

Predictors of child participation in child welfare emergency placements—A Norwegian case file study

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Abstract

Background: Although child participation has attained significant awareness in child welfare research, little is known about how this right is upheld in emergency cases. Therefore, the various degrees to which children participate in child welfare services' emergency cases and factors predicting such participation were explored.

Method: Degrees of participation found in 148 case files ($M_{\text{age}} = 11\text{--}12$ years old, range; 3–18 years; 59% girls, 48% with minority backgrounds) from four Norwegian municipalities were regressed on 15 independent variables in a multinomial logistic regression.

Results: The children's advancing age increases their probabilities of involvement in the decision-making processes regarding emergency placements ($p < 0.001$). The children's minority backgrounds enhance their likelihood of being informed of the placement and having their opinions given weight in decision-making processes ($p = 0.010$). The study, nevertheless, revealed that 39% of children in emergency placements are not involved in these processes.

Conclusions: Case file documentation indicates inadequate involvement of children in emergency cases. Nevertheless, older children and those with minority backgrounds are more likely to participate, although the degree of their involvement varies. The study did not find a correlation between prior contact with child welfare services and child participation.

KEYWORDS

case files, child participation, child welfare, emergency cases, emergency placement, out-of-home placement

1 | INTRODUCTION

Child maltreatment is a global problem, and the protection and safe-keeping of children in vulnerable situations is a critical issue worldwide. Usually, these matters are addressed by the countries' child welfare services (CWS), who receive and assess referrals and provide voluntary or compulsory measures when necessary. Since the recognition of children's participatory rights as fundamental in the United

Nations Convention on the Rights of the Child, it has also become an expectation for CWS to ensure children's participation in their own cases. Consequentially, these rights have been incorporated into various countries' CW legislations, including the Norwegian Child Welfare Act (CW-Act) §§ 1-4, 12-4, and 12-5 (Child Welfare Act, 2021). The Norwegian Child Welfare Service (NCWS) is required to keep individual case files that document their engagement with every child. These case files 'must contain all significant factual information and CW

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assessments on which the CWS bases its case, and which may impact the decisions and measures made' (CW-Act, §12-4). Additionally, all formal decisions must contain a declaration of the child's viewpoint and a clarification of the weight given to the child's opinion in the decision-making processes. Hence, Norwegian case files should function as documentation of how a child's participation is safeguarded in an NCW case.

The integration of children's participatory rights not only improves the quality of the services provided but also plays a pivotal role in promoting children's development and overall well-being (Havnen et al., 2020; Storhaug et al., 2020; Vis et al., 2012). Despite recognizing the significance of child participation, the CWS continues to face challenges in successfully incorporating it into their practice (Havnen et al., 2020; Storhaug et al., 2020). Notably, children involved in the most intrusive measure, out-of-home placements, are the least likely to participate in decision-making processes (van Bijleveld et al., 2015). The decision-making processes in these cases are marked by considerable levels of uncertainty and ambiguity (Baumann et al., 2014). In emergency placements, where decisions are made immediately, limited time for information gathering and comprehensive assessments further complicates the decision-making processes. The urgency to take immediate action can also hinder the involvement of children and parents in the preparation of emergency placements, making them exceptionally distressing for children, parents, and practitioners (Save the Children Norway, 2017; Slettebø, 2018; Storhaug et al., 2020). How the context of emergency cases affects child participation is nevertheless scarcely explored within the CW literature, which has primarily focused on ordinary CW cases. To our knowledge, no previous studies have examined predictive factors of child participation in emergency cases.

The objectives of this study are threefold: (i) to identify characteristics of emergency placements, (ii) to discover to which degree children participate in these cases, as documented in case files, and (iii) to explore which factors may predict various degrees of child participation within this context.

1.1 | Emergency placements in Norwegian child welfare

In 2021, 981 children were involved in emergency placements in Norway (Bufdir, 2022a). That number constituted 10% of the 9950 children receiving out-of-home care and 2% of the 50 520 children receiving measures in the same year (Bufdir, 2022a). The primary reason for emergency placements has been identified as violence toward the child. However, placements can also be prompted by more insidious forms of maltreatment, such as neglect or parental substance abuse (Storhaug et al., 2020). These latter situations often involve more complex and escalating concerns for the child over time (Storhaug et al., 2018, 2020). The underlying determinant in emergency cases is, nonetheless, that the CWS has assessed that the child's care situation immediately and significantly harms the child.

Emergency placements are made pursuant to specific sections of the Norwegian CW-Act exclusively reserved for situations where the child is at risk of immediate harm. The most used emergency paragraph, §4-2, states that

The head of the child welfare administration, the head's deputy, or the prosecuting authority may immediately make an interim care order if there is a risk that the child will suffer significant harm if the decision is not implemented immediately.

The CW-Act thus opens for an exception of the general practice found in planned compulsory out-of-home placements. Generally, the CWS presents the case to the county social welfare board (CSWB), the state judiciary body responsible for deciding on compulsory placements (Storhaug & Kojan, 2017). This process may take several months, and given the urgency of intervention in emergency cases, there is no time to wait for this process. The CW-Act, therefore, mandates the leader of the CW office (or the prosecuting authority outside of office hours) to make an interim care order. The CSWB must, nonetheless, review the legal criteria of the placement within 48 h (Storhaug et al., 2018).

