in a shelter. This is partly due to queues and waiting lists, and children often moving out from the shelter before any agencies offering specialized interventions get involved in the case. These agencies may also be reluctant to offer services during the shelter stay, as they perceive the child's situation to be too unstable. Together with the researchers, the representative from the specialized social services working with violence decided to opt out of the work group. The reason was that specialized services are rarely offered to children while the placement is still ongoing. Instead, support can be offered by the general services, which forms a part of the same local authority as the statutory services and is thus more closely connected to the statutory services deciding on support measures.

In summary, it was decided that the development work would focus on the agency most likely to be involved in cooperation in everyday professional practice beyond the project. As regards other agencies, it was decided that it was not practically possible to have these agencies involved in the development work either, due to the time constraints set by the project period. Consequently, the resulting model concerns cooperation between women's shelters, statutory services formally responsible for placement of crime victims in a shelter (adult services) and for decisions regarding children (child welfare services), and general social services offering support to children and families.

The critical issues at different stages of the placement process identified at the first step in formed the point of departure for the development work in step two. Drawing on these issues, the work group met a couple of times to outline a suggested model for cooperation. A pre-existing local guidance document on cooperation between the statutory services was also disseminated in the whole group

and some elements from this document were incorporated into the draft model (e.g. the recommended points of contact between adult/child case workers).

Trying the model out

After drafting the model, work to try it out in practice started in the early Autumn 2021. The workgroup and researchers met on a regular basis, approximately once a month, to discuss how the work was progressing. One particular case – called “Little A” here – was used as a pilot case to try out and modify each part of the model. “Little A” was followed by the work-group and researchers for a number of months, all the way through the process from coming into the shelter to moving out and getting settled in new accommodation. The case of “Little A” turned out to help the group to pay attention to many different aspects of a model of cooperation, as this child and mother both stayed for quite a long time in the shelter (compared to many other cases) and also had a need of other services in addition to the stay in the shelter. The case workers from the statutory services involved in the case of “Little A” were not part of the work group developing the model, however the case workers were included in the group when the case of “Little A” was discussed.

Parallel to, and after the case of “Little A”, the social services participating in the project cooperated in other cases, involving other case workers from these agencies, some of which were members of the work group. In these later cases, the case workers were not included in the work group. Instead, the work-group members kept in touch with their colleagues and gathered information about how the cooperation was going.

When developing and trying the model out, the work-group and researchers encountered some challenges. One challenge was the number of cases during the project period involving all the agencies. In the region where the project was carried out, both the number of placements in women’s shelters, and the time of stay, had decreased in the period preceding the project period (Eriksson et al. 2021). When the development work was carried out, the Covid-19 pandemic was still ongoing and during the pandemic, the number of children coming to the shelter in the project decreased further, reducing the number of possible cases to use to try a model for cooperation out in practice. In addition, the statutory child welfare services in the local authority involved in the project is a large unit, with approximately 45 case workers organized into five different investigation teams. The team leader for one of these teams was a member of the work group, and tried to channel new cases of placement in the women’s shelter participating in the project into this particular team. Even so, the logistics of coordinating cases turned out to be quite difficult in practice. In addition, in some cases coming into this particular local authority the women ended up in another shelter than the one participating in the project. Also in these cases, the statutory services and support services could try out the model in the

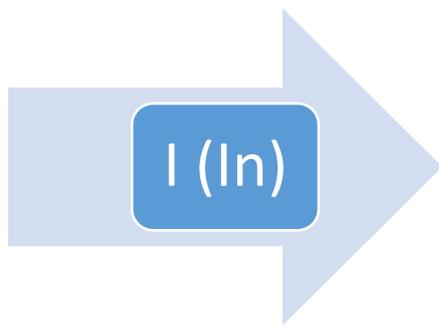
parts that involved those agencies. However, for all of these reasons the number of cases involving all four agencies was very limited during the project period.

After the agencies trying the model out in the case of "Little A" and other cases, the researchers drafted a more definite, second version of the model. The aim was to develop a model that was focused and simple enough to be possible to use in other contexts than the one where it was developed, and also possible put into practice in everyday work with children in women's shelters. The work-group members were then interviewed – agency by agency – about their views on and experiences of the model. After that, the final version was written up in this report.

The IDEAL model of child centred cooperation

The work resulted in a model for cooperation at the time of placement, during placement, at the time of planning for exit, during the transition to life outside, with a long-term perspective. The different parts of the model and experiences of trying it out in practice are described below.

