

Justifying interventions in Norwegian child protection - an analysis of cases of violence in migrant and non-migrant families

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How are decisions about care orders of children in cases about violence justified? What important accounts are considered? In an in-depth analysis of 94 written care order decisions from the Norwegian County Boards, we examine decision-makers arguments and hereunder if there are differences in cases about migrant and non-migrant families. The analysis shows that justifications are largely rooted in a pragmatic discourse focusing on risk-levels, drawing on empirical evidence of violence. Additionally, there is a pragmatic-ethical discourse rooted in the decision-makers assessment of parents' ability to change their behaviour, to meet the children's needs, highlighting parental denial of violence and blaming the children. This serves the decision-makers in justifying whether the necessary care for the children is possible to attain. We find only a few differences between migrant and non-migrant cases: parents' denial is more prevalent in migrant cases; in non-migrant cases consequences for the child is more prevalent; and more evidence of strong direct violence in migrant cases.

Keywords: child's best interest, violence, justifications, discourse, decision-making.

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Introduction

There exists a broad consensus that accountable exercises of state-power shall be justified and based on reason (Habermas 1996; Ward 2012). However, what constitutes a just and fair use of power differs among welfare states as well as between public sectors and disciplines (Burns et al. 2017; Burns et al. 2019; Svallfors 2012). A justification is in its simplest form a provision of a reason, an argument, an account, or a fact, that explains or defends a choice or a decision. In this paper, we use argumentation theory to examine justifications for child protection interventions in families to expand our understanding of why child protection authorities intervene to protect a child's rights and interests. Furthermore, we examine if intrusive interventions towards migrant families are justified differently than for non-migrant families. It has been a repeated suspicion that Norwegian child protection services are biased in their meeting with migrant families (Berggrav 2013), lacking in cultural sensitivity (Aarset and Bredal 2018; Berggrav 2013; Ghilechi 2018) and have less regard for migrant children's rights than non-migrant children's rights (see Skivenes 2015).

The empirical material for our study is written County Social Welfare Board (CB) decisions. The CB is a court-like decision making body that decides all intrusive child protection interventions, and its written decisions shall, according to law, include all relevant arguments and facts for the decision made.³ Thus, our study contributes to the scarce research reservoir on how decision-making bodies and the judiciary that decide intrusive child protection interventions, reason and justify child protection interventions (Burns et al. 2017). To create a comparable material, we have selected care order cases about violence. We have reviewed all publicly available written care order decisions from the CB in 2016 and 2017. A total of 94 relevant cases concerning violence are identified, of which half were families with a migrant background and half with a non-migrant background. The written decisions provide the CB's justification of whether an intervention is necessary.

The structure of the paper is as follows: the next section presents our classification on violence. Then follows an overview of the Norwegian child protection system (CPS) and its characteristics. Then we present our theoretical platform on argumentation and reasoning, before we present

³ The Dispute Act 2005.

the methods and analysis, followed by findings on the distribution and reasoning of violence, and dimensions of child's best interest considerations, discussion and finally concluding remarks.

Conceptual framework - defining violence

Parents' violence towards and corporal punishment of children are prohibited in Norway and 63 other countries - with 26 more states having committed to reforms to achieve complete prohibition.⁴ Attitudes towards corporal punishment and the regulative legislation on the matter vary between individuals and between populations (Helland et al. 2018; Burns et al. 2021; Baniamin 2020). In Norway, the population expresses little tolerance for the use of corporal punishment (87% do not find it acceptable), in contrast to Spain (62%) and Austria (76%) (Helland et al. 2018). This study showed, by using experimental design, that migrant status of the child did not have an impact on citizens' acceptance of corporal punishment.

Studies of Norwegian children and young people's self-reporting on violence show that one in five have experienced violence from a parent, and one in almost twenty-five have experienced it within the last year (Mossige and Stefansen 2016). This includes anything from impulsive and brutal physical violence to instrumental types of violence traditionally associated with the (corporal) punishment, discipline, and sanctions of childrearing. Specifically for children with migrant background the study reported them experiencing violence at higher rates than children with non-migrant background, where 19% of migrant children from western countries reported violence from mother and 17% from father, 27% of migrant children from non-western countries reported violence from mother and 20% from father, whereas 14% of non-migrant children reported violence from mother and 13% from father (Mossige and Stefansen 2016).

Research in different fields and disciplines agrees that the psychosocial development of children targeted by, as well as witnessing violence in the family, suffers from detrimental short- and long-term consequences for psychopathology, emotional, behavioural, and social characteristics and skills (Attala et al. 1995; Callaghan et al. 2015; Devaney 2008; Downey et al. 2017; Edleson 1999; Felitti et al. 1998; Øverlien 2010). It has been estimated

⁴ Global Initiative to End All Corporal Punishment of Children (2021).

that family violence in Norway results in a production loss (including a loss in taxes) of 14.4-39.6 billion NOK per year (Rasmussen and Vennemo 2017).

The World Health Organisation defines violence as “(t)he intentional use of physical force or power, threatened or actual, against oneself, another person, or a group or community, that either results in or has likelihood of resulting in injury, death, psychological harm, maldevelopment or deprivation” (Krug et al. 2002, 5). Specifically, on corporal punishment, the Committee on the Rights of the Child describes it as “any punishment in which physical force is used [...] to cause [...] pain or discomfort» and «other non-physical forms of punishment that are also cruel and degrading [...] [t]hese include ... punishment which belittles, humiliates, denigrates, scapegoats, threatens, scares or ridicules the child” (CRC Committee 2006, 4). In research, this definition has been categorized as weak and strong violence (Helland et al. 2018; see Mossige and Stefansen 2016).

While we cannot assume that victims’ subjective experiences correspond with such a distinction, it is a meaningful analytical distinction because different types of actions can have different consequences and meaning for the victim and the perpetrator (Kelly 1987). Violence towards a child will also include witnessing violence such as family or partner violence (see Callaghan et al. 2015; 2017; Dallos and Vetere 2012; Devaney 2008; Felitti et al. 1998), and we refer to this as “indirect” violence. Following this we have a classification of six types of violence including psychological and physical violence, each of them including three types: strong, weak, and indirect (see table 1).⁵

Table 1. Types and variants of violence

Type / variant	Strong	Weak	Indirect
Physical violence	Closed fist, kicking, use of object like belt or stick, sexual abuse.	Pinching, hair pulling, ear flicking, and use of open/flat hand.	Child witnessing weak or strong physical violence against others at home or in family situations.

⁵ A note on the relationship between indirect violence and the other variants: cases coded as “indirect” of either violence type are cases with exclusively indirect violence; however, in cases of the (direct) weak and strong variants, there may be cases where there is also indirect violence present.

