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The decision whether to report on children exposed to domestic violence: perceptions and experiences of teachers and school health staff

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ABSTRACT
The law requires staff at Swedish preschools and schools to report suspected or known child abuse to the child protection services (CPS). In this qualitative study, focus group and individual interviews with teachers and staff in the school health teams (SHTs) were conducted to examine their experiences and strategies when they decide to make or not make a legislative report to the CPS when they suspect or know that a child has been witnessing domestic violence. What affects professionals at preschool and school when they decide whether to make a report to the CPS? What arguments do the professionals at preschool and school use when they talk about what affects them in their decisions on whether to make a report to the CPS? What prevents or promotes such a decision? The data is analysed from a social constructionist perspective and the concept emotional work. The results indicate that the professionals seem to be very insecure and emotionally governed in such situations. It is explained as a result of a lack of knowledge and support at the institutional level for their complex emotional and practical work in making decisions and acting in relation to children affected by exposure to domestic violence (EDV). In addition, their relations with the CPS are an important factor in how they respond to children that are affected by EDV. The study also reveals some good examples and strategies that professionals use to live up to their mandatory duty to report children that are exposed to domestic violence.

Professionals working with children in different contexts often hesitate or are reluctant to report suspected or known child abuse (Backlund, Wiklund, and Östberg 2012; Gilbert et al. 2008; Kenny 2001; Svensson 2013). This is particularly true when it comes to the exposure of a child to domestic violence (EDV), which Mathews and Kenny (2008, 57) refer to as a ‘new class of abuse requiring reports in some jurisdictions’. However, the understanding and definition of EDV have resulted in important changes, such as a symbolic stance regarding the problem and a reinforcement of children’s rights (Coohey 2007; Eriksson et al. 2007; Kaufman Kantor and Little 2003; Överlien 2010; SOU 2016:19).

It has been argued that preschool and school (hereafter pre/school) are ‘powerful institutions in the social development and protection of children’ and that the mandatory reporting legislation can be seen as an important part of this protection (Gilligan 1998, 13). Despite this argument, there is a lack of knowledge about pre/school staffs’ perceptions and experiences of the phenomenon of EDV (Bruno 2016; Eriksson, Bruno, and Näsman 2013a; Finkelhor 2005).
In Sweden, as in many other countries, the mandatory reporting laws require teachers, along with other professionals in the welfare state, to safeguard children and report situations when they know or suspect child abuse to be occurring, including situations with children affected by EDV (SFS 2001:453). The legislation has been strengthened as a part of the development of children's rights in the Nordic welfare state (Eriksson et al. 2007). According to the Swedish school law (2010:800, 1:2) and curricula (Skolverket 2010, 2011), pre/schools are expected to cooperate with child protection services (CPS) when needed.

Earlier studies, both international as national, show that professionals at pre/school are often concerned about and receptive to the subject of the maltreatment of children, but that they do not have an adequate level of knowledge to identify child abuse and to know how to act (Eriksson, Bruno, and Näsmann 2013a; Usakli 2012). These circumstances indicate the importance of obtaining more and deeper knowledge about what prevents teachers and other school staff from filing a report when they suspect that a child is affected by EDV, and what encourages them to do so.

In this article, we examine the experience and strategies of Swedish pre/school staff in filing or not filing a mandatory report with the CPS when they suspect or know that a child has been witnessing domestic violence. What arguments do professionals in pre/school use when they talk about what affects them in their decisions on whether to make a report to the CPS? What prevents or promotes such a decision?

### Previous research

Research about children from families affected by violence problems has been established both in the international and the Swedish context, as a specific area in the field of intimate partner violence (Överlien 2010). There is a large amount of international research regarding CPS (Coohey 2007; Eriksson and Näsmann 2008; Humphreys and Absler 2011; Münger 2015; Stanley et al. 2011), but a lack of studies regarding preschool and school institutions (Eriksson, Bruno, and Näsmann 2013a) in how professionals identify, report and support children that are affected by EDV. Research is mainly focused on prevalence (e.g. Bowen 2015), the impact of EDV on children's behaviours (Holmes, Voith, and Gromoske 2015) and school results (Assad, Friedemann-Sanchez, and Levison 2016), and the psychological and social effects of EDV (Graham-Berman et al. 2012; Holt, Buckley, and Whelan 2008). However, relatively few studies consider the effects on children's educational outcomes (King and Scott 2014; Olofsson et al. 2011).