Assuming responsibility for emergency placement decisions diverges from the primary role of the NCW practitioner as a helping service provider (Fjeld et al., 2020). Over 80% of the measures the NCWS provides are voluntary (e.g., compensatory or advisory measures) (Statistics Norway, 2022), making the NCWS commonly characterized as family service-oriented, with a family-sensitive and therapeutic approach (Kojan & Lonne, 2012; Skivenes, 2011; Storhaug & Kojan, 2017). Consequentially, the NCWS's practice mainly involves relational and therapeutic approaches, and practitioners' knowledge of and experience in exercising their authoritative executive role is somewhat limited (Fjeld et al., 2020). Therefore, understanding and enhancing the practice of child participation in these exceptional cases is crucial.

1.2 | Previous research

Despite a significant amount of research highlighting child participation in CW cases, it is crucial to provide more attention to the various contexts in which participation is practiced (Skaug et al., 2021). Pölkki et al. (2012) have underscored this concern by suggesting that discrepancies in team structures and working phases within the CWS could potentially influence children's participation opportunities. In the context of emergency cases, only a handful of studies emphasize child participation (Save the Children Norway, 2017; Slettebø, 2018; Slettebø et al., 2021; Storhaug et al., 2020), while a few more incorporate emergency cases into the context of ordinary CW cases without explicitly exploring them (e.g., Bakke & Holmberg, 2014; Fylkesnes et al., 2018). The latter approach could pose issues given the variation

in practice. Despite the distinct nature of emergency cases, research on decision-making in ordinary CW cases remains crucial for comprehending child participation in emergency cases.

Studies show that decisions can be adversely affected by stress and time pressure (Munro, 2012; Starcke & Brand, 2012) and that a crucial aspect of good decision-making is dedicating sufficient time to listen to the parties involved (Læret & Skivenes, 2023). Extensive research has also demonstrated that child participation enhances decisions' accuracy and provides better outcomes for children and their families (Archard & Skivenes, 2009; Bessell, 2011; Vis et al., 2011; Woolfson et al., 2010). However, facilitating child participation in emergency cases can be particularly challenging because of time constraints and the availability of information (Gording-Stang, 2018; Oppedal, 2008).

Child participation has been shown to have numerous positive effects on children's well-being, including mental health, sense of safety, and self-esteem, by contributing to the child's resilience (van Bijleveld et al., 2014). It allows children to practice taking responsibility for their own choices (Dillon et al., 2016; Muench et al., 2017), protects them from abuse (Heimer et al., 2018; Kosher & Ben-Arieh, 2020), and encourages autonomy and agency (Križ & Roundtree-Swain, 2017; Rap et al., 2019). Despite these benefits, a common finding is that children are insufficiently involved in their own CW cases (e.g., Havnen et al., 2020; Storhaug et al., 2020; Vis et al., 2012). The few studies emphasizing the context of emergency cases find that children often experience these placements as sudden and without receiving adequate information (Slettebø, 2018; Storhaug et al., 2020). Another study found that children wanted to be more involved in the process, as they disagreed with how the placement was performed despite acknowledging the need for immediate placement (Haugen et al., 2017).

Despite the absence of standardized guidelines for implementing child participation leading to dissimilar participation practices in various CW offices (Paulsen & Studsrød, 2019; van Bijleveld et al., 2020), a set of associative factors for child participation has been identified in the research. Two of the more robust findings are that children's participation opportunities may be enhanced with the child's advancing age (e.g., Kjørholt, 2010; Paulsen, 2016; Rap et al., 2019; Vis, 2004) and when there is an established relationship between the CWS and the child (Archard & Skivenes, 2009; Paulsen, 2016; Toros, 2021). Being a girl is furthermore associated with a higher probability of participation because CW practitioners perceive them as more mature and relationship-oriented (Eriksson, 2009; Havnen et al., 2020). Concerns regarding relational and linguistic issues have, however, been linked to limited involvement opportunities for children with minority backgrounds, as interaction with them is perceived as more challenging (Haugen et al., 2017; Križ & Skivenes, 2011). Associations are also found between participation and the grounds for intervention, as stated in ordinary CW referrals. Referrals regarding conditions attributed to the child (e.g., the child's mental health or criminal behaviour), as well as those about violence and abuse, are shown to increase the probability of the child being talked to during the investigation (Havnen et al., 2020; Vis et al., 2022). On the other

hand, has referrals concerning parental mental health or drug abuse (Havnen et al., 2020; Vis et al., 2022) been demonstrated to decrease children's probability of participation. Research additionally suggests that children's participation is negatively affected by an out-of-home placement (van Bijleveld et al., 2015).

Our understanding of how these associations affect child participation in emergency cases is, however, limited in several ways. First, few studies emphasize participation exclusively within this context (Save the Children Norway, 2017; Slettebø, 2018; Slettebø et al., 2021; Storhaug et al., 2020). Second, to our knowledge, no previous studies have examined which factors influence participation in various degrees in these cases. The present study addresses these gaps by examining how factors related to the child, the case, and the background factors affect child participation in emergency cases.