Psychological violence	Humiliation, frightening, scaring, threatening, ridiculing.	Belittling, blaming, scapegoating.	Child witnessing weak or strong psychological violence against others at home or in family situations.
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Norwegian child protection system and legislation

For the CPS to be able to act and know when to act, they are reliant upon reports or referrals of concern about a child’s situation. In Norway, it is mandatory reporting for professionals, public employees, and a moral obligation for citizens in general. In 2017 about 1/3 of all referrals (18,637/16.4 per 1000 children) to the CPS concerned observed violence or fear of violence, including sexual abuse.⁶ Reports on physical violence has a higher frequency than psychological and sexual abuse put together. Based on the referrals, we assume that violence is a concern the CPS is handling regularly. In the Norwegian system there is not extensive use of schematic guidelines and checklists to determine risk for a child (Skivenes 2011; Falch-Eriksen and Skivenes 2019).

The Norwegian child protection system is a family orientated and child-centric system aimed at providing support for families and to prevent more intrusive measures (Skivenes 2011; Hestbæk et al, in press). The CB decides all serious interventions, such as involuntary out-of-home placement. There are 10 CBs in Norway, regionally placed. The CB is a court-like decision-making body following the same procedures as courts, and decisions may be appealed to district courts and further to appeal courts under specific conditions (Skivenes and Søvig 2017). The CB usually consists of three decision-makers, chaired by a lawyer with judge qualifications, an expert from the psychological, medical, social work, or child protection fields, and a layperson. Care orders are usually decided after negotiating hearings for typically 2-3 days in which all parties present their arguments and evidence (Skivenes and Søvig 2017). Parents are provided free legal aid. Children able to form an opinion have a right to be heard, and there is a spokesperson arrangement in place that is used for most children seven years and older.⁷

⁶ Statistics Norway: <https://www.ssb.no/statbank/list/barneverng> (SSB 2020)

⁷ See for example Magnussen and Skivenes 2015; Enroos et al 2017, for details on children’s involvement.

The Norwegian Child Welfare Act (1992) demands that three main criteria are fulfilled to grant a care order. First, section 4-12 a-d sets the intervention threshold:

- (a) if there are serious deficiencies in the daily care received by the child, or serious deficiencies in terms of the personal contact and security needed by a child of his or her age and development,
- (b) if the parents fail to ensure that a child who is ill, disabled or in special need of assistance receives the treatment and training required,
- (c) if the child is mistreated or subjected to other serious abuses at home, or
- (d) if it is highly probable that the child's health or development may be seriously harmed because the parents are unable to take adequate responsibility for the child. (Article 4-12, official translation).

Second, a care order can only be issued based on the current situation of the child, and only if no in-home and other services may create a satisfactory situation, and third, a care order must be in the child's best interest.

Decisions are justified in writing, and typically consist of 12-20 pages including facts of the case, parties' arguments, and the CB's view on the case and the important reasons for the decision.⁸ In 2016 and 2017, the CB decided a total of 1684 cases about care orders. On average, 86% of the care order cases, pursuant of the whole section 4-12, results in a care order⁹ and about 40% are appealed to the district court (Skivenes and Søvig 2017).

Theoretical platform of arguments and reasoning

There are relatively few social science studies of written judgements and how decision-makers in child protection care order cases are justifying their decision (Ward 2012; Burns et al. 2017), and systematic reviews on the topic are non-existing.¹⁰ Studies analysing judgements concerning removing children from their birth families covers varied topics: children of parents

⁸ See appendix (<https://discretion.uib.no/projects/supplementary-documentation/#1552296903964-af7d19a0-9d4c>) with an outline of the content of the written decisions.

⁹ In Skivenes and Søvig (2017) and Skivenes and Tonheim (2018) the formal procedures and the workings of the CB are outlined.

¹⁰ This is based on a literature search conducted on systematic reviews on children at risk and child protection within the Social Sciences and Law, by Regina Rein, Senior Librarian at the University of Bergen in May 2020.

with intellectual disabilities (Booth and Booth 2004; McConnell and Llewellyn 2002); how parents defend (justify, excuse, normalise) their actions when appealing court decisions concerning a care order (Juhász 2018; 2020); and how judges justify changing or maintaining, or just making, decisions concerning adoption (Helland 2021; Skivenes 2010). Furthermore, there are some studies on children's involvement (Archard and Skivenes 2010; McEwan-Strand and Skivenes 2020) as well as an analysis of judgements on adoption without consent from the European Court of Human Rights (Breen et al. 2021).

An examination of arguments in the written decisions provides us with insights into the consideration of the decision-makers' and the decisive arguments for a care order. We draw on deliberative theory, as outlined by Alexy (1989) and Habermas (1996), in which a main idea is that legitimate answers to normative questions - such as defining the best interest for a child - can be found through rational discourse in which all parties involved participate and all relevant arguments are presented for open and free discussion (Eriksen and Weigård 1999; Ward 2012). Such a rational discourse is procedural at its core, consisting of four key premises: that all persons concerned can participate, can propose any assertions they wish, actually believe in these assertions, and that they aim to be consistent in their use of words and concepts (see Eriksen and Weigård 1999). According to Alexy (1989, 191ff), three rules should be followed: First, the justification rule requires that, if necessary, a stated assertion must be reasoned or justified. The second rule embodies principles of universality, equality and freedom and asserts that all parties concerned should be allowed to participate in such a way that they can freely ask questions, introduce their opinions, and express their needs and attitudes. The third rule is that nobody can be prevented from exercising the first and second rules, either by external or internal coercion. The formal requirements for proceedings in care order decisions in Norwegian CB and the judiciary, are considered to be in accordance with this theoretical framework (Eriksen and Skivenes 1998).

Judiciary decisions about interventions into the family must be justified according to a value-laden best interests-principle. A value- and norm-pluralistic society challenges the relationship between the general principles that underpin society, as well as society's policies with respect to

children and families. Although the legal profession is vested with the authority to interpret law and make decisions about what counts as current law within a specific area, justification standards still apply for criticizing and assessing the quality of the decisions (Dworkin 1967). Molander et al. (2012, 219) refer to the epistemic dimension of judiciary discretion and explain it this way: “... *from a normative point of view, the latter aspect (epistemic) is fundamental, since the delegation of discretionary powers is based on the epistemic assumption that the entrusted actor is capable of passing reasoned judgments.*” (see also Freeman, 2007). Applying deliberative theory, it is distinguished between four discursive standards: pragmatic, ethical, moral, and legal discourses (Habermas 1996; Eriksen and Weigård 1999). The setting for our analysis is the judiciary and the legal system discourses, demanding that all decisions and interventions are in accordance with the law and the legal methodology (see Boe 2020; Eckhoff 1971). A decision in court also answers to requirements of rationality that entail normative standards of truth, ethically good and the morally correct. Based on previous research on written court judgements (Juhász 2018; Skivenes 2010; Ward 2012), we focus our analysis on *pragmatic* and *ethical* arguments. The first, pragmatic discourse refers to empirical facts and their relations in defining how the world is, what is needed to reach a goal, and what the likely consequences of actual conditions are. Pragmatic arguments, such as evidence of maltreatment, what has happened, and professional knowledge of likely consequences for child development are central to discussions of a dilemma. The standards of evaluation to which arguments and deliberations are subjected to are whether an assertion is true or false and whether statements are documented, reliable and realistic. We expect, for example, that pragmatic arguments will dominate in documentation and evidence of violence in relation to the child welfare law article 4-12 a-d (see above). The second, ethical discourse, concerns what might be a good and fulfilling life for an individual. Discussions of what constitutes a good childhood and family life, and the matter of a child’s best interests, are at the outset an ethical and indeterminable matter in value pluralistic societies (Mnookin 1975; Elster 1989). The standard of evaluation used is hermeneutical interpretation of norms and rights, where opinions of what might be good or acceptable for a child are discussed and interpreted in relation to cultural and social norms and practices of a value-

pluralist society (see Skivenes 2010, 4ff). We expect, for example, that discussions around the child welfare law's criteria that a decision must be in the child's best interest will be in an ethical discourse (see third section of article 4-12 above). In the analysis of the written decisions, we examine if the CB uses pragmatic and/or ethical arguments when justifying whether a care order should be enacted.

