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Dialogues for Care and Safety:  
The Role of Social Workers in Responding to Sexual and Gender-  
Based Violence against Unaccompanied Children

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Author: Jasmina Haapanen  
Supervisor: Deniz Kellecioglu

## **Abstract**

**Title** Dialogues for Care and Safety: The Role of Social Workers in Responding to Sexual and Gender-Based Violence against Unaccompanied Children

**Author** Jasmina Haapanen

**Keywords** unaccompanied children, sexual violence, gender-based violence, social work

In the past years, Sweden has been faced with high numbers of unaccompanied and separated children (UASC) who are fleeing war and turmoil from their home countries through Europe. These children are resilient but also face several protection risks throughout their migratory path, including risks for sexual and gender-based violence (SGBV). Their vulnerability for these risks is exacerbated by the fact that they are transiting alone, without the layer of parental protection. The familial care is replaced with professionals taking care of these children – social worker carrying a mandate to take care of their well-being. SGBV may have devastating consequences to the physical, psychological and emotional development of these children, and thus the interest of social work.

This study aimed to understand how social workers perceive their role and capacities in responding to SGBV against UASC in Sweden. The research question was threefold: the first research question was concerned with learning about what kind of experiences the social workers have concerning SGBV against UASC, the second one aimed to understand the roles and strategies that social worker employ as a response to the issue, and the third one extended to examine the role of a social work organization in responding to the issue. This qualitative study was carried out by interviewing six social work professionals working in different social work contexts where they meet UASC in Sweden. The interviews were semi-structured phone interviews. Thematic analysis was used to analyze the empirical material. Ecological theory, Tew's framework of power for emancipatory social work practice, and critical social work were employed as a theoretical framework.

The interviews showed that social workers who meet UASC in their work perceive SGBV as a prevalent issue that is shadowed by shame and causes severe consequences in the well-being of the children. The findings of the study show that the role of social workers in responding to SGBV against UASC is to engage in dialogues on SGBV against UASC in different ecosystems to ensure appropriate care and protection for the child, but also to promote for safer future. The dialogues take place in the contact with the child through facilitating a trust relationship and providing psychosocial support, in the professional networks through coordinating the services and raising awareness on the topic, and a societal level by challenging discourses that enable SGBV against UASC. Finally, a cross-cutting role was to engage in critical analysis to identify the oppressive structures and work for societal change. The role of social work organization was to support the social workers in their attempts.

The conclusions are that even though the main responsibilities of the social workers lay in the microsystem, they also have possibilities and power to respond to SGBV against UASC in the other ecosystems. By extending the response outside the microsystem, they are taking a step towards a structural change for a safer future for UASC.

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And finally, I want to extend my deepest gratitude to the social work professionals who agreed to be interviewed for this study. I admire your expertise and I feel privileged to have learned through your experiences. Without you, this project would have not been possible.

## List of Abbreviations

CALCASA	California Coalition Against Sexual Assault
CRC	Convention on the Rights of the Child
FGM	Female Genital Mutilation
ICRC	International Committee of the Red Cross and Red Crescent Societies
IFRC	International Federation of the Red Cross and Red Crescent Societies
IFSW	International Federation of Social Workers
LGBTQ	Lesbian, Gay, Bi, Trans, Queer
MIPEX	Migration Integration Policy Index
NCTSN	National Child Traumatic Stress Network
NGO	Non-Governmental Organization
OHCHR	Office of the High Commissioner for Human Rights
RFSU	Riksförbundet för Sexuell Upplysning
SGBV	Sexual and Gender-Based Violence
UASC	Unaccompanied and Separated Children
UK	United Kingdom
UN	United Nations
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
U.S	United States

# 1. Introduction

It was a Tuesday in August 2020. I was discussing sexual and gender-based violence against unaccompanied and separated children with a fellow social worker who had started a new job in refugee integration services. “But I am not a therapist.” This was the response from her when I explained that according to this thesis, social workers have a pivotal role in responding to this issue. Her comment highlighted that many social workers see trauma therapy as a primary response to this kind of violence.

In the past years, Sweden has been faced with high numbers of unaccompanied and separated children [UASC] (Migrationsverket 2016). They are fleeing conflicts, violence, natural disasters, and poverty from their home countries (UNHCR [United Nations High Commissioner for Refugees], 2020a). They are children and they are displaced. As they transit alone, the closest protective system, family, changes to a range of professional adults such as social workers, the staff at the residential care/foster family, and a legal guardian who are now responsible to meet the child’s day-to-day needs in the absence of the family (Wimelius et al, 2016).

These children have shown great resilience and strength when transiting through Europe to Sweden (IFRC [International Federation of the Red Cross and Red Crescent Societies], 2018). They are often faced with many protection risks such as violence, dealing with smugglers, dire conditions, and scarcity of essential commodities such as food and water. These protection risks and their inherent vulnerability as children render them vulnerable to sexual and gender-based violence [SGBV]. The exact scope of the issue is not clear, as the phenomenon goes undetected due to the barriers to reporting and seeking help (IFRC, 2018).

Regardless of the ambiguity of the magnitude of the issue, we know that children migrating alone are subjected to SGBV (IFRC, 2018). Social workers are often working close to the unaccompanied child in different contexts and are well familiarized with the child’s life. Thus, the social worker needs to be prepared to respond if the child discloses a case of sexual and gender-based violence.

This paper is an interview study of six social work professionals. The study examines how social workers in different public and civil society organizations in Sweden view their roles and capacities concerning SGBV against UASC.

In the first part of the paper, I present the background to the study; who are the UASC, and what is the phenomenon of SGBV. After that, I discuss the theoretical approaches; ecological framework by using Bronfenbrenner’s (1979) ecology of human development, Tew’s (2006) framework of power for emancipatory social work practice, and the critical social work approach. Then I proceed to explore the methodological considerations and present the findings of the study.

## 1.1 Aims and objectives

The study aims to understand how social workers in Sweden (e.g. in non-governmental organizations [NGOs]/municipal services) view their role in responding to SGBV against

UASC. The study aims to understand how social workers perceive their capacities to respond to the issue on different layers of the society.

As this thesis aims to educate and raise awareness on the subject, the social workers can use this thesis as a starting point to understand their relevance in the arena. With the help of this research, social workers who meet unaccompanied children in their work can increase their knowledge on the subject as well as their preparedness to respond to SGBV against UASC.

On the national and international level, this paper aims to shed some light on the issue of SGBV against UASC, and hopefully, it will inspire further research on this understudied issue.

## 1.2 Research questions

The research questions of this study consist of three separated, but interrelated questions:

1. What kind of experiences social workers have in relation to sexual and gender-based violence against unaccompanied and separated children?
2. What roles and strategies social workers employ in responding to actual or potential cases of sexual and gender-based violence against unaccompanied and separated children?
3. What is the role of the social work organization in responding to sexual and gender-based violence against unaccompanied and separated children?

## 1.3 Relevance to the field of social work and human rights

SGBV against UASC is a violation of human rights and rights of the child, and it has a strong impact on the child's development (Inter-Agency Standing Committee, 2015a). Social workers have a particular role in supporting the newly arrived migrant children, who are lacking the familial layer of support, care, and protection. Social workers have the responsibility to ensure the safety and wellbeing of children in society, and especially the unaccompanied and separated children.

Social workers and social work organizations can use this thesis to increase their knowledge on the issue of SGBV against UASC. Through strengthening the knowledge base, they might be better equipped to develop better working practices to address the needs and rights of these children. In addition to this, increased awareness may help to design professional support and supervision for social workers themselves. The results of this study should also contribute to social work education to respond to the current issues in the social work arena.

## 2. Background

### 2.1 Unaccompanied and separated children

UNHCR (2020a) estimates, that there were 79,5 million forcibly displaced people in the world in the end of 2019 and 40% of them were children. Reasons for displacement are e.g. fleeing persecution, conflicts, human rights violations, and violence (ibid.). Kohli and Mater (2003) add that someone might be escaping economic hardship as a result of state fragility or a threat posed by the family or kinship. Factors such as climate change and weak governance make reasons to flee even more complex (UNHCR, 2019). In the turmoil of such events, many children get separated from their parents before or during migration (ICRC [International Committee of the Red Cross and Red Crescent Societies], 2004). They are unaccompanied and separated children [UASC]. UNHCR (2020a) estimates that there were around 25 000 UASC in the world in 2019.

By definition, *unaccompanied children* are “children who have been separated from both parents and other relatives and are not being cared for by an adult who, by law or custom, is responsible for doing so” (ICRC, 2004, p. 13). *Separated children* on the other hand are separated from their parents but might be accompanied by some other adult relative who is not their legal custodians (ibid.). The terminology and abbreviations used to discuss UASC vary but mostly refer to the same group of children; children moving alone without adult carers. Common terms used are unaccompanied minors, unaccompanied refugee minors, and unaccompanied asylum-seeking minors. However, some definitions only refer to the children who are seeking asylum outside of their country of origin (e.g. UNHCR, 1997). Some definitions include a statement that the term refers to all unaccompanied children outside of their country of origin and regardless of their migration status (Schippers, 2014).

I have chosen to use the term *unaccompanied and separated children* to include all children who are on the move and are separated from their parents, but they might be accompanied by other relatives. I am using the word children instead of minors to emphasize that they are not only under 18 years of age but first and foremost children. By using the term child instead of minor, I want to give importance to childhood as a phase of life and not only as a preceding stage before adulthood.

Many of the UASC experience events that affect their physical and psychological well-being. They are subjected to dire living conditions, dealing with smugglers and traffickers, and experiences of abuse and violence at every stage of their migratory path - in the country of departure, transit, and in the destination country (IFRC, 2018). All children are vulnerable due to their limited capabilities in decision-making and their dependence on adults (Inter-Agency Standing Committee, 2015a). Especially children that are lacking the first layer of protection, their family, are at heightened risk of sexual and gender-based violence. They are often subjected to violence and multiple violations against their human rights (Abunimah & Blower, 2010).

Abunimah and Blower (2010) emphasize that even though this group of children is at risk it does not mean that all of them would be traumatized since they come from different situations and their capabilities to overcome traumatizing events are different. The agency and resilience of the UASC need to be acknowledged. Their research (Abunimah & Blower 2010) suggests that some children thrive in their new living environment while some children need enhanced support due to traumatization. Kohli and Mather (2003) discuss, that UASC have to deal with



several barriers when they arrive in a new country. They are adapting to the customs of the new settings, and at the same time coping with the burden of their past, as in separation from their family and a range of traumatizing experiences. Lastly, they have to rely on foreign stranger adults to assist them in coping with the past, present, and future.

Nelson et al (2014) discuss that the understanding of trauma needs to be critically assessed, as it usually sits with the Western trauma counseling approaches. However, these children come from different cultures where trauma might be understood in different ways and appropriate ways of dealing with trauma are different. Nelson et al (ibid.) point out, that in some cultures the appropriate way might be to approach the elderly family members. Discussing traumatizing events with foreign strangers who might not be the appropriate age or gender might not be the most convenient way for the UASC. Nelson et al (2014) discuss that the Western understanding of trauma is heavily focused on one-on-one counseling and is potentially pathologizing, medicalizing, and individualizing. Nelson et al (ibid.) highlight, that community-based approaches should be thus strengthened and that sufficient information e.g. on secrecy is provided for the UASC, and that the children have true understanding and decision over whether or not they want to engage in trauma-targeted counseling.

## 2.2 Reception of unaccompanied children in Sweden

Sweden has long traditions in receiving migrants and refugees as it is a considerably attractive destination and it fulfills the international reception standards (Human Rights Watch, 2016). Migrant Integration Policy Index [MIPEX] (2015) ranked Sweden as the number one country regarding integration policies in 2014. In 2015, the influx of asylum-seekers challenged Sweden's well-established reception system. Especially the number of children arriving unaccompanied put pressure on the child protection system. In 2015, 35 396 UASC sought asylum in Sweden (Migrationsverket, 2016).

After 2015, Sweden introduced new changes to the reception of asylum-seekers. These changes were deploying border control and law amendments that complicated obtaining a permanent residence (Swedish Institute, 2020). As Seidel and James (2019, pp. 85) described, "Sweden turned from a welcoming and open country to a nation with strict immigration rules". This was reflected in the number of asylum-applications. In 2019, a total of 902 UASC (257 girls and 645 boys) sought asylum in Sweden (Migrationsverket, 2020a). The four most common home countries were Syria (151), Morocco (125), Somalia (124), and Afghanistan (121) (ibid.)

Seidel and James (2019) explain, that when unaccompanied children arrive in Sweden, the first contact with the authorities might for example be with the police or emergency social services. The initial assessment of their needs is carried out and the child is placed in transit accommodation before they are taken to the Swedish Migration Board to submit an asylum-application. The Swedish Migration Board assigns the child to a municipality, where the social services are responsible for the child. The child is appointed a legal guardian as soon as possible. The social services organize the accommodation where the child lives when their case is processed in the migration board, which is often a time-consuming process. The housing can be organized as foster care or residential care. (Seidel & James, 2019). Social workers work in different areas in the lives of UASC. They might work e.g. in municipal social services, in residential care units, or in civil society organizations that provide other services for UASC. UASC are entitled to the same rights in Sweden as the children with

Swedish citizenship, which means that they have access to education, accommodation, and health care services. (Migrationsverket, 2020b)

Human Rights Watch (2016) brought up the situation of UASC in Sweden, that Sweden has partly failed to respond to the needs of these children. According to Human Rights Watch (ibid.) Sweden has not managed to provide adequate mental and physical health care, including the children who have been subjected to sexual violence. Sweden struggled to provide adequate living spaces for UASC and ended up accommodating them in repurposed spaces such as schools and hotels. They reported that single girls were accommodated with groups of boys (Human Rights Watch, 2016). Seidel and James (2019) point out, that this practice increases their risk to be subjected to SGBV.

## 2.3 Sexual and gender-based violence

As mentioned, children moving alone face many protection risks, abuse, and violence in the country of departure, during transit, and in the countries of destination (IFRC, 2018). However, this paper focuses solely on sexual and gender-based violence, because it remains understudied and underacknowledged, even though the traumatic experiences of UASC are increasingly recognized. IFRC (2018) describes that the issue of sexual and gender-based violence against unaccompanied children is a blind spot for many governments and humanitarian organizations.

Definitions of sexual and gender-based violence [SGBV] vary from source to source but have common core characteristics. The diverse terminology and varying definitions cause sometimes confusion. For example, the terms *sexual violence*, *gender-based violence*, and *violence against women* are often used interchangeably (The New Humanitarian 2004). In this paper, I have chosen to use the term *sexual and gender-based violence* to comprise a wide range of harmful acts and to take a stance that anyone, regardless of their gender, can be subjected to sexual and gender-based violence. My aim is not to fade out the gender-based violence experienced by women, but rather draw attention to the fact that many of UASC are boys, yet still at risk for SGBV. I have chosen to use the word survivor instead of a victim to describe the person who is subjected to SGBV. The use of survivor underpins the recognition of the resilience and agency of the subjected person (UNHCR, 2003).

UNHCR (2020b) defines SGBV as “any act that is perpetrated against a person’s will and is based on gender norms and unequal power relationships. It encompasses threats of violence and coercion. It can be physical, emotional, psychological, or sexual, and can take the form of a denial of resources or access to services. It inflicts harm on women, girls, men, and boys”. UNHCR (2020b) highlights that SGBV is a violation of human rights and harms human dignity.

