

Confinement and Caring

On sociomaterial practices in secured institutions for youths

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On sociomaterial practices in secured institutions for youths

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Man måste våga lita på ungdomar för att göra skillnad

Ally, 15 år, Siljegärde, 2019

To every youth at a special youth home then, now, and in the future.

ABSTRACT

In special youth homes run by the Swedish National Board of Institutional Care, youths are placed because of involuntary care or a verdict. The legal regulations and conflicting requirements of care, security, and children's rights place high demands on these institutions' care environment. The **overall aim** of this thesis was to investigate and explore the impact of the care environment on youths and staff, and on the interactions between youths and staff in special youth homes. The **methods** used in this study were (I) register and survey based statistical analyses, (II) microethnography, (III) photovoice, and (IV) focus group discussions with staff. The **theoretical** interpretation of the findings was from the perspectives of caring as a sociomaterial relational practice, and Erving Goffman's dramaturgical perspective. **Results:** Study I showed associations between crime during care, and solitary confinement, escaping, alcohol use, and the duration of placement. Criminal activities during care could be interpreted as rational reactions to stressful situations, in such a way that repressive strategies increase the risk of further violence and criminal activity. Study II showed that staff members' control over objects and settings means a corresponding control over the definition of the special youth home, and what happens there. The behaviors required by the staff constitute sociomaterial control practices rather than care practices. In study III, the environment was experienced by the youths as an intertwined social and spatial space distancing them from the staff. The youths strived to present themselves as worthy of increased freedom and negotiating with their behavior, leading to reinforced feelings of social exclusion. In study IV, the staff experienced the care environment as constituting conflicting requirements between the youths' needs and possible achievements given the prerequisites. This constitutes a constant struggle that could be interpreted as conflicting moral and instrumental demands, often resulting in sociomaterial control practices—rather than care practices. The **conclusion** was that the moral requirements for care and security were conflicting, although their unreflected but rational solution was through the environment's security inscription which encouraged controlling and repressive sociomaterial practices among the staff, rather than caring practices. Goffman's concept of decorum can be interpreted as an aspect of sociomateriality. The findings point to the importance of viewing spaces and objects as crucial parts of care practices and highlight the intentions of institutional designs and objects.

Keywords: Institutional youth care, Care environment, Sociomateriality, Erving Goffman, Quantitative methods, Ethnography, Photovoice, Focus group discussions

SAMMANFATTNING PÅ SVENSKA

I Sverige vårdas ungdomar med omfattande psykosocial problematik enligt Lag med särskilda bestämmelser om Vård av Unga (LVU) på särskilda ungdomshem som drivs av Statens Institutionsstyrelse (SiS). Vid dessa ungdomshem placeras också ungdomar 15–17 år som avtjänar ett straff i enlighet med Lag om verkställighet av Sluten Ungdomsvård (LSU). Att geografiskt omlokalisera ungdomar med olika slags problematik till låsta institutioner är en social praktik med historiska rötter. Förutom inlåsningen på institution, präglas de särskilda ungdomshemmen också av juridiskt grundade rumsliga och materiella restriktioner vilka innebär en ytterligare inskränkning av ungdomarnas rörelsefrihet. Därtill, har ungdomshemmen kritiserats för att möjliggöra destruktiva interaktioner mellan ungdomar, något som också bekräftas av tidigare forskning.

Detta, sammantaget, gör att kraven på vårdmiljön vid de särskilda ungdomshemmen är mångfacetterade och ibland motstridiga. Förutom krav på samtidig vård och kontroll, skall krav på arbetsmiljö, säkerhet, samhällsskydd, stöd i barnens utveckling samt barns rättigheter uppfyllas—i en miljö där bokstavligen allt äger rum innanför samma fysiska väggar. Tidigare forskning om vårdmiljö har framför allt genomförts i andra vårdkontexter, med andra målgrupper och i lägre utsträckning fokuserat hur interaktioner och praktiker påverkas av miljön.

Vården och behandlingen inom de särskilda ungdomshemmen bygger på relationen mellan ungdomar och personal. Därmed ligger grunden för prosocial förändring i vad som händer mellan människor, nämligen i de sociala interaktionerna, och i de sociala praktiker som formar dessa interaktioner. Syftet med avhandlingen var att undersöka och utforska vårdmiljöns påverkan på ungdomar och personal, samt på samspelet mellan ungdomar och personal på de särskilda ungdomshem som drivs av SiS.

Avhandlingen består av fyra delstudier: **Studie I** var en kvantitativ explorativ register- och enkätstudie som undersökte eventuella associationer mellan individfaktorer, faktorer relaterade till fysisk miljö och utfall kopplat till brottslighet under vårdtiden. **Studie II** var en mikroetnografisk deltagande observationsstudie som undersökte interaktioner i miljön vid ungdomshemmen Siljegärde¹ och Viskansby. **Studie III** var en Photovoice-studie som undersökte ungdomarnas levda erfarenheter av miljön vid ungdomshemmen Siljegärde och Ottarryd. Slutligen, **Studie IV** var en

¹ Namnen på ungdomshemmen är fingerade

fokusgruppsstudie med personal, som undersökte personalens erfarenheter av vårdmiljön vid ungdomshemmen Siljegärde och Viskansby. För att tolka de empiriska fynden användes ett teoretiskt ramverk med fokus på vårdande som en sociomateriell relationell praktik. I sociomaterialitetsperspektivet ses rum, objekt och sociala praktiker som tätt sammanflätade, omöjliga att separera från varandra. Det sociomateriella perspektivet på vårdande användes tillsammans med Erving Goffmans dramaturgiska perspektiv, med särskilt fokus på begreppet dekorum.