Children affected by EDV in Sweden are underreported (Annerbäck et al. 2010; BRÅ 2014). Pre/school institutions encounter all children, and are therefore important in the work of identifying children that suffer from EDV and in contributing to the support of such children. Staff members at pre/schools have a unique ability to observe different signals or symptoms over time (Eriksson, Bruno, and Näsmann 2013a, 2013b; Münger and Markström, forthcoming). However, international reports from professionals at pre/school are scarcer than reports from other professionals (Gilbert et al. 2008; King and Scott 2014).

International studies indicate several reasons that prevent staff members at pre/schools and other professional groups from reporting different forms of child abuse. Professionals’ decisions to report child abuse are dependent on their own background (i.e. whether private or educational), on a fear of making an inaccurate report and on a lack of knowledge (Alvarez et al. 2005; Gilbert et al. 2008). Their decisions can also depend on their attitudes towards child discipline, how serious they consider the situation and the explicit signs to be, fear for the perpetrators, or limited confidence in the CPS and in the effect of a report (Besharov 2005; Feng, Huang, and Wang 2010; Kenny 2001; Levi and Loeben 2004). This is also shown in relation to a Swedish context (Svensson 2013; Svensson and Janson 2008).

Gilbert et al. (2008), who studied factors that affect reporting in the United States, point out that consultation with colleagues or other professionals affects reporting positively. O’Toole et al. (1999, 1096) argue that ‘the more involved teachers had been in previous reporting the greater their current response to abuse as reflected in higher recognition and reporting scores’. In addition, they found...
that teachers who had been teaching for a very long time were associated with fewer identified cases, a result that they explain as being due to their ‘old education’. In Kenny’s (2001) study, the opposite is shown: that women with long experience as teachers seem to be more active in filing reports than those with less experience.

In the Swedish context, there is a limited amount of research about pre/school professionals' reporting of children affected by EDV. However, Dufva (2001) has shown that there is a lower amount of reports than expected concerning children affected by EDV (cf. SOU 2016:19). It is also shown that teachers find it difficult to confront children affected by EDV, and that teachers who identify themselves with their profession, rather than with their organisation, find it more difficult to know how to act, and ask for more support from others (Bruno 2016).

There are two main issues that staff at pre/school struggle with related to children affected by EDV: how to identify EDV, and how to act and cooperate within and between institutions (Eriksson, Bruno, and Näsman 2013a, 2013b). Svensson and Janson's (2008) study of preschool staff in Sweden reveals that staff’s perception of the ability of CPS to support maltreated children is affected by their relation to the family. In a later study, Svensson (2013) shows that teachers at preschool try to act on their own more often before making a report, while teachers at schools seem to be able to separate their own responsibility from that of social services. One explanation is that preschool teachers have closer contact with parents than teachers at school do.

An important issue is that EDV is not addressed at pre/school in the same manner as other forms of maltreatment. Teachers and other mandated reporters are receptive to the subject and take the protection of children seriously; however, do not seem to have an adequate level of knowledge to identify child abuse such as EDV (Levi and Loeben 2004; Münger and Markström, forthcoming; Usakli 2012).

To sum up, questions remain on why and how these professionals act as they do, especially in relation to children affected by EDV and to the lack of reporting to the CPS. More knowledge is needed, both in an international and in a Nordic context, about the process that leads these professionals decide whether to file a report, including the preparedness and experiences of pre/school staff members in filing reports for suspected cases of EDV.

**Emotional work in encountering children affected by EDV**

The work of teachers and other staff members at pre/schools consists of a complex of pedagogical, social, ethical and emotional components (Hargreaves 1998; Helsing 2007; MacGarry Klose, Lasser, and Reardon 2012; Uitto, Joikikokko, and Estola 2015). To a large extent and in various ways, these professionals’ work is centred on relations that involve interpreting and assessing children's skills, behaviours and emotions. Different forms of relationships and decision-making processes affect children in certain ways (MacGarry Klose, Lasser, and Reardon 2012, 411), and can also affect the teachers, or others, involved in these processes. Constructing relationships, which are a key component in pre/school, consequently involves emotional work that sometimes leads to uncertainty (Helsing 2007; Levi and Loeben 2004; Uitto, Joikikokko, and Estola 2015). Hargreaves (1998) argues that teaching is an emotional practice or a form of emotional labour, which per se involves an emotional understanding. Moreover, he argues that teachers' emotions are intertwined with 'their moral purposes and their ability to achieve those purposes, actions that also are based on cognitive as well as emotional considerations' (Hargreaves 1998, 838). Furthermore, he points out that it is important to have both an emotional and a cognitive understanding of students to succeed in teaching. Teachers and other professionals at school are supposed to make informed decisions and then act on them; in some cases, emotions and ethical dilemmas may be evoked in the decision-making.