In (I): When coming into the shelter



Against the backdrop of the critical issues identified at the stage of placement of a parent and child in a shelter, it was decided that at the time of the child coming into the shelter with the parent, the model aims at, firstly, ensuring that there is an agency involved in the case that takes overall responsibility for the child's situation.

Secondly, all agencies involved need to share an understanding of the family in placement, their history, situation and needs. Thirdly, there should be measures put in place that enables shared planning and collaboration between statutory services, as this collaboration is key to a beneficial situation for the child during the stay in the shelter. Fourthly, communication between all agencies involved in the case should be established already at the stage of placement, to secure the continued communication over time. Considering the grounding of the model in the UNCRC and the double approach to children in shelters, it is, fifthly, also important to put measures in place to ensure participation for both children and parents. Drawing on the different aspects of children's participation outlined by Hart (1992), agencies involved in the case need to ensure child and parent participation at this stage of placement, that is, that children and parents are informed, consulted and/or take part in decision making to the extent it is possible considering the circumstances on the case.

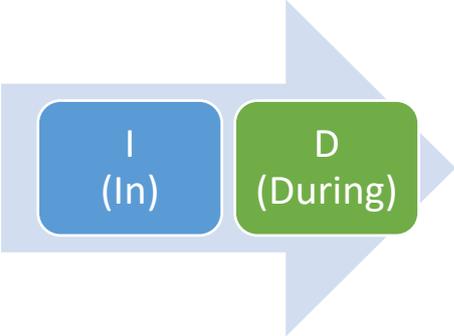
To fulfil these aims, a number of cooperation activities are expected from all agencies involved in the case. If someone else than statutory child welfare services is responsible for placement, the agency deciding on placement of a parent and child in a shelter needs to involve statutory child welfare services, to make sure that there is an agency involved that takes the overall responsibility for the child. To ensure the shared understanding of the family's history, situation and needs, a placement cooperation conference should be held. It was decided that the most pragmatic way of clarifying who is responsible for what is to make the agency making a placement responsible for convening a collaboration conference at the placement stage. In addition to the women's shelter, the default participants should be the statutory services (adults, child welfare services). However, it was also

thought that if there is a support intervention already in place or ongoing, the agency offering services should also be invited at this early stage of the process. The agency that has commissioned the support intervention, in the Swedish case it would typically be the statutory child welfare services, is responsible to invite the support services. The cooperation conference should, as a minimum, cover the areas of information sharing about the family's history and reasons for placement, joint planning for who-is-doing-what and when (including enabling child and parent participation), and planning for ongoing communication during placement. At the stage of placement, all agencies involved also need to take responsibility in relation to their own practice, to make sure that children and parents receive information, and children and parents are consulted and invited to take part in decision making when appropriate and possible considering the child and the situation.

The idea of a cooperation conference was inspired by the Barnahus model. A digital conference was suggested to be the expected way of working with these cooperation conferences. During the development and testing period, the Covid-19 pandemic was still ongoing, which meant that everyone involved was regularly working with digital meetings, and a digital way of working was perceived as the most time-efficient and simple way of making sure that the cooperation conference would take place.

During the work-group meetings, there was some discussion about the position and role of services users, that is, parents and children, in these meetings. Some practitioners were more keen on the idea that these meetings should be for practitioners only, than on including services users as well. Others argued that including service users would be a good way of ensuring service user participation. They shared examples of how they had organized this cooperation conference not digitally but as a meeting between the statutory service representatives and parents and children at the shelter, with the shelter staff present as well. This way both cooperation and service user participation would come naturally, they argued. However, the experiences made in the group made it clear that due to work loads and schedules it is not always possible to get everyone involved to take part in a physical meeting some distance away from the office without too much delay. The cooperation meeting should be held within the first few days, to serve its purpose. If it is not possible to convene a physical meeting within a reasonable time period, a digital meeting might be a possibility instead, and services users can both be invited or the meeting can be for practitioners only, depending on the case.

During (D): During placement



Against the backdrop of the critical issues identified during the parent’s and child’s stay in a shelter, it was decided that during the child’s stay at shelter with the parent, the model aims at, firstly, ensuring continued communication between statutory social services (adult and child welfare services respectively)

throughout the time of placement, and ongoing communication between these agencies and the women’s shelter. Secondly, the model should counteract a practice where the child welfare investigation is closed down with reference to the shelter stay only, to ensure that the child’s needs of protection, support and treatment beyond the shelter are investigated properly by the child welfare services. Thirdly, the model should ensure that attention is being paid to the child’s possible needs of additional support during the placement period, for example, in the form of parental support. Fourthly, during placement all agencies involved need to take responsibility in relation to their own practice, to make sure that children and parents receive information, and that children and parents are consulted and invited to take part in decision making when appropriate and possible considering the child and the situation.