Resultaten visar att vårdmiljön vid ungdomshemmen tolkas av ungdomar och personal som en sammanflätad odelbar helhet, med både spatiala, materiella och sociala aspekter. Miljön upplevs av både ungdomar och personal som präglad av säkerhet, där regler manifesteras genom rum och objekt. Medan ungdomarna upplever säkerhetsinskrivningen som kontroll, legitimerar personalen denna mot bakgrund av ungdomshemmet som en potentiellt farlig plats. Tillgång till saker, rum och situationer som ungdomarna associerar med 'hemlighet', eller en informell känsla av 'backstage' understödjer hemkänsla, men är kraftigt begränsade. Ungdomarna erkänner inte personalens praktiker som vårdande, utan som dominerade av kontroll. Personalen upplever en konflikt mellan moraliska krav på vård respektive säkerhet, samt de instrumentella krav på att agera på ett visst sätt, som miljöns säkerhetsinskrivning signalerar. Personalen har inte tillräckligt stöd i att 'lösa' denna konflikt vilket leder till sociala interaktioner präglade av sociomateriella kontrollpraktiker hos personalen, respektive sociomateriella motvilliga anpassningspraktiker hos ungdomarna. Detta skapar distans mellan ungdomar och personal, försvårar behandlingsallianser och kan öppna upp för möjligheten att ungdomarna vänder sig till varandra, vilket kan leda till såväl vänskapliga relationer som till potentiellt destruktiva interaktioner. Avskiljning, rymning, alkoholanvändning, liksom placeringens tidslängd hade samband med ökad risk för aktivitet som kan definieras som kriminell under placeringstiden, som exempelvis droganvändning och våldsutövande.

Goffmans begrepp dekorum kan tolkas som en aspekt av sociomaterialitet. De moraliska kraven på vård och säkerhet står i konflikt med varandra, och hittar sin orefleterade men rationella lösning genom att miljöns säkerhetsinskrivning uppmuntrar kontrollerande och repressiva sociomateriella praktiker, snarare än vårdande som det kan förstås utifrån vårdvetenskaplig teori. Resultaten visar att rum och objekt inte utgör passiva 'döda ting', utan tvärtom aktiva agenter som både påverkar kroppar direkt, identitet och självbild, och sociala interaktioner mellan människor.

LIST OF PAPERS

This thesis is based on the following studies, referred to in the text by their Roman numerals.

- I. Nolbeck, K., Wijk, H., Lindahl, G., Olausson, S. & Thodelius, C. (2022). Criminal activity during institutional youth care: The association between individual and spatial aspects. *In manuscript*.
- II. Nolbeck, K., Wijk, H., Lindahl, G. & Olausson, S. (2022). Claiming and Reclaiming Settings, Objects, and Situations: A Microethnographic Study of the Sociomaterial Practices of Everyday Life at Swedish Youth Homes. *Journal of Contemporary Ethnography*. March 2022.
doi:10.1177/08912416221082701
- III. Nolbeck, K., Wijk, H., Lindahl, G. & Olausson, S. (2020). “If you don’t behave, you’re in real shit, you don’t get outside the doors”—a phenomenological hermeneutic study of adolescents’ lived experiences of the socio-spatial environment of involuntary institutional care. *International Journal of Qualitative Studies on Health and Well-being*. 15(1). <https://doi.org/10.1080/17482631.2020.1726559>
- IV. Nolbeck, K., Olausson, S., Lindahl, G., Thodelius, C. & Wijk, H. (2022). Be prepared and do the best you can: A focus group study with staff on the care environment at Swedish special youth homes. *Submitted*.

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CONTENT

GENERAL INTRODUCTION AND NOTE TO THE READER.....	1
A brief note on focus and concepts	2
Thesis structure	2
PART 1. LEGAL, SPATIAL, AND SOCIAL PERSPECTIVES ON SPECIAL YOUTH HOMES.....	4
From workhouse to special youth home.....	4
Today’s special youth homes—legal and spatial perspectives	6
Care and readjustment under ‘particularly close supervision’	7
Legal mandate to restrict access to spaces and objects.....	8
The youths in the special youth homes.....	11
Placement grounds, care needs and ‘behavioural problems’	11
An alternative interpretation of ‘behavioural problems’	14
A note on children’s rights: during care and after discharge	16
Spatial perspectives on children’s rights	16
After discharge: the effects of institutional care	18
Summing up part 1	20
PART 2. PREVIOUS RESEARCH: SPACES AND MATERIALITIES IN CARING.....	21
The development of the research field	21
The institution: an artificial world or a temporary ‘home’?.....	24
Spatial aspects on control, observation, and incidents	27
A macro level note on the institution	29
Summing up part 2.....	31
PART 3. RATIONALE AND AIM	32
Rationale.....	32
Aim	33
PART 4. THEORETICAL PERSPECTIVES	34
Caring as a sociomaterial relational practice	34
Philosophical points of departure in Health and Care Sciences.....	34
Adding a sociomaterial dimension.....	35

Goffman’s dramaturgical perspective	36
Summing up part 4	38
PART 5. METHOD AND METHODOLOGICAL REFLECTIONS	39
About pre-understanding and bodily memories	40
Thesis design.....	43
The quantitative study	45
The qualitative studies.....	49
Outline of context.....	49
Method and methodology of qualitative studies	50
Handling of pre-understanding and researcher position.....	54
On selection and access to the field—or what actually happened.....	56
The youths and the staff in the studies	59
Analysis	60
Ethical considerations.....	64
PART 6. FINDINGS	68
Findings from the register data material.....	68
General characteristics of the study population	68
Criminal activity, inpatient care visits, and deaths.....	71
Findings from the four studies	74
Synthesis of findings	75
Dominating deficiencies—few benefits.....	75
A controlling space—a dangerous place	77
Sociomaterial practices: control vs. reluctant adaption	79
A special place with a special clientele	81
PART 7. DISCUSSION	82
A security inscribed sociomaterial reality	82
Inscription as <i>prescription</i> : ‘decorum’ as an aspect of sociomateriality.....	84
Interrupted sociomaterial caring practices	87
Conditional access to caring practices.....	91
A place on the outskirts at the centre of attention.....	95