The definition by ICRC and IFRC (2015) has a common core with the UNHCR definition but defines sexual violence and gender-based violence separately. They understand gender-based violence as an “umbrella” term for “any harmful act that results in, or is likely to result in, physical, sexual or psychological harm or suffering to a woman, man, girl or boy based on their gender” (ICRC & IFRC, 2015, p. 1-2). The power imbalance between genders and abuse of power are understood as root causes. They define sexual violence as “acts of a sexual nature committed against any person by force, threat of force or coercion. Coercion can be caused by circumstances such as fear of violence, duress, detention, psychological oppression or abuse of power” (ibid., p. 1-2). They add that the use or threat of violence can be directed

to other people. In their definition, they point out that sexual acts are perpetrated by taking advantage of coercive circumstances and they emphasize the importance of consent.

Drawing on these definitions, SGBV is understood in this paper based on the following characteristics: Acts that

- causes emotional, psychological, physical, or sexual harm or suffering.
- is perpetrated without consent.
- is based on gender norms or unequal power balance.
- has an element of coercion or takes advantage of the circumstances.
- may contain an element of threat or use of violence, which is directed to the survivor or other person.

Ozcurumez, Akyuz, and Bradby (2020) call for a social constructivist understanding of SGBV in forced migration. They discuss that women and girls are often understood to be most affected by SGBV, and a big part of protection policies are targeted to them. However, the social constructivist understanding of SGBV suggests that gender and gender-based violence are dynamic. Skeljsbaek (2001, p. 225) explains that in the constructivist conceptualization “the victim of sexual violence in the war-zone is victimized by feminizing both the sex and the ethnic/religious/political identity to which the victim belongs, likewise the perpetrator’s sex and ethnic/religious/political identity is empowered by becoming masculinized.” Thus, multiple forms of oppression are intertwined (Ozcurumez et al, 2020), The person subjected to SGBV is feminized, thus rendered disempowered, and the perpetrator masculinized to use power regardless of the gender of the subjected and the perpetrator. As suggested by UNHCR (2017), the culture of silence and the lack of services enforce the belief that men and boys are not vulnerable to sexual and gender-based violence or that it is not happening. The UNHCR (2017) examined sexual violence against men in the Syrian conflict and the study revealed that men and boys are subjected to sexual violence and torture especially in makeshift detention centers. The same study emphasizes the vulnerability of the lesbian, gay, bi, trans, and queer [LGBTQ] population to sexual and gender-based violence due to their double stigma as refugees and gender identity/sexual orientation (UNHCR, 2017).

SGBV can take place in many contexts and forms. ICRC and IFCR (2015) mention rape, sexual slavery, and enforced prostitution as examples of sexual violence. Other types of gender-based violence are, for instance, physical assault, domestic violence, trafficking, forced or child marriage, female genital mutilation, honor killing, and sexual exploitation and abuse (The New Humanitarian, 2004). Ozcurumez et al (2020) highlight, that the experience of SGBV in forced migration spreads out in time and geography as “SGBV is never confined to where the violence takes place but spills over to the displacement journey and leaves traces across displacement processes.”(Ozcurumez et al 2020, p. 2)

SGBV causes both immediate and long-term implications that impact the survivor’s health in many ways (Inter-Agency Standing Committee, 2015b). It can affect the survivors’ physical, psychological, and sexual health. SGBV can cause, for example, unwanted pregnancies, sexually transmitted diseases, male impotence, physical injuries impacting for example urinary and reproductive health as well as mental health disorders such as depression, post-traumatic stress, anxiety, and suicidality (ibid.).

Inter-Agency Standing Committee (2015b) emphasizes that responding to SGBV should not wait for detailed information on the magnitude of the issue, and the professionals should

assume that it is happening in all contexts even though it would not be visible. The Committee (ibid.) highlights that SGBV cases are under-reported due to shame, fear of revenge, or lack of access or trust to professionals.

## 2.4 Sexual and gender-based violence against unaccompanied and separated children

As mentioned above, the unaccompanied and separated children are at risk of SGBV at all stages of their migratory journey (IFRC, 2018). However, it is acknowledged that there is a significant data gap in mapping the magnitude of the problem (ibid.). Thus, it is significant that the actors working with this group of children do not wait to have a clear picture of the number of children subjected, and they should assume that such abuse is taking place (Lay & Papadopoulos, 2009).

The report of IFRC (2018, p. 12) points out that “for many children, sexual and gender-based violence is a spectre that haunts all stages of their migration journey.” It also needs to be highlighted, that SGBV against UASC may take different forms in different contexts. Thus, SGBV against UASC needs to be understood as a fluid and broad concept that comprises a range of acts that undermine the child’s self-determination on their own body. This section provides a glimpse into the hazards that UASC face, and this section should be understood as examples, rather than an exhaustive list of forms of SGBV.

The risks in the home countries can be, for example, conflict-related sexual violence. SGBV can be the reason for the forced displacement of UASC, as well as a consequence of the breakdown of structures that protect from violence such as family, community, and the state (UNHCR, 2020b). Sexual violence is one form of tools used in wars (Inter-Agency Standing Committee, 2015b). Other forms of SGBV in the home countries link to harmful traditional practices such as female genital mutilation [FGM] and early/child marriage that are both widespread practices around the world (UNFPA [United Nations Population Fund], 2020). These practices link directly to the lack of power of girls and women as the practices are intended to place them under the power of men, and sometimes these practices are justified based on tradition, religion, or culture (UNFPA, 2020).

Risks during the transit can be related, for example, to dealing with smugglers especially if the children are not able to pay their smuggling fees (IFRC, 2018). The unaccompanied children are vulnerable to end up in prostitution to collect money to continue the journey or they might have to perform “survival sex” in exchange for accommodation or money (IFRC 2018). Other risks are, for example, the detention of migrant children based on their migration status. The detention poses risks of sexual exploitation by the guards and adults who are detained with them (UNHCR, 2017). Also, severe abuses of power, such as exchanging food for sexual services by humanitarian actors in the context of refugee camps have been reported (Hyder & Veigh, 2007). Border crossings along the way pose risks for SGBV, as the border police have been reported to use different forms of violence, including sexual harassment and undressing the migrants forcibly, to prevent them entering the country and to push them back out of their territory (Border Violence Monitoring Network, n.d.) A Greek report from the refugee camps shows that the conditions in the camps are not protective enough which is a risk factor for UASC to be subjected to SGBV (Digidiki & Bhabha, 2018).

The destination countries also have a variety of risks for UASC to be subjected to SGBV. A study (Lay, Papadopoulos & Gebrahivot, 2007) in the UK [United Kingdom] aimed to map the experiences of the unaccompanied children who have been sexually maltreated in the UK. Most of the incidents happened during the first year of their stay, and the experiences varied between sexual harassment and rape. The reported perpetrators were female carers, people from their own countries, and young males living at the same accommodation. In the Swedish context, UASC have been documented to be victimized to sexual exploitation in form of survival sex, especially if their asylum-application is denied and they are not entitled to the care and protection by the Swedish authorities, which drives them to seek, for example, accommodation in exchange for sex (RFSU [Riksförbundet för Sexuell Upplysning], 2019). The same phenomenon was detected by the Swedish Red Cross (2020) that surveyed 103 UASC. They found out, that more than a fifth of them have been forced to give sexual services in exchange for money or housing.

## 2.5 Legal framework

The key document in the standard-setting for the rights of the UASC is the Convention on the Rights of the Child [CRC] (UN [United Nations] General Assembly, 1989), that lays the framework for the human rights of children recognizing childhood as a period of development as well as the inherent vulnerability of children. The four main principles of CRC are non-discrimination, the best interest of the child, survival, and development of the child and child participation. CRC is the most ratified UN human rights treaty with 196 ratifications (OHCHR [Office of the High Commissioner for Human Rights], 2020). Through ratification, state parties become duty-bearers, obligated to respect, protect, and fulfill the human rights of the rights-holders, which in the context of CRC are the children. Social workers as agents of the state with other public actors such as teachers and the police carry the mandate of realizing the state's obligations as duty-bearers (European Commission, n.d.). Sweden ratified CRC in 1990 (OHCHR, 2014), and the convention became national law in Sweden as of the January 1<sup>st</sup>, 2020 (Barnombudsmannen, n.d.).

CRC protects UASC in several ways. The principle of non-discrimination (article 2) states that children, regardless of their nationality, status, or other factors should be entitled to the same rights without discrimination. Article 22 in the CRC relates directly to asylum-seeking children, accompanied and unaccompanied, who are to be protected and their rights fulfilled by the state. According to article 19 and 34, the children have the right to be protected from violence, including sexual abuse and violence. Article 19 paragraph 2 obligates the state parties to take protective measures “to provide necessary support for the child and for those who have the care of the child, as well as for other forms of prevention and for identification, reporting, referral, investigation, treatment and follow-up of instances of child maltreatment described heretofore, and, as appropriate, for judicial involvement”.

Another key document is ‘The Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography’ (UN General Assembly, 2000). The Optional Protocol obligates the state parties to protect children with legislation to punish and prosecute the perpetrators. Sweden ratified this protocol in 2007 (OHCHR, 2014).

On the regional level, the key legal document is ‘The Council of Europe Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse’ (Lanzarote Convention) (Council of Europe, 2007). The convention establishes sexual abuse as a criminal offense. The convention sets measures to protect children and prevent sexual abuse

through screening people who are working with the children and through educating the workers and children on sexual abuse. Sweden ratified the convention in 2013 (Council of Europe, 2020).

### 3. Literature review

Reviewing previous literature is a central task for a researcher – a well-conducted literature review helps the researcher to understand what is already known about the subject and to better integrate the study at hand to the existing body of literature (Bryman, 2012). A narrative review is one of the most employed forms of constructing a literature review. Bryman (ibid.) explains that the narrative literature review is a tool to give an overview of the body of knowledge in the field and “initial impression” (Bryman, 2012, p. 110).

The research question is the starting point for a literature review (Bryman, 2012). However, it became very quickly evident, that the literature related directly to social work practice concerning SGBV against UASC is not very broad, so this literature review draws also outside those lines, including literature on social work with UASC and refugees in general. The literature review was conducted by using ProQuest Social Sciences database, Google Scholar, and reviewing reference lists of relevant literature. Literature in the Swedish context was preferred, but also literature from other geographical areas was included due to the scarcity of literature within the Swedish context. Literature especially from the UK and Australia is represented in the review.

The literature profiles the social worker as a professional of many functions when working with UASC. As Nash, Wong, and Trlin (2006) discuss in their article, social workers have roles on different layers in the society and thus, they need to be skilled at micro, meso, and macro levels to respond effectively to the needs of migrants, refugees, and asylum-seekers. The same is reflected by Nelson, Price & Zubrzycki (2017). They recall for critical practice on direct counseling as well as in structural work. This literature review is constructed first to discuss the role of the social worker on a macro level, then meso level, and finally on the micro level. The section concludes by presenting areas of development identified in the previous literature regarding the social workers’ response to SGBV against UASC.

The roles and competencies discussed in the literature on the macro-level relate for example to advocacy work. Nash, Wong, and Trlin (2006) discuss that social workers working with refugees need to understand human rights, social justice, and advocacy on the macro level. Nelson, Price & Zubrzycki (2017) discuss that social workers need to critically approach discourses and policies affecting the unaccompanied children and engage actively for social change for example through supporting initiatives that seek social change. They (Nelson, Price & Zubrzycki, 2013) emphasize, that social workers need to be aware that racism is pervasive in all levels of society and can jeopardize the effectiveness of inclusion programs and that social workers need to challenge these assumptions of western superiority to strengthen integration programs. Al-Qdah and Lacroix (2011) discuss that the starting point in the work with asylum-seekers should be a structural analysis and that the psychosocial needs, advocacy, and community development must be recognized on the macro level.

On the meso level Evans, Diebold, and Calvo (2018) discuss the importance of building partnerships with other local service providers. Nelson, Price, and Zubrzycki (2017) shed light on advocacy work done in the social work context with UASC. They discuss that this should be done through strengthening resources, networks, and pathways for the practice, for example by organizing free legal help for the UASC. They recognize that there are several barriers they must overcome, and it can be very demanding with the resources of the individual social worker and thus the commitment of the social work organization is required.

The National Child Traumatic Stress Network [NCTSN] has developed a trauma-informed framework for the services that deal with potentially traumatized children in the United States (NCTSN, 2020). The core of the trauma-informed operating model for child welfare systems is that everyone working in the organization recognizes the possible trauma of the clientele, and every employee has the same level of knowledge on evidence-based practices in trauma-related issues. The framework also draws on strengthening inter-agency cooperation and supporting the participation of the children (NCTSN, 2020).

Nelson et al. (2014) point out that when engaging in advocacy work, the social worker must keep in mind that if genuine dialogue with the refugee population is not ensured, the advocacy might disempower the clients. However, through providing assistance that supports the strengths and independency of the clients, the advocacy truly enhances the community's resources and resilience. Nash, Wong, and Trlin (2006) discuss that on the meso level social workers need skills to strengthen community-based practices. Wimelius et al (2016) researched the inter-agency response for UASC reception and integration processes in Sweden. They discuss that even though a range of actors is included in the child's life, the actors were lacking established cooperation. According to their findings, the municipal social workers were characterized as links between the organization and they were the ones with overall responsibility for the cooperation of different actors. However, the social workers described a sense of isolation from the other professionals in the child's life. Evans, Diebold, and Calvo (2018) discuss the social worker's role in the exosystem. They call for hiring a diverse workforce and cross-training child welfare and immigrant service professionals to enhance the service quality

On the micro level, the focus is on the interventions with the individual. This is more explored in the literature and therefore the roles of the social worker vary greatly. The social worker's role in the work with UASC is explored in other arenas than responding to SGBV. For example, Seidel and James (2019) discuss the social worker's role in the context of residential care in Sweden. They perceive that the social worker's role in residential care is to assess and support the child's development, family, and the living environment. They are responsible to carry out the individually discussed care plan. Papadopoulos (2002) discusses a concept of "therapeutic care", which means that any form of support for UASC can contain therapeutic elements, and specialized psychiatric professionals are not always needed to recover from traumatizing experiences.

Evans, Diebold, and Calvo (2018) discuss in the U.S [United States] context that in increasing numbers the social workers in the mainstream services will be faced with UASC. They lay importance in providing information to the UASC about their rights, U.S laws and regulations, and local services available. They also suggest that role of the social worker is to facilitate trust and vouch for welcoming them to education.

Relating to the psychosocial needs, Blackwell (1997) presents a model of holding, containing, and bearing witness. Blackwell discusses the model in relation to torture victims. Blackwell discusses that often social workers are tempted to actively help the victims because it is easier than to contain. In the model, holding refers to recognizing and understanding the experiences the victim, containing is about forming a dialogue about the unbearable feelings, and bearing witness is about dialectic synthesis against oppressive forces.

Kohli (2006a) discusses, that social workers possess roles in three domains in the relationship with the unaccompanied child: cohesion, connection, and coherence. Cohesion refers to the



social worker's responsibility to meet the child's day-to-day needs, such as providing shelter and subsistence. Connection refers to meeting the child's emotional world. Drawing on Blackwell (1997) Kohli discusses that this means sometimes bearing the silence before the child opens up, and when that happens, not moving away from the child's pain. The domain of coherence means providing a fresh start in the new society for the child and supporting the resilience in them by using the trust relationship as a tool. Kohli and Mater (2003) conclude that social workers have an important role in supporting the child to make sense of their past, present, and future experiences.