2 | METHODOLOGY

2.1 | Procedures and recruitment of participants

The present study is a quantitative case file study based on a secondary data analysis from the national study 'Emergency casework in the CWS' (Storhaug et al., 2020). The data consisted of pre-existing coded information extracted from 175 case files from five NCW offices dated from 2015 to 2019. The third author of this article was responsible for this coding. Before accessing the case files, the main study was approved by the Norwegian Centre for Research Data (NSD/SIKT, approval number 38750) and our institution. The Council for Confidentiality and Research granted exemption from confidentiality, which allowed access to the case files without consent from the families. Electronic access was permitted to case files meeting the criteria of children aged 0–18 years and emergency placements between 2015 and 2019.¹ The case file from only one child was included from families where several children fit the criteria (Storhaug et al., 2020). From four of the offices, all cases meeting the criteria were reviewed. In the last office, the 20 most recent cases were included.

The offices represent four Norwegian municipalities. One office was organized as a cooperation among three municipalities. Four offices covering different districts in a major city represents the fourth municipality. The offices correspond to a convenience sample, as the researchers had to be present over an extended period to review the case files. However, the included cases are a strategic sample according to the abovementioned criteria.

Cases involving children younger than 3 years old (N27) were excluded from this study. This exclusion does not suggest that younger children cannot or should not participate in their own cases. Still, their limited conversational skills require different participation practices to ensure their involvement (Committee on the Rights of the Child [CRC], 2009). Previous studies have indicated that the CWS has limited knowledge of available tools and methods to facilitate participation for children younger than 3–4 years old, indicating that younger children's participation is rather limited within the CWS (Havnen et al., 2020; Middel et al., 2021; Storhaug et al., 2020; Winter, 2010).

Of the participants in this study, 52% (N77) were aged 13 to 18 years, with 59% being girls and 48% having one or two parents born outside of Norway, defined as a minority background.

The coding of the case files was done by three researchers using a structured coding form. Every document contained in the case files was reviewed, starting from the first referral. This included assessments, reports, written correspondence with external partners and the family, formal decisions, and case notes. Ten percent of the cases were independently coded by two researchers, who then compared their understandings to ensure agreement on the interpretation of the material and the categories. Some categories were adjusted to clarify what was sought. The documents were reexamined and thoroughly discussed in the few cases with differing interpretations until a shared understanding was reached. The three researchers involved worked together throughout the coding process to consecutively discuss and cooperate in cases of uncertainty.

The variables and code form are available from the corresponding author upon request.

2.2 | Measures

Our dependent variable, 'participation degree', is an ordinal variable representing three degrees of child participation recorded in the case files. 'Participation-degree 1' represents cases where the child is provided information regarding the emergency placement, and the child's understanding of the situation is given weight in assessments and decision-making.² 'Participation-degree 2' refers to cases with records of the child's involvement in decision-making and placement planning. 'No participation records' refers to cases where no documentation of participation was found.

Children's participation is often conceptualized through the models developed by Hart (1992) and Shier (2001) (e.g., Bouma et al., 2018; Fylkesnes et al., 2018; Skauge et al., 2021) where participation is presented as a ladder with ascending 'rungs' representing various degrees of participation. These models emphasize two key dimensions of participation: hearing the child and providing the child with opportunities to influence decision-making. Bouma et al. (2018) additionally propose that the General Comment on Article 12 by the Committee on the Rights of the Child adds a third dimension, informing the child. Building on Hart's (1992) understanding of participation as a linear ladder, our dependent variable is constructed on the basis that lower degrees of participation have been achieved for higher degrees to be attained. This is despite not always finding records of lower participation in the case files. Nevertheless, our approach to participation is that of a multidimensional construct with three distinct values representing the various degrees of participation, as illustrated in Figure 1.

The selection of our 15 independent variables was performed on an empirical and theoretical basis and the information available in the case files. All variables are presented in Table 1 with their categorization and coding.

The grounds for the emergency placements were coded into 19 variables in the original project, which was organized into four categories for this study. Data from Statistics Norway (n.d.) was used to thematically group the variables. Table 2 presents descriptive statistics pertaining to each category, along with the original variables the categories are based on. The original ground for placement, 'the child's physical health issues', was not categorized, as there were no representations in the data. In four cases (3%), the grounds for placement were not recorded in the case file.

2.3 | Statistical analyses

Analyses were conducted using SPSS 28 (IBM Corp, 2021), where descriptive analyses were performed to establish characteristics found in emergency cases, specifically regarding recorded child participation. Multinomial logistic regression was employed to explore the association of independent variables with each of the three degrees of participation. The dependent variable, 'participation degree', was regressed on *background factors* (CW office and year of emergency placement), *child factors* (stratified age groups, gender, and ethnicity), and *case factors* (violence and abuse, conditions attributed to the parents, conditions attributed to the child, high levels of conflict in the home, emergency trigger, and cumulated durability of previous measures). Correlational data showed a range of correlation from -0.393 (CW office 1, CW office 3) to 0.414 (stratified age groups, conditions attributed to the child).

In the regression analysis, 'no participation records' was used as a reference category for the two degrees of participation.