Re-configuration of caring practices?	99
PART 8. METHODOLOGICAL AND THEORETICAL CONSIDERATIONS	103
Validity and reliability in the quantitative study.....	103
Trustworthiness of qualitative studies	106
About returning to places and spaces	110
Theoretical considerations.....	111
PART 9. LOOKING AHEAD.....	113
Conclusions	113
Implications	113
Future perspectives.....	114
REFERENCES.....	115

GENERAL INTRODUCTION AND NOTE TO THE READER

This thesis is positioned within the field of health and care sciences but adjacent to the fields of social work and building design. However, it studies a specific setting, the special youth homes; therefore, it relates to other studies on institutional care, and specifically to studies in the field of Swedish institutional care of youths. During 2017–2019, the PhD study was part of a larger research project that studied the importance of the physical environment in the rehabilitation of young people in special youth homes.

This thesis focuses on how the care environment in special youth homes affects youth and staff experiences and interactions. However, the ontological foundation for this thesis considers spaces and material objects as inseparable from social interactions and practices. Further, the thesis takes on a broad definition of what ‘care’ means in this specific research area. Care is viewed as a relational practice, constituting a ‘doing’ involving humans, spaces, and objects. From this standpoint, the studies in this thesis aim to expound on the role of spaces and objects in special youth homes in Sweden relating to practices and interactions within these institutions. The thesis also strives to discuss, understand, and interpret its findings on its ontological principles. It contributes to care environment research, and to the theorization of the ‘care environment’ phenomenon.

A BRIEF NOTE ON FOCUS AND CONCEPTS

Care and treatment within special youth homes are based on the relationship between youths and staff, which means that the basis for prosocial² change, lies in what happens between people in their *social interactions*. Further, *social practices* are defined as collectively shaped organized activities, including but not limited to actions, forming social phenomena—and, in this thesis, viewed as connected to social interactions. Thus, this thesis is concerned with the impact of the care environment on social interactions and practices.

From the foregoing, the use of some central concepts will be outlined briefly. The terms *care environment* and *environment* are used as umbrella concepts to describe the joint physical and social environments of special youth homes. *Physical environment*, *materiality*, and *material objects* should be understood primarily in relation to a manifest, absolute understanding of the care environment phenomenon, while the terms *lived space* and *lived place* refer to more abstract dimensions relating to interpretations of the environment. *Sociomateriality* is used with reference to social interactions and practices intertwined with materiality. This concept is linked to the theoretical framework, and thus are the focus of the thesis.

THESIS STRUCTURE

This dissertation presents and discusses empirical findings from one quantitative and three qualitative and ethnographic studies. To increase readability, fictitious names are used for the three special youth homes that reappear in the qualitative material: the boys' institutions Ottarryd and Viskansby, and the girls' institution Siljegärde³.

All spaces and objects have their history, therefore, **Part one** of this thesis starts with a historical narrative of the institutional youth care in Sweden. Part one also aims to outline the context of special youth homes in legal, spatial, and social terms. The chapter strives to describe the legal framework for placement, the legal mandate to restrict access to spaces and objects, and a review of previous research on youths in special youth homes. Children's rights and the effects of institutional care are addressed. **Part two** outlines

² Prosocial behavior is usually defined as behaviors that are intended to help and support other people and/or society at large. The term is often used as opposed to antisocial behavior (American Psychological Association, 2020).

³ The three special youth homes will be further presented in Part 5. Method and Methodological reflections.

previous research on spaces and materialities in caring, both in general and in relation to special youth homes. **Part three** outlines the rationale and aim of the thesis. **Part four** presents the theoretical perspectives of the thesis: caring as a relational sociomaterial practice, and Erving Goffman's dramaturgical perspective. **Part five** gives an overview of the method and methodologies for the four studies, the synthesizing of the findings from the studies, and the analysis methods. The context for the qualitative studies is outlined, and the handling of pre-understanding and reflexivity is discussed. In **Part six**, the findings from the four empirical studies are presented together with previously unpublished registry data, and the synthesized findings. The empirical studies explore possible relations between spatial and individual characteristics, and outcomes related to crime during care (Study I); how the spaces and objects affect interactions (Study II); the meaning of the care environment to the youths (Study III); and the staff's experiences of the care environment (Study IV). Hence, the analysis in this thesis is grounded in empiricism, which is further elaborated and discussed in **Part seven**, through the theoretical perspectives mentioned above, and in relation to previous research. In **Part eight**, the methodological and theoretical considerations are discussed. In **Part nine**, the implications of the study, and suggestions for future research in light of the current findings are discussed.

PART 1. LEGAL, SPATIAL, AND SOCIAL PERSPECTIVES ON SPECIAL YOUTH HOMES

FROM WORKHOUSE TO SPECIAL YOUTH HOME

Even though it is not the focus of this thesis, it is important to give a short historical context to understand today's special youth homes. The management of the 'problematic youth' and the 'youth at risk' has been a recurrent theme in Swedish social debate for decades (Hörngren, 2013), as has the idea of taking the youth out of their social and geographical context. This idea of relocating a youth has a long-lasting tradition within the history of social youth work (Nilsson, 2013; Sundkvist, 1994). Early social childcare was characterized by the idea of rescue, and the institution was viewed as an opportunity for positive development, where relocation to a new environment constituted a saving from criminality (Platt, 2009). Historically, the geographical relocation of children and youths to the countryside has been a way to save them from becoming 'maladaptive and morally neglected'⁴ in the perceived destructive context of the cities (Hörngren, 2013; Sundkvist, 1994). This regulation, in both the spatial, geographical, and social terms of various social problems, has been a crucial part of building the nation-state, conveying moral values, and forming a modern society (Edebalk et al., 2013; Nilsson, 2013).