Devenney (2020) builds on Kohli's three domains. Devenney frames social workers as "co-navigators" who assist the child within the bureaucracy and support the UASC in practical and emotional matters. Devenney's framing of the social worker's role as co-navigator contributes to the discussion between controlling and supporting the agency of the client by claiming that the relationship is more fluid than understood earlier. Previous research has discussed for example social worker's contradicting role as conducting age assessments for UASC (Cemlyn & Nye, 2012).

A trust relationship is portrayed as a central tool in working with UASC (Kohli 2006a; Hertz & Lalander, 2018). However, forming the relationship is challenging as the children are worried to open up to social workers about their experiences (Hertz & Lalander 2018). Kohli (2006b) explains that depending on the trust relationship between the child and the social worker, the child provides *thin* or *thick* narratives. These terms refer to how detailed and nuanced the narrative is. Hertz and Lalander (2018) mention that, for example, an experience of distrust can lead to thin narratives. According to their research, the children living in a group home were not informed about why social workers have their files and believed the social workers to work together with the Swedish Migration Board. Hertz and Lalander (2018) found out that even though the children have some good experiences and empathetic encounters with their social workers, the prevailing discourse was that the social workers appeared distant messengers that "pop up" to deliver a message from the system. The participant children perceived the social workers to possess a lot of power over them and the children did not know how they could affect decisions made on behalf of them.

The literature recognizes that there are areas of development within the work with unaccompanied children. These gaps include a lack of professional competence of the social workers, available protection for UASC, and inter-actor cooperation. Nash, Wong, and Trlin (2006) discuss that social workers often do not feel well equipped to deal with this kind of issue due to lack of training. Hertz and Lalander (2018) discuss that the fact that the children are not informed properly about the function of keeping client records and how this documentation is used is a barrier to forming trust relationships with the children. Lay & Papadopoulos (2009) state that the protection of UASC needs to be enhanced in the context of SGBV. They suggest that the default position in working with UASC should be that if the children are not actively protected, they will suffer SGBV. They call for stronger external protection to protect UASC from SGBV. Wimelius et al (2016) found out that the reception of UASC in Sweden is lacking collaboration between actors, the political vision of integration for these children, and evidence on how the reception system serves the children in the long run. They also discuss that continuity of integration processes are jeopardized by the high turnover of the key persons in the child's life.

## 4. Theoretical framework

I present the choices concerning theoretical approaches in this section. First, I have used Bronfenbrenner's (1979) ecology of human development. Secondly, Tew's (2006) framework of power for emancipatory social work practice, and finally critical social work. I conclude the section by constructing the framework to be used in the analysis.

### 4.1 Ecological theory

The ecological theory emerges from the field of natural sciences but has been adapted to the field of social sciences with the influence of several disciplines, such as sociology and psychology (Rotabi, 2007). The ecological theory aims to explain the interconnectedness of different ecosystems, and in social sciences, the ecological approach is particularly interested in the relations of social systems (Rotabi, 2007). The ecological perspective draws from the systems theory and aims to understand complex systems and how its pieces influence each other (Trevithick, 2012).

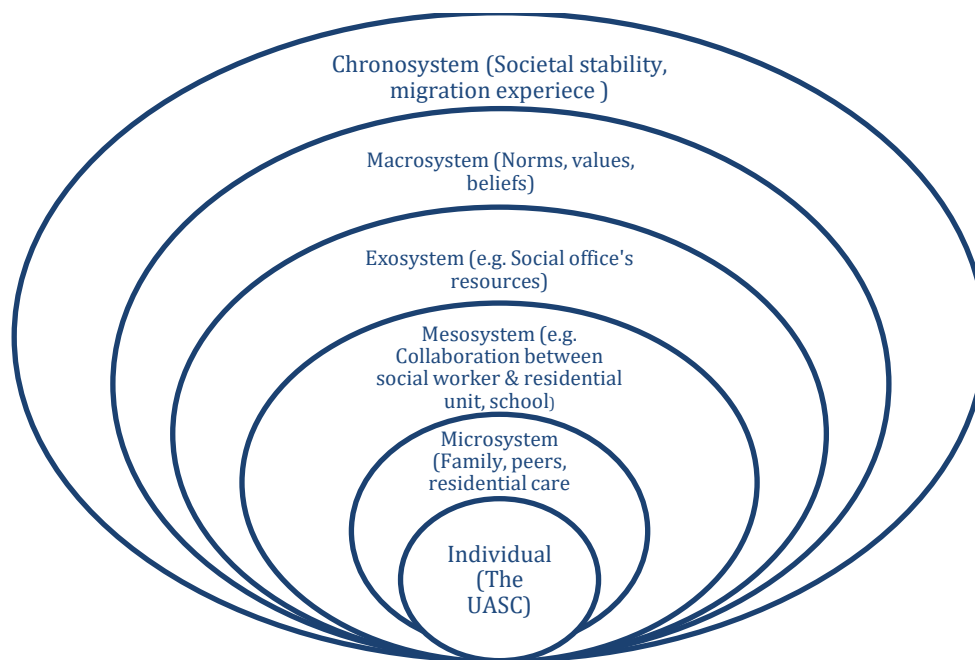
The ecological framework has been employed in the field of social work, partly by the influence of Gitterman and Germain (1976). They discuss the ecological framework in the context of casework, group work, and community interventions. They recognize the profession's struggles to combine the individual client interventions with the work of the environment of the client. They argue, that through the ecological perspective, both spheres can receive simultaneous attention.

The ecological approach has been employed by different scholars to explain and understand the social reality and interconnectedness of different layers of social systems. The ecological framework has been used to conceptualize for example youth criminality (Fraser, 2004) child abuse (Garbarino, 1977; Belsky, 1980), and violence against women (Heise, 1998). In this thesis, I have paid particular attention to Bronfenbrenner's (1979) application of the ecological framework in the context of a child's development.

Bronfenbrenner's ecology of human development (1979) aims to draw connections on how different systems influence the development of the child. The underlying assumption of the theory is the child is part of different systems in smaller and larger scales and these systems affect the child directly or indirectly. Bronfenbrenner depicts these systems as micro-, meso-, exo-, macro- and chronosystems that are presented as nested spheres within each other (Figure 1). This approach was presented to provide an extension to the studies on human development by bringing understanding about the external factors outside the intra-familial context that influence the child's development (Bronfenbrenner, 1986).

The ecological approach can be employed in the work with UASC to understand how different systems influence their development and well-being. In this study, the role of the social worker in responding to SGBV against UASC is examined through the ecological perspective. The ecological approach is employed by asking how the social worker can influence the different systems in the child's life to respond to SGBV against UASC.

Figure 1 Ecosystems in the life of UASC (adapted from Bronfenbrenner 1979;1986)



Next, I am going to discuss Bronfenbrenner's (1979) ecosystems and link them to UASC. One aspect to be noted is the geographical transition – the ecosystems might look very different in the home country of the child, in transit, and the country of destination.

The individual child is in the center of Bronfenbrenner's ecology, and the most immediate system is called the microsystem. Microsystems are systems such as home, school, or peer group (Bronfenbrenner, 1979). The child is an active agent in these systems. It is widely acknowledged that functional or dysfunctional microsystems have a direct impact on the child's development, e.g. substance abuse within the family. In the context of UASC, these systems are, for example, the child's family in the home country, peers, and humanitarian workers during transit and foster family or peers in the residential care in the destination country. In the context of UASC is important to pay attention to the fact that they are unaccompanied, which means that one of the most central microsystems – family – is not present, which is already a contributor in the child's development. When the child arrives in Sweden as an unaccompanied child, the most immediate familial system is replaced by a range of professionals – a municipal social worker, staff at the residential care, and the legal guardian. At the same time, familial ties take the form of online communication if the child has family and relatives left in their home country or somewhere else (Wimelius et al, 2016).

The next system – mesosystem – is the one where the different microsystems meet, for example when the family is in contact with the peer group. In the mesosystem, the child is a central agent in all the microsystems that the mesosystem is consisting of. Bronfenbrenner (1979) uses the example of how the ties between home and school influence the child's grades. When thinking about UASC, the mesosystems are for example the connections between child protection social worker, residential care/foster family, and education.

The next sphere in Bronfenbrenner's (1979) ecology is the exosystem which introduces that contexts beyond the child's direct environment have an impact on the child's development.

Bronfenbrenner (1979) gives an example stating that the parent's employment conditions influence the child, even though the child does not have a role at the workplace of the parent. In the context of UASC, such factors might for example be the working environment of the social office or residential care or budget allocation to each child. The child in question cannot influence these systems, but the systems have a direct impact on the child. In the context of their home countries, the impact of exosystems (e.g. long-term unemployment) might have had a tremendous effect on the child's development leading to fleeing the country.

The largest ecosystem in Bronfenbrenner's (1979) ecology is the macrosystem which includes the society as a whole, including the culture, beliefs, and values as well as social events. Bronfenbrenner (1979) uses as an example that economic crises and hardship can have positive or negative effects on the child's development. In the context of UASC, the influence of macrosystems is easy to see, as many of the children are fleeing war or economic hardship. Prevailing societal attitudes and discourses, e.g. on migration, are setting the circumstances for the reception and integration of these children.

One more ecosystem that Bronfenbrenner (1986) includes is the aspect of time. The concept of chronosystem aims to understand the child's development through the aspect of chronological age, how have the changes over time affected the child, and how consistent/inconsistent the child's life experiences have been. The concept of chronosystem suggests that the past is inseparable from the present and the future. In the context of UASC, one aspect of chronosystem is the migration experience as such. It is a transition that has long-term effects on the child's life.

Rotabi (2007) discusses, that the ecological framework is especially useful to understand social systems and questions. When employed, it can help to understand issues such as oppression and inequality. When turning the focus to sexual and gender-based violence, this can as well be understood through the ecological approach. For example, Heise (1998) presented a social ecology framework on violence against women as a critique of single-factor hypotheses on mechanisms leading to SGBV. Heise (1998) discusses that previous explanations on violence have focused either only on the individual factors or societal factors. By applying the ecological perspective, the SGBV can be understood not only as an interpersonal event but as a complex network of intertwined systems. Heise (1998) suggests, that SGBV is a combination of individual, situational and societal factors.

The ecological perspective has been criticized strongly by Wakefield (2004). Wakefield argues that the ecological approach as a theory is too abstract for social work interventions. Wakefield discusses that the ecological theory does not have "scientific explanatory power of its own" (Wakefield 2004, pp. 4), but mostly provides categories, but it does not explain why the systems function in the way they do. Despite the critique, I have to chosen to utilize the ecological approach to categorize the empirical data, and other theories are chosen to complement in analyzing the content of these categories.

Summarizing, the ecological perspective provides a comprehensive theoretical base for social work, as it allows strategies on multiple levels from individual interventions to structural approaches (Pardeck, 1988). The ecological perspective suggests that the adversities experienced by the individual are not the fault of the individual but the dysfunctions in other systems and that the client's functioning is interrelated to the environment. Pardeck (1988) discusses that the social worker can have several roles in relation to the client when the work is portrayed through the ecological perspective. The roles can vary from providing direct

assistance to the client to providing protection, but they expand also further by, for example, linking the client with the right services and overseeing the quality of those, or by advocating for the client in different ecosystems.

## 4.2 Power in emancipatory social work practice

SGBV against UASC encompasses many aspects of power – power, or more asymmetry of power is manifested in an act of SGBV against an unaccompanied child. Also, the relationship between the social worker and the unaccompanied child encompasses disparities in power. However, power can be understood in different ways and as a concept, it is contested by many scholars. I have chosen to utilize Tew’s (2006) conceptualization on power because it is adapted to social work contexts and it helps to understand the social workers’ responses to SGBV against UASC.

Tew (2006) presents a framework of power for emancipatory social work practice (Table 1). Tew presents, that power can be understood as *power together* or *power over*. The framework suggests that power can be used in productive forms as well as in destructive forms. When power over is employed as a productive mode of power, it can serve as protective power, where power is exercised to protect the vulnerable population from harm. If power over is exercised as a limiting power, it can be used to oppress others and to improve one’s position. On the contrary, when power together is employed in its productive form, it can be used as co-operative power to create change through collective support. When it is employed as its limiting form, it takes the form of collusive power that has the capacity to exclude others.

Table 1 Matrix of power relations (Tew 2006, p. 41)

	Power over	Power together
Productive modes of power	Protective power - Deploying power in order to safeguard vulnerable people and their possibilities for advancement	Co-operative power - Collective action, sharing, mutual support and challenge – through valuing commonality and difference
Limiting modes of power	Oppressive power - Exploiting differences to enhance own position and resources at the expense of others	Collusive power - Banding together to exclude or suppress ‘otherness’ whether internal or external

Tew’s (2006) theorization provides a framework that reflects the double mandate of social work. As a profession, social work is committed to fight against injustice and emancipate oppressed populations (Staub-Bernasconi, 2016). On the other hand, social work has a controlling function in society (ibid.). The concept of power provides a starting point to analyze, how the social workers discuss their role in relation to the double mandate of social work and how they manifest the aspects of control and empowerment in their narratives. The framework suggested by Tew (2006) is useful to understand the social workers’ responses to SGBV against UASC by looking at what kind of power they exercise.

### 4.3 Critical social work

As the third line of the theoretical framework, I have chosen to utilize the critical social work approach. Critical social work provides a useful approach for the social worker to respond to SGBV against UASC because it provides a framework on how to analyze and respond to the issue. Critical analysis on SGBV against UASC reveals, that SGBV is embedded in historically and socially constructed structures and that therefore, those social structures can be changed.

Social justice and equality are core principles of social work (IFSW [International Federation of Social Workers], 2018). As Dominelli (2002) discusses, social justice and equality are important goals and principles, but without understanding the dynamics of oppression the social workers might themselves contribute to reproducing it. Thus, critical social work is needed. Critical social work draws on the traditions of anti-oppressive, anti-racist, feminist, and radical social work approaches (Fook, 2002). Morley, Macfarlane, and Ablett (2019) define critical social work as “a progressive view of social work that questions and challenges the harmful divisions, unequal power relations, injustices and social disadvantages that characterize our society, and seeks to create more socially just societal arrangements” (ibid. p. 1).

Healy (2001) extends the definition into employing critical reflection and integrating participatory practice with the oppressed population to achieve social transformation. Critical reflection has a pivotal role in critical social work practice. Morley et al (2019) discuss critical reflection as questioning the position of oneself in addressing social problems and social change. Healy (2001) points out that social work has often a contradictory role in terms of social control functions, thus the social worker must adopt a critical approach to understand how they are positioned and how they explain social problems.

Critical social work is grounded on critical social theories, where the starting point is to understand oppression. Mullaly (2010, p. 38) defines oppression as “domination of subordinate groups in society by a powerful (politically, economically, socially, and culturally) group” [brackets in original]. Mullaly continues, that the structures in the society favor the dominant group, thus the dominant group is satisfied in the current state. The oppressed group might not be aware of the oppression and blame themselves for their situation (Tew, 2006). Agger (1991) points out, that the oppressed group might thus participate in their own oppression.

The critical social theories suggest that a distinguishable social structure exists in society and that the structure is formed as a historical process (Payne, Adams & Dominelli, 2002). Through acknowledging that the current structure is a product of slowly changing the social process, the critical approach proposes that the current structure is not immutable but there is a possibility for change. Payne et al (2002) explain that critical social theories highlight human agency in influencing the social world they live in and that everyday actions have the potential to create flows that contribute to either change or stability. Fook (2002, p. 18) summarizes that the critical social work approach aims to understand how the structures create domination and how “people construct and are constructed by changing social structures”. According to Fook (ibid.) this understanding helps to construct new structures that are more inclusive to different oppressed populations.