3 | RESULTS

3.1 | Characteristics of emergency cases

Our first objective was to identify the characteristics of emergency cases, which are presented in Table 3. We find that 52% of the children are aged 13 to 18 years. There is a low representation of 3- to 5- and 11- to 12-year-olds. Almost half of the sample has a minority background, and there are approximately 10% more girls than boys.

Three in five children had received measures from the CWS before the emergency placement, of which 36% received measures when the placement occurred. Thirty-one percent of the previously provided measures had accumulated durability of 12 months or longer. Most previous measures were home-based, but 16% of the children had at least one earlier emergency-placement experience. An association between previous measures and the families' ethnic backgrounds was found. In families with minority backgrounds, 44% had formerly received measures, compared to 77% of the families with majority background. No association was found between earlier emergency placement and ethnic background.

More than half of the cases resulted from 'violence and abuse', while 'conditions attributed to the parents' represent 46%.³

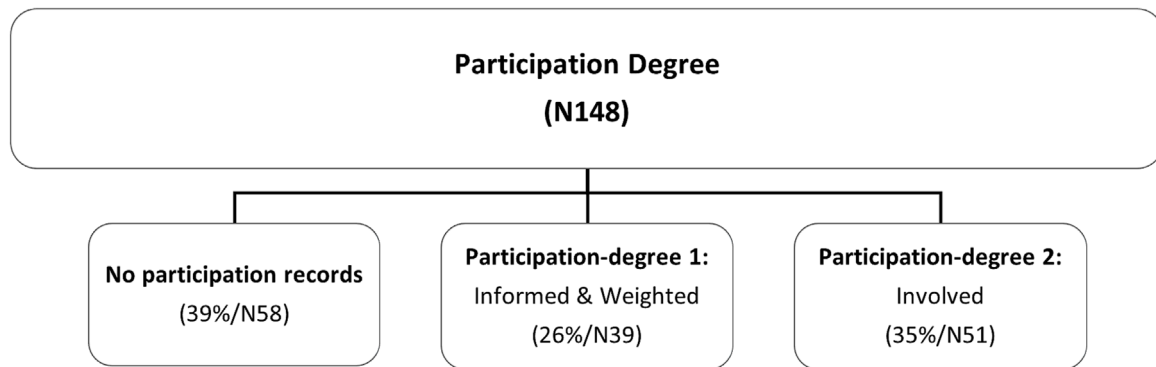


FIGURE 1 The dependent variable and its degrees of participation.

'Conditions attributed to the child' characterized almost one-fourth of the cases, while 'high levels of conflict in the home' was the cause in one in five. Ethnicity significantly informs the basis for placements. 'Violence and abuse' accounts for the principal justification for placement in families of minority backgrounds (72%). Contrarily, for majority families, the primary ground for placement is 'conditions attributed to the parents' (66%).

Most placements were triggered by the abrupt rise of an emergent situation (42%) (e.g., a child running away from home after a conflict and refusing to return, violence between parents with the child present). Close to one-third were triggered by the child disclosing violence to a professional (e.g., employees of their kindergarten, school, or CW practitioners). An additional 28% of placements were due to the CWS' escalating concerns regarding the child's circumstances.

3.2 | Degrees of child participation

The degrees of recorded child participation are presented in Table 4. We found records of differing degrees of participation in 61% of the cases, where 'participation-degree 2', the highest degree, was found in more than one-third of the case files. However, it was primarily older children (aged 13–18 years) who reached this degree of participation. In nearly two in five cases, no participation records were found, and the documentation of younger children's (3–7 years) participation is largely missing (62%). No participation records were found in nearly half of the cases involving families with a majority background. This was the situation in under one-third of families with minority backgrounds.

3.3 | Predictors of child participation

The final objective was to explore which factors may predict various degrees of child participation in emergency cases. A multinomial logistic regression comprised the dependent variable 'participation degree' with *background factors*, *child factors*, and *case factors*, as demonstrated in Table 5.

The final model proves to be a significant improvement in fit over a null model, $\chi^2(28) = 59.155$, $p < 0.001$, and both Pearson's chi-square, $\chi^2(264) = 285.893$, $p < 0.170$, and deviance chi-square tests, $\chi^2(264) = 262.204$, $p < 0.520$, demonstrate that the model fits the data. Using the conventional $\alpha = 0.5$ threshold, the likelihood of ratio tests of the overall contribution of each independent variable to the final model demonstrates that the strongest significant predictor is the child's age ($p < 0.001$). 'Minority background' is significant at $p < 0.030$.

'Minority background' was the only significant predictor ($b = 1404$, $s.e. = 0.547$, $p = 0.010$) of 'participation-degree 1'. The odds ratio indicates that the odds of case files including records of the child being informed and having their views weighted increased by a factor of 4.071 for children with a minority background. 'Age' is the only significant predictor ($b = 0.684$, $s.e. = 0.174$, $p < 0.001$) of 'participation-degree 2'. In this case, the likelihood of finding records of the child being involved in decision-making processes was 1.981 times higher than finding no participation records.