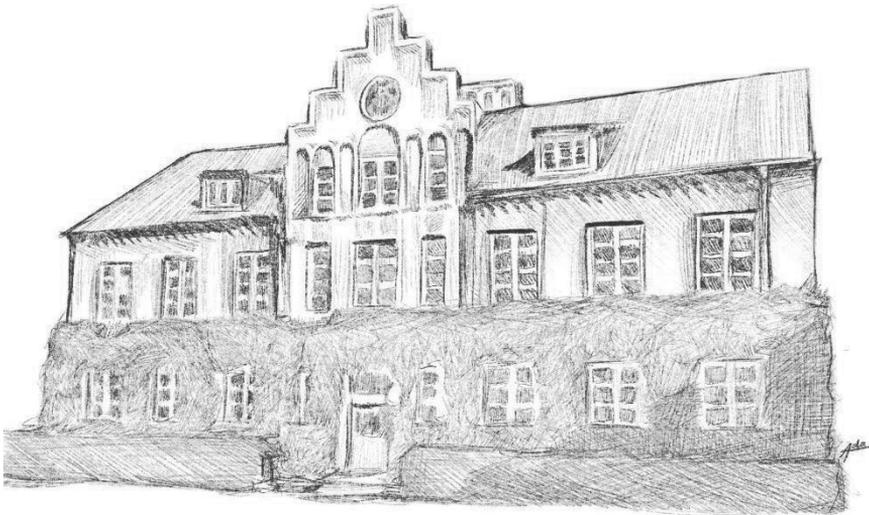
From the 17th–19th century, children, and youths were often placed in so-called workhouses, together with adults⁵ (Bolin, 1992). Today, the oldest special youth homes, which were built in the beginning of the nineteenth century for different purposes, such as housing for mining managers or blacksmiths or for rescuing youths, are still active (The Swedish National Board of Institutional Care, 2015). In 1840, the first so-called rescue institute⁶, Råby, opened outside

⁴ [Author's translation]. In Swedish: *Vanartade och i sedligt avseende försummade (barn)* (Swedish Government Offices, 1902).

⁵ During this period, establishments existed in practice that were combinations of orphanages and correctional facilities, the so-called workhouses, that legally included children in the group of 'petty thieves and vagrants'. [Author's translation]. In Swedish: *småtjuvar eller lösdrivare*. (see Bolin, 1992).

⁶ In Swedish: *Räddningsinstitut*.

the city of Lund, closely followed by Folåsa in the eastern part of Sweden⁷. The first educational institution for boys, Bona, opened in 1905 (Söderholm Carpelan, 1994). In designing Bona, conscious choices were made to prevent destructive interactions among the boys. The entry into force of the 1924 Child Welfare Act caused a division in social child welfare, in terms of policy and spatial separation⁸, and a necessity to separate the children in need of protection from those that were perceived as a threat to society (Hörngren, 2013; Swedish Government Official Reports SOU 2015:71, 2015). From 1950–1980, several new youth institutions were built, and already established institutions were rebuilt (The Swedish National Board of Institutional Care, 2015).



Picture: Råby special youth home outside Lund, Sweden. Illustration by Ada Forssander from inspiration of a photograph by Anna Bubenko/Sveriges Radio

The thorough critique and questioning of the social welfare laws in the 1960s and 1970s, urged for a new, client-centered, non-paternalistic policy framework. This led to involuntary care being given its own laws (Hörngren, 2013; Swedish Government Official Reports SOU 2015:71, 2015). In 1993, the Swedish National Board of Institutional Care (in Swedish, ‘SiS’)⁹ was

⁷ Both Folåsa and Råby are active as special youth homes today (2022).

⁸ According to the Child Welfare Act of 1924, children and youths without parents should be placed in orphanages, children interpreted as vicious or disobedient, were referred to so-called shelters, while so-called reformatories, correctional, or educational institutions, were intended for children and youths who committed crimes (See Hörngren, 2013).

⁹ SiS stands for *Statens Institutionsstyrelse*.

formed with responsibility for the so-called section 12-homes or the special youth homes¹⁰, and state-managed institutions for youths in need of ‘particularly close supervision’ were established (Sallnäs & Wiklund, 2017; Söderholm Carpelan, 1994). The new authority included several old rescue institutes. The formation of the new organization meant an incorporation of the old institutions’ spatial and social heritages; thus, the special youth homes of today constitute a complex setting with historical, legal, and spatial heritages.

TODAY’S SPECIAL YOUTH HOMES—LEGAL AND SPATIAL PERSPECTIVES

Care and treatment in Sweden are based on the principle of voluntariness. This makes the coercion and involuntary measurements an exception that could only be prescribed by law and applied in special circumstances (*for example, §. 2a of the Health and Medical Services Act and §. 1 of the Social Services Act*) (SFS2001:453, 2001; SFS2017:30, 2017; The Health and Social Care Inspectorate (IVO), 2020).