Method

This study is part of a larger comparative study on the norms for and the acceptability of state intervention into families funded by the Norwegian Research Council. This study compares decisions made by the CB in care order-cases in non-migrant and migrant families in which violence is a central concern. There was a total of 908 care order-cases processed by the CB in 2016, and 776 in 2017. Of these, 384 (23%) care order cases were publicly available online through the private foundation www.lovdatab.no at the time of data collection (196 in 2016 and 188 in 2017). All cases in Lovdata are de-identified. To identify cases we started with two inclusion criteria: (1) the legal criterion of care order decisions by the CB according to the Norwegian Child Welfare Act article 4-12; and (2) the violence criterion, that violence is a central reason for concern in the case. Cases where violence only pertains to the background or history of one or both parents, but not called out as an aspect of the family situation or considered a risk factor, are not included. To identify cases about violence all 384 decisions were read and filtered manually by searching for key terms such as "violence", "punishment", "disciplining", and "abuse", as well as narrower terms such as "strike", "kick", "slap", "belt", "threats", "yelling", "shouting", and "stick". We differentiate and consider violent actions, not their effects, and we focus on adults' violence, and exclude cases where the child is the sole violent agent. Of the 384 decisions, 104 decisions had violence as a characteristic: as risk, allegations, or proof of violence by one or both parents. Fifty-two of these decisions concerned migrant families; children and parents who have migrated, as well as children born in Norway of parents that have migrated,¹¹ and 52 cases concerned non-migrant families. The anonymised state of the cases made it difficult to distinguish between different types of migrants and different origins. While some were clearly

¹¹ This necessarily simplified definition corresponds with Statistics Norway's definitions (SSB 2013).

from war-torn countries, and many had listed “country 1” or “country x” when describing the family or parents,¹² a few were more difficult to reveal a migrant background for, as there were no references to “country”, with little background or nationality information, and in one case for instance, only a quote from a sibling of one of the parents. Of the 104 violence cases, a total of ten cases were excluded from the analysis because they lacked justifications around the criterion of the child’s best interest (n=7), or it was not possible to identify type of violence (n=3).¹³ Thus, we have a data material of a total of 94 cases, hereof 47 migrant cases and 47 non-migrant cases. We have given each case a code that we refer to when presenting illustrative quotes in the paper, migrant cases are coded MNorwayXX and non-migrant cases are coded nMNorwayXX. All translations have been done by author 1.

The data was analysed in several steps. First, we collected descriptive information about the 94 cases about violence, such as the age of children, migrant or non-migrant, types and variants of violence, etc. The 94 decisions concern 159 children with an average age of 8.4 years for all the children. None of the cases in the selection of decisions involved more than 4 children. Forty-eight decisions concern one child in the family; 32 decisions concern two children; 9 concern three; and 5 decisions concern four children. The average age of the oldest child in cases of two or more children is 9.8, the average age of only-child cases is 9.3. The second child average age is 7 for decisions concerning two or more children, for cases concerning only two children the average for the second child is 6.2. For the third child in cases with three or more children, the average is 6.2, in cases concerning only three children, the average is 5.1, and for the fourth child, the average age is 5. Exact ages of children below 1 year old are not provided and these have all had the age rounded up to 1 year. 15 children in the data had an age of less than or 1 year old. Of the 94 decisions 90 (95.7%) resulted in a care order, 3 did not, and 1 resulted in a mixed decision with a care order for the youngest children, but not for the oldest. Thirty-four of the

¹² The decisions do not consistently provide the reason for migration to Norway, so this is a wide variable that includes anything from labour migrants to asylum seekers and refugees. Continent or global region is not consistently provided in the decisions either, and countries are only referred to as single letters or number, e.g., “country 1” or “country x”.

¹³ Three cases were about violence, but due to sparse information in the cases we cannot identify the variants of either type of violence. Seven cases in the data did not result in a care order because the CB concluded the legal threshold for removing the child from her family was not met, and thus there are no further justification.

decisions involved one or more children with siblings that were not included in the decision. In these families some children had already been removed, some children were not considered to be exposed to the kind of risk or neglect as the one(s) covered in the decision, or were living with another parent or family, and some siblings were 18 years or older.

In the second step of the analysis, we identified and categorized the legal criteria for a care application (see table 2). Most of the cases are shown to meet the most basic criterion of the care order section of the child welfare act, most often linked to neglect, whereas sub-section c) and d) have fewer instances. We also see that more migrant cases are considered to meet the stricter sub-section c) than non-migrants, where a total of six migrant cases also cite sub-section c) in the decision, and only one non-migrant case cites this sub-section. Another stricter sub-section is d), which shows no difference between migrants and non-migrants in our data.

**Table 2. Legal criteria met for care order decision by family type¹⁴
(n=94)**

Family type	4-12a	4-12a & c	4-12a & d	4-12c	No care order	Total
Migrant	38 (81%)	5 (11%)	2 (4%)	1 (2%)	1 (2%)	47 (100%)
Non-migrant	42 (89%)	1 (2%)	2 (4%)	0	2 (4%)	47 (100%)

The third step of the analysis was an examination of how the CB concerned itself with preventive services/help measures that had been implemented, if any (table 3). Dismissed preventative or help/support measures refer to where the CB dismisses the viability of efforts leading to improvement or adequate change. In three cases any coverage of this subject was absent. In a few more, it was recommended to continue with these types of measures, regardless of the outcome of the case; either to increase the likelihood of reuniting the children with their family or as in two of the non-migrant cases that did not result in a care order, it was deemed as a sufficient measure. In

¹⁴ It should be noted that several cases were forwarded by the CPS with alternate sub-sections of the care order legal criteria, the table presents the articles the CB found to be met.

the large majority of the cases, the care order decision mentioned that such measures had been attempted but were not found to be sufficient.¹⁵

Table 3. Preventative/help/support measures implemented, by mention in the care order decision (n=94)

Family type	Dismissed	Absent	Attempted	Recommended	Total
Migrant	12 (26%)	1 (2%)	33 (70%)	1 (2%)	47 (100%)
Non-migrant	8 (17%)	2 (4%)	34 (72%)	3 (6%)	47 (100%)
Total	20 (21%)	3 (3%)	67 (71%)	4 (4%)	94 (100%)

The fourth step classified the types of violence in the cases according to the six types of violence (see table 1 above) so that we could compare the arguments across cases. There are 14 violence-combinations in total in the cases, whether strong physical and weak psychological, indirect physical and indirect psychological, or solely physical violence. We elaborate on this in the finding section.