4 | DISCUSSION

Although several studies establish that child participation in CW cases is significant for the child's well-being and the quality of the casework, studies also indicate that participation needs to be better incorporated into CW practice. This study contributes knowledge about factors impacting child participation in an under-studied context, that is, emergency cases. Our results indicate that, as in ordinary CW cases, the NCWS struggles to include children in emergency cases. Two groups of children are found more likely to participate than others: those who are older and those with ethnic minority backgrounds. Nevertheless, certain factors typically considered influential, such as an established relationship between the child and the CWS, did not affect the child's involvement.

Figure 2, below, provides a visual summary of the study's key findings. Primary challenges are presented in the circles of the model, while implications for research, policies, and practice are listed in the square.

TABLE 1 Overview of dependent and independent variables.

	References	Coding
Dependent variable		
Participation-degree	CRC (2009); Hart (1992); Shier (2001)	Ordinal
No participation records		=0
Participation-degree 1		=1
Participation-degree 2		=2
Independent variables		
<i>Background factors</i>		
CW Office 1	Paulsen and Studsrød (2019); van Bijleveld et al. (2020)	Office1 = 1
CW Office 2		Office2 = 1
CW Office 3		Office3 = 1
CW Office 4		Office4 = 1
CW Office 5		Office5 = 1
Year of emergency placement	Child Welfare Act (2021); Prop. 133 L (2020–2021)	Categorical
2015	(2021); Prop. 169 L (2016–2017) (2017)	=0
2016		=1
2017		=2
2018		=3
2019		=4
<i>Child factors</i>		
Gender	Eriksson (2009); Havnen et al. (2020)	Categorical
Girl		=0
Boy		=1
Age groups	Kjørholt (2010); Paulsen (2016); Vis (2004)	Categorical
3–5 years		=0
6–7 years		=1
8–10 years		=2
11–12 years		=3
13–15 years		=4
16–18 years		=5
Ethnicity	Haugen et al. (2017); Križ and Skivenes (2011)	Categorical
Majority background		=0
Minority background		=1
<i>Case factors</i>		
Violence and abuse		yes = 1
Conditions attributed to the parents	Havnen et al. (2020)	yes = 1
Conditions attributed to the child		yes = 1
High levels of conflict in the home		yes = 1
Emergency trigger	Henderson and Hanson (2015); Storhaug et al. (2018)	Categorical
Escalating concerns over time		=0
Abrupt rise of an emergent situation		=1
The child's disclosure of violence		=2
Cumulated durability of previous measures	Archard and Skivenes (2009); Paulsen (2016); Toros (2021)	Categorical
No previous measures		=0
0–2 months		=1
3–5 months		=2
6–11 months		=3
1–2 years		=4
3–4 years		=5
Five years or more		=6

TABLE 2 Grounds for placement ($N = 144$).

		Percentage	Frequency	Coding
Violence and abuse (54%/N = 80)	Physical violence toward the child	40%	59	0 = no, 1 = yes
	The child witnessing violence in the home	18%	26	
	Psychological violence toward the child	14%	20	
	The child being sexually abused	5%	7	
Conditions attributed to the parents (46%/N = 68)	Lack of parental skills	22%	33	0 = no, 1 = yes
	Parental drug abuse	18%	26	
	Parental mental health issues	14%	21	
	Neglect	4%	6	
	Parent(s) engaged in criminal behaviour	3%	5	
	Other parental conditions	3%	4	
	Parental absence	2%	3	
	Parental physical health issues	1%	2	
Conditions attributed to the child (24%/N = 35)	The child's behaviour/criminal behaviour	15%	22	0 = no, 1 = yes
	The child's drug abuse	10%	14	
	The child's mental health issues	9%	13	
	Other conditions attributed to the child	3%	4	
	The child's relational issues	1%	2	
High levels of conflict in the home (19%/N = 28)	High levels of conflict in the home	19%	28	0 = no, 1 = yes

Note: A combination of grounds for placement was possible both within and between the four categories (e.g., Parental drug abuse + Parental mental health issues and/or Physical violence toward the child + Lack of parental skills), resulting in cumulative percentages higher than 100.

4.1 | Lack of participatory opportunities

Child participation is strongly emphasized in the NCW legislation, which states not only that all children have the right to participate in all matters concerning the child (CW-Act, §1-4) but also that CW professionals must document children's participation in formal decisions in the case files (CW-Act, §§12-4 and 12-5). Participation's well-acknowledged beneficial aspects encourage the belief that facilitating child participation should be highly prioritized in NCWS's practice. Our results, nevertheless, show that 39% of children in emergency placements are not involved in the process. These findings persist over 5 years (2015–2019) and are relatively similar within the five CW offices in this sample. Our findings contradict previous findings of variations in CWS's ordinary practice. Previous studies have noted that the lack of clear guidelines for practicing participation encourages practice discrepancies between CW offices (Paulsen & Studsrød, 2019; van Bijleveld et al., 2020). Variations are also found because of office size, professional specialization (Krane et al., 2021), and local working cultures (Kristofersen, 2018). Limited time for gathering and assessing information may, however, have a more significant impact on shaping participatory practices in emergency cases compared to ordinary CW cases. This could explain our findings of a certain level of uniformity in the offices' practice. However, another contributing factor could be the severity of the cases, implying that professionals may perceive decisions about placing children in particularly detrimental circumstances easier or even necessary to make without requiring the child's involvement.