In the special youth homes, the foundation for achieving prosocial change with the youths lies in the relation between the youths and staff, ultimately constituted in the so-called contact personnel function. This means that what happens between people in the environment is what is presumed to cause positive change (Helgesson, 2003; see also Billquist & Skårner, 2009). However, the legal framework on which the activities of the special youth home activities are built can be assumed to affect not only the individuals who are placed there but also the social and the spatial care environment. The general legal restrictions associated with the placement (the actual lock-in at the institution), and the constraints, especially on spaces and objects, tentatively create the starting point for social interactions and practices that become possible in the context of special youth homes. In light of the above, the following chapter will deal with the context and the prerequisites for special youth homes, through the legal grounds for placement, and the legally formulated restrictions on spaces and objects.

¹⁰ ‘Section 12-homes’ refers to the Care of Young Persons Act §. 12, which states the existence of the special youth homes. SiS was also given the responsibility for the compulsory care of addicts according to The Care of Abusers (Special Provisions) Act.

CARE AND READJUSTMENT UNDER 'PARTICULARLY CLOSE SUPERVISION'

At the Swedish special youth homes, children, and youths up to the age of 21 are placed according to the Care of Young Persons Act (TCYPA), following a decision by the social welfare board, either because of conditions in the home that pose a significant risk to the youth's health or development (§. 2), or because the youth expose themselves to a significant risk of being harmed by drug abuse, criminal activity, or 'any other socially degrading behavior' (§. 3). The decision on care may be immediate (§. 6) (SFS1990:52, 1990). However, special youth homes also house youths serving a sentence for a committed crime, according to the Law on Young Offenders (TLYO)¹¹ (SFS1962:700, 1962; SFS1998:603, 1998). The law was formulated as an alternative to keep the youngest offenders out of prison—an environment considered unsuitable for children (Swedish Government Offices. Ministry of Justice, 1998; Swedish Government Official Reports (SOU) 2020:63, 2020). A placement due to care according to TCYPA shall be reconsidered every six months, while a placement in line with TLYO normally ceases when the sentence is served (SFS1990:52, 1990; SFS1998:603, 1998). Recently, voices have been raised that youths in need of care, and convicted youths should be separated spatially, with proposals to abolish and sharply limit TLYO.

The special youth home staff consists of different professionals, such as treatment assistants, teachers, nurses, and psychologists. However, when other professionals work with the youths in spatially and temporally limited forms (for example, teachers during class), the treatment assistants, which constitute 60% of the staff at the special youth homes (Andersson, 2021; Silow Kallenberg, 2016; The Swedish National Board of Institutional Care, 2020b), spend the most time inhabiting, to a great extent, the same spaces as the youths. The care and treatment within special youth homes build on the contact personnel function¹², which means that the treatment assistants mainly have the task of creating a trusting relationship with the youth and achieving prosocial changes among them (Bernler, 1993). This work has

¹¹ In Sweden, youths aged 15–17 years, who commit a crime where the penalty (for an adult) would be imprisonment, should be sentenced according to the Law on Young Offenders (TLYO), with a minimum sentence of 14 days, and a maximum of four years (SFS1962:700, 1962; SFS1998:603, 1998).

¹² Apart from contact personnel function, the special youth homes offer a range of manual based treatment programs, which generally focuses on behavioural management and behavioural changes, as anger management or relapse prevention. The special youth homes also offer primary and secondary school education for the youths.

been recognized as laden with emotions, and the special youth homes as emotionally laden places, requiring the staff to handle both their own and others' emotions in striving to balance the various demands of the work (Andersson, 2021; Biszczanik & Gruber, 2021). The framework that compulsory care puts on the relationship requires constant handling and balancing between the staff and the client. The tension that is built into the relationship results in different strategies for managing the balance between support and control in both staff and clients (or youth). These strategies are characterized by different levels of trust, power, and counter-power, and create different starting points for the relationship. Herein lies the challenge for staff to not only act according to the formal power assigned by the institution and society, but also strive to build a trusting relationship where there is room for the client's participation, and where the interpretation of support and control is negotiated within the framework of the relationship (Billquist & Skårner, 2009). Despite the high demands on the staff of the special youth homes to establish the above, a lack of education and experience among the staff and difficulties in recruitment are evident (The Swedish National Board of Institutional Care, 2020b).

The borderland between caring and guarding in which the special youth homes are positioned is not specific to this context; rather, it relates to the general character of social work as a coin with two sides (Lorenz, 2020). This tension, however, can be argued to be more accentuated in special youth homes, where requirements for social protection, work environment, safety, care, and treatment should all be achieved behind the same physical walls. The legal restriction of movement, and the requirement for staff to balance between different logics in an emotionally loaded environment tentatively places high demands on the care environment of these homes. Societal change, such as increasing violent crimes, and the fact that perpetrators and victims are now younger, further increases the demands on the special youth homes (The Swedish National Council for Crime Prevention (Brå), 2020a).

LEGAL MANDATE TO RESTRICT ACCESS TO SPACES AND OBJECTS

The above outlined legal grounds for placement in a special youth home also come with spatial and material restrictions. Procedures such as relocation to rural areas, and locking into secure accommodations have a long-lasting history, as stated above. Apart from the idea of geographical and spatial relocation and the general prevention from leaving the institution, the

‘specialness’ about special youth homes is the so-called ‘coercive means’¹³. These legally sanctioned mandates are used by the staff to further restrict the movement of the youths, and their access to certain material objects, and these are justified on the safety of staff and other youths, and the maintenance of order¹⁴ (Mattsson, 2018; Swedish Government Official Reports SOU 2015:71, 2015). The most intervening of the coercive means is the mandate to keep a youth in seclusion or in private care¹⁵ (The Care of Young Persons Act 15 c–d; the Law on Young Offenders §§. 14a; 17). The first is justified on violent behavior or the youth being under the influence of drugs, while the second is decided upon with reference to the needs or the safety of the youth, or the safety at the home, implying that they are prevented from meeting others cared for at the home (the Care of Young Persons Act, §. 20a; the Law on Young Offenders, §. 18b). An additional restriction that occurs is the so-called sectioning at night. This means that the ward is locked in sections such that the youths can only enter the corridor where their private room is located but not the ward. The corridor is locked with a security door, often with a glass pane. If youths want to communicate with staff after the lock-in (usually around 10 p.m.), they need to knock on the door (the National Parliamentary Ombudsman (JO), 2019)¹⁶.