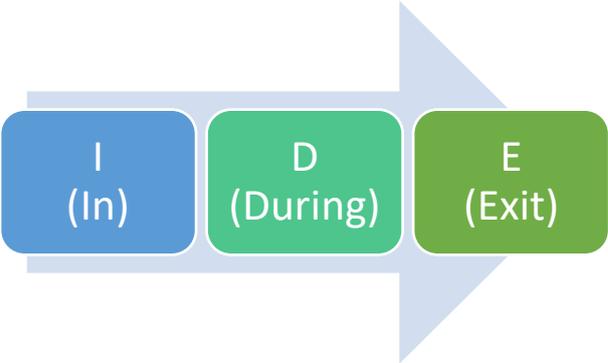
To fulfil these aims, three kinds of cooperation activities are expected from all agencies involved in the case. Firstly, all agencies involved need to develop some kind of local guidance for ongoing dialogue between all parties involved, and make sure that this guidance is used in practice. Secondly, the option of convening a second cooperation conference if needed should be open to any agency involved in the case. Thirdly, during placement, all agencies involved also need to take responsibility in relation to their own practice, to make sure that children and parents receive information, and children and parents are consulted and invited to take part in decision making when appropriate and possible considering the child and the situation.

In terms of experiences of trying the model out in practice, it seems as if the development project to some extent contributed to the implementation of the activities outlined for this phase of the placement process. The idea of including local guidance for communication and collaboration during case management as part of the model came from the fact that such guidance already existed at the beginning of the project, in terms of the statutory services. During the work to design the model this local guidance document was passed around among the work-group members, making participants from other agencies aware of the existence and contents of the guidance, and making the statutory

services participants aware of the need to update the guidance as well as of putting into practice – so that is would not just “gather dust in the book-shelf” as one practitioner put it.

In the case of “Little A” which was used to design the model, the parent and child stayed for quite a long time at the shelter, partly due to the fact that they were not able to move out before the holidays over Christmas and new year. This prolonged stay pointed to the need of the option to call for another cooperation conference, as there were several issues regarding the needs of support that had to be clarified between the involved agencies in the “Little A” case.

Exit (E): Planning for leaving and leaving the shelter



At the time of planning for the parent and child to move out of the shelter, and the parent and child leaving the shelter, the model aims at, firstly, the mapping of, and recognition of, child and parent needs of protection and support in the post-

placement period. This should happen before child and parent move out of the shelter. Secondly, post-placement services, including access to pre-school or school and different forms of protection, support, and treatment interventions needs to be planned before moving out. Thirdly, the moving out should also be as well-planned as possible under the circumstances, also in cases of short stays at the shelter. Fourthly, the moving out itself should follow the plan as much as possible. Fifthly, at the time of planning for the child and parent leaving the shelter, all agencies involved also need to take responsibility in relation to their own practice, to make sure that children and parents receive information, and children and parents are consulted and invited to take part in decision making when appropriate and possible considering the child and the situation.

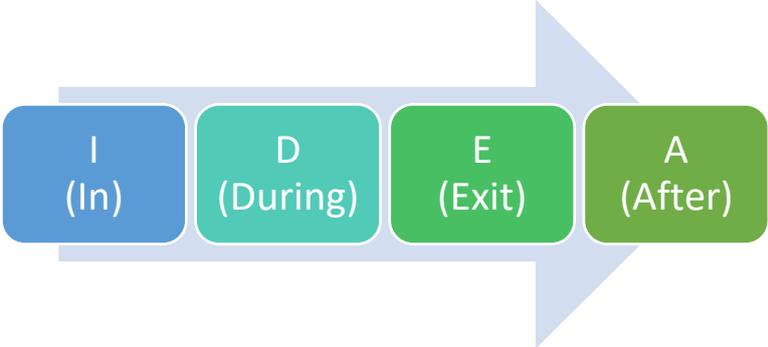
To fulfil these aims, a number of cooperation activities are expected from all agencies involved in the case. Firstly, when moving out is becoming an option, if the agency responsible for the placement is not the statutory child welfare services, the agency should contact the statutory child welfare services as early as possible, to enable planning. As it typically is the statutory child welfare services that is responsible for the provision of support, the child welfare services informs the relevant support services so that the support services can make preparation to offer the intervention “Support during the transition” when it is time to move out. Secondly, an exit cooperation conference should be organized. At this stage, the responsibility to convene such as conference rests with the statutory child welfare services, as that is the agency with the formal and overall responsibility for the child’s

situation. At the cooperation conference at this stage of the process, participants would be the women's shelter, the statutory services (adults, child welfare), and also the support services expected to provide "support during the transition". The conference should, as a minimum, concern the joint planning for who-is-doing-what and when at the time of moving out of the shelter (including enabling child and parent participation), and planning for the intervention "support during the transition". Thirdly, all agencies involved also need to take responsibility in relation to their own practice, to make sure that children and parents receive information, and children and parents are consulted and invited to take part in decision making when appropriate and possible considering the child and the situation.