Considering that the limited child involvement in emergency cases may stem from time constraints and highly consequential decisions, it is essential to recognize that participation can and should be facilitated in various forms and to varying degrees. Efforts should be made to seek the implementation of simpler and less time-consuming methods to ensure child participation. One approach is to provide adequate information about the placement and create opportunities for children to express their opinions on how the placement should be conducted, as demonstrated by Slettebø (2018). Another example is enabling children to voice their desires regarding what they would like to bring to their temporary home, as highlighted by Storhaug et al. (2020). These efforts may contribute to the children's understanding of what is happening and why, promoting a sense of predictability and safety during the placement and the period after. Giving the children access to a trusted person may also make the emergency placement itself less frightening and ensure they have someone close to them with whom to share the experience during and after the placement. When possible, it is essential to prioritize meaningful participatory opportunities by actively engaging the children in decisions (Bouma et al., 2018), such as those concerning emergency kinship and foster or institutional care.

4.2 | The children's advancing age

Our study discloses that older children are considerably more likely to reach higher degrees of participation than younger ones. When

TABLE 3 Sample characteristics of emergency cases (N = 148).

	Percentage	Frequency
Child welfare office		
Office 1	13%	19
Office 2	15%	22
Office 3	24%	36
Office 4	15%	23
Office 5	33%	48
Year of emergency placement		
2015	14%	21
2016	30%	44
2017	20%	29
2018	27%	41
2019	9%	13
Gender		
Girl	59%	87
Boy	41%	61
Age groups		
3–5 years	8%	12
6–7 years	15%	22
8–10 years	16%	24
11–12 years	9%	13
13–15 years	28%	41
16–18 years	24%	36
Ethnicity		
Majority background	52%	77
Minority background	48%	71
Grounds for placement (a combination of grounds was possible)		
Violence and abuse	54%	80
Conditions attributed to the parents	46%	68
Conditions attributed to the child	24%	35
High levels of conflict in the home	19%	28
Emergency trigger		
Escalating concerns over time	28%	42
Abrupt rise of an emergent situation	42%	62
The child's disclosure of violence	30%	44
Previous measures provided		
Voluntary in-home measures	61%	90
Previous out-of-home placement where the child has been returned to the home	3%	5
Previous emergency placement	16%	24
Cumulative durability of previous measures		
No previous contact	41%	61
0–2 months	10%	15
3–5 months	11%	16
6–11 months	7%	10
1–2 years	16%	23
3–4 years	10%	15
Five years or more	5%	8

TABLE 3 (Continued)

	Percentage	Frequency
Topic of conversation		
Nothing recorded	12%	17
General topics	11%	16
The child's current situation	78%	115

TABLE 4 Participation degrees divided by age, ethnicity, and total sample (N = 148).

	No participation records		Participation-degree 1 (Informed and weighted)		Participation-degree 2 (involved)		Total N (%)	
Age								
3–5 years	67%	(8)	25%	(3)	8%	(1)	12	(100%)
6–7 years	59%	(13)	23%	(5)	18%	(4)	22	(100%)
8–10 years	50%	(12)	42%	(10)	8%	(2)	24	(100%)
11–12 years	54%	(7)	15%	(2)	31%	(4)	13	(100%)
13–15 years	24%	(10)	20%	(8)	56%	(23)	41	(100%)
16–18 years	22%	(8)	31%	(11)	47%	(17)	36	(100%)
Ethnicity								(100%)
Majority background	48%	(37)	17%	(13)	35%	(27)	77	(100%)
Minority background	30%	(21)	36%	(26)	34%	(24)	71	(100%)
Total sample:	39%	(58)	26%	(39)	35%	(51)	148	(100%)

distinguishing by age, 86% of children aged 11 and older were involved in decisions about the placement, compared to 14% of children younger than 11. These findings are congruent with previous research showing similar contrasting participation degrees for children above and under the age of 10 in ordinary CW cases (Vis & Thomas, 2009). The child's increasing development and maturation is, therefore, a good predictor of child participation also in emergency cases. Our results further argue for enhanced focus on including children in CW emergency decisions. Particular emphasis should be given to younger children.

4.3 | Minority backgrounds

Minority children (56%) were more than twice as likely than majority children (27%) to experience the emergency placement as their first contact with the NCWS. Consequently, the NCWS had not had the chance to establish a relationship with most minority children. Several reasons may contribute to this lack of contact, with the time the families have resided in Norway potentially playing a significant role. However, controlling for this variable was not feasible with the data available in this study. The high proportion of minority children experiencing the emergency placement as their first meeting with the NCWS is noteworthy. It may explain the high lack of trust in and fear of the NCWS within these families (Aarset & Bredal, 2018).