Critically oriented social workers understand how the structures shape the lifeworld of the unaccompanied child. It is important to remember, that different systems influence the child's life constantly, and thus the social worker must understand the intersecting factors that exacerbate each other. Collins (2015) discusses that the systems of race, class, gender, sexuality, ethnicity, ability, and age are intertwined. These factors give some people greater power and privilege and render some people vulnerable to systemic oppression. For example, masculinity is seen as powerful whereas femininity is seen as a weakness in today's patriarchal society, and people of color are seen as having less value in a society where white people have economic, political, and social power.

Responding to SGBV must thus be broader than solely responding to sexual violence. Armstrong, Gleckman-Krut, and Johnson (2018) state that sexual violence is in the core of domination through reproducing power asymmetries and responses that merely recognize gender or ethnicity but not the other erase the "intersectional experiences of violence and discrimination" (ibid p. 101). The intersectional approach to SGBV responses is also called for by the California Coalition Against Sexual Assault [CALCASA] (2017) that emphasizes that sexual violence is linked to other social justice battles. They suggest that sexual justice responses must be intertwined to fight oppression based on e.g. skin color and ethnicity.

These factors influence the child's risk to be subjected to SGBV as they have often intersecting vulnerabilities that increase the risk. Not only because of their age or gender, but the UASC come often from racialized contexts that subjects them to dehumanizing treatment and exploitation by people who believe to be above them in social hierarchies and use this as a justification for the exploitation. The UASC come often from contexts of poverty and scarcity and thus rendered powerless in terms of class. Intersecting inequalities are exacerbated by the colonial mindset and history since the impact of colonialism still involves asymmetries of power between people of the global north and global south and this racial mindset manifests itself through racism and discrimination (Kamali, 2009).

Also, the profession of social work has had a role in colonial expansion in reproducing discriminatory practices (Östman, 2019). Thus, social workers must recognize the past of the profession. The critical social theories suggest that the current structures are formed socially over time. Therefore, the critical social worker understands how history has molded the discourses and structures in the current society (Östman, 2019).

The anti-immigration and sexist discourses that enable SGBV can be manifested on the individual, organizational and societal levels. On the individual level, they might be acts of hatred and asserting dominance, on the organizational level they might e.g. manifest as ignoring allegations of SGBV (Armstrong et al, 2018), and on the societal level, they might manifest as systemic oppression. These levels are intertwined according to the ecological approach. Digidiki and Bhabha (2018) present an example from Greece where the rise of anti-migration discourse eroded the resources and standards for the care and protection of migrants in the refugee camps. Failing protection measures such as safe accommodation for UASC forced the children to rely on their own mechanisms of survival leading to increased vulnerability to SGBV (ibid.).

Based on the literature on critical social work, I summarized the critical approach in the work with UASC as follows: through employing a critical approach, the social worker recognizes the structures that influence the situation of the client. In the case of UASC, this means that the social worker is aware, for instance, about how the migration laws and the difficulty to

gain a residence permit influences the child's situation, or how the lack of safe migration routes renders the children vulnerable to SGBV. After identifying these structures that shape the child's experiences, it is possible to understand what kind of effect these structures have on the wellbeing of the child, which in the case of SGBV means serious implications on the child's physical, psychological, and emotional wellbeing. Critical social work also includes an understanding that these structures can be changed. A critically competent social worker can identify intersecting factors e.g. gender, class, and ethnicity, and see how these influence the vulnerability of the child. The social worker also engages in critical reflection to understand their position in relation to the child.

## 4.4 Analytical framework

The ecological perspective, power, and critical social work approach have been introduced above. In this section, I construct an analytical framework that will be used as a base of the analysis of the empirical data. The overarching theoretical lens is the ecological approach, and the concepts of critical social work and power will provide tools to understand the roles of the social worker.

The ecological framework (here understood through Bronfenbrenner's (1979) conceptualization) suggests that several ecosystems influence the unaccompanied child's life and development. There is also a range of factors in the child's life that influence the vulnerability to SGBV. These factors can be linked to different ecosystems. Thus, both unaccompanied child and SGBV are constructed through the ecological approach in this thesis. This suggests that responses to SGBV against UASC include several layers. The ecological approach is employed to analyze the empirical data collected in the interviews with the social workers to explore how they can influence the different systems and the factors contributing to the protection of UASC from SGBV. In the below table (Table 2), the unaccompanied child is constructed through an ecological perspective, as well as the factors that contribute to the UASC vulnerability for SGBV. The last column will be constructed from the empirical data collected in this study. It reflects, where the social work professionals place their professional roles.

The concept of power is understood here through Tew's (2006) framework of power for emancipatory social work practice. This theoretical approach is used to analyze the social worker's roles and responses to SGBV against UASC in different layers of the ecological framework. The concept helps to understand how social workers manifest the different forms of power and how it is visible in the roles they name for themselves. The framework also allows to analyze how do they perceive their capabilities in terms of power over and power together, and whether their roles include using limiting or productive forms of power.

The critical perspective of social work provides a framework to understand oppression and intersectional vulnerabilities in the context of SGBV against UASC. Critical social work provides a solution to respond to the issue.

In summary, the ecological perspective functions as a map that helps to locate the social worker's roles, and it provides a tool to classify the social worker's testimonies. The concepts of critical social work and power help to further analyze the dynamics of the roles in a deeper sense and provide information on what the roles contain.



Table 2 SGBV against UASC in the ecological perspective

System	UASC	Factors contributing to UASC vulnerability SGBV (examples)	Social worker's role in responding to SGBV against UASC
Chronosystem	e.g. migration experience	the fragility of the state, living in conflict-torn areas, slow societal change	
Macrosystem	the surrounding society, norms, culture	gender norms, gender inequality racism, not enough attention to SGBV issues politically lack of LGBTQ rights	
Exosystem	e.g. social worker's budget allocation	availability of funds lack of knowledge and competence in SGBV issues	
Mesosystem	Relationships between e.g. social worker, school, living unit	access to services lack of referral pathways for survivors	
Microsystem	Family, peers, living unit, foster family	e.g. lack of protection from family lack of protective accommodation, transportation, family that reproduces harmful cultural practices	
The individual	the child	childhood, disability, gender, ethnicity	

## 5. Methodology

This research focuses on how social workers perceive and describe their professional position and capacities in responding to SGBV against UASC. This thesis is concerned about words and meanings – thus, the research is qualitative of its nature. Bryman (2012) discusses that qualitative research strategies tend to be epistemologically positioned as interpretivist, which means that the researcher interprets the social world of the research participants from their viewpoint. The ontological orientation of qualitative research tends to be constructionism, which means that the reality is constructed in social interactions (Bryman, 2012). In this thesis, the reality is understood to be socially constructed. The social realities of the social workers are on the focus, and these realities are interpreted by the researcher. As opposed to the positivist and objectivist research paradigm often employed in natural sciences, this research is understood as a construct of social processes and it must be acknowledged that a researcher cannot study something objectively and separately from reality. Sexual and gender-based violence is a result of complex social processes such as value formation in societies, as well as responses to sexual and gender-based violence are transforming due to social aspects such as information sharing - in which this thesis hopes to be one link in a chain.

Bryman (2012) discusses that qualitative research tends to be inductive, as the empirical data is supposed to contribute to theory formation. However, in this thesis, the approach to the empirical data was both inductive and deductive. It was deductive because the interview guide was drafted based on themes that have been emerging in previous literature. The inductive approach was applied in the analysis of the empirical material since there was space for the interviewees to bring up issues and themes that they perceived central and important, and some themes that appeared more central in the planning stage of the interviews turned out not to be very central in the interviews and difficult to grasp. Partly the theories were guiding the classification of the data, but it did not strictly overrule what kind of aspects were sought from the data.

### 5.1 Data collection

One of the most employed methods in qualitative research is interviewing (Bryman, 2012). Interviewing is the most suitable method for collecting empirical data for this thesis, because the aim is to understand how social workers perceive their own role, and the best way to research this is by asking the social workers themselves. According to Bryman (2012) qualitative interviewing is understood to entail unstructured and semi-structured types of interviewing. Structured and standardized interviews are more associated with quantitative research. The difference between qualitative interviewing and structured interviewing is that the former is more concerned with the participants' perceptions and thoughts, whereas the latter reflects the interests of the researcher. Qualitative interviewing allows the researcher to alter the structure of an interview more freely, ask more questions, and in different wordings (Bryman, 2012). Hammersley and Atkinson (2008) distinguish between prestructured and reflexive types of interviewing. They emphasize that the interview is a social interaction between the researcher and the interviewee, and they both influence the structure of an interview. However, an interview is not only a conversation, because the researcher has an agenda and regulates the flow of the discussion (Hammersley & Atkinson, 2007).

Beitin (2012) discusses that the most employed form of interviews is individual interviews. Such interviews focus on individuals who know about the research area and are able to

provide their insights on the issue. The choice of the interview form must be guided by the research question and aim of the research (Beitin, 2012). Beitin (2012) discusses that the benefits of the individual interviews are that they might give the interviewees more freedom to present their views without the social pressure of the other participants, and they are easier to organize when there are on multiple different schedules. In contrary to multiple-person interviews, the individual interviews reflect the participant's own thoughts without the possibility to be enriched by the social interaction.

Individual interviews were chosen as a form of interviewing in this thesis because the purpose of the study is to learn about the social worker's understanding and perceptions of their work in relation to SGBV against UASC. Due to practical reasons, individual phone interviews were the most suitable solution in the COVID-19 pandemic situation.

In this thesis, the chosen method of interviewing is semi-structured interviewing. Bryman (2012) defines semi-structured interviews as interviews that are carried out with an interview guide. The guide contains a list of topics or questions to cover and discusses that the participants are able to freely formulate their replies. Bryman (2012) discusses that not necessarily all the interviews follow the same path but that the outline of all interviews remains relatively similar.

A total of six participants were interviewed for this thesis in 30-50-minute-long semi-structured interviews. By using the semi-structured interviewing method, the interviews had a clear structure as a backbone but allowed to vary the structure of the interview and the wordings of the questions. By employing a semi-structured approach to the interviews, the interviewees could bring up themes and issues they find central and relevant and the questions could be adapted according to that. The interviews had an interview guide ([Appendix 2](#)) as a baseline, but all the interviews had a unique structure depending on the social workers' narratives, and by noticing that some questions were not fitting or understandable. All interviews started with background questions on their job descriptions and number of years working with unaccompanied children and by asking them to describe what kind of cases of SGBV against UASC they have faced in their work. Background questions were followed by the predetermined interview themes: reactions and actions, responsibilities, training and education, resources, and gaps. The theme 'reactions and actions' contained questions on how they reacted in a situation where a child told them about the SGBV case and what did they do in a case of potential or actual cases of SGBV. The theme 'responsibilities' included questions on what the participants perceived as their central tasks and how they saw their role in relation to the child and other actors involved with the child. The third category aimed to map out their knowledge base on SGBV and how they perceived their own skills on SGBV. The fourth theme was concerned with how they view their resources in supporting the child and if they identify gaps that need to be improved. The order of the themes varied in the interviews to provide a sense of "flow" and the number of questions under each theme varied depending on how much input the participants had.

Hammersley and Atkinson (2007) discuss two different types of questions: directive and non-directive, and they provide for different purposes. The interview questions were formulated in a non-directive way, to allow elaborate answers from the participants. However, some questions were more closed and direct to ensure specific answers to certain questions such as if the participants had received training on SGBV in the context of UASC. The answer to this question made it possible to learn more about what kind of training they have received or what kind of needs they have in relation to training on the subject.

All the interviews were carried out as phone interviews. This contributed to the organization of the interviews since no physical meeting space was needed and the researcher or the participant did not have to travel between places. However, the lack of visual connection also meant that non-verbal communication could not be observed. All the interviews were recorded, and the records were transcribed. In some parts the fact that the interviews were carried out via phone affected the quality of the recordings. Mainly the quality of the recordings was good. The language of the interviews was English.

Beitin (2012) discusses that the recommended sample size in qualitative interview research varies between 2 and 12 participants, but a common approach to determining the sample size is observing the theoretical saturation. Beitin (2012) explains, that there are ambiguities in determining the saturation point. Bryman (2012) explains, that the saturation point is reached when the new collected material does not provide new relevant data. In the six interviews conducted for this research satisfying level of saturation was already visible, as during the course of the interviews I could anticipate many of the themes that were taken into the discussion based on the previous interviews. However, I was hoping to conduct one or two more interviews to strengthen the results, but finding participants seemed to be challenging either due to the sensitive nature of the research or due to the pandemic that has brought people to face new challenges in their private and working lives.

## 5.2 Participants

The participants were selected through a suitability criterion: they were currently or previously working with unaccompanied and separated children in Sweden and they had come across potential or actual cases of SGBV against UASC regardless of where it had happened. The participants were sought out by contacting by phone, email, and social media relevant actors and people who are working with UASC. In addition to that, a snowballing method was employed to reach out to other possible candidates who could be suitable.

A total of six people were interviewed for the thesis during March and April 2020. Five of the participants have a social work education, and one of the participants had a degree in psychology but had been working in similar settings as a social worker and using the social work knowledge as a starting point. The participants had between 1,5 and 8 years of working experience with UASC. The participants were working in different social work settings: at a residential care unit, at a social office, or in civil society organizations. Interviewing participants working in different settings provided a broad picture of social work roles and that allowed some degree of comparison between different social work settings.

## 5.3 Method of analysis

The empirical material collected from the interviews reached 36 pages of transcripts. The transcripts were verbatim. Some repetitions, such as repeating the question, and verbal “tics”, such as repetitive use of “like” were removed from the transcripts to present the text in a more understandable form.

A thematic analysis was employed in this thesis to interpret the empirical data. Bryman (2012) discusses thematic analysis to be a popular method of analysis in qualitative research. The method entails a search for themes emerging from the data, for example, repetitions, metaphors, differences, and similarities as well as linkages to theory. Bryman (2012)

discusses that repetition is the most common means to track a theme, however, repetition as such is not the only criteria to form a theme. The theme must contain an element relevant to the study and the research questions.

I started the process of analyzing already in the interviewing stage by taking notes after the interviews about the emerging themes and based on the notes I created a tentative analysis framework. I took a more systematic approach to the analysis after finishing all the interviews and transcripts. I used NVivo software for the qualitative data analysis to manage the empirical material.

I started by uploading the transcripts to NVivo. I read the data thoroughly and marked codes with the software. At this stage, I used the tentative analytical framework to detect those preset themes from the data, but the process allowed also other codes to emerge. Examples of the used codes were “Lack of training” or “Making referrals”. Already in the coding stage, I could group some codes, suggesting possible themes. After the coding, I observed the codes and groups of codes and could see distinct themes forming, such as “facilitating a trust relationship with the child” or “providing psychosocial support”. The themes were grouped into main themes and subthemes. These themes were further categorized by employing the framework provided by the ecological approach.

## 5.4 Trustworthiness

The tradition of assessing the reliability and validity of the study is established in the line of quantitative research. Bryman (2012) discusses that such criteria to measure quality in qualitative research are being considered, but there are several different stances on the criteria. To assess the trustworthiness of the qualitative study,

Bryman (ibid.) suggests the concepts of *credibility*, *transferability*, *dependability*, and *confirmability*. *Credibility* refers to the internal validity of the study. In this study, credibility is pursued through employing a good practice, ethical considerations and explicitly explaining the research methods and the data analysis process. *Transferability* as a concept refers to the external validity of the study, and how applicable it is to other contexts (Bryman, 2012). Bryman (ibid.) points out that this is challenging in qualitative research since the aim is to go in-depth to specific contexts rather than producing broad explanations. However, I perceive that the results of this study apply to other contexts since many inequalities and oppressions share a common core, and this study can provide an understanding of how a certain profession’s role can be understood in relation to it through an ecological approach.