In the local authority where the development work took place, the intervention "support during the transition" was a new intervention as it did not exist as an option when the project started. The idea came from previous experience from a similar pedagogic support intervention consisting of frequent home visits during the first time in a new accommodation, aiming to help to the parent with practical matters, helping children making sense of the move out of the shelter as well as helping the parent and child developing a shared narrative about moving out from the shelter/ moving to a new home. In the context of the local authority participating in the project, there were some routines for commissioning support services that the model had to be adapted to. Therefore, it became important for the child welfare services to get in touch with the support services as early as possible, to integrate the model into "practice as usual" as much as possible, as this would make it easier to continue to work according to the cooperation model beyond the project period.

Another reason for involving the support services at an early stage was to enable the child and parent to meet and get to know the practitioners providing the support whilst still staying at the shelter. That way, the support person could more easily act as a bridge between the shelter and the new life outside. As contact at such an early stage, before moving out, could be somewhat confusing for the child and parent in terms of the role of the practitioner providing "Support during the transition", the women's shelter staff and the support services staff spent some time in separate meetings to clarify their roles when working together with the child and parent still at the shelter. The intention was to be as clear as possible about the division of responsibility and on how to help the child and parent to understand who-is-doing-what in terms of leaving the shelter.

After (A): The transition to life outside



Against the backdrop of the critical issues identified at the transition to life outside of the shelter, it was decided that at the transition to life outside of the shelter, the model aims at, firstly, supporting the transition for both

child and parent. Secondly, there needs to be a bridge between the shelter and later protection, support, and treatment interventions, as there are often gaps in services, leaving children and parents hanging, in some kind of “vacuum” without support. If so, there is a clear risk that the parent may end up moving back to the abuser. Thirdly, it was decided that there should be some mechanism built into the model, whereby the participating agencies could learn from the experiences of working according to the model. It was also considered important with a shared understanding of the case among the agencies, of what has been working well and less well in a particular case. Fourthly, during the transition to a life outside of the shelter, all agencies involved also need to take responsibility in relation to their own practice, to make sure that children and parents receive information, and children and parents are consulted and invited to take part in decision making when appropriate and possible considering the child and the situation.

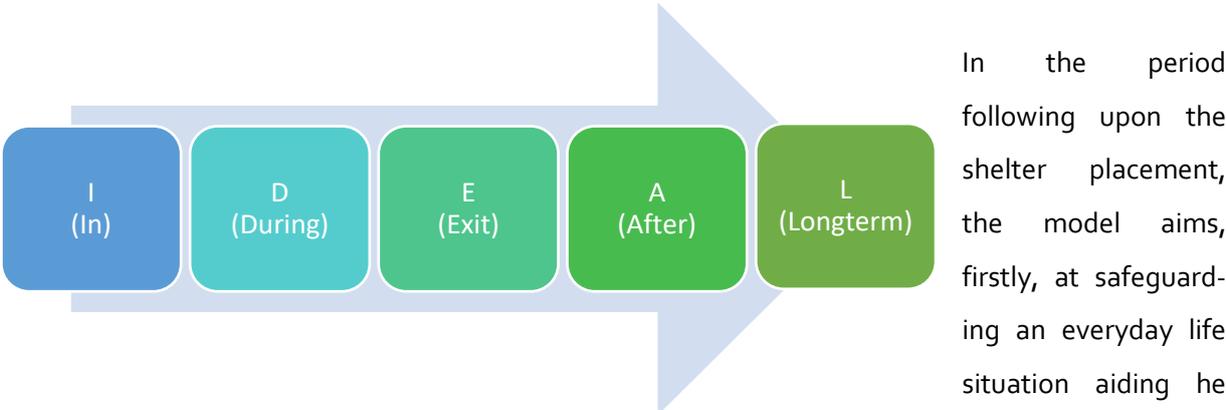
To fulfil these aims, a number of cooperation activities are expected from all agencies involved in the case. Firstly, the child and parent are offered the intervention “Support during the transition”, consisting of help with practical matters, and of helping children making sense of the move out of the shelter as well as helping the parent and child developing a shared narrative about moving out from the shelter/ moving to a new home. The intervention should be adapted to the needs of the individual child and parent, but a starting point could be frequent home visits to start with, combined with practical help. This help could be anything from help with contacts with different authorities as the social insurance agency, unemployment agency, or with a housing company, school, or bank, to about finding the way in a new area, getting to know what leisure time activities that might be available for the child to join, or whatever that needs to be put in place to enable the parent and child a stable and manageable everyday life.