Apart from the legally founded coercive means, last year’s debate on armed exemptions and escapes from special youth homes (The Swedish National Board of Institutional Care, 2020g) has increased demands on further restrictions on youths’ movements. In 2020, by a government decision, SiS initiated extensive work on organizational structure and policy regarding security throughout the organization (Swedish Government Offices. Ministry of Social Affairs, 2020; Swedish National Board of Institutional Care, 2020b). The decision affected not only the convicted youths, but also the youths under

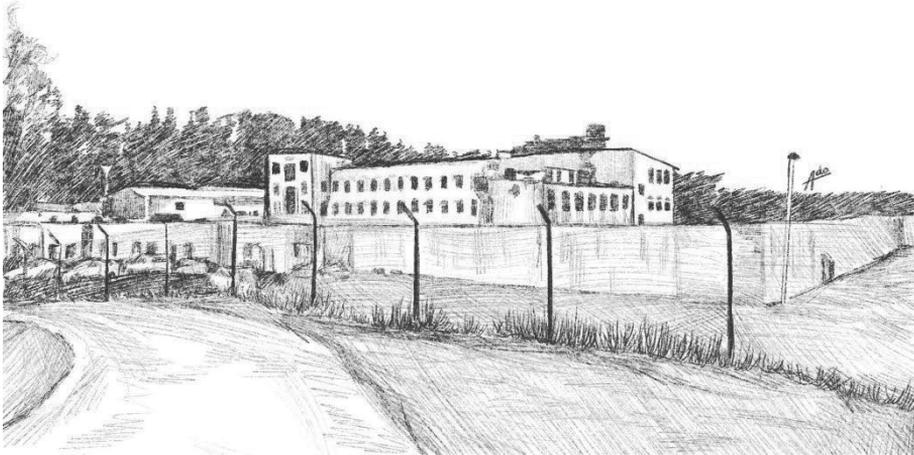
¹³ [Author’s translation]. In Swedish: *Särskilda befogenheter, tvångsåtgärder* or *skyddsåtgärder*.

¹⁴ Formulations as ‘if the order at the home is jeopardized’ (TCYPA, §. 15a), if circumstances arise that ‘prevent him or her from being kept in order’ (TCYPA, §. 15c) and ‘if necessary to carry out care or maintain order at the home’ (TCYPA §. 17c), are used to rationalize the restricted access to outdoor areas, the restricted access to, and the search for certain objects in the youth’s bedroom or on their body (the Care of Young Persons Act §§. 15–17; see also the Law on Young Offenders §§. 15–17) [author’s translation].

¹⁵ [Author’s translation]. In Swedish: *avskiljning* and *Vård i Enskildhet* (ViE).

¹⁶ The National Parliamentary Ombudsmen (JO) are appointed by the Swedish parliament (*Riksdagen*) to warrant the conformity to law and other governing statutes, of public authorities and their staff members. As a national preventive mechanism, JO regularly inspects places where people are detained, such as the special youth homes.

care¹⁷. The enhanced focus on security resulted in a classification of youth homes according to security level, where six were pointed out as higher-level security institutions, and two¹⁸ were evaluated as having prerequisites for the highest level (The Swedish National Board of Institutional Care, 2020a, 2020d, 2020e). The highest-level homes should be able to handle youths who are adjudged as having ‘the highest risks regarding deviations, threats, and violence’ (The Swedish National Board of Institutional Care, 2021). The buildings should be technically and physically equipped to hinder exemptions and escapes, making it difficult to smuggle in illicit objects, and should possess the possibility of spatially separating the youths (The Swedish National Board of Institutional Care, 2021). In addition, youths placed according to TCYPA and youths serving a sentence according to TLYO should always be separated spatially (The Swedish National Board of Institutional Care, 2020d).



Picture: Tysslinge special youth home, in Södertälje, Sweden. Illustration by Ada Forssander from inspiration of a photograph by TT.

¹⁷ The government’s decision states that there are also youths ‘with a large propensity for violence and in great need of care among those placed [...] according to the Care of Young Persons Act’ (Ministry of Social Affairs, 2020, p. 3) [author’s translation].

¹⁸ The special youth homes, Tysslinge in Södertälje and Johannisberg in Kalix.

THE YOUTHS IN THE SPECIAL YOUTH HOMES

As discussed above, the legal foundations for placements, as well as the specific legal restrictions associated with the physical care environment, form the context of special youth homes. The different reasons for placement presented above imply that the organization, and ultimately the staff, must meet a wide range of needs and strive to achieve different goals, sometimes presumably difficult, or at least challenging, to combine. The ability of the overall care environment to achieve this should ultimately be identifiable through the effects that institutional care has on the youth group at an aggregate level, that is, through what happens to the young people after the placement. Against this, the young people's care needs as well as the effects of the institutional care will be outlined below. The care needs of the youths under placement are what the care environment tentatively should strive to support; the environment should presumably, through both social and spatial aspects, shape the context in which change is to be achieved.