In the Swedish context, mandatory legislation requires everyone who works with children to make a so-called ‘worry report’ if they obtain knowledge about a child at risk or suspect that a child is at risk, which includes exposure to child abuse/EDV (Backlund, Wiklund, and Östberg 2012). The concept of a ‘worry report’ indicates an emotion; that is, for example, pre/school staff should feel worry (for a child) when necessary. This concept places extraordinary demands on pre/school staff to take their
emotion (i.e. worry) seriously and to report their worries. In addition, the concept of ‘suspicion’ that is used in this context is vague and can contribute to a feeling of insecurity. To suspect child abuse is to hold it as being true, and involves a probability. According to Levi and Loeben (2004), suspicion about child abuse can be interpreted as a feeling that is associated with critical qualities of the mind. In addition, previous research points out that teachers and others at pre/schools fear to make an inaccurate report because they distrust the capacity of the CPS to help families (Svensson 2013). Another explanation why pre/school staff seem to be more restricted in making reports is because they tend to protect themselves from an emotionally trying task in relation to the parents, rather than protecting the children (Backlund, Wiklund, and Östberg 2012).

Emotions and emotional work can be studied from different perspectives. In this study, we take a social constructionist approach, and interpret ethical dilemmas and emotions emerging from individual’s relations with others in the school context (cf. Uitto, Joikikokko, and Estola 2015) as socially negotiated and produced in situ. When emotions such as fear are involved in decision-making, the fear can make people avoid or deny their responsibility for a decision (MacGarry Klose, Lasser, and Reardon 2012), such as filing a report to the CPS. However, while fear can have a negative impact on decision-making by causing people to avoid action, it can also have a positive effect, and cause people to act.

In pre/school, teachers and other categories of staff, such as special-needs educators, school nurses, social workers and school psychologists, must deal with different complex psychosocial problems and dilemmas – issues that produce emotional worry/anxiety and stress. In such situations, it is necessary to balance their engagement with the children with their ability to find strategies to deal with the difficulty according to their knowledge (Helsing 2007). One example of such a difficulty is the need to identify a strategy to understand and respond to children affected by EDV, such as the ethical dilemma of deciding whether to make a report to the CPS. Working in inter-professional teams is an important strategy; however, conflicting assignments and rules as well as different ethical values, beliefs and fears make it difficult to reach consensus and make a decision, such as when responding to EDV (MacGarry Klose, Lasser, and Reardon 2012).

The study

This article draws on a larger study of professionals at pre/schools, and on their knowledge, experiences and strategies in identifying, reporting and supporting children that are affected by EDV. In this article, we focus on the experiences and strategies of teachers and members of school health teams (SHTs) in filing or not filing a report with the CPS for cases or suspected cases of children affected by EDV. In the analysis, we take the point of departure from the fact that school staff are obliged to report on suspicions of child abuse.

Qualitative methods were used to collect data in this study: focus groups and individual interviews. The empirical material consists of 11 focus groups and 7 individual interviews with professionals in 10 preschools and 24 schools in Sweden. The informants were recruited through contacts with the managements of the pre/schools and through networks of practitioners in the SHTs.

The focus groups involved preschool teachers (7), teachers (10), school social workers (9), school nurses (5) and special-needs educators (4). The individual interviews involved preschool teachers (5) and teachers (3). All the informants were women (no men volunteered.) For this article, we were interested in collecting data to show the variation in perceptions and experiences of the EDV phenomenon in general. That is, our interest is not directed towards differences in different categories of professionals. The locations of the interviews were chosen by the interviewees, and resulted in some taking place at the participants’ workplaces or at the university.

Research on child abuse is always sensitive, so ethical considerations were seriously considered throughout the research process. The study was conducted in accordance with ethical research standards (Vetenskapsrådet 2011); that is, we informed the participants about the study before the interviews, obtained voluntary consent, and promised confidentiality and that the interviews would only be used
for our research. The study was also approved by the Regional Ethical Review Board. In addition to informed consent and confidentiality procedures, we considered how the study and the questions it raised could be ethically problematic. For example, we needed to be sensitive to the fact that preschools and schools have been criticised for their way of handling and responding to child abuse. In the focus groups and interviews, therefore, we tried to be mindful of this issue and to show that we understood that dealing with child abuse is a difficult task for professionals to handle in practice.