The concept of *dependability* relates to the reliability of the study and if the same conclusions are likely to be reached at other times if the study is repeated (Bryman, 2012). I have sought dependability by documenting the research stages and trying to remain as objective as possible. This leads us to the last aspect of trustworthiness – *confirmability* (Bryman, 2012). It links to the objectivity of the researcher. This study understands the reality and knowledge as socially constructed and recognizes the researcher is inevitably influencing the research process through being a social agent in the interview situation and the data is interpreted through the researcher's own reality. Thus, I have tried to remain as objective as possible even though I recognize the social and interpretative nature of research and I have discussed the research process openly.

## 5.5 Delimitations of the study

Despite careful efforts to design a good study, all research has its limitations. In this particular study, the biggest challenges were posed by the Covid-19 pandemic that influenced especially the data collection process since it was difficult to reach participants and I was forced to use telephone interviews instead of face-to-face interviews as a data collection method. Also, the sensitive nature of the study might have influenced to the difficulty of finding participants. However, the fact that the form of interviews changed to phone interviews allowed a more flexible interviewing schedule since no physical meeting space was needed. It also meant that the participants or the researcher did not have to transport anywhere for the interview – thus both parties could create a space for the interview where they feel the most comfortable. It also allowed to include participants from a larger geographical area.

One central limitation was the aspect of language. The interviews were conducted in English, which was not the mother tongue of mine or the participants. Even though the language did not pose major challenges, it might have influenced the fact of how freely the participants were able to express their views or how I as a researcher have interpreted the data. However, I consider that the overall quality of the data was high regardless of the aspect of language.

## 6. Ethical considerations

Social work as a profession deals with vulnerable populations and has a strong moral mandate. Thus, ethics should be a permeable consideration in practice, education, and research of a profession. Central ethical principles of social work are respecting the inherent dignity of people and promoting human rights and social justice as well as promoting the rights for self-determination and participation (IFSW, 2018). Respecting confidentiality and privacy, treating people as whole persons and responsible use of technology are part of ethical social work practice (ibid.).

Conducting good research requires ethical considerations and following guidelines. Good research is based on openly communicating about the research and ensuring transparency at every stage of the research (Swedish Research Council, 2017). Bryman (2012) discusses the main principles of social research. First, the possible harm for the participants should be considered. Secondly, the participants need to give informed consent. Thirdly, the privacy of the participants should be respected, and fourthly, deception should be avoided. Hammersley and Atkinson (2008) raise the same ethical issues in social research and add one more consideration: implications to further research.

The first principle, *do no harm*, challenges the researcher to consider for example the physical, psychological and developmental harm that might be caused to the participants form taking part in the research (Bryman, 2012). Possible harm can be for example stress or anxiety due to participating in the research or revealing the identity of a participant (Hammersley & Atkinson, 2007; Bryman, 2012). The *do no harm* principle was considered already in the stage of formulating the research questions since it concerns a vulnerable group of people – unaccompanied children who have faced sexual and gender-based violence. Even though it would have been interesting and valuable to give the children a voice in an issue that concerns them, it would not have been possible in the scope of this thesis. Researching children raises several ethical issues, for example, the issue of giving true consent, especially when researching a sensitive topic like violence. Rittenhouse and Felicini (2015) explain that there is a great need for reliable research on sexual exploitation of children in a child-centered manner that allows the voice of children to be heard. However, they recognize that conducting such research may cause them emotional, psychological, and social harm, and psychosocial support should be provided to them. For these reasons, this research was designed to have a focus on the experiences of social workers who meet unaccompanied children in their work. This way the topic could be studied, but there is not fear of distressing the children. Also, when interviewing adults, the power imbalance between the researcher and research object is less prevalent, than it would be in researching children. The participants were informed that they could withdraw from the study at any stage, so they had the possibility to discontinue in the study if they were feeling uncomfortable psychologically. Also, the participant's personal information and the empirical data was treated with confidentiality.

The second principle, *informed consent*, means that the participant should be provided with information about the research and their rights before they give their consent to participate (Bryman, 2012). Hammersley and Atkinson (2007) discuss that the lack of informed consent is problematic especially in covert participant observation because then the research objects do not give their consent to be researched. However, using interviews as a research method, the participants are aware that they are participating in research. Participants in this research were provided with an information letter ([Appendix 1](#)) and oral information about the aim and

area of interest of the study as well as their rights as a research participant, and they had a possibility to ask questions about the research. All participants gave their consent to participate in the study and were aware that they could withdraw at any point. The participants were also asked whether they consent to recording the phone interview, and all the participants agreed.

The third principle of conducting social research is *not to invade the privacy* of the research participants. It links closely to the principle of informed consent, as the research participants are informed to what extent their given insights and details will be used in the research (Bryman 2012). In the context of this research, the data collected was sensitive. The participants were not forced to tell more than they felt comfortable with and the details such as names and places were altered when transcribing the interviews to protect the privacy of the participants. In addition to that, the cases of SGBV that they had faced in their work were described as on a case or phenomena -level, and no recognizable characteristics were shared in the interviews.

The fourth principle relates to *avoiding deception or exploitation* of the research participants. Bryman (2012) discusses deception as claiming the research to be something else what it really is. Hammersley and Atkinson (2007) are more concerned about conducting research for example on a vulnerable population and thus using their resources, but not giving anything back to the community. In this thesis, as accurate as possible, information about the study was given to the participants but keeping in mind that the final focus might be shifted from the original in the process of gaining more information on what the participants see as relevant. The aspect of exploitation was minimized by not directly interviewing the children who have been subjected to SGBV.

Hammersley and Atkinson (2007) bring up the implications for future research. If the research is not designed ethically and respectfully, the participants and communities might be reluctant to take part in any future research. So, it is not necessary to maintain high ethical standards only for the sake of the quality of the research, but also keeping the avenues open for the researchers who might come after. This aspect has been taken into account by respecting the participants and following all the above ethical principles of social research.

Potter and Hepburn (2012) emphasize the researcher's role as an active agent in the interviewing process, but the voice of the researcher is often faded in the research reports. Bozalek (2016) draws on Barad's (2007) intra-active approach to data-collection in quantum physics but reflecting it to social work research. Bozalek (2016) suggests that in addition to the researcher, many other factors such as the research questions and the recording machine affect the outcome of the interview – the research always reflects the combination of these individual factors that an active role in determining how the research looks like. Lay, Popodopulos, and Gebrahivot (2007) point out that the researcher should reflexively approach the research to distinguish how their beliefs and values influence at every stage of their research.

Thus, I find it relevant to acknowledge that regardless of my efforts to neutrality, this thesis is a construct by me, and it reflects my interpretations throughout the whole research project all the way from the choice of the topic, research design, data collection, and data analysis - all this through my white, a product of a Nordic welfare state, cis-woman point of view. I do not claim to speak on behalf of the interest group, but with this thesis, I hope to create more space for the voices of unaccompanied and separated children.



## 7. Findings and analysis

In this section, I present the findings from the empirical data collected in the six interviews with social work professionals. First, I discuss, how the phenomenon of SGBV against UASC manifests in the social worker's work and what kind of experiences the social workers have had. After that, I proceed to discuss what are the roles of a social worker in responding to the issue. The sub-section utilizes the structure of the ecological perspective to explore the roles. Finally, I move to discuss the role of the social work organization in responding to SGBV against UASC.

### 7.1 Forms of sexual and gender-based violence

To be able to analyze the different roles and strategies the social workers employ in the cases of SGBV, it is necessary to explore, what kind of experiences the social workers have regarding working with the issue of SGBV. The interviewed professionals had been faced with different forms of SGBV in their work through the stories of UASC they meet in their work. All the participants perceived SGBV as a prevalent issue in the context of UASC, and they estimated that a big part of the children they meet are subjected to SGBV. One participant discussed that nearly all the girls they had worked with, had been raped or abused on their way to Sweden.

The participants described that the SGBV cases they have directly worked with were mostly from the countries of origin or during the transit, but they have also met children who have been subjected to SGBV in Sweden. The discussion concentrated solely on the SGBV against the binary genders, and non-binary/LGBTQ identities did not emerge in the testimonies. The respondents told that they had met boys and girls who had been subjected to SGBV.

The forms of SGBV the social workers named in the countries of origin were closely linked to harmful traditional practices such as early/forced marriage, female genital mutilation, and "dancing boys". The SGBV in the countries of origin was one of the push factors to start the journey for refuge according to the participants. In the cases in their countries of origin, the family of the children has been an active agent in contributing to the cases of SGBV, for example, the family has supported the early or forced marriage or in the case of the dancing boys, the family was enforcing this practice, since they needed funds for living.

I would say almost all of the... especially [country name] girls have told me something like that. Usually that they were forced to marry an older man with or without the agreement of her parents. And then was abused to sexual activities. That was really common. And also, usually one of the reasons why they flew from the country. (*Respondent 1*)

One form of SGBV, the tradition of dancing boys, was mentioned multiple times. The literature on SGBV against UASC does not mention this tradition, but based on the material collected for this study, many of the social workers had encountered this practice. The boys of low-income families are forced to dance for older men dressed up in female clothing in exchange for money for the family. The respondents told that it often included drugging the child and touching them sexually or raping them.

And we had also boys from [country name], I remember at least one boy, who had, his background was, that he was this kind of dancer. They have special dancers in [country name], that when older men was forcing them and drugging them and made them dress like girls and dance for them, and also raped them. So we heard a lot about this. (*Respondent 4*)

Most of the participants described situations where UASC were subjected to SGBV during transit. Many mentioned that girls they have met have experienced kidnapping and rapes along the way and some end up pregnant and the gender was a central factor that added vulnerability. The respondents described that detention posed a risk for SGBV in the form of gang rapes and the perpetrator in these cases were extremists or adult detainees. The respondent described it as conflict-related sexual violence, and sexual violence was used as an act of torture. The theme of survival sex also emerged in the interviews: some children used sex to pay for their smugglers and in the other case the UASC sold sex to wealthy locals.

I heard more than one story about when they traveled through [country name], so there's mostly girls from [country name] and [country name], who have been arrested mostly from extremists, and then they have been in some sort of prison and raped. Several times and also by several men at the same time. And then also girls who have been sexually abused or raped, more... not the same, what I told you, extremists, from [country name], it's more systematic, the same as torture. (*Respondent 5*)

The cases of SGBV in Sweden were not that familiar to the respondents, and in most cases, SGBV took different forms compared to the cases of SGBV occurring in transit. The respondents described cases such as sexual harassment and stigmatization. Sexual harassment was described that especially the girls were exposed to harassing by the males from the same ethnicity, and that girls have been stigmatized in the community for example due to abortion. The respondents also described how the children have been forced to sell sexual services to compensate for the insufficient living benefits from the migration board. One of the respondents described a case where a social worker was abusing their power by buying goods for the child in exchange for a relationship where the child believed that the social worker could help gain a residence permit.

So they started a kind of relationship and he [the child] really thought and hoped that she [social worker] could really help with his case in migration board and this kind of stuff so he started a kind of relationship with her and she bought stuff for him, so this kind of stuff, and also had told him that maybe she can help him [to get] permanent residence. (*Respondent 6*)

However, they acknowledged that all the cases do not come into their attention due to several reasons that are for example underreporting, shame, not having enough trust, and low awareness that SGBV is against their rights. The social workers explained that there are cases where the children had explicitly told the social workers, but on some occasions, the violence was more implicit, and the respondent could only suspect that such violence was occurring. The respondents have started to suspect based on for example the child's behavior or a "gut feeling".

I have suspected with some boys that I have met, especially when I worked at the camp, according to have they have been around especially around male staff. They have been acting in a way that is quite typical for people

who have been sexually abused, maybe they have reacted to something in a very dramatic way, or they have been sexual, what do you say, sexuellt utmanande betende [sexually challenging behavior] against mostly male, other male, but also against women but especially men. (*Respondent 5*)

The respondents explained that they could see the effects of SGBV on the children in many ways, and especially they saw the effects on their self-image and difficulties in their relationships and wellbeing such as in their sleeping habits. The girls who end up being pregnant are faced with the choice of either aborting and facing stigmatization or giving birth to the child and experiences the implications on their integration. The participants told that issue of SGBV had nearly become an assumption and normalized among the children as well as the workers, so the children might lack the response from the social worker to receive the help they needed. One of the participants described how the SGBV had become normalized among the UASC, that they even made jokes about it and it was hard to identify as abuse.

So most of the boys actually didn't talk about this happening like abusing, they sometimes even laughing about it and making jokes about this. It was like that they sometimes, especially when it was with a woman, they more talked about that in other terms like, yeah the women are dirty, the women are smelling not good, the sex is not so nice. -- They talked about they are not sleeping good, they also talk about they can't even have sex with their younger girlfriends they had. (*Respondent 6*)

As demonstrated, the spectrum of SGBV cases the social workers encounter in their work with UASC is broad and it can take many forms. Based on the narratives of the respondents, the experiences of SGBV in the countries of origin of the children were often linked to harmful traditional practices combined with hopes for the improvement of the financial situation of the family such as forced marriage or the practice of "dancing boys". The cases of SGBV that occurred in transit took the forms of rapes and survival sex. The cases in Sweden took the form of harassment and stigmatization as well as enforced prostitution. Sometimes the children tell explicitly, and, in some cases, the social workers only suspect that the violence has happened or is happening.

## 7.2 The roles of the social worker

As demonstrated above, the participants have faced cases of SGBV against UASC in many forms and at all the stages of the child's migratory path. This sub-section is concerned about how social workers respond to the cases of SGBV, and what kind of roles they have. It was visible in the interviews, that the social worker's role was slightly different depending on where they work (child protection office/ housing facility / civil society organization), which stage of the journey the SGBV took place (countries of origin/ during transit/ Sweden), and whether they are the first to hear about it or if they receive the information from other actors. It was visible, that the role of the social worker in responding to SGBV against UASC spreads out on several social ecosystems in the child's life and society. The chapter analyses the roles through the ecological perspective. The focal area of the response to SGBV against UASC takes place in the microsystem with the individual child. However, also the roles located in the other systems were seen as crucial for an effective response.

### 7.2.1 Microsystem: Facilitating a dialogue and providing psychosocial support

A big part of social work takes place in individual encounters with the service users, and individual discussion is one of the central ways to facilitate a dialogue with the service user and gain information on their situation. Thus, it is consistent, that the interviewed social work professionals gave great importance to the work happening in the most immediate ecosystem – microsystem. As discussed by Bronfenbrenner (1979), the child is an active agent within the system, so the roles of the social worker are directly linked to the individual child. The main theme arising in the microsystem is to facilitate a dialogue with the child and providing psychosocial support. The subthemes of facilitating a dialogue are building a trust relationship with the child, raising the question, taking the issue seriously, and providing information, and the subthemes of providing psychosocial support are listening and showing compassion and removing shame. (Table 3)

Table 3 The roles in the microsystem

	Main themes	Subthemes
Microsystem	Facilitating a dialogue on SGBV	Building a trust relationship Raising the question Taking it seriously Providing information
	Providing psychosocial support	Listening Showing compassion Removing shame

It is crucial to keep in mind, that not all children want to discuss SGBV with the social worker and it might not be in their best interest. As Nelson et al. (2014) discuss, the concept of discussing traumatizing events in a one-on-one professional context is withdrawing, as the social worker might not be appropriate gender or age according to the child's culture. However, some children might need to discuss it, and the social worker must be prepared to take that information and function accordingly. The child's best interest must always be the central consideration (UN General Assembly, 1989).