PLACEMENT GROUNDS, CARE NEEDS AND 'BEHAVIOURAL PROBLEMS'

In 2020, 27,300 children and youths were placed in out-of-home social care in Sweden. The most common type of placement was foster care, followed by the so called HVB¹⁹, while 5% (n = 1113) were placed at a special youth home because of needed care (The Swedish National Board of Health and Welfare, 2021). Of the youths cared for at a special youth home, 64% were boys and 36% were girls, and the mean age was 16.2 years (The Swedish National Board of Institutional Care, 2020c). However, the age range was 10–20 years; therefore, the special youth homes house children, older youths, and young adults. Of the placements in 2020, 51% constituted immediate care due to the Care of Young Persons Act, §. 6, and 40% to §. 3²⁰. The emphasis on placements due to the youth's own behavior (§. 3), was in line with the Care of Young Persons Act §. 12 (SFS1990:52, 1990), which motivates the existence of special youth homes.

In 2020, 5.2% (n = 61) of the total population of youths placed at SiS (N = 1,174) served a sentence according to the Law on Young Offenders. Of the convicted youths, all were boys, and the penalty time varied between 90 and 1,460 days, with an average of 357 days. The most common crimes were drug

¹⁹ The so called HVB (In Swedish: *Hem för Vård eller Boende*), is a residential care home for children, youths, adults, or families in need of social services.

²⁰ A minority of the placements were due to both §§. 2 and 3 (8%) or constituted a voluntary placement according to the 4 chapter §. 1 of the Social Services Act (n = 1).

offenses, robbery, assault, and theft (The Swedish National Board of Institutional Care, 2020c). A smaller proportion of the youths who served sentences were convicted for more serious crimes, such as sexual offences (3%/n = 2), homicide (3%/n = 2), and arson (2%/n = 1)²¹. Thus, including robbery and assault, it means that 1.5% of all youths placed at a special youth home in 2020 were sentenced for more serious violent crimes, while 98.5% were placed either because of care or non-violent crimes²².

Adolescence is sometimes defined as the transitional age, and in terms of change, development, liberation, and challenges, the individual must be supported in developing a gradually increasing adult responsibility (Berg Kelly, 2014). Adolescence per se constitutes a transition with several aspects, making it a challenging process. If, at the same time as this transition, other stressful events occur, such as being critically ill, the transition and critical event contribute to vulnerability, challenging the individual's identity (Sparud Lundin & Bratt, 2021). This could be compared to the geographical, spatial, and social re-location of a youth, from the context that they know to a new, unknown setting, which could constitute an extra stress during an already vulnerable time in life.

Further, being involuntarily placed in social out-of-home care, per definition, means not being in control of the process, and perhaps only partially aware of the extent of the consequences. The lack of empowerment, engagement, and control further adds to an already stressful situation during a vulnerable period in life. Previous research on the general health of children and youths placed in social care shows differences in comparison with children and youths in general, with a particularly poor condition for young people placed in institutions (Children's Ombudsman, 2019; Vogel, 2012; Ybrandt & Nordqvist, 2015). The Children's Ombudsman (2019) stated that suicidal thoughts and suicide attempts were more common among youths in social out-of-home care, prescription of psychotropic drugs were higher, and mortality was almost five times higher. Access to health care for placed children and young people is also lacking, and care providers' knowledge and competence of compound care needs are often scarce (Children's Ombudsman, 2019).

²¹ The figures refer to crimes among youths enrolled during the year 2020, where only one crime in each category for each sentence is counted. Of the detained youths, 78% were convicted of more than one crime (The Swedish National Board of Institutional Care, 2020c).

²² Due to the Swedish Prosecution Authority (In Swedish: *Åklagarmyndigheten*) a violent crime is defined as a crime that involves violence against another person, such as homicide/murder and assault, or rape (See <https://www.aklagare.se/ordlista/v/valdsbrott/>).

Regarding specifically the youths at the special youth homes, the Swedish National Board of Institutional Care (2019) stated that neuropsychiatric problems, depression, various anxiety disorders, and comorbidities are common. The authority also stated that seven out of ten youths at the special youth homes had at least one established psychiatric diagnosis, and almost 50% had at least two diagnoses (The Swedish National Board of Institutional Care, 2019a, 2019b)²³.

The concepts of ‘antisocial behavior’ and ‘norm breaking behavior’, are often used when describing the youths at special youth homes (for example, Swedish Agency for Health Technology Assessment and Assessment of Social Services, 2016). Norm-breaking behavior usually refers to negative, destructive behaviors that involve violations of rules or norms in society. Norms are contextually and culturally binding, and breaking them implicates anything from rule violations, such as truancy, to serious violations of the law. The concept of antisocial behavior could be defined as recurrent norm-breaking behavior and acting out aggressively, including truancy, disobedience, resistance to adult authorities, and drug use, among others (Tonry, 2012). When the problems last over time, they intensify, causing problems for the individual and for other people, and are usually emphasized as warning signals. Moreover, that the problems appear in several arenas (i.e., at school, at home, and during leisure time) are usually taken as signals of more serious behavioral problems, and thus interpreted as distinct from a situational ‘ordinary’ teenage behavior (Nordahl et al., 2007). However, the differences between what could be considered a normal teenage behavior and norm-breaking behaviors that over time could lead to behavioral problems and antisocial behavior are not entirely clear. For example, official statistics show that 52% of all Swedish ninth graders in 2019 stated that they have committed a crime (theft, violent crime, vandalism, or drug crime) at least once within the last 12 months (The Swedish National Council for Crime Prevention (Brå), 2020b). Far from all these, young people develop what the adult world defines as problematic behaviors and end up in social out-of-home care. This illustrates the difficulty of measuring, defining, and trying to understand the complex web of conditions that lead to situations, behaviors, and actions in young people,

²³ In psychiatry, the diagnostic manuals DSM-IV and ICD-10 are used to define behavioral problems in children, youths, and adults. In relation to youths, Oppositional Defiant Disorder (ODD), Conduct Disorder (CD) and ADHD/ADD are pointed out as specifically relevant. All diagnoses require that the individual meets several criteria, or symptoms, and that the problems are considered permanent or persistent over a period of time (see Nordahl, 2007).

which are interpreted as deviant or undesirable by the surrounding adult world.