In the fifth step, we conducted a close reading of the section in the judgement where the CB's reasoning and justification of their decision are presented. We focused on patterns and trends that revealed themselves as important in relation to the threshold and child's best interest criteria and related them to pragmatic and ethical discourses. From the CB's reasoning on the child's best interest criterion we identified eight themes, and these were related to parents' arguments (three themes); to children's view and culture¹⁶ (two themes), and the implication of evidence and arguments (three themes). These empirically informed themes were used as codes that are mutually exclusive (see table 4), and a systematic coding of all cases were undertaken with the software NVivo 12. Reliability testing of codes was a continuous process, as coding was done in several rounds, which included simultaneously using NVivo's coding stripe function to check what was coded and under what codes they had been placed.

In presentations of findings, we have calculated percentages to make comparisons between categories accurate, and we have used the software

¹⁵ See Luhamaa et al. 2021 for similar findings in removals cases of newborns in eight European jurisdictions.

¹⁶ The culture code only pertains to the migrant cases.

Zighe Signifikans¹⁷ (95% level) to test if differences between the two samples of migrant and non-migrant are significant. We use ** to show $p < 0.05$.

Table 4. Code descriptions on CB arguments in relation to Child's best interest considerations, and frequency (n=94)

Codes	n	Description
CB on parent's arguments		
Denial	53 (56%)	Parents deny and trivialise violence, neglect, and family situation.
Acknowledge	34 (36%)	Limited confession or acknowledgement from parents concerning violence, neglect, or other shortcomings in care situation.
Blame	20 (21%)	Parents blaming and accusing child of lying for the family's current situation, for the violence; of manipulating and/or being manipulated.
CB on child's view and consideration of culture		
Child opinion	68 (72%)	The child's opinion, in terms of living situation; and social contact with parents.
Culture	27 (29%)	CB references and/or makes statements concerning ethnic/cultural background of the family. From relevant informational facts to specific situation and the role of culture, and what should be considered common and expected knowledge.
CB drawing implications of evidence and arguments		
Consequences	62 (66%)	CB references continued and/or future consequences of violence/care situation may or will have on child, long-term consequences, and risks if returned to parents.
Change	54 (57%)	CB assesses the parents' potential to change, learning and shedding detrimental habits, as well as resistance to supervision, and recognition of the effects of their actions, including personal functioning.
Insufficient skill	52 (55%)	CB arguments concern expectations to the sufficiency or insufficiency of the parents' parenting skills.

There are limitations with the study as the sample is not representative, but quite large with close to 100 cases from all CBs in Norway which enables us

¹⁷ <https://aardal.info/zighe-hva-er-signifikanstesting/>

to detect some patterns in reasoning. However, the comparisons of migrant and non-migrant families will only provide some indications on similarities and differences. Furthermore, we do not analyse the care order application nor other types of information in relation to the proceedings that have informed decision makers.

Findings

On the reasoning of violence

The analysis of 94 care order cases shows that the children were exposed to several types of violence. In table 5a the prevalence of physical violence is displayed, including strong violence in 38 cases, weak violence in 19 cases, in 28 cases the child experienced indirect violence, and in four cases it is not possible to classify which variant of physical violence occurred. There is a significant overweight of strong physical violence in migrant families, and a significant overweight of indirect physical violence in non-migrant families.

Table 5a. Distribution of physical violence variants (n=89)

	Total	Migrant	Non-migrant
Strong:	38 (43%)	24 (63%)**	14 (37%)
Weak:	19 (21%)	10 (53%)	9 (47%)
Indirect:	28 (31%)	11 (39%)	17 (61%)**
Indefinable:	4 (4%)	1 (25%)	3 (75%)
Total:	89 (100%)	46 (52%)	43 (48%)

In table 5b the prevalence of psychological violence is displayed, and in 33 cases the children experience strong psychological violence. In 15 cases there is weak psychological violence, and in 31 cases there is indirect psychological violence. There is a significant overweight of strong psychological violence in migrant families, and a non-significant overweight of indirect psychological violence in non-migrant families.

Table 5b. Distribution of psychological violence variants (n=79)

	Total	Migrant	Non-migrant
Strong:	33 (42%)	20 (61%)**	13 (39%)
Weak:	15 (19%)	7 (47%)	8 (53%)
Indirect:	31 (39%)	13 (42%)	18 (58%)
Total	79 (100%)	40 (51%)	39 (49%)

In a majority of the cases (n=82) violence was combined with other risk factors such as neglect, crime, substance abuse, and mental health issues, but for 12 of the cases, of which ten cases concerned migrant families, violence was the decisive factor for removal. Of these, all 12 had strong physical violence, with nine also involving strong psychological violence. One of the remaining three cases involved indirect psychological violence, and two cases did not describe or report psychological violence in the decision.

Most of the cases have a combination of physical and psychological violence and we created five categories based on the frequency within combinations (see table 6). Cases that score “strong” in both psychological and physical violence (n=23). Cases that score “indirect” in both psychological and physical violence (n=20). Cases that only have a score in physical violence and none in psychological violence (Physical, n=15). Cases that only have a score in psychological violence and none in physical violence (Psychological, n=5), and cases that have various combinations of violence (and not covered by Strong or Indirect) (Combined n=31).

Table 6 shows the distribution of the cases according to the analytical violence-categories for the 94 cases. For the category strong physical violence and strong psychological violence, there is a non-significant overweight of migrant families, and more non-migrant families in the category of psychological violence - otherwise, the groups are overall similar.

Table 6. Violence categories distribution (n=94)

Violence categories	Total	Migrant	Non-migrant
Strong physical and strong psychological violence	23 (24%)	15 (32%)	8 (17%)

Indirect physical and indirect psychological violence	20 (21%)	9 (19%)	11 (23%)
Physical violence (strong, weak, or indirect)	15 (16%)	7 (15%)	8 (17%)
Psychological violence (strong, weak, or indirect)	5 (5%)	1 (2%)	4 (9%)
Combination of types of violence (f ex strong physical and weak psychological violence)	31 (33%)	15 (32%)	16 (34%)
Total	94 (100%)	47 (100%)	47 (100%)

In 23 cases (24%) the children are exposed to strong physical and strong psychological violence, and the following quote from a case with three children aged 2, 7, and 9, give an illustration:

The biggest risk factor is associated with violence. [Child 1] and/or [Child 2] have described [...] a care situation characterised by constant fear of being beaten, threatened, tugged and harassed. Both [Children] have repeated in different contexts that mother hit them with a spatula and a folded towel, where the corners were folded in order to [cause] more pain. (From case 2016-MNorway20 -Strong).