The role of the social worker in responding to SGBV against UASC begins already before they know whether the child has experienced SGBV. One of the most central roles of the social worker is to create a safe space for the child, a dialogue, where the child feels safe to disclose this kind of sensitive information. The participants discussed that the best way to do this is by *building a trust relationship with the child*. This is also reflected in the literature. Kohli (2006b) discusses that based on the amount of trust between the unaccompanied child and the social worker determines, how many details the child provides about their life. If the trust does not form between the social worker and the child, the child might not receive the support or medical help they need.

Even though the participants perceived trust as a central aspect in enabling the child to disclose the information about SGBV, the social workers experienced it challenging in some cases. The participants described for example that the child's trust put pressure on the worker to be "worth" the trust and know answers to everything right away. Another challenging aspect concerning trust was the double mandate of social work; at the same time the social workers exist to support the client, the child, and on the other side they are agents of the state and part of a range of professional networks. Multiple participants described a situation where

a child wanted to tell them about SGBV confidentially, without them telling other workers or actors.

So a lot of kids don't want us to like tell it to anyone else. And that makes it hard because I think that, like I said, you need to cooperate with everyone else that is involved with the kids. I think that what you need to do is ask straightforward and be clear with like you need to talk with someone else about it. But then maybe you don't get the right questions as well. So I think it's hard. (*Respondent 1*)

Hertz and Lalander (2018) discussed the aspect of trust in their research. They noticed that the children are not aware of the purpose of keeping client records, and the children feared that the social workers are cooperating with the migration board and thus the information shared with the social worker could influence their residence permits. The same research highlighted the power possessed by the social worker. The children perceived the social worker as a distant person who has the power to make decisions over the child's situation, such as the living arrangements.

The above excerpt demonstrates how the double mandate of social work manifests in social work practice. On one hand, they exercise the function of social control of the state, which here is manifested through obligations to report certain information to the police or the other actors involved in the child's life to ensure adequate protection and care for the child in the cases of SGBV. At the same time, the trust relationship is the central tool in responding to the SGBV against UASC.

The second subtheme under the theme facilitating a dialogue is *raising the question*. The respondents emphasized that one central role of the social worker is to ask the question on SGBV and discuss it with the child even before the disclosure. By asking about it they open the conversation and show it is a safe place to talk about it, and that the social worker can bear with the information. This is in line with earlier research that suggests the children struggle to initiate telling about sexual abuse and engaging them in a dialogue helped them to tell about it (Jensen et al, 2006). Diaz and Manigat (1999) suggest, that direct questioning increases disclosing sexual abuse. The social workers discussed that it is not always easy to ask the question, but if the social worker does not have the courage to talk about, how can the children have the tools to take it in the conversation.

Even if you ask the question about sexual and gender-based violence and you get no one who have experienced that, but you open up for... okay they ask these questions and maybe I can count on it later on. That's important, that you can just open up, you don't have to get an answer or the real answer, but you can open up that we can talk about it. I can take this information if you want to tell me something happened to you. (*Respondent 3*)

The participants found it problematic to raise the question if they only suspected that the child might have experienced SGBV, but the social workers did not have any concrete facts about it. The participants discussed that most of the time the children would deny that such violence had been or is being perpetrated against them if the social worker does not have any concrete facts that particularly this child has experienced SGBV. Thus, the social workers suggested that asking about SGBV is not a one-time event, that should take place only in the first interview with the child when mapping the background information. Asking and discussing

SGBV needs to be a continuous process where the child has time to engage in the trust relationship with the social worker, and that the child has multiple occasions to make their story *thicker* as Kohli (2006b) describes and to provide more details.

However, even though the participants recognized the central role of raising the question, the participants did not ask about SGBV systematically as they go through other experiences of violence. Some participants described raising the question only if something has provoked suspicions that something might have happened. The respondents recognized that their habits of asking about SGBV were different depending on if the child is a boy or a girl, as they were asking it more from girls, even though they recognize that both boys and girls are subjected to SGBV.

We ask about violence if they have experienced something during the escape, but I remember we don't ask especially about sexual violence in the first contact. I think also there has been like difference between boys and girls, you ask that question more to girls than boys also, in some weird way.  
(Respondent 3)

The participants discussed that the issue of SGBV against UASC is sometimes undermined. They discussed that it is problematic, that sometimes the children are not taken seriously. Thus, the third subtheme is *taking it seriously*. The social workers recognized, that if the case of SGBV has happened earlier, as in their home country or during transit it does not receive the same importance in the response from the social worker, as if it happened in Sweden. The participants recognized, that the legal mandates for the social worker are different depending on where the abuse has happened, but some struggled to address how the experienced SGBV influences the child's everyday life even it would have happened before entering Sweden and does not require immediate action. The participants also brought up, that sometimes the child's narrative is not taken seriously because they were thought to make up the story in order to gain permanent residence.

They [colleagues in other units] didn't think that same rules and same morals were important for ensamkommande barn [unaccompanied children] as the other kids, like yeah, this happens every kid. So we don't, we... it's not our job, something like that, you know. Yeah. it's so normal, every kid. Sometime even, every kid, they say that because think they can get permanent residence for this. This kind of stories, this kind of word and meanings I know it's not unusual even by social workers, not only from other kind of society, but even also social work. (Respondent 6)

One more aspect the participants discussed in relation to starting a dialogue on SGBV with UASC was *providing information* to the children. Central topics to discuss were human rights, the body, and sexuality. By discussing these topics the children can better distinguish for example safe and equal relationships from exploitation, as well as provide them with information about their rights to determine over their own body. The importance of awareness-raising is noted in the literature as well, in the findings of Lay and Popodopoulos (2009) noticed that the unaccompanied children who were warned about sexual violence, were more likely to disclose the abuse and seek support.

We try to make it as... in one way as easy as possible, just to make it normal to talk about body and what can I decide myself and what... can I say no, should say no or yes or yeah, just to talk about relations, body and

sexual relations. -- For especially for the girls, but also for the boys. -- with everyone, all youth, we need to talk about human rights, right to the body, sexual violence, how to get support and try to not... it's a big taboo to talk about this in many countries. And how do you open up to talk about this.  
(Respondent 4)

However, not all participants saw information sharing as something that would be included in their work.

I don't think I give any information about it. Maybe I could give, like when I ask... I can ask have you been abused this or this or this, has someone done something like this to you. But I don't think I give, ever give information. (Respondent 1)

Social workers are well-positioned to detect SGBV especially at the living units, because they meet the child daily, and they can notice changes in mood or behavior and they are specialists in social issues. The position working close to the child allows them to keep the discussion on SGBV as a continuous topic. By engaging in a conversation about SGBV with the youth, the social worker can use their *protective* and *co-operative power* as defined by Tew (2006). By informing the children about their rights and the body, the social worker empowers the children to recognize their own boundaries and to become active agents in their recovery process. The participants discussed that the social worker can help the child to realize that they have been subjected to SGBV, and support in coping with it. Through empowering the children, the social worker manifests *co-operative power* on the micro level as they actively aim that the individual child has the adequate tools to come forward to assert their rights. As Tew (2006) points out, the oppressed population might not be aware of their oppression and therefore contribute to their own oppression. By educating the children about their rights and opportunities to claim them, the social worker can support them to claim their rights.

The other major theme that arose in the interview in relation to the microsystem, was that the role of the social worker in responding to SGBV against UASC is to *provide psychosocial support* when the child discloses that they have been subjected SGBV. By providing psychosocial support the social worker can support the child's coping with the experience.

The participants discussed that three core elements in the initial psychosocial response are *listening*, *showing compassion*, and *removing shame*. The social workers discussed that the initial response to SGBV cases with UASC does not differ that much from working with a local child. One participant highlighted that it is central to show, that the social worker has heard what the child says. In the initial response it was seen important not to rush in with a lot of advice, but just to be present in the very moment where the child tells about it.

I think it's very important to not judge something or someone, not be shocked, just to listen and just to show that you have heard what they say, and you might... you can repeat what they said and just respect in that, -- but first of all, you need to listen a lot before you come with very much advices, just to make them feel secure, that you have listened and that you can hear it without being too emotional. (Respondent 4)

It is visible in the above excerpt that receiving such information requires, that the social worker manages their feelings in a professional way. The participants discussed that hearing about cases of SGBV from the child may provoke a variety of feelings. The participants

described that especially in their early careers, they experienced feelings such as panic, when they were not sure, how to support the child the best. One participant described that facing SGBV in everyday work had provoked feelings of powerlessness and the coping strategy was to “build walls” to create distance to the cases of SGBV. Regardless of the emotions the situation provoked in the social workers themselves, they found it central not to impose their own reaction to the child and thus scare the child from not telling more about it.

The participants brought up, that they have a critical role to show compassion and to remove shame as the child tells about SGBV. They perceived that a great amount of shame is attached to the theme, and according to their experience especially boys are struggling with the shame, as they are expected to live up to the masculine norms without showing vulnerability.

Of course first just listening and show compassion. That’s basic, but I’m...  
I try to be as, I try to tell these children that there’s no shame, it’s not your  
fault, it’s common and what it can do to people. (*Respondent 5*)

These themes relate to Blackwell’s (1997) model of *holding*, *containing*, and *bearing witness*. The model emphasizes the importance of bearing with the information the client is telling the practitioner. The interviewed social work professionals recognized the difficulty of being present in the situation, especially in their early careers. Some of them reacted by starting to think where to refer the child, instead of being present in the moment. Blackwell (1997) discussed, that active helping is often easier for the professional than simply containing the painful information and engaging in a dialogue about it. This also links to Kohli’s (2006a) three domains of support for UASC. One of the domains where the social worker has a role is *connection*. It refers to bearing with the silence and thin stories until the child feels secure enough to open up, and not moving away from the child’s pain when it happens, which is reflected in the respondent 2’s explanation.

If I could turn back time I would instead forget the panic, just sit and talk to  
him and let him talk to me and you know it’s going to be normal talking  
instead of panic and send him here and there and stuff like that.  
(*Respondent 2*)

As has been demonstrated above, social workers have an active role in raising the question of SGBV into the conversation, building a trust relationship with the child, to listen and to react compassionately in a way that helps in removing the shame and guilt from the child. The social workers did not perceive the roles in facilitating a dialogue to be much different between different organizations and workplaces, as these link closely to the fundamental tasks of social work.

### 7.2.2 Meso- and exosystems: Coordination and awareness-raising

Social workers are well-positioned to respond to SGBV against UASC on the micro level. However, it was evident in the interviews that to provide an effective initial response it has to be a joint effort of different actors. According to Bronfenbrenner’s (1979) human ecology, there are several systems outside the most immediate systems in the child’s life that have an impact on the child’s development. This sub-section discusses the roles of the social worker in responding to SGBV against UASC in meso- and exosystems (Table 4), which consist of different actors who are included in the child’s life in one way or another. In these ecosystems, the social worker has a role in engaging in dialogues within the social work organization as well as the professional multidisciplinary networks.



Table 4 The roles in the meso- and exosystems

	Main themes	Subthemes
Mesosystem	Coordinating the services	Assessing the multidisciplinary needs of the child Linking the child with the support system Making/receiving child welfare notice
Exosystem	Facilitating collaboration in SGBV issues	Knowing the network Raising awareness within the network

The participants discussed that after the child has initially disclosed the SGBV incident, they need to assess, what kind of support the child needs next. This might for example be help from a psychologist, police, medical support, or NGOs working with the issue. The social workers discussed that they are the ones with the responsibility to *coordinate the services* that are needed for the child to get the support they need. The role of the social worker is a little bit different in different contexts, but the roles are usually different sides of the same coin. For example, the participants discussed that a social worker working within the municipal child protection services has the responsibility to ensure access to safe accommodation, whereas the social worker working in the residential care has the responsibility to ensure safety within the unit. One social worker working in the municipal child protection services described, that their responsibility is to ensure that the child has access to the needed services – *link the child with the support system* – but they do not have the responsibility to provide a profound discussion on SGBV.

Like to help the kid to find a place to where it's safe to live if they are not in a place where it's safe to live. And like help find persons who can help them to deal with the problem and so on. I think I have not like the responsibility to go deeper with it. But just more the cooperating thing.  
(Respondent 1)

The above discussion is in line with Kohli's (2006a) one of the three domains of the relationship with an unaccompanied child. Kohli describes the domain of cohesion as a responsibility to respond to the day-to-day needs of the child, such as subsistence and shelter. Also, Devenney's (2020) framing of the social worker's as co-navigators contributes to this, as the social worker will be assisting the child within the bureaucracy and complicated service networks. However, in the interviews with UASC Hertz and Lalander (2018) noticed that if the relationship with the child is only about making decisions about for example on living arrangements without allowing real participation of the child, the social worker becomes a distant person with power over the child's life. Even though the social worker would be using their *protective power* over the child by arranging safe living for the child, it might disempower the child. According to Tew's (2006) theorization of power, there are productive and limiting kinds of power. The social worker is using the protective power in the productive capacity as the aim is the protect the child, but if the child's participation is not truly included, the power might take the form of limiting power.

One crucial role was making referrals to medical care, psychological care, and the police. However, making referrals varied depending on where the abuse has happened and how long

ago. If the SGBV incident had happened in the country of departure or during transit, then the participants perceived referral to the police unnecessary. Then the participants saw that it was more important to refer the child to a psychologist. The participants described that their role is to know the network working with these issues and link the child with these organizations and bring up the benefits of receiving support. They discussed that sometimes their role is to accompany the child to the organization and visits. They brought up, that even though the child would not be interested to be linked with the service right away, the social workers saw it central that the child has the information about these possibilities in case they wish to contact them later in life.

I would... of course not force them, but I would open up to different ways to of the like.. different organization of myndigheter [authorities] or something that could help them to answer questions because it's not always easy for them to talk about us they meet every day and we need someone who is more professional in the area. So I would suggest it and say that I would go with you so we can go there together, should we try it and see how it is if you like it or not. So I would definitely like tipsa [hint], how do you say... recommend and talk positive taking such a contact and go with them. (*Respondent 4*)

The participants emphasized the importance of having a rapport with the different microsystems in the child's life, such as teachers, guardians, foster parents, and social workers at the child protection office/staff the living unit. It was seen central in providing an effective response to SGBV.

I'm not at a place where the children live every day, it's important to have like a good collaboration with like that or the person in charge of the minor in the institution, or the foster care so that you can also be a support for them if something... if they find out about that, sexual abuse or violence. I think that also really important, that we have like good working together with the grown-ups around the children, because they have a lot of grown-ups around them. (*Respondent 3*)

This was also noticed by Wimelius et al (2016) when they researched the reception of UASC in Sweden. They found out that different actors in the child's life were isolated from each other and that decreased the cohesiveness of the support for integration as the actors were not aware of the processes outside of their domain.

In some cases, the SGBV was discovered by other actors, for example, the female genital mutilation was detected by the medical personnel. Then, the role of the social worker was different as the other actor has dealt with submitting a crime report to the police. One social worker describes, that then the role is to tell the child that they are aware that this has happened to the child and offer support in case the child needs something else.