Three vignettes were constructed by the researcher and used to initiate the topic of EDV in each interview (both in the focus groups and in the individual interviews) in order to start the discussions. The vignettes were used to elicit participants’ experiences and thoughts about cases that could be both familiar and challenging in their work – children affected by EDV (Wibeck, Abrandt Dahlgren, and Öberg 2007). In the individual interviews, we used these vignettes along with a semi-structured interview form (Holstein and Gubrium 2007; Silverman 2006). Interview lengths varied between 40 and 94 min and were transcribed verbatim by the authors.

The analysis focuses on what the informants say and how they talk about their knowledge and perceptions of responding to suspected or known cases of EDV and how, more specifically, of filing or not filing a report with the CPS. The interviews are viewed as co-constructions of meanings between the interviewees and the interviewer, and between the interviewees (Holstein and Gubrium 2007; Silverman 2006). We use all the interviews as a single empirical entity and as a whole, and we do not compare different professions – although, in some parts of the results, we may present different standpoints. The analysis applies an analytic framework following the social constructionist assumption that in interaction, such as in focus group interviews, the participants draw on discourses that are available to them. Moreover, the participants also reproduce and co-construct their knowledge about ‘reality’ in their discussion.

In the analysis, we followed Braun and Clarke’s (2006) analysis phases: making transcriptions, and then re-reading the transcriptions; coding to discover what was relevant for the aim of the study and sorting into themes. The main theme concerns, ethical dilemmas, opportunities and obstacles in reporting to the CPS and comprises the sub-themes: hesitations, the process, need for professional support and cooperation with CPS.

**Reporting to CPS – opportunities and obstacles**

Most of the participants in this study have a long experience in their profession; thus, even though it is an intricate task to recognise and report possible child abuse to the CPS, there has been a change in attitudes compared with when the participants first started to work in school – change in both their own attitudes and those of the school. Therefore, it is now well known and clearly stated that they, as professionals at a school, are obliged to report when they suspect that a child is in danger.

What arguments are used to legitimise the filing (or not filing) of a report to the CPS when professionals suspect or know that a child has been witnessing domestic violence? Even though the interviewees in this study are well aware of the legislation, many think that it is not clear in every single case when the school and they, as individuals, should act, and whether a report should be made to the CPS. When discuss such situations, the respondents find it difficult to deal with questions about who holds responsibility and who should sign and stand behind the report.

**Hesitations – the child’s or the adults’ problem?**

The question about when to file a ‘worry’ report with the CPS is seen as crucial; the interviewees talk about often hesitating to make a report because signs or signals are vague, and because of their lack of knowledge about the phenomenon of EDV. They must also make a decision on whether the actual case is a school problem or not; the respondents state that they are undeterred by the sensitive character of the problem, by the fear of making an inaccurate report, or by the fear of over-reporting if they have no proof to show (i.e. if they accuse a parent of domestic violence and it turns out not to
be the case). In some interviews, it can be interpreted that the respondents identify themselves with the parents; they say, for example, ‘it would be awful to be accused of something like that’. That is, the professionals understand how upset parents can be if they are accused of exposing their child to domestic violence. Moreover, when the interviewees talk about their hesitation, they state that they are aware that they do not have to prove anything, but only report their concerns about a child. Although it is up to the CPS to prove things, the respondents put pressure on themselves anyway to present evidence. Some respondents say that, prior to making a report, they prefer to start a process at school in which facts (documented incidents, etc.) and, to a certain extent, evidence may be presented. The first step in this process is to decide whether a form of abuse is occurring. In the following example, four special-needs educators working in preschool are presented with a vignette concerning a child who has witnessed her father abuse her mother physically. They discuss whether the child is exposed to domestic violence.

A: It is not about the girl, it is problems between the parents. So it is something else.
I: You do not consider it as child abuse?
A: No, she is not beaten. But, it is a kind of abuse, to see and experience, it is.
B: It is something bad.
C: Yes, absolutely.

This quotation shows that A first states that it is the parents’ problem and not the girl’s. However, when the interviewer asks directly if this case could be seen as child abuse, A first says that it is not abuse because the girl is not beaten, but then immediately corrects herself and says that it is abuse. B supports this attitude; then C says ‘absolutely’ (it is child abuse).