Indirect physical and psychological violence was evident in 20 cases (21%), with the following quote from a case with two children aged 8 and 11 to illustrate:

Both [Children] were exposed at an early age to their parents' quarrels and struggles, including an episode in which [Father] perpetrated serious violence to [Mother]. In [Year], the children were put in emergency care after witnessing their father taking a stranglehold on mother and that she had to be picked up by an ambulance. Both children can still talk about traumatic experiences from the time their parents lived together. (From case 2016-MNorway09 - Indirect).

Fifteen cases, (16%) concerned solely physical violence, as the following quote from a case with one child aged 15 illustrates:

[Child] has had a problematic upbringing where [Child] has been subjected to violence by [Child]'s mother. It is pointed out here that in [Year], Mother was sentenced to 9 months in prison for having perpetrated violence against [Child]. (From case 2016-nMNorway28 - Physical).

Five cases concerned only psychological violence (5%), as the following quote from a case with one child aged 12 illustrates:

Parents have shown poor judgment by using threats and inappropriate strategies in setting boundaries. This is considered to be very severe from the symptoms [Child] shows today. (From case 2016-MNorway08 - Psychological).

Thirty-one of the cases (33%) include a variety of combinations of violence types, as illustrated with this excerpt from a case about two children aged 6 and 4, which experienced strong physical violence, and the psychological violence is indirect:

[Mother] has told a number of agencies about a relationship where [Mother] has experienced [Father] as aggressive and controlling. [...] [T]he relationship has at times been characterized by severe disagreements, to which the children have also been exposed. The father acknowledged this in his statement, that the children had witnessed the parents arguing loudly. [...] [Mother] has reported violence from the [Father] against her and the children, including that [Father] pushed her into a bed when she was pregnant, and that he has hit her in the face with a flat hand. [...] The roughest episode, in which [Father] beat the [Children] with a rolling pin so they turned blue from waist down [Mother] has repeated on numerous occasions. [Mother] has also referred to some other episodes, including the fact that [Father] hit [Child] so hard that she saw [the marks of] five fingers on [Child's] thigh. (From case 2017-nMNorway12 - Combined).

For all the 94 cases, the CB found the maltreatment/neglect criteria in the child welfare act §4-12 satisfied, and the justifications were overall anchored in pragmatic arguments on empirical facts and evidence. The violence in

these cases, often in combination with other risk factors, shows the threshold and the living situation for the involved children, this causes the child protection authorities concern and to suggest an intrusive intervention.

The CB has also considered if in-home services have been proven insufficient or may remedy continued care by the natural parents (see table 3 above). A large majority (n=91) of the cases resulted in a care order, but for three cases the CB decided that in-home services would be sufficient to care for the child's best interest.¹⁸ The CB must undertake a holistic consideration of the situation for the child and ensure that the decision is in the child's best interests, and it is the CB best interest-consideration we in the following analyse in-depth.

On dimensions of the child's best interests considerations

The analysis shows that the CB's child's best interest reasoning was centred around three main dimensions: (1) Parents arguments; (2) Child and Culture; (3) Implications of evidence (see table 4 above). In the following we present these dimensions and their sub-themes, and we reiterate that it is the perspective of the decision-makers and their accounts that are analysed.

CB on parents' arguments

Denial

One of the main concerns in the CB's decisions is the parents denying the exercise of violence on their part. In 53 cases *denial* of violence and neglect, and/or trivialisation of violent actions and the effect of violence, and/or claims about it all being a misunderstanding, were argued. This illustrative excerpt from a case with two children aged 11 and 15 reveals how a parent claims, by using primarily pragmatic arguments, it is all a misunderstanding:

It is obvious that [Father] does not see what these outcomes in terms of knocking and punching, and the knife episode, do with the [Child],

¹⁸ In one case the majority of the CB were of the opinion that family council, in-home social worker, check-up visits and relief by setting up a visitation home should be tried due to parent's evident cooperative ability and willingness. In the second case no in-home or other support measures had been tried, however the parent wanted to try, the CB deemed this viable and necessary. In the third case, the parents and the CPS had experienced difficulties in cooperation, which at the time of the proceedings had improved due to change of CPS contact worker, leading CB to decide that improvement was likely through support measures.

and he has no understanding that [Child] is scared. [Father] says it was meant as a joke or was misunderstood, and then it does not matter to [Father] how it was perceived by the child. (From case 2016-nMNorway32).

The next illustrative excerpt from a case with one child aged 11, shows pragmatic arguments trivialising on the parents' part of their actions and denial that they are in fact violent:

[B]oth [parents] were trivialising by minimizing the importance of their own actions and externalizing by seeking to put the cause of [Child's] great mental health difficulties outside of themselves. Neither of them seemed to accept the fact that [Child] has significant psychological difficulties today as a result of the insecurity he has been exposed to at home. (From case 2017-nMNorway15).

Acknowledge

No parents in our data made a full confession of all accusations, descriptions and allegations of violence, abuse, and neglect. However, in 34 cases parents did to a limited degree admit or acknowledge one instance concerning violence; and/or one event or element related to the care situation (e.g., neglect, substance use). Also, in some instance, this admittance or acknowledgement came about due to changed circumstances or under certain conditions, for instance after a stay at a mother-child unit or having a social worker assist in the home. An illustrative excerpt from a case with two children aged 6 and 4, shows a parent's recognition of shortcomings in the care situation after a change in circumstance, referring to neglect related to substance use:

The board considers that the stay at [institution] showed that [Mother's] later decision to place the [Children] in emergency homes was based on an acknowledgement of her own shortcomings. (From case 2017-nMNorway12).

Another illustrative excerpt from a case with two children aged 14, shows a partial confession of corporal punishment, but the CB calls for acknowledging any of the other aspects of the children's testimonies, were not accommodated:

The parents have acknowledged some instances of lighter form of "corporal punishment", but in their explanations for the board they have not expressed any recognition or reflection on the significance of the [Children's] explanations beyond this other than that the parents have both stated during the proceedings that what the [Children] have said are both contradictory and partly exaggerated. (From case 2016-MNorway10).

Blame

In 20 cases the parent(s) blame the child/children for their actions and/or the current situation of the family, i.e. being involved with child protection services and care order proceedings. In 19 of the *blame*-cases, parents also deny or trivialize the violence or the concern in the case, see the denial code outlined above. Illustrative is the following case with one child aged 10 where the CB is referencing an ethical standard of what children should handle:

[p]arents' reflection on their own care practice has not been affected by self-criticism, rather they attributed to [Child] the responsibility and the situation the family has come in. This is a heavy burden for a child to carry. (From case 2016-MNorway03).

Blaming also appears in instances of more direct blame and accusation against the child, as in the following illustrative excerpt from a case with one child aged 11, that includes pragmatic arguments on denial and accusations of lying:

[Mother] has briefly stated that she has never seen scars or marks on the [Child's] body, that there is no evidence of violence, and that [Child] is lying and has been manipulated. (From case 2016-MNorway23).