Secondly, in terms of the joint evaluation of cooperation in the particular case, of what has been working well and less well, the responsibility to initiate such an evaluation should rest with the

statutory child welfare services, it was decided. This evaluation could be carried out in a way that is considered the most feasible in the particular case, it could be done by phone or through a digital conference meeting, but also over e-mail, or through a personal meeting. It was considered more important that it would happen, than how the evaluation was carried out.

Thirdly, also at this phase of the process, all agencies involved also need to take responsibility in relation to their own practice, to make sure that children and parents receive information, and children and parents are consulted and invited to take part in decision making when appropriate and possible considering the child and the situation.

Long term (L): Securing a situation aiding the child’s recovery



child’s recovery, including housing, access to pre-school / school, leisure time activities, social networks etcetera. Secondly, to do so it is important to map and highlight any continued needs of protection, support, and treatment interventions in the post-placement situation for the child and parent. Thirdly, the aim is also to bridge any gap between the intervention “Support during the transition” and other protection, support, and treatment interventions that the child and parent might need. Fourthly, participation for the child and parent should be secured.

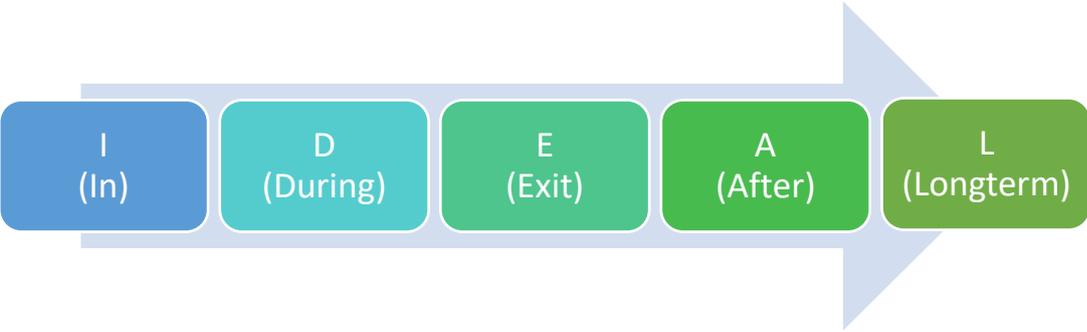
To fulfil these aims, there should, firstly, some form of follow-up of the intervention “Support during the transition”, initiated by the statutory child welfare services. At this phase of the process, the shelter, or statutory agency responsible for the placement in the shelter (if it is another than the child welfare services) are no longer involved in the cooperation activities. Consequently, the participants at the follow-up meeting would be the statutory child welfare services and support services offering the intervention. The contents of this meeting should be the sharing of information regarding the child’s situation after moving out from the shelter, and about possible continued needs of intervention. Secondly, the agencies involved also need to take responsibility in relation to their own practice, to make sure that children and parents receive information, and children and parents are

consulted and invited to take part in decision making when appropriate and possible considering the child and the situation.

During the development work it was discussed how long the intervention "Support during the transition" would be expected to go on. It was concluded that if it is the situation and needs of the particular child and parent should guide the intervention, it is hard to state a specific time limit. To give some kind of approximation, based on experiences from practice, the intervention could be expected to go on at least during the first month of life outside of the shelter, with home visits more frequently in the first couple of weeks and then more spread out in the following weeks. But beyond that estimation, the duration would depend on the situation, and on waiting lists for other kinds of services, if they are needed. Because of this uncertainty, the intervention would need to be followed up by the statutory child welfare services, as long as it is considered necessary to let it go on.

Conclusions

After having developed this five-step model in relation to ongoing practice, and practitioners trying it out – either as a whole or in parts – the conclusion is that this model would be possible to implement in practice in the context of Swedish local authority social work with victims of intimate partner violence, and their children. It should be noted that as with any model of practice, resources are needed to implement a new way of working. However, by designing the model in a way that resembles “practice as usual” as much as possible, and keeping add-ons at a minimum, the additional cost in terms of staff time and administrative work, e.g. to document contacts between agencies and information received, should be possible to manage for the kind of agencies involved. How the model outlined here would work in other contexts remains to be tried out in practice.



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