Finding that minority children (37%) are more likely to be informed and have their opinions given weight in decisions than

majority children (17%) also challenges the understanding that an established relationship enhances child participation (Brady et al., 2019; Paulsen, 2016; Toros, 2021; Vis et al., 2022). This finding is particularly interesting, considering CW professionals are previously found to experience difficulties interacting with minority children (Haugen et al., 2017; Križ & Skivenes, 2011). However, our findings can be contextualized in the light of most minority children (72%) being emergency placed due to violence and abuse and 45% of these placements being triggered by the children themselves disclosing the violence to either the CWS directly or, more commonly, to professionals at school. These conversations have been recognized as a space where children explicitly or indirectly (through behaviour) express their needs and wishes (Storhaug et al., 2020). Acknowledging the importance of these conversations is essential, as they can form the basis for documenting child participation in emergency case files.

4.4 | Cultural and socioeconomic understandings of violence

Similar to our findings, previous studies have shown that the referrals to (Christiansen et al., 2019) and the measures from (Kojan & Storhaug, 2021) the CWS in minority families often concern violence. In their study on how different interpretations of violence impact assessments and decisions made by the CSWBs (the state judiciary body responsible for decisions about compulsory placements) in emergency placement appeals, Storhaug et al. (2022) revealed that

TABLE 5 Multinomial logistic regression model (N = 148).

Dependent variable	Independent variable	Coefficient	P value	Odds ratio	95% CI Lower/upper
Participation-degree 1 (informed and weighted)	Child welfare office 1	2.061	0.092	7.851	0.716–86.097
	Child welfare office 2	1.560	0.232	4.761	0.369–61.401
	Child welfare office 3	1.314	0.289	3.720	0.328–42.247
	Child welfare office 4	1.144	0.369	3.140	0.259–38.036
	Year of emergency placement	−0.344	0.122	0.709	0.458–1.097
	Age	0.303	0.067	1.354	0.979–1.872
	Boy	0.342	0.479	1.407	0.546–3.626
	Minority background	1.404	0.010*	4.071	1.392–11.904
	Violence and abuse	−0.177	0.617	0.838	0.418–1.677
	Conditions attributed to the parents	−0.201	0.569	0.818	0.409–1.633
	Conditions attributed to the child	0.009	0.983	1.010	0.432–2.359
	High levels of conflict in the home	−0.204	0.777	0.816	0.199–3.346
	Emergency trigger	0.268	0.467	1.307	0.635–2.688
	Durability of previous measures	0.106	0.395	1.111	0.871–1.417
Participation-degree 2 (involved)	Child welfare office 1	−0.282	0.724	0.754	0.158–3.607
	Child welfare office 2	0.471	0.577	1.601	0.306–8.386
	Child welfare office 3	0.210	0.787	1.234	0.268–5.691
	Child welfare office 4	−0.314	0.699	0.731	0.149–3.583
	Year of emergency placement	−0.017	0.934	0.983	0.655–1.476
	Age	0.684	<0.001***	1.981	1.409–2.785
	Boy	−0.387	0.405	0.679	0.274–1.687
	Minority background	0.482	0.341	1.620	0.600–4.370
	Violence and abuse	0.033	0.922	1.034	0.533–2.005
	Conditions attributed to the parents	−0.190	0.560	0.827	0.437–1.566
	Conditions attributed to the child	−0.377	0.320	0.686	0.326–1.442
	High levels of conflict in the home	0.431	0.443	1.539	0.511–4.631
	Emergency trigger	0.248	0.480	1.282	0.644–2.552
	Durability of previous measures	0.058	0.614	1.060	0.846–1.328

Note: 'No participation records' is used as a reference category of which participation degrees 1 and 2 are compared. Reference category: CW office 5, Girl, Majority background.

* $p \leq 0.05$, and *** $p \leq 0.001$.

CW professionals' understanding of violence is not affected by the socioeconomic status of families. This finding raises a concern regarding the potential for the CWS to adopt unilateral interpretations of the challenges related to violence in minority families, attributing them solely to cultural practices. Given the overrepresentation of minority families in the NCWS' emergency placements and supportive measures in the home (Bufdir, 2022b) not being attributed to their ethnicity but instead to their living conditions and socioeconomic status (Berg et al., 2017; Dettlaff, 2014; Staer & Bjørknes, 2015), this holds notable importance. Studies examining children's exposure to violence have also identified similar connections, suggesting that increased exposure to violence among minority children is likely a result of their families' socioeconomic status and the accumulation of difficulties they face (Andersen et al., 2020; Hafstad & Augusti, 2019).

Because Norwegian case files do not provide information regarding the socioeconomic backgrounds of families, further exploration of these claims was not possible in this study. It is nevertheless plausible that minority children constituting 48% of our cases while forming 19% of the general population in 2019 (Statistics Norway, 2019) is related to both their minority backgrounds and their socioeconomic situations.

4.5 | Working with escalating concerns

The NCWS follows the principle of proportionality and maintains a high threshold for placements, implying that measures should not exceed what is required and that supportive measures should be



FIGURE 2 Key challenges (circles) and implications (square) related to emergency placements and child participation.

prioritized before resorting to more invasive measures (NOU 2016: 16, 2016). Previous research finds that this high threshold (Storhaug et al., 2018) and negligence in the CWS's work regarding supportive measures (Berg et al., 2017; Statens Helsetilsyn, 2019) contributes to the escalation of problems in families with whom the CWS works. Fifty-nine percent of the children in our study had been in contact with the CWS before the emergency placement, whereof 31% had received measures for more than 12 months. Close to one-third (28%) of the placements also resulted from escalating concerns over time, where a catapulting event made the placement inevitable

(Dickens, 2007, p. 83). This may be comprehended in the light of a previous study arguing that the initial work, including the follow-up and evaluation of supportive measures, is insufficient to prevent a subsequent emergency placement (Storhaug & Kojan, 2017). However, high levels of turnover within the NCWS (Baugerud, 2019) may also affect the establishment of a relationship, even in cases where there has been contact between the family and the services over an extended period of time. The question remains whether an enhanced emphasis on establishing close relationships and follow-up measures can help prevent a substantial number of emergency placements.