The next illustrative excerpt from a case with one child aged 16, shows how parents' accusations of responsibility may sometimes be targeting the child directly:

As far as [Mother] is concerned, the board will specifically refer to the SMSs she sent to [Child] in December [Year], where she places all responsibility fully on [Child] and strongly rejects [Child]. (From case 2016-nMNorway05).

Another instance of this kind of blame or accusation of lying shows how parents of a 16-year-old adhere motivation to the child to cause the notification to the CPS:

The parents have consistently held that [Child] is lying about the conditions at home, and that [Child] has chosen to say that s/he has been subjected to violence, in order to move away from home and thus gain greater freedom. (From case 2017-nMNorway24).

CB on child opinion and culture

The analysis shows that the CB is considering the child's view and minority considerations.

Child opinion

The CB explicitly expressed and referred to the opinions and voices of the children in 68 cases. They sometimes appear summarised, at other times paraphrased, and sometimes meticulously quoted. They mainly concern whether the child wants to stay with their parents or if they want to move, but at times also cover communication and contact after a potential care order. Two illustrations from the CB's considerations are included, the first with references to both ethical and pragmatic arguments, from a case with a 15-year-old child:

[Child] has rights as a party to the proceedings. Through [Child's] lawyer, [Child] has clearly stated that [Child] does not want to move home to [Mother]. [Child] has also stated the same to [Person X] and [Person Y]. This position seems mature and well-considered in the board's assessment. In sum, the county board assumes that [Child] wants a care order. (From case 2017-MNorway26).

And second, in which the CB cited a report by a spokesperson of a 12-year-old child:

We get to talk together undisturbed in the living room. [Child] says s/he is fine and is happy to be home. Is back in school again and just had a science test which went well. [Child] doesn't want to live anywhere else but home. [Child] has now tried to live in a foster/placement family and institution and does not want any of that. [Child] wants to join [the football club] again. [Child] sticks to a couple of good friends and wants to stay away from nonsense and trouble, s/he says, and "avoid chaos." [Child] is excited about the outcome of the meeting on Tuesday, much is put on hold for the final decision, such as the start of football training. We end the conversation. [Child] has nothing more to say and shakes my hand before I leave. (From case 2017-MNOrway06).

Culture

In 27 out of 47 migrant cases, the CB made statements about cultural or national background of the family in relation to the decision. In some arguments, the CB merely makes explicit information presented to them in a manner of documenting something they deem important and relevant; specific situation and the role of culture according to the CB's perspective; and what should be considered common and expected knowledge, hinting towards aspects of integration and adaptation into a new social and cultural context. The following excerpt - from a case with three children aged 4, 12, and 16 - illustrates concise and short reference to documenting culture as part of the proceedings and added to the decision as relevant, and arguably important:

The family is [ethnicity] from [Country X]. In the proceedings it is informed that in this culture violence is used as a part of discipline/raising children. (From case 2016-MNOrway14).

The next excerpt from a case with one child aged 13, illustrates an instance of how the CB refers a specific situation and an ethical argument on the role of culture:

In the board's view, the neglect of care occurred especially in the last six months [Child] lived at home. [Child] began at this time to exhibit

what the family perceived as inappropriate behaviour based on their culture/religion. (From case 2017-MNorway16).

Culture may also be treated more in relation to integration and the adoption of knowledge of ethical standards regarding child rearing in a new cultural context, as this excerpt from a case with two children aged 5 and 7 illustrates:

As the parents describe this, it is so-called [corporal punishment], which according to parents and private witnesses is quite common in [Country X]. [Father] has admitted to the board that he has slapped [Child's] hands and legs when [Child] is "naughty" and will not listen. [Child], on the other hand has described it as being beaten and that the blows are hard and that it hurts. The board has also noted that [Child] has been scared and that [Child] has told the emergency caregiver that [Child] is no longer scared. Father has lived in Norway for 27 years and should therefore be well aware that this form of upbringing is unacceptable and punishable here. (From case 2017-MNorway13).

CB drawing implications of evidence and arguments

The analysis shows that the CB emphasise especially three implications of the evidence: Consequences for the children; Parental change potential; and Parenting skills.

Consequences for the children

Consequences that children may and do suffer are argued in 62 of the cases, the CB uses pragmatic arguments ranging from present situation and consequences; long-term consequences if no change of the situation; and risks for the children if returned to parents. The excerpt below, from a case with one child aged 10, illustrates the future risk the CB considers the child may live with, despite the current absence of such consequences:

Even if [Child] as of today shows no sign of maldevelopment or apparent difficulties, to grow up under unsafe conditions will threaten [Child's] future psychological health. (From case 2017-MNorway19).

The consequence-arguments also follow from current situation and consequences to social-psychological care if returned to parents from placement as illustrated by this excerpt from a case with two children aged 5 and 9:

However, the children are characterized by their experiences with both parents, and both [Children] are assessed to have an unsafe relationship with their parents. Based on the description of the children, the board agrees with this and finds it clear that serious shortcomings in the care of the children's mental health will occur if the children - both or one of them - were to be returned to [Father's] care. (From case 2016-nMNorway21).

Parental change potential

The potential for change in the parents, including learning new skills and shedding detrimental habits, is something the CB brings forward in 54 cases. *Change*-arguments are primarily pragmatic, ranging from parents resisting supervision, and/or not recognising the effects of their actions, to personal functioning - all regarding parents being deemed difficult or impossible to guide and incapable of or unlikely to change. The following excerpt from a case with two children, both aged 14 is illustrative:

The board, after hearing the parents' statements during the proceedings, cannot see any evidence that change-conducive supervision has resulted in increased self-awareness or initiated any change on the part of the parents. The board finds it probable that any change-work of this nature, especially with regard to the father's way of treating the [Children], will have to extend over a long period of time. As the board sees it, it is unlikely that [Father] will be able to give proper, emotional care to the [Children], before he is well into behaviour-changing work. Furthermore, the board does not consider it likely in the foreseeable future, that mother will be able to adequately compensate for the serious shortcomings in the care situation. (From case 2016-MNOrway10).

In another illustration, about a child aged 11, the personal functioning of the mother is focused on, as this excerpt from the CB's reasoning shows:

[Mother's] failure is considered by the board as a manifestation of her personal functioning. Mother is unable to see her own role, not in relation to [Child] nor in relation to conflicts that arise around her. The stressors that have characterised her existence for a long time and weakened her as a caregiver, have come about in the wake of her own choices and her way of dealing with her surroundings. She is not very amenable and appears to have poor mentalisation ability ... Based on this case's level of concern, as well as the mother's unwillingness to cooperate on change-conducive supervising measures, a request for a care order should have been made earlier. (From case 2017-nMNorway23).