In other interviews, the teachers show similar differences in their interpretation of the legislation or in their attitudes to their role when it comes to their responsibility to act in relation to children affected by EDV at home, outside the school:

It happened to the mother, and the child. But it was outside school, it is nothing for us, I mean, we are indirectly involved, but it is nothing for us to make a report on because the mother had contact with the police./…/ I feel that it is not we at school that should report about bad adult relations. I don't know.

In this quotation, the teacher argues that the problem with domestic violence is known by the police, that is, by other adults outside preschool, and that it is not, therefore, something that she must act on. These two quotes above, illustrate the conflict between ideas or discourses about children's rights and security, those about the autonomy of the family/parents in relation to the school and those about the expectations on parents to always be able to protect their children.

Most of the professionals interviewed find it emotionally and practically difficult to know if, how and when they should act in relation to children affected by EDV. In the discussions, they comment that EDV is a serious problem, and that they, as professionals at the pre/school, have both a judicial and moral responsibility to act in the best interests of the child. Nevertheless, they think and even know that many children affected by EDV are never reported to CPS. They find it very difficult to act on such situations, and view reporting as an ethical dilemma if they are unable to show ‘evidence’, even if they understand that a child who lives in ‘a milieu of latent violence’ is exposed to child abuse.

In this study, it seems that representatives from the school health team play a special role in these cases and are more skilled at dealing with this kind of problem than some of the teachers, who do not meet as many cases of child abuse. In particular, the school social workers seem to be more determined than the teachers, and appear to have more knowledge and strategies for how to act based on just a suspicion of EDV. For example, they argue that being a witness to violence is as severe as being directly abused, and state that they must act in the same way for EDV as they do in cases of direct abuse. One school social worker says that she makes reports to the CPS fairly often – that is, she does not mention or appear to avoid making reports.
I make reports often because I think it will help the child. It is a part of my job, that is the fact, and then CPS has to make an investigation.

In this quotation, the informant points out that she makes reports because she wants to help the child, which is a part of her profession. However, the investigation is not part of her role.

**The process of making a report to CPS**

In some of the interviews, the informants talk about their hesitations and decisions in terms of a process in which they want to involve others. Some argue that they always try to support the child, but that they often want to involve the parents before deciding that a report to CPS is needed. In a focus group interview with school social workers, the interviewees say that before they make a report, they try to understand what has happened, and help the child in school. One says, ‘In the best of worlds, I want to involve the parents and the child in a process because I don’t want the “worry report” to be a surprise for them.’

Some of the preschool teachers have similar comments; that is, they state that they want to talk to the parents about their worries about the child to prevent a report, or before they make a report. One of them says:

> We made a demand on them. We are mandated to make a report but we want to give the parents a chance to do something about their situation. We have said that we give them a month. [Otherwise, they will make a report.]

The teachers talk in terms of a process in which they want the parents to act and, in this case, to get help from social counsellors. This teacher’s strategy seems to be to put significant emotional pressure on the parents to ask for help, at the same time as she talks about preschool teachers’ responsibility to report to the CPS, thus treating a report almost as a threat.

This opinion on involving the parents in the process is not shared by all the informants, and is not shared in all situations. In particular, social workers and school nurses consider that, in some cases, it is very important to protect the child by not involving the parents. However, it can be a concern to talk to the child without permission from the parents. Most of the interviewees consider it to be very important to talk to the child first – especially when the problem is identified as domestic violence. However, a school nurse says that she would not like the school to talk to her own child in such a situation and not contact her if the school was concerned for her and her child. Again, her emotions seem to be engaged when she talks about this kind of sensitive process.

In addition, the professionals in this study consider that their hesitation to start the process of reporting to the CPS stems largely from their need to be sensitive and to ‘feel’ that they are doing the right thing when they make a report. It also stems from a lack of knowledge about EDV and about how to act in different situations. The symptoms and signals are often vague, contributing to both insecurity and a fear of making the wrong decision on how to act.

**The need for professional support regarding how to act**

The respondents talk about insecurity and security in terms of individual or collective responsibility for how to act in relation to children affected by EDV and how to report to the CPS. In all the interviews, the informants argue that they always want to discuss the case with colleagues. They do not want to ‘be alone’ with the decision of how to act. The individual’s responsibility to report seems to be an emotionally stressful key problem, especially for many of the teachers, who say that they work in schools that lack routines on how to act in such situations. In one of the interviews, a teacher says that she feels very lonely when she has to make a decision, and even feels individually exposed:

> I think that one thing that makes it difficult is that we have to make the decision by ourselves, if we shall report or not. And I am supposed to stand up for the report as a private person. I think it hinders people when reporting, that you can be unsure.
In this case, the teacher does not seem to divide her role as a private individual from her role as a professional, which makes her unsure of how to act. However, knowledge, experience and support from different parts of the school organisation are seen as crucial for knowing how to decide and act when reporting children affected by EDV to the CPS. Most respondents say that their strategy is to talk to and get support and advice from colleagues, the principal, members of the school health team or other experts. That is, cooperating with colleagues or experts and sharing in their experiences and knowledge are referred to as a core aspect of managing these difficulties, hesitations or fears. The respondents consider that their experiences over the years in their profession have made them more open to asking for help.