5 | CONCLUSIONS AND IMPLICATIONS

Until recently, research has paid scant attention to emergency cases and often presented them alongside regular CW cases. This has led to a scarcity of research that explicitly emphasizes child participation in emergency cases. However, with the growing recognition of the need to pay attention to the context within which CW research is conducted, the need to explore these cases separately has also been identified. This study identifies and discusses the particularities in emergency cases and shows how this context may impact child participation. Previous qualitative studies have found that children receive insufficient information in emergency cases (Slettebø, 2018; Storhaug et al., 2020) and that the children wish to participate more in the placement process (Haugen et al., 2017). Our findings are congruent with these studies, as we found no records of child involvement in two in five cases. By not involving the child, the CWS is hindered from obtaining the necessary information to assess the child's care situation and improve it. In the worst-case scenario, the children may not receive the right help and support. The lack of participation opportunities is moreover damaging to the child's overall well-being. Findings from previous studies underscore that most children emphasize the challenges associated with the lack of involvement in the placement processes. According to the children, this contributes to making the situation unpredictable while also impeding their understanding of the placement itself and what will happen afterward (Save the Children Norway, 2017; Storhaug et al., 2020). Through participating in decisions affecting their lives, on the other hand, children are found to experience a greater sense of control and connection to the decisions made (McLeod, 2007; Woolfson et al., 2010).

We argue for the stronger inclusion of children, especially those younger than 11, in CW emergency placement decision-making processes. In addition, we have put forth potential practical approaches that may enhance child participation in emergency cases. These include providing children with adequate information, creating opportunities for them to express their opinions on how the placement should be performed, ensuring access to a trusted person, ensuring they may choose which personal belongings they want to bring to their temporary home, and involving them in decisions regarding emergency kinship and foster or institutional care. By implementing these measures, children's participation in emergency cases may easily and effectively be ensured without requiring significant time commitments.

Demonstrating that minority families are overrepresented in emergency cases encourages the need for a deeper understanding of the socioeconomic situations that these families experience.

Finding that more than half of the children experiencing an emergency placement have been in contact with the CWS previously points to insufficient initial work in these families. Greater emphasis should be given to identifying the underlying issues and difficulties these families have been facing, thereby proactively enabling measures to address and mitigate these challenges. By gaining a deeper understanding of the circumstances leading up to the emergency

placement, appropriate interventions and support can be implemented earlier to potentially prevent the need for such placements altogether in these instances.

6 | STRENGTHS AND LIMITATIONS

Case file studies are a cost-effective and non-intrusive approach for researchers to acquire information about the challenges that children in high-risk families face and the nature of the support they need (Witte, 2020). However, case files have previously been criticized for providing a fragmented and incomplete portrayal of client situations (Egelund, 1997), representing selective and subjective decisions made by social workers regarding what to record (Askeland & Molven, 2010). The high demand for documentation within the NCWS may have positively impacted the quality of case files, particularly regarding the documentation of children's participation. However, it is important to note that the absence of documented participation in case files does not necessarily imply that participation did not occur. Nonetheless, considering the precise and growing documentation requirements, we find it reasonable to regard the documentation in NCW case files as a reliable indicator for participation. The similarity in participation records between the five CW offices may also be attributed to this high demand, further supporting our argument. Our findings may, however, reflect the limitations of our sample. Including additional and more diverse offices may better reflect the variances in emergency and participatory practices. Including case files from only five CW offices could also affect the generalizability of the study. However, the number of cases reviewed is sufficiently high to provide valuable insight into CW practice and the factors related to child participation in emergency cases.

It is also important to acknowledge that although two researchers independently coded 10% of the records, inter-rater reliability was not calculated. However, the approach involved extensive discussions that led to a shared understanding in the instances of differences. None of these differences were systematic. This practice resulted in high consistency in the researcher's coding and a carefully prepared coding form.

Last, it is crucial to note that our non-significant results for several theoretically established variables do not necessarily indicate the absence of a relationship between the dependent and independent variables. It is possible that our sample size was not large enough to detect statistically significant relationships. Therefore, further research is needed to confirm or refute these findings.

CONFLICT OF INTEREST STATEMENT

No conflict of interest to declare.

DATA AVAILABILITY STATEMENT

The data that support the findings of this study are available from the corresponding author upon reasonable request.

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ENDNOTES

- ¹ The first placement was emphasized if the child had experienced several emergency placements during this period.
- ² Due to few records of the child being informed only (6%/N = 9), this was combined with cases where the child's understanding of the situation was given weight in assessments and decision-making.
- ³ A combination of grounds was possible.

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