Parenting skills

Fifty-two cases contain argumentation by the CB about the expectations to parenting skills and the parent role. It is cases where the CB refers to the ethical standards of parenting and upbringing of children. Among these cases there is some variation, ranging from hygiene, lack of housework, to teaching their children basic personal and dental hygiene. Also, there are variants concerned with parents' responsibility for the children's health, social and future adult life. In these arguments there also appear assessments of implications of parent life-choices that do not appear conventional, like not seeking employment or education, and the effects of alternative lifestyle choices. The excerpt below, from a case with two children aged 9 and 15, illustrates how the CB points to an ethical standard of friendship for children and treats tidiness in the home as a sign of the parents' competency and whether house hygiene is conducive with social life and development for children:

The threshold for what is an acceptable standard in a home is not possible to set, and it must be kept in mind that there are different perceptions about how one should have it at home. The board will, in any case, note that a home characterized by disorder and strong cat odour is not a home that invites visitors, and therefore does not appear to be a suitable place for the children to spend time with any friends. (From case 2016-MNOrway11).

This next excerpt, from a case with three children aged 2, 7, and 9, refers to a pragmatic argument with more severe repercussions of parents' lacking

focus on hygiene and self-care, and the parent's responsibility for their children's health:

The oldest children have had poor dental hygiene and need extensive dental treatment despite their young age ... [Mother] and [Father] have not looked after the children's dental health. The children have suffered significant dental damage, and [Child 1] has had to remove several teeth. (From case 2016-MNorway20).

From the same case as the tidiness excerpt, the CB here focuses on the ethical dimension on the responsibility of parents as role models to ensure a good and independent future for the child, as well as questioning the parent's life-choices:

As the board sees it, it is generally an important task for parents to ensure that children get the best possible life as adults, including supporting them while receiving an education that enables them to support themselves and any children of their own when they grow up. This includes being a good role model for their children. The board notes that mother at the age of [45-55] has rarely been employed, despite the fact that she herself informed the board that she has always been healthy, both mentally and physically. (From case 2016-MNorway11).

The below excerpt from a case with one child aged 11 illustrates how the CB also concern themselves with the effects and potential detrimental effects of parents leading alternative lifestyles:

There are several aspects of [Child's] upbringing that have not been elucidated, among other things related to mother's alternative orientation and the impact this may have had on [Child's] emotional life and understanding of reality. That the [Child] should not be exposed to mother's practice when it comes to meditation and alternative treatment must be said to have the presumption against

it. However, to what extent this has been harmful, is difficult for the board to assess. (From case 2017-nMNorway23).

Summary of CB main considerations

The distribution of the codes, divided on migrant and non-migrant family cases, is displayed in table 7a. Comparing the accounts, it is an overall similarity between cases with migrant and non-migrant families, except for the significant overweight of “Denial” in migrant cases, and the significant overweight of describing the “Consequences” for children in the non-migrant cases. There is also a difference in “Child opinion”, with more migrant cases having the child opinion mentioned.

Table 7a. Codes according to family background (n=94)

	Total (n=94)	Migrant (n=47)	Non-migrant (n=47)
<i>CB on parents’ arguments</i>			
Denial	53 (56%)	33 (70%)**	20 (43%)
Acknowledge	34 (36%)	19 (40%)	15 (32%)
Blame	20 (21%)	11 (23%)	9 (19%)
<i>CB on child’s view and consideration of culture</i>			
Child opinion	68 (72%)	38 (81%)	30 (64%)
Culture	27 (29%)	27 (57%)	n/a
<i>CB drawing implications of evidence and arguments</i>			
Consequences Child	62 (67%)	25 (53%)	37 (79%)**
Change	54 (57%)	29 (62%)	25 (53%)
Insufficient Parenting skills	52 (55%)	28 (60%)	24 (51%)

Table 7b displays the distribution of arguments concerning cases with physical violence cases, and migrant - non-migrant. Perhaps the most evident finding here is that in the cases with strong violence there is also a high prevalence of denial. Furthermore, denial is more prevalent for migrants compared to non-migrants on weak violence; the CB spells out to a higher degree the consequences of violence on the child in the non-migrant cases and are to a higher degree explicit on the insufficient parental skills in migrant cases.

Table 7b. Physical violence cases and family background (n=85)¹⁹

	Migrant (n=45)			Non-migrant (n=40)		
	Strong 24 (53%)	Weak 10 (22%)	Indirect 11 (24%)	Strong 14 (35%)	Weak 9 (23%)	Indirect 17 (42%)
CB on parents' arguments						
Denial	21 (87.5%)	8 (80%)	3 (27.3%)	11 (78.6%)	4 (44.4%)	5 (29.4%)
Acknowledge	12 (50%)	3 (30%)	2 (18.2%)	5 (35.7%)	2 (22.2%)	7 (41.2%)
Blame	9 (37.5%)	2 (20%)	0	5 (35.7%)	3 (33.3%)	0
CB on child's view and consideration of culture						
Child's opinion	20 (83.3%)	7 (70%)	9 (81.2%)	10 (71.4%)	7 (77.8%)	10 (58.8%)
Culture	14 (58.3%)	5 (50%)	6 (54.5%)	0	0	0
CB drawing implications of evidence and arguments						
Consequences	12 (50%)	6 (60%)	6 (54.5%)	11 (78.6%)	7 (77.8%)	13 (76.5%)
Change	16 (66.7%)	5 (50%)	6 (54.5%)	8 (57.1%)	6 (66.7%)	8 (47.1%)
Insufficient skills	12 (50%)	8 (80%)	6 (54.5%)	7 (50%)	4 (44.4%)	8 (47.1%)

Table 7c presents an overview of arguments concerning cases with psychological violence. Like the physical violence cases, there is more denial in migrant cases (weak violence) and spelling out consequences for the child in non-migrant cases. For the psychological cases, it is noticeable that the child's opinion is to a higher degree mentioned in migrant cases.

¹⁹ The number of cases is 85 because 4 cases that are indefinable in terms of violence categories are excluded here.

Table 7c. Psychological violence cases and family background (n=79)

	Migrant (n=40)			Non-migrant (n=39)		
	Strong 20 (50%)	Weak 7 (18%)	Indirect 13 (32%)	Strong 13 (33%)	Weak 8 (21%)	Indirect 18 (46%)
<i>CB on parents' arguments</i>						
Denial	15 (75%)	6 (85.7%)	6 (46.2%)	8 (61.5%)	4 (50%)	7 (38.9%)
Acknowledge	10 (50%)	4 (57.1%)	2 (15.4%)	5 (38.5%)	2 (25%)	8 (44.4%)
Blame	8 (40%)	0	1 (7.7%)	5 (38.5%)	4 (50%)	0
<i>CB on child's view and consideration of culture</i>						
Child's opinion	18 (90%)	6 (85.7%)	11 (84.6%)	9 (69.2%)	7 (87.5%)	9 (50%)
Culture	12 (60%)	5 (71.4%)	6 (46.2%)	0	0	0
<i>CB drawing implications of evidence and arguments</i>						
Consequences	13 (65%)	3 (42.9%)	8 (61.5%)	10 (76.9%)	7 (87.5%)	14 (77.8%)
Change	14 (70%)	5 (71.4%)	6 (46.2%)	7 (53.8%)	4 (50%)	11 (61.1%)
Insufficient skill	11 (55%)	4 (57.1%)	8 (61.5%)	9 (69.2%)	4 (50%)	8 (44.4%)