In the beginning, when I was a young teacher, then I thought that I had to know and manage everything. But over time it became, this is not a part of my profession.

In this quote, the teacher reflects that she has changed her strategy compared with her strategy from when she was a ‘new’ teacher. She now asks for help and support from other professionals who are more experienced and skilled than she is. This example is illustrative of several of the comments in the interviews. The teachers point out the importance of other professionals being available to support them in the process of identifying, reporting and supporting children that they suspect may be affected by EDV. The teachers argue that they, as teachers, can initiate the problem and give information; however, they prefer for the principal to make and sign the official report to the CPS. Several of the respondents have the same opinion: that someone other than the teacher who meets the child on a daily basis should take responsibility for reporting. However, in some of the interviews with members from the SHT, the professionals express the opposite opinion; these respondents consider that some teachers try to run away from their responsibility. Some school nurses argue the point in the following excerpt:

A: The right person or profession should handle this kind of problem, take the responsibility from the beginning, I think.

Interviewer: Whose problem is it, then?

A: From the beginning, it should be (pause) a communication between (pause) it depends on how serious it is, but the teacher, pupil and parent. I cannot see anything else.

Everybody: Yes.

B: But as soon as they discuss the case with the school nurse or talk to someone else in the school health team, then it will be …

C: Someone else’s case.

B: Our common case. Together.

A: Absolutely.

B: And then I think it is very important that if you are going to work with this, that the class teacher must be involved. Because if they aren’t, they leave it totally, and think that ’now she will take the responsibility and manage the case, and I don’t have to bother’.

All: Yes.

B: Because it is the teacher that the child has most contact with.

In this conversation, the school nurses discuss where the responsibility should be placed at an organisational level. Although they consider that all the staff at a school should cooperate and take responsibility for the child, they think that the teachers must sometimes be more involved than the nurses are, and should take their part of the responsibility. On the other hand, some of the social workers raise the question of the teachers’ or principals’ ability to respond to this kind of problem. As one school social worker comments about the teachers:
It seems to be difficult for them to feel how serious it is. I think that they live in a kind of sheltered reality themselves and cannot understand what happens. And I don't think that they are emotionally capable of understanding how serious it is... they have never taken part in this kind of milieu or experienced the circumstances under which these children live.

In this quotation, the interviewee argues that some of the staff lack the right 'feeling' about this kind of problem and about what children can be exposed to. However, it is characteristic of the interviews in this study that the school staff members point out the collective responsibility; in this case, the social worker points out her own professional knowledge as a social worker.

All the participants talk about the importance of cooperation, both in the process of identifying the problem and discussing whether it is necessary to make a report, and in the concrete work with the report, because it is a difficult and emotionally stressful duty. The school social workers, nurses and special-needs educators (all members of the SHT) in this study comment that they interpret their overall role in such situations as one of supporting the teachers to 'dare' to ask children difficult questions about their situation at home. One school social worker considers it to be important that they be honest about their worries, and thinks that it is a part of the SHT’s mission to support the teachers in deciding how to act. Teachers may require support when asking the child questions about sensitive matters, such as about conflicts or violence in the family.

Furthermore, some of the professionals suggest that one explanation of why the staff at pre/schools do not make reports may be that they are very insecure when it comes to the question of how to make a report in practice. An interviewed preschool teacher points this out as a key issue:

We must be better, but I think that we shouldn't be so afraid. But it is important that we get experience and get used to making a report, sometimes, and that we can get help to make it. Actually, it is not that complicated to write a report and send it in.

This preschool teacher talks about the importance of having knowledge and experience about how to act and how to produce a concrete report. Such knowledge and support may come from their own organisation – through routines and support from colleagues or other professionals – and from the social service that receives the report, in the form of support and advice.