Sometimes we get the information from other parts, that someone is dealing with sexual violence and that maybe they also did the things you should do, they already contacted the police or they already contacted the care. -- And then we just get the information. That can be a difficult thing, while I have the information, then what I need to, the minor like, just say that I know that this happened to you and you got some help. If there's something else we can do and how do you feel now. (*Respondent 3*)

The social workers working at the child protection services also had the role of *receiving child welfare notices* and other social workers working for example in the residential care had the role of *filing* them if they got worried over a child. The participants discussed, that in cases, where the SGBV incident has happened in the country of origin or during transit it was considered as background information. In these cases, a child welfare notice was not filed, only if the abuse happened during the child was using their services.

In Bronfenbrenner's (1979) human ecology, the exosystem entails systems where the individual child is not present, but those systems still influence the child's development. The role of the social worker in responding to SGBV against UASC in the exosystem deals with the workplace of the social worker as well as the professional networks. It became visible, that the social worker has a role in *raising awareness on SGBV in the workplace* and keep the discussion on SGBV against UASC alive. One participant discussed that even within the workplace the issue of SGBV was experienced as a subject that provoked reactions of shame in the workers. The participant highlighted how important it is to take into the discussion.

But also to talk about that in places and -- have it like in important dialogue in the workplace with the staff, with the workers. Because sometimes I feel it's like a, it's a difficult thing to talk about even for the social workers, even when we were just sitting and talk about that, it was difficult for people to talk about that, it's a lot of shame and this kind of stuff which are blocking so many social workers to talk about it and also talk about like it's a very difficult question to work with. (*Respondent 6*)

The participants described that through keeping the discussion alive in the workgroup, they were able to provide support to each other within the team, and thus strengthen the response to SGBV against UASC.

### 7.2.3 Macrosystem: Critical professional

The role of the social worker in responding to SGBV against UASC extends to the macro level. As has been discussed earlier in this paper, the mechanisms that produce SGBV are embedded in all layers of society. The macrosystem entails the whole society, such as the culture, norms, and beliefs (Bronfenbrenner 1979). This sub-section discusses the social worker's possibilities to respond to SGBV against UASC in the macrosystem (Table 5).

*Table 5 The roles in the macrosystem*

Macrosystem	Main theme
	Challenging prevailing discourses
Cross-sectional	Critical professional

The main theme that arose from the interviews was *challenging prevailing discourses*. One more role that was discussed in the interviews links closely to this theme, but appears as a cross-sectional theme, is the role of a *critical professional*.

The role of the social worker in the macrosystem is to *challenge the prevailing discourses* in society on issues related to UASC and SGBV. Even though the main focus of the SGBV

response is within the individual level, the participants saw, that it is their mandate to advocate for this group of children and stand up for them in the societal context.

I think it's one of the biggest responsibilities we have, what we are working with, what we have to do, to stay up for these people who has not these resources or possibilities by themselves -- It's violence, and it's a...we know how it affects people and human, then it's responsibility of a social worker to not accept it, to stay up for this and work against this kind of cultures and actings (*Respondent 6*)

They suggested that their ways to create societal change are to publish articles for example in newspapers or to advocate by utilizing the resources of a non-governmental organization. One participant explained that the public debate on unaccompanied children is reduced to discuss them only in terms of numbers and migration status, and the engagement of social workers can be a tool to create interest in the living conditions and life experiences of these children.

This is a very important, because media and the discourses about these kids are most of time in same discourse as migration board and terms of numbers and... but not so much as human. So this is, I think, important to put this kind of new different discourses in life and talk about for example the sexual abuses, and different kind of this and talk about this, it's happening in our country and it's unacceptable. (*Respondent 6*)

The theme of challenging the discourse links directly to the issue of power. By engaging in the public debate in a critical way, the social worker uses their power to enhance the life situation of the children. Thus, the social worker is using co-operative power according to Tew's (2006) classification on power.

In order to use their power in a co-operative manner in the macrosystem, the social worker must engage in a critical power analysis to understand how the prevailing structures influence the child's situation to see what kind of structural change is needed.

The interviewed social work professionals reflected a critical approach through understanding how historic power structures internationally still influence in terms of inequality and how the migrant children are welcomed in Sweden. One participant discussed that the post colonialist hegemony still lives in today's attitudes against UASC and manifests as racism. The racist discourse dehumanizes the children from racialized contexts and renders them vulnerable to exploitation.

It's not only on individual level, it's also big problem in structural level, because why we can... what's the reason that these kids are most victim for this sexual violence. I think it's from postcolonial racist culture which is overall Europe and west world, how we are thinking and how we are talking about the people from other places in the world and especially coloured people so it's like, it's more okay to do this kind of stuff, because we also had killed them, we have genocide them and we are talking about them as something else and not as real human. We are not thinking these kids as our kids and as kids in the world. (*Respondent 6*)

The participants discussed that the social worker must understand their own privilege. *Critical reflection* helps the social worker to understand the intersecting factors that add to the child's

vulnerability and the social worker's own position in relation to the child. The participants highlighted the importance of reflecting one's own background and values and be aware of how it affects their work and how they meet people from other contexts.

But I think, what I would do differently is to be more aware of my own like not values, but like how I think about things, my perspective growing up in Sweden, try to be more open for other perspective and sometimes that you lock, that it is in one way, but it's much more complex. (*Respondent 3*)

The participants noted, that even though many UASC are at risk of SGBV, or children from certain countries might have certain experiences, they should not take it for granted. They called for recognizing the bias one possesses, so they can be aware of them and let their service users tell themselves how their situation is like.

I think it's important not to judge the kind of people, the culture, the people from certain country and like judging, like judging before you know anything about the situation. and because families are very different, just because you come from [country name] it doesn't mean that you were a victim of sexual violence, I think it's very important to listen to their history and not have your föredomar... stereotypes. (*Respondent 4*)

The interviews showed, that even though the core is of the responding to SGBV is within the microsystem, the issue of SGBV against UASC cannot be sustainably responded to without engaging also at the macro level. The response in the macrosystem means taking a strong stand on SGBV issues and advocating for the rights of the UASC and thus manifesting *co-operative power* to the prevailing order in the society. This can be done by employing critical social work practice and engaging in critical reflection. Through the employment of these approaches, the social worker can recognize their own power, and to use it in a co-operative manner with the UASC in order to promote the wellbeing of this group of children. It is important to include the children in the process and to magnify their voices, otherwise, the social worker might fall into using *oppressive power* even though they would have good intentions. If the social worker believes to know what is best for the children without consulting them first, there is a risk, that the voices and agency of the UASC are muffled by the social worker's assumptions on their needs.

### 7.3 The role of the social work organization

The role of the individual social worker in responding to SGBV against UASC has been explored in the previous sub-sections. However, even though the social worker has multiple opportunities to make a difference in the child's life in the microsystems and to influence also in other ecosystems on meso- and macrolevels, the social worker is often a part of a social work organization that in many cases defines, how much discretion the social worker has over these issues. Even though an individual social worker would be interested in developing better practices, without the support of the organization it might be difficult. Thus, it is necessary to briefly introduce, how the organizations were reflected in the testimonies of the participants.

One critical aspect that was emerged concerning the organizational aspects in the interviews was the issue of training. NCTSN (2020) suggests that everyone in a trauma-informed child protection organization should receive continuous training related to traumatic stress on

children as well as to promote resilience. The participants brought up, that the training they have received on SGBV against UASC was inconsistent and varied between organizations. In many cases gaining knowledge on the issue was the individual social worker's responsibility. Some participants explained that they have attended trauma-trainings and training on female genital mutilation and honor violence. Still, it was evident that social workers working with UASC are not systematically trained on SGBV issues and responding to it. The participants brought up, that education on SGBV issues was not very extensive in their social work education. The participants described different approaches to acquiring sufficient knowledge on the issue. One participant explained that one could seek information online and it would probably be easy, but the participant had not done it.

I guess it's like easy to find in the internet if you're looking for it, but I don't think I've ever done it. (*Respondent 1*)

Other strategies to gain information were learning by doing from the children and seeking academic literature and research on the issue.

I think it's something that interested me, I read a bit, I learned a bit about it myself and also, but not... I'm not specialist I think. I know a bit a but then not as much I should. I think I could be more aware. More training and how do you ask, when do you ask, things like that. (*Respondent 5*)

Some of the participants felt confident in responding to SGBV even though they did not have that much knowledge about it. It was common to have some knowledge on the issue, but they described, that they were hoping to learn more on how to respond to SGBV the best way. They recognized that the issue is complex, and one will never be complete in learning about it, and thus ongoing learning on the subject is important.

The second organizational aspect discussed in the interviews was internal and external support. The theme of support is also discussed by NCTSN (2020). They point out, that one essential element in a trauma-informed organization is to understand how working with trauma-related issues influences the wellbeing of the worker. They suggest that trauma-informed organization needs to have strategies to support the worker's resilience and mitigate the risks of secondary traumatization. The participants discussed that they received internal and external support to deal with SGBV related issues.

The coworkers emerged as a central resource that the participants experienced as a supportive element. The respondents highlighted the importance of a stable, competent, heterogenous working team. The below excerpt shows, how trust within the colleagues transformed into trust between the employees and the children.

I think we had a group of staff that were, we were quite heterogenous, we were in different ages, we were different genders, I think that was very positive for our work that we could reach, especially the girls in this case, because they were, it was them who were talking more about this issue, and their background and also what they were confronting or meeting in the society here. That we were different ages and different experiences that was very good, but also work our trust and we... that we tried to find activities, and relation building, yeah relation building activities, and that we were working, not many new staff working, like vikariet, we were not many of

those. we were group of staff that were very stable. And that made us... we got trustful and good relations with the youth. (*Respondent 4*)

Another internal resource that was mentioned as an element was good leadership at the workplace. The team leader has a role in determining whether SGBV issues are taken seriously. The participant describes, how the team allowed the workers to show their emotions and that made them strong.

Where I worked this time, where actually from the beginning at least, very good team, where we had very strong bones to each of us... the team and we had a very good boss. -- we even could sit and cry and say now I am just so sad about the world, to ventilate. -- So the most important is actually the boss, leadership, which are open-minded and also take this kind of questions serious. (*Respondent 6*)

Other aspects of the organization that were perceived to support the resilience of the worker was the possibility to work in pairs. This enabled to share the responsibility for a child with another person.

External professional support included supervision, and other actors working in the field. The participants perceived external supervision as a channel to exchange experiences, find new approaches to the issues at hand, and create strategies on how to respond to SGBV cases. In addition to that, the participants brought up that other actors, such as non-governmental organizations, can be a valuable resource in responding to SGBV against UASC through their expertise and consultation. Partnerships with other actors and systems that provide services for children to tackle their trauma are also aspects of a trauma-informed child welfare organization according NCTSN (2020).

However, it was visible in the material, that many workplaces were lacking connections to other organizations. The participants described that many of the workplaces were missing a referral pathway (besides the standard child protection notice protocol) or a mapping of relevant organizations and their expertise, or the participants were not sure if their organization had these resources. One participant discussed the importance of mapping out different actors in the field to look beyond merely the services of the psychologist.

I think it's also important, that you're aware, because in Sweden there's many organization and there's many non-governmental organizations who maybe work with those kind of questions, so awareness that there is many organizations that you can get in contact if you have this kind of question, it think it is important. -- I think is important, otherwise there is a risk that you always like, every issue go to child.. and use psychiatry, because that's the only thing is maybe in your head. But there are other organizations that are not necessarily in that level, but do a really important job. So it's important to know, okay you can also call them, you can maybe go with the child to this place. (*Respondent 2*)

In addition to these three aspects, the participants named other organizational issues that prevented them from responding to SGBV against UASC in the way they wanted. One participant mentioned that due to too large a caseload, they were not able to respond to the need of the child as they hoped.

I see as a part of my job to be able to like a to go with the minor to different support system and difficult to that I also have big case load, sometimes make me have the time... yeah the time to connect, talk and having follow-ups that I want to have, so the time, is of course the resource that I would have more, or lower caseload. (*Respondent 3*)

One participant saw that the scarcity of funds was a factor that prevented the social workers to be further educated on SGBV.

It's a question of money many times to get education, and that is very sad. (*Respondent 4*)

The participants identified several gaps and barriers in responding to SGBV against UASC, some of them more practical and some structural. The participants suggested, that not all the SGBV responses have to include costly one-on-one trauma therapy, but for example, easy access services, such as group support, for UASC survivors of SGBV should be developed and enhanced. Other areas of development were conducting more research on the issue and utilizing that research in decision-making processes. The participants brought up on many occasions the issue of shame related to SGBV. As long as the shame remains, the statistics will not reflect the reality; thus, one area of development is to work for removing the shame on all levels of the society.

Because I think it's a lot of, not only in [country name], also in Sweden, associate with shame and stuff like that. Especially for the boys, I think. you don't talk about stuff like that. So do something that can ... take away part of the shame at least. I don't know... making a movie or let people who have been through this give them a space to talk, so others can see. (*Respondent 2*)

This sub-section showed, that the exosystem – in this case, the social work organization – has importance in responding to SGBV against UASC. The commitment to work in a trauma-informed way emerges from the organizational aspects through allocating resources to enhanced training on the issue, strengthening the internal and external structures of support, and designing inter-actor cooperation on the subject.



## 8. Conclusions

Many scholars and the participants in this research agree, that even though the precise magnitude is not clear, risks and cases of sexual and gender-based violence are prevalent in the context of unaccompanied and separated refugee children due to a range of factors on multiple levels of the society. Social workers in Sweden meet these children in a variety of services and are included in their asylum and integration processes: in child protection services, housing facilities, and non-governmental organizations. The social workers work often very close to the child and hear about experiences in their home countries, during transit, and in Sweden, and sometimes the children tell the social worker they have been subjected to SGBV.

During their careers, the interviewed social workers have encountered unaccompanied children, who have been subjected to acts of SGBV. The cases of SGBV varied from harmful traditional practices such as female genital mutilation and early/forced marriage to enforced prostitution/survival sex to harassment, sexual abuse, and rapes. It was evident according to the social workers that both boys and girls were vulnerable and subjected to this kind of act of violence. According to the interviews SGBV caused had many physical, psychological, and social issues in the lives of the UASC. Due to the high prevalence of SGBV, it had become a normalized assumption among the children and the workers.

This thesis aimed to understand, what is the role of the social worker in responding to these cases (Table 6). The children's experiences are all individual, even though they share some characteristics. Thus, it is necessary to remember, that not all children benefit from the same kind of intervention and not all children want to tell about their past and possibly traumatizing events, and the social worker must respect that. However, many children benefit from disclosing such events, because it allows them to receive support to cope and overcome these experiences and receive medical help if they need it. This thesis concentrated on how social workers can respond to these cases in different ecosystems on micro, meso, exo, and macro levels.

The study shows, that the role of social workers in responding to SGBV against UASC is to engage in dialogues on SGBV against UASC in the different ecosystems – with the child, in the professional networks, and on societal level to ensure appropriate care and protection for the child, but also to promote for safer future.