Discussion

The findings show that care order cases brought forward to the CB are extremely serious for the children involved, and there are different types of combinations of violence as also pointed out in Weiss (2020; see Johnson 2008). The findings document the empirical descriptions and the evidence of the violence the children have experienced, and as such, it is mostly pragmatic arguments the CB uses to explain that the evidence for the threshold for intrusive intervention is met, i.e., the first criteria in the law for removal of a child. About one in four cases involve strong physical and strong psychological violence, and the analysis displays that in most cases the children typically experience several types of violence. It is without a doubt that children living with violence in their own home and within their

own family are in an exposed situation and dire need for improved living conditions. Some research describes children's experience of violence in their home as living in a warzone (see Skivenes and Stenberg 2013). A recent meta-synthesis examining qualitative research, shows that children experience domestic violence as complex, isolating, and enduring (Noble-Carr et al. 2020). The latter is especially present "(r)egardless of whether children described the violence as being 'subtle and insidious [or] explicit and explosive,' the unifying theme across children and across studies was that 'it was always there' (Berman 2000, 117)." (Noble-Carr et al. 2020, 186).

It is also clear from our analysis that there are some differences between migrant families and non-migrant families with an overweight of strong violence in migrant families. This finding reflects the findings of Mossige and Stefansen (2016) on Norwegian pupils, referenced in the introduction, in which migrant pupils had experienced a higher prevalence of violence than non-migrants. This is corroborated in a study from 2019 of 9000 pupils in Norway, in which "children of parents from other countries than the Nordic countries, experience more serious physical violence than children in which both parents are from Norway or Nordic countries" (Hafstad and Augusti 2019, 109, our translation). Possibly, the indirect violence our study identified in non-migrant cases, indicate a lower threshold for child protection interventions in non-migrant families. Berggrav (2013) has proposed this, also pointing out that more direct and stronger types of violence tend to follow from weaker and indirect types (see Johnson 2008). However, the difference we detect may also be due to other reasons, for example that severe violence towards children is more prevalent in migrant families.

Prominent in the reasoning of the CB's justification are pragmatic arguments, which undercut the standard sentiments that child protection and the child's best interest are about discussions of ethical norms. Surely, the standard for what is acceptable to do towards a child and what children are expected to endure, varies between countries and people, and thus represent interpretations of social conditions in a society that are deemed acceptable and not acceptable. However, in case-by-case assessments we notice that the justifications and the reasoning is dominated by pragmatic arguments. These are denial of violence and/or child abuse, acknowledgement of violence and/or abuse, blaming the child, child's view,

and -in migrant cases- cultural explanations. The CB considers the parents' arguments in relation to claims about violence, child abuse and neglect, and displays a pragmatic orientated discourse about the denial and acknowledgement of what is proven to be experienced as violence for the child. Only in one-third of the cases is there a partial acknowledgement by the parents. Clearly, parents have the right to present their view and experiences, but the CB is not convinced by parents' evidence and arguments. In a majority of the cases, the CB understands the parents to deny the facts and evidence presented. Research on parents in child protection situations, confirms similar findings of denial (Brown and Ward 2014). We also find that in one-fifth of the cases parents explain the situation by blaming the child and/or trivialising the abuse, and this is also a known phenomenon in child protection cases (Brown and Ward 2014). Possibly, parental denial and blame are even more prevalent in cases before the CB because cooperation and attempts of improvement have already been tried (see *ibid.*).

The CB focuses on the logic of argumentation by combining parent's denial, acknowledgement and blaming, with the evidence of experienced violence of the child. As mentioned, when the CB brings forward the parents' arguments about denial and blame, they are not convinced. Parents' arguments are subsequently interpreted in relation to their skills and abilities to see the needs of the child, i.e., to see the situation from the child's perspective - both traits that are usually considered vital for raising children. Also, when the parents do not acknowledge any problems in the family situation, the CB links this to the ability to make changes to improve the situation for the children.

In the assessment of the situation and presented arguments, the CB specifically elaborate on and taps into three main discourses: First, the assessment of the consequences of the abuse for the child which is discussed in two-thirds of the cases. Here, the CB uses pragmatic arguments about the empirically based knowledge familiar from research on the consequences of violence and abuse on children's wellbeing. This reasoning is also followed by predictions about children's future wellbeing and what may happen if children continue to be exposed to abusive parents and stay in a household of insecurity. Mostly these reasonings relate to empirical facts and knowledge but interwoven with this discourse is a discourse about

change and insufficient parenting skills in which an ethical discourse on what one should expect from parents and what may be acceptable living conditions for a child. Second, the ability to change a situation of abuse and violence is imperative for a decision-making situation about a care order. The CB explicitly discusses the potential for change, and this is closely related to the parent's description of the situation. It is evident from the CB's discussions that the parents' denial, lack of acknowledgement, and blaming the child, are interpreted as parents lack of self-understanding and insight, and thus the basis for an improvement of the situation is deemed absent. The ethical discourse on insufficient parenting skills displays some standards of what are expected from parents and children's living situation. The third discourse is the consequences for children being brought up in a violent home. This discourse displays how the CB regards the probabilities for the future child's life and likely outcomes of staying with the birth family or not. In the migrant cases, these considerations are also combined with consideration around culture, and children's needs are seen in relation to the child's opinion.

We notice that the child's opinion is more often mentioned in migrant cases, and possibly this is used to reduce uncertainties for the decision-makers. Admittedly we are on speculative ground here, but we wonder if the decision-makers experience a greater degree of uncertainty in cases with migrant families due to aspects related to cultural, religious, and ethnic features. It could, therefore, be that the CB believe a care order will deprive minority children of even more than their natural family and wish to make sure the child is heard. It could also be that the CB anticipate criticisms and thus make sure all aspects are covered and accounted for. However, overall, we cannot verify significant and systematic differences between how the CB treats and justify their decisions in non-migrant compared to migrant cases.

Concluding remarks

We have analysed a relatively large sample of written decisions about care orders in cases about violence to learn how these decisions are justified, and to examine if there are differences in justification in cases with migrant families compared to non-migrant cases. We show that decisions to a large degree are determined by the risk level for the children, based on the one hand on pragmatic arguments based on the empirical evidence and documentation of the family violence and violence towards the children,

and on the other hand, on the pragmatic-ethical arguments on parental ability to change their behaviour, as well as their abilities to meet their children's needs. Our study does not substantiate that the CB treats migrants and non-migrants differently, as can be seen claimed in public debates. The differences we find in justifications of migrant versus non-migrant cases are minor and relates to the evidence of more severe direct violence in migrant cases, and, that the child's opinion is more often mentioned. Although we do not have a country comparative material on cases of violence, we assume that the child protection systems acceptance of parental violence towards children will be different in another country, for example the USA, which has a different child protection system with a high threshold for intervention in child protection (Berrick et al, in press; Gilbert et al, 2011) and is a society with a seemingly high level of acceptance for corporal punishment (see Helland et al., 2018).

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