The respondents have different experiences of routines and strategies to deal with this work task. In some pre/schools, it is always the individual teacher or school nurse that has recognised the problem who is supposed to make the report. In many other schools, it is the principal, the school social worker or the nurse who always signs the report. Both the school social workers and the school nurses mention the teachers’ fear and their unwillingness to write a report to the CPS by themselves. One of the schools included in this study has a routine and strategy of having the school nurse or school social worker sign the report; however, they always write the concrete report together with the teacher that knows the pupil and the specific case. One school nurse states that it is the strategy at her school to train the teachers to participate in the process more – to formulate the report and become more skilled and be less afraid to report to social services when necessary. This strategy can be interpreted as an effort on the part of the school to show that identifying children affected by EDV should be on teachers’ agenda. Reporting is a part of the school’s duties and something that all professionals should be aware of, involved with and trained in. In addition, this strategy is discussed in terms of unburdening individual professionals from emotional hardships.

In some of the focus group interviews, participants from the SHT comment about protecting the teachers and being careful to involve teachers in the report process – that is, they consider that it should be someone other than a teacher that prepares and signs the official report. The main argument is that it is necessary to protect the teachers’ relations with the school and with the parents – and the teachers in this study state that they prefer having these relations protected. They want to have a good relationship with both the child and the parents, and they consider it a relief to get this kind of help from the SHT. Furthermore, in a focus group interview with school social workers, this aspect of the routine is mentioned as being important for the pupil.

Most children can understand that a school social worker makes a report, then you are excused. But they can find it difficult when their teacher makes the report, like ‘How could she?’
The social workers point out that a good relationship between a pupil and a teacher can be negatively affected if the teacher makes a report. They consider that it can be more acceptable to the child if a social worker makes the report.

**Cooperation between pre/school and CPS**

According to previous research, the cooperation between the two institutions – the school and CPS – is often seen as problematic by the school staff. In line with this, most of the participants in this study draw on a discourse of distrust. Some respondents explain their reluctance to report abuse as being due to a previous negative experience of bad relations and cooperation with the CPS, which affects their emotions and their willingness to file a report. In particular, the professionals say that they are dissatisfied with how they have been treated by CPS and with the character of a one-way interaction. They think that the CPS asks them many questions but does not want to cooperate in determining how to support the child. The teachers also find it problematic that they do not get feedback from the CPS after they have filed a report on their concerns about a child. They argue that they need information to be able to support the child in school. Many of the interviewees stress that their interactions with children and parents at school can be emotionally trying, especially when they lack knowledge about and support from the CPS in how to act.

Moreover, some of the participants mention that they sometimes find it difficult to get CPS to engage in cases that the school finds problematic. In one of the interviews with school nurses, a nurse says:

> It is risky, to think about how you express yourself in a report. As in the health services, you almost have to lie to get access and help.

In this quotation, the school nurse points out the importance of what she says in the report to the CPS, and how she writes it, in order to make the CPS act; she feels that she sometimes has to exaggerate what she writes in a report to get their attention for a child. In addition, in another focus group interview with school social workers, the respondents say that they sometimes use a strategy of submitting reports over and over again, if they do not get a response from the CPS. One social worker says that she acts like ‘a woodpecker’ and that she can send reports over and over again.

However, some of the participants have good experiences of their relation and cooperation with the CPS:

> Then we have had our own social worker from the CPS who has been very skilled and who says ‘this is needed for us to make an investigation. This is needed for us to get any substance in our investigation so it will be possible to decide about different interventions. It [the report] must have substance’.

In this case, the school had a close cooperation with what a respondent calls ‘our own social worker’ at the CPS. Here, the CPS worker seems to provide support, although she also wants the school to provide documentation and show proof. Paradoxically, this kind of response contributes to insecurity about the school staff’s responsibility, that is, whether they are expected to report on a suspicion.

For some of the teachers, the most important issue is not whether to report or not. One teacher says that the most important thing is the professional support that can be obtained from the CPS. Another teacher says that she prefers getting support from the CPS when working with a pupil in the context of school who is affected by EDV. She says, ‘How should I act as a teacher in the classroom? What is the best way to support this pupil?’ The teachers also say that they would like to have an ongoing cooperation with the CPS. One teacher says:

> If I could have what I want, and if the child was already supported, I wish for some kind of network so we could get important information and a better understanding of the problem. To know when to contact CPS. For me, it is important to know how, that is important for us because we need support for how to interact with the child in this free zone. [school]

To summarise, the analyses of the interviews indicate that the identification of violence and the school personnel’s determination to report their suspicions of domestic violence are intertwined with the
demands on professionals’ legal responsibility to report, while also depending on the professionals’ opportunities to obtain support from other professionals in the reporting phase.