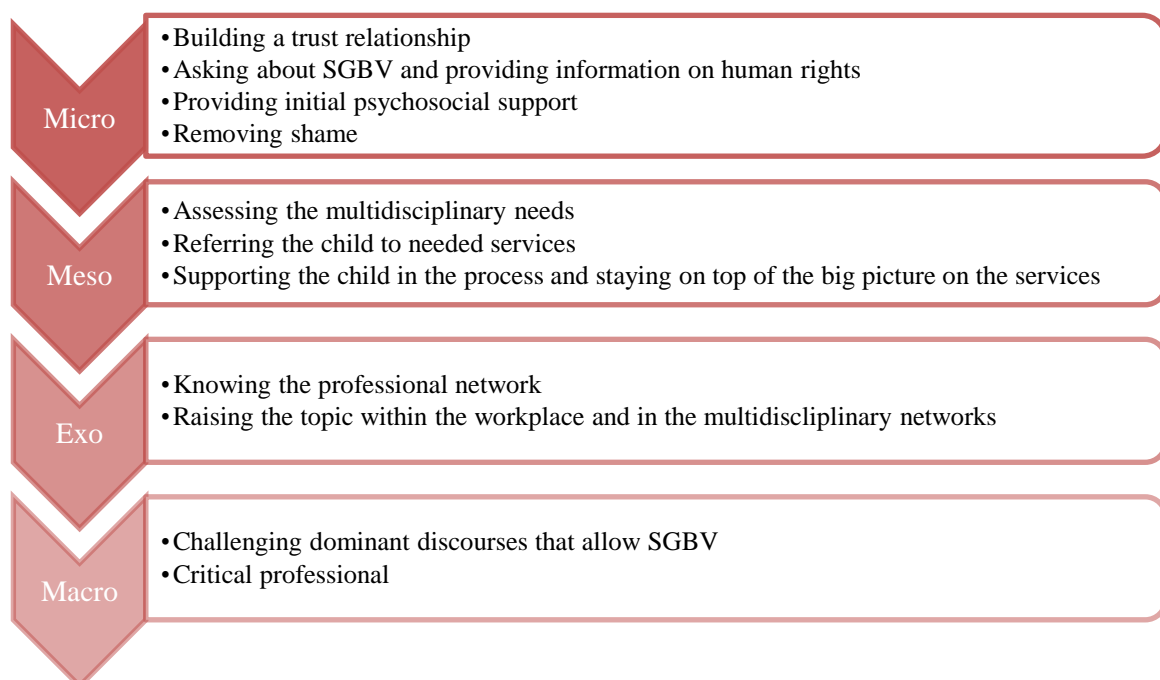
On the micro level, the role of social worker started from creating a safe space for discussions on SGBV and other aspects of sexuality with the children through facilitating a trust relationship with the children. The matter of trust relationship was not always straightforward as it seems, because of the social work profession's functions of social control. This is related to Kohli's (2006b) conceptualizations of *thin* and *thick* narratives based on the trust between the social work and the child. If the child tells about SGBV to the social worker, then the role is to provide psychosocial support as an initial response. It includes an aspect of listening, showing compassion, and telling the child it is not their fault and removing the shame in that way. The social worker's role on the microlevel is to raise the question of SGBV with the children and educate the child about their human rights and right to self-determination over one's body. In the microsystem social worker employs protective and co-operative forms of power according to Tew's (2006) classification through empowering the children to understand their own rights and how to claim them.

When looking beyond the initial psychosocial response with the individual child, the social worker's role is to assess the child's needs in the multidisciplinary dimension. Depending on the child's individual situation and experience there might be a need to contact for example the police, medical care, psychologist, or other actors including the civil society organizations with expertise specifically on this issue who offer different kinds of support in terms of consultation or support for the child. This section related closely to the previous literature, as the social workers are strongly associated with "navigating" (Devenney, 2020; Kohli, 2006a) and taking care of the multidisciplinary needs of the children. Depending on the context of the social worker they also have the role of making or receiving child protection notices. The social worker uses *protective power* in the mesosystem, however, it may take limiting forms to the child's agency if the participatory practices are not ensured.

The social worker has roles outside the direct environments of the child (exosystem), such as the social work organization and the professional networks. In those contexts, the role of an individual social worker is to keep rapport with the organizations that work in the field with similar issues, and disseminate the children's voice and experiences to these contexts, and to raise the question of SGBV against UASC if it is not already discussed.

At the societal level, the role of the social worker is to understand, how structures e.g. laws, policies, norms, and culture shape the child's experiences and how they render the child vulnerable to SGBV. The social worker has possibilities to challenge the dominant discourses that enable SGBV against UASC on the societal level through advocacy and communicating the needs and experiences of the children to the structural level. On the macrosystem the social worker has potential to exercise *co-operative power* in order to enhance the life quality of this group of children. A cross-cutting role of the social worker is to practice critical reflection to understand their own power position and how they can use their power to enhance the life of the UASC. Critical social work provides the social worker tools to analyze the oppression the children face in society. Central in the critical theories is the idea of constructionism – current social structures are shaped by history, and thus can be changed.

Table 6 The roles of the social worker in the ecological perspective



It became evident in the study, that the social work organization sets the frame for the work of the social worker in terms of responding to SGBV. Thus, the role of the social work organization must be emphasized in enabling an effective and comprehensive response to SGBV. Three aspects, in particular, were raised by the participants in this study: currently gaining competence on SGBV against UASC is the responsibility of the individual social worker, the social workers perceived internal and external support as valuable elements in responding to SGBV and the social work organizations lack comprehensive mapping on services that provide services related to SGBV against UASC. The social workers brought up that one barrier to respond to SGBV against UASC effective is too large a caseload.

Table 7 Power analysis

Power analysis	Power over	Power together
Productive modes of power	<i>Protective power</i> -Responding to the day-to-day needs of the child e.g. safe accommodation -Making and receiving child protection notices -Making referrals -Educating about human rights	<i>Co-operative power</i> -Educating the children and networks on the rights of the Child and SGBV against UASC -Active partnerships with the child and other organizations to promote societal change
Limiting modes of power	<i>Oppressive power</i> -The current situation of the child, oppression based on intersecting vulnerabilities age, class, gender, race, ethnicity, religion...	<i>Collusive power</i> -If SGBV against UASC is not taken as a central consideration and if the oppression is not identified

Power is a central aspect of the role of the social worker in responding to SGBV against UASC, as summarized in the above table (Table 7). The children are influenced by *oppressive power* in their situation. They have been forced to flee their home countries from oppressive situations. In transit and the countries of the destination, they are subjected to oppression due to their origin and gender that manifests as SGBV. The countries of destination can use *protective power* through granting asylum. The social worker functions as an agent of the state and in this case, the social worker can use their power in a protective capacity. It means that the social worker takes care of the day-to-day needs of the child (e.g. accommodation), makes and receives child protection notices, makes referrals to other agencies (e.g. health care, police). They are also exercising protective power by educating the children on their human rights. The line between the two forms of *power over* is subtle since without truly consulting the children in the decisions that concern them, the social worker runs a risk of using oppressive power instead of protective power, as the children are rendered even more powerless. With the help of the critical social work approach, the social worker can engage in critical analysis to identify and understand the oppressive structures in different ecosystems, especially on the micro level, but also in other systems.

The social workers have possibilities to use *co-operative power* if they form active partnerships with the children to empower them to stand for their own rights. Also, inter-actor partnerships create a possibility for co-operative power to disseminate awareness on SGBV against UASC wider in society and to create space for the experiences of the children. However, if the social workers and the social work organization fail in addressing the issues in their work, there is a risk that oppressive structures are not identified and the social workers themselves use *collusive power* become a link in the chain to prevent societal change.

## 9. Recommendations

This thesis brought up several areas of development in the social work response to SGBV against UASC. In my interviews, I was introduced to passionate social work professionals who engaged in their work for social justice with empathy and who are doing their best to ensure the protection and the best interest of these children. I was honored to learn how their efforts can be supported in order to enhance their response to SGBV against UASC.

Central areas of development they brought up were strengthening training on SGBV issues throughout the careers of social workers – already starting from their formal education and continuing in the working life. Gaining skills about SGBV against UASC should not be only the responsibility of an individual social worker, but a more comprehensive approach should be adopted in social work organizations. The topic of SGBV against UASC needs to be lifted to the discussion in the social work organizations to normalize the discussion on SGBV. When social workers are supported by their organizations, they can safely engage with children in discussions and to disseminate knowledge on the children’s experiences wider in their network and society. Through the organizational support, the social workers can rely that they have the professional support from their team leader, colleagues, and external support such as supervision and other organizations if they need it. Both social workers and the literature (Wimelius et al, 2016) pointed out that the inter-actor cooperation needs to be strengthened.

As discussed in this thesis, social workers have possibilities to respond to SGBV against UASC in all of the ecosystems, but those opportunities are influenced by the social work organization. With the support of their organizations, social workers have the possibility to respond to SGBV comprehensively and effectively. If the barrier is too large a caseload or constantly changing staff – it needs to be solved by the organization. The purpose of this thesis is not to bring “additional” work for the social workers, but increase the quality of the work, and thus allow the social workers to make a difference in the individual child’s life. I am not suggesting that the social worker must provide trauma therapy, because that’s the turf of a whole other profession. Some children do need the services of a psychologist and benefit from it, but also many other approaches are valuable in responding to SGBV. Social workers themselves possess tools and competencies that can be useful in responding to the needs of these children. Social workers in residential care can provide stability and “therapeutic care” as discussed by Popodopulos (2002), or can help the child create coherence between past, present, and future by linking the inner and outer worlds of the child as discussed by Kohli and Mather (2003). As noticed in this thesis, social workers have a particular role in responding to SGBV against UASC in different ecosystems through engaging in dialogues with the individual child, within the social work organizations, professional networks, and structurally.

It became evident in the course of this study, that research specifically in the area of SGBV against UASC needs to be strengthened, even though the area of UASC is otherwise well studied. Especially the children’s voices are needed to understand their needs better. Children with LGBTQ identities were not discussed by the interviewed social workers and they were invisible in the professional literature either, so especially the voice of these children and their experiences need to be lifted into the discussion. The participants discussed that it is crucial that more research on the issue is conducted and the information on disseminated to the decision-making level. The Western understanding of responding to trauma must be expanded

to understand other culturally appropriate responses and develop community-based approaches.

As long as the shame is the discourse related to SGBV the real magnitude of the issue will stay hidden. The first step is to remove the shame, talk about it, ask about it. Give the children a voice and let the decision-makers hear the voice. By raising awareness more resources can be released to research, education, and social work practice. Drawing attention to the issue and promoting societal change supports the global fight against SGBV. Sweden can influence that the children have opportunities for safe and humane migration and that they are provided with the opportunity for stable life through granting permanent residence. The Swedish society can support the survivors through allocating resources for adequate opportunities to cope – and eventually heal from the SGBV trauma by training the social work personnel, medical personnel, the law enforcement, judges, and the migration board on SGBV issues so that they can engage in a dialogue with the survivor, believe them, understand the structures that enforce SGBV against UASC, and eventually to challenge these harmful practices and discourses.

I want to conclude my thesis with the words of Alice Walker:

The most common way people give up their power is by thinking they don't have any. (*Alice Walker*)

I hope these words will inspire us, social workers, to be proud of our broad competence and to use our power to create social change – in a dialog with our clients.

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# Appendixes

## Appendix 1: Information letter

Dear Social Worker,

I am a social work and human rights master student at University of Gothenburg, and currently writing my master's thesis on social workers' role in responding to sexual and gender-based violence (SGBV) against unaccompanied asylum-seeking children ("ensamkommande barn"). The aim of the study is to understand how social workers in Gothenburg perceive their capacities and resources in relation to SGBV against unaccompanied asylum-seeking children.

The study will be carried out by interviewing social workers who have come across real, potential or likely cases of sexual and gender-based violence against unaccompanied asylum-seeking children (for example sexual exploitation/abuse, rape, sex in exchange for money/ accommodation/ food, enforced prostitution, female genital mutilation). The case of SGBV might have happened in the country of departure, during transit or in the country of destination. This study hopes to raise awareness about SGBV against this group of children, which is a blind spot for many public authorities, but also emphasize the importance of social workers' contribution in understanding and reacting to this issue.

The interviews will be conducted during the end of March through the beginning of April. The interviews will be semi-structured, which means that part of the questions are standard questions for all interviewees but allows answers to be freely formulated. The interview is carried via telephone or skype. The duration of the interview will be about 30-45 minutes, and it will be held in English. However, I understand some Swedish, which might be useful occasionally. The participation is voluntary, and withdrawals are allowed at any stage of the process.

The anonymity will be respected throughout the process and all the material from the interview will only be used for research purposes. The material from the interviews will be analysed thematically to highlight the themes that you as social workers see central in responding to SGBV against unaccompanied children. The thesis report will include quotes from the interview, but individual characteristics (for example names, places) will be altered to protect anonymity. The thesis will be published at University of Gothenburg's thesis database.

If you would be interested to participate, or know someone who should be interested, please contact me by sending an email to [gushaaja@student.gu.se](mailto:gushaaja@student.gu.se) or via phone [REDACTED]. Please do not hesitate to contact me if you have anything to ask concerning the study.

This master's thesis is carried out with the approval of University of Gothenburg, and it is supervised by Senior Lecturer Deniz Kellecioglu, who is reachable at [REDACTED] and [deniz.kellecioglu@socwork.gu.se](mailto:deniz.kellecioglu@socwork.gu.se).

Sincere regards

Jasmina Haapanen

Master student in Master's programme in Social Work and Human Rights

University of Gothenburg

## Appendix 2: Interview guide

- Background questions
  - o Age, gender
  - o Where do you work? / Where did you work?
  - o How many years have you worked in social services/with unaccompanied children?
- Reactions, actions and inactions
  - o Could you describe the cases of SGBV that you have encountered? Were they potential or actual cases?
  - o How did you react to the actual case of SGBV?
  - o What did you do?
  - o What you did not do?
  - o How did you react to the potential case of SGBV?
  - o What did you do?
  - o What you did not do?
  - o Why did you act the way you did?
  - o What do you think is important when you meet a child tells you about SGBV?
  - o Who did you contact? Did you accompany the child somewhere?
  - o Do you systematically ask SGBV related questions or do you wait the child to tell about it?
  - o Did you think about filing/ did you file a child welfare notice (translate)?
  - o How confident would you be/were you about filing the child welfare notice?
  - o What do you think affected your level of confidence?
  - o In what circumstances you would need to do the child welfare notice?
  - o How about an investigation request for the police?
  - o Who did/would you consult if you needed support when facing a potential or actual case of SGBV? What kind of support asked/would you ask for?
  - o Could you have done something differently?
  - o Something else that you want to mention?
- Planning the services for the child
  - o How would you see your possibilities to prevent SGBV?
  - o How do you assess the child's risk to be subjected to SGBV?
  - o How do you take the risk of SGBV into account when planning the services for the child? For example, concerning accommodation?
  - o How is the risk of SGBV evaluated throughout the client process? e.g. is there monthly client plan meetings where this would be assessed?
  - o How would you see your role in sharing information and raising awareness about sexual and gender-based violence? To the children? To other actors?
  - o Is there something you would like to add?
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- Training, knowledge base
  - o Have you received training on SGBV in the context of UASC? Where?
  - o How would you describe your education needs in relation to this?
  - o How do you perceive your own competence in relation to SGBV against UASC?
  - o e.g. in relation to the issue in general? / what to do when you face it in our work?
  - o Does everyone in the office have the same skills regarding SGBV or is there a focal point in SGBV issues?
  - o Something else?
- Responsibilities/interagency response

- What actors in the child's life play a role in responding SGBV?
- What are your responsibilities?
- How would you describe other actors' responsibilities?
  
- Resources
  - If you think about different resources, what would think play a role in responding to SGBV?
  - How would you describe your available resources, is there something you're satisfied or unsatisfied with?
  - Something else?
  
- Barriers
  - What would you identify as barriers in responding to SGBV?
  - What would you identify as gaps/areas of development?
  - Something else?
  
- Is there something else that you feel like is central in preventing or responding to SGBV by social workers?