Conclusion and discussion

This study, which interviews staff from pre/schools about children affected by EDV, reveals that the professionals’ concerns regarding whether they should report to the CPS are characterised by both emotional and practical arguments. The respondents argue that their lack of knowledge and practical experience with this type of problem is intertwined with and contributes to their feelings about an emotionally difficult duty. In addition, they find EDV to be a particularly difficult problem to identify because the problem derives from the private sphere and because the abuse is mentally directed (Münger and Markström, forthcoming). The interviewees’ experience of EDV must be understood in relation to what Mathew and Kenny (2008, 57) consider to be a ‘new category of child abuse’ in the mandatory system. In this category of child abuse, the act of violence is ‘indirectly’ directed at the child, and the professionals’ decision about whether to make a report depends on how they assess the risk for the child affected by EDV. Furthermore, the professionals’ decision depends whether they consider the situation to be a school problem or not (cf. Levi and Loeben 2004).

The fact that the problem of EDV is seen as a specific and complex problem seems to produce uncertainty among the staff at pre/school about how to act (cf. Besharov 2005). The concept of a ‘worry report’ indicates an emotion, and a situation is per se identified as serious when staff members suspect that a child is affected by EDV. Paradoxically, it is the emotion-driven actions that professionals are asked for that can also contribute to negative consequences, and prevent professionals at pre/school from filing mandated reports when they suspect EDV.

This issue seems to produce emotional anxiety and stress, as well as some inconsistency in the arguments that professionals use to explain their decisions on whether to file a ‘worry report’ (cf. Levi and Loeben 2004). However, it often seems to be an emotional rather than a cognitive understanding of the problem that is at stake (cf. Hargreaves 1998; Helsing 2007). As shown in previous research (Levi and Loeben 2004; Svensson 2013), the interviewees in this study say that they are afraid of making inaccurate reports, and that they fear having conflicts with parents and losing their good relations with the child and – more often – with the parents.

The interviewees draw on different discourses and use various arguments when they explain why they file a report or not when they suspect that a child is affected by EDV. They argue that they often find that the responsibility is placed on the individual or the group, rather than on the institution (cf. Bruno 2016). They consider that this duty, along with the practical work of submitting reports, should be shared with colleagues and experts. If such cooperation succeeds, they also find it necessary to negotiate and decide on who is responsible for the process and who will produce the concrete report (cf. Alvarez et al. 2005; Gilbert et al. 2008).

However, the argument of sharing responsibility can also be used as a strategy to avoid making a decision. The respondents say that diverse assignments and attitudes among the staff can contribute to conflicts. Different ethical values and beliefs can cause decision-making to be a problem on its own, resulting in the solution to the problem – supporting the child – being left unsolved (cf. MacGarry Klose, Lasser, and Reardon 2012). In this process, vague rules and routines, as well as insecurity about how to act, can contribute to anxiety if responsibility is assigned at the individual or group level. The interviewees ask for systematic routines and distinct leadership in this area, and think that these aids would make them more comfortable with handling the problem.

Another issue that is identified in the interviews is the professionals’ hesitation to report to the CPS. The interviewees argue that they often lack confidence in the CPS as an institution because they do not think they get enough or the right information, they do not get support regarding how to act at school and they distrust the capacity of the CPS to support the child and family (Eriksson, Bruno, and Näsman 2013a). In other words, the argument here is that reporting is seen to cause more harm than good (cf. Levi and Loeben 2004).
To sum up, an important result of this study is that many decisions about reporting EDV to the CPS are characterised by an ad hoc approach in that the decisions often seem to be based on individual emotional preferences. This result is from a Swedish context but is probably of interest in an international context according to previous research about this phenomenon (Hargreaves 1998; Helsing 2007; MacGarry Klose, Lasser, and Reardon 2012; Uitto, Joikikokko, and Estola 2015). The interviewees ask for more knowledge and organisational support for teachers and for the school health team at pre/school, to assist in their complex emotional and practical work of making decisions and acting in relation to children affected by EDV. This support should be offered from both the pre/school and the CPS in order to provide the professionals with practical knowledge as well as emotional support (cf. Hargreaves 1998; Helsing 2007; Uitto, Joikikokko, and Estola 2015). That is, the responsibility of an EDV report should be placed at the institutional level instead of being a decision that is made just by individual teachers or SHT staff.

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Social Service Act (SFS 2001:453).