The reasons and interpretations of the ‘behavioral problems’ are not one-dimensional. They constitute complex interactions between biological, psychological, and social factors; thus, youths’ problems often consist of a combination of many different factors and circumstances (Nordahl et al., 2007; Tjus et al., 2015). This means that the analysis of what is defined as behavioral problems and measures to address them must reflect the complexity and avoid simplified explanations. Focusing only on behaviors, defining certain behaviors as problematic risks, and giving a one-dimensional and simplified picture of the situation is deficient. Instead, viewing the individual as mutually interacting with the surrounding environment in which they develop makes visible the dynamic relationship in which the individual influences, and is influenced by the environment. Thus, ‘behavioral problems’ must be defined not only in their social, historical, and cultural context, but also in relation to the social environment in which they occur (Nordahl et al., 2007). This actor-oriented perspective acknowledges the complex interplay between the individual and the environment and regards the youth as an active agent, taking on rational strategies related to their context. Concepts such as ‘norm breaking behavior’ or ‘antisociality’ are thus value-laden concepts that must be understood as normative and relative (Nordahl et al., 2007).

AN ALTERNATIVE INTERPRETATION OF ‘BEHAVIOURAL PROBLEMS’

However, context alone does not play a role in the understanding and interpretation of behaviors that may be perceived as problematic. The notion of ‘antisocial’ youths or ‘behavioral problems’ does not exist in a vacuum; rather, they occur in social interactions. This reasoning refers to the notion of clientization processes, characterizing interactions between staff and clients in social services (Gubrium & Järvinen, 2014; Järvinen, 2001; Scott & Lyman, 1968). According to the process of clientization, the positioning of individuals as immoral others, as well as the construction of ‘normality’ and ‘deviance’ take place in the interaction between people in everyday life situations. This means that other’s interpretations of an individual are dependent on how the individual presents themselves, and thus the possibility to control the self-presentation (Gubrium & Holstein, 2001; Gubrium & Järvinen, 2014; Loseke, 2001; Smith, 1978). The latter is tentatively influenced by the setting in which the social interaction takes place. The term ‘the System’ could be used as an analogy for various societal institutions that clients in social services interact with, and try to impact (Ugelvik, 2014). The individuals that work within a social service institution, for example, the staff at a special youth home,

represent the System; an undivided homogeneous whole without a face—a feature the clients need to interact with (Ugelvik, 2014). Through clientization processes, resistance is interpreted as evidence of a problematic behavior and the reason for being held in a special youth home, rather than as a rational response to a demanding situation or environment (Goffman, 1961). This tends to form a circular process, whereby ‘the System’ responds with solutions to (perceived) problems (for example, resistance), leading to repeatedly determining clients or youths in terms of ‘antisocial’ or with ‘behavioral problems’ (Emerson & Messinger, 1977; Enell, 2015a, 2015b; Enell & Wilińska, 2021).

Moreover, the young people who are considered worthy of protection, and those who are defined as ‘antisocial’, have historical roots, usually referred to as the discourse on ‘child in danger’ and ‘dangerous child’. Where the former is viewed as in need of protection, and not responsible for its situation or problems, the latter constitutes a danger, and a risk that society needs protection from (Donzelot, 1997). This path dependency has been shown to be especially present in the field of social child and youth care (Swärd, 2020). The discourse on youths as either ‘in danger’ or ‘dangerous’ has been shown to impact youths at special youth homes, for example, in assessment situations (Enell, 2015b) and staff narratives of threat and violence (Andersson, 2021).

In the pursuit of defining behaviors, actions, situations—and individuals— notions of class, gender, and ethnicity are woven into the social interactions influencing the understanding and interpretation of the youths’ problems (Pettersson, 2009; Åkerström & Hambert, 2016). As is the power to—as a representative of the System—use the collective knowledge contained in journals, documents, and statements from other representatives of the same or similar systems to clarify which category a youth ‘belongs to’ (Gubrium & Järvinen, 2014). For example, the placement criteria invoked for boys and girls, respectively, as well as the activities at special youth homes, have been shown to carry historical perspectives and cultural notions of gender²⁴ (Vogel, 2016, 2020; Vogel, 2012). Moreover, both ethnicity and gender have proven to be crucial for the staff’s interpretations of young people’s behavior, as well as their attitudes in relation to the youths, and each other. Perceptions about

²⁴ For example, the criterion of ‘socially degrading behavior’ has been the most cited criteria to the care of girls, although there are indications that this may have changed in recent years, to more emphasis on placement due to addiction. The activities within the special youth homes have been criticized for being mainly adapted for boys with criminal behavior, rather than for other groups such as girls with complex mental health problems (Vogel 2012; 2019; 2020).

gender and ethnicity have thus been shown to govern both what is expected of the youth and what is considered possible to achieve (Gruber, 2013). Subsequently, a division into the seemingly clear categories correspondent to the legal placement grounds, and the notion of ‘antisocial’ youths or youths in need of protection do not exist in a vacuum. Rather, they occur in social interactions between staff and youths, constituting clientization processes (Gubrium & Järvinen, 2014).

A NOTE ON CHILDREN’S RIGHTS: DURING CARE AND AFTER DISCHARGE

The increased security, the legal foundation for placement, and the coercive means also need to be problematized in relation to the Convention on the Rights of the Child, which was adopted as Swedish law in 2020 (Swedish Government Offices, 2017). The convention declares that all appropriate measures should be taken to promote rehabilitation of children and youths in social care, ‘in an environment which fosters the health, self-respect and dignity’ (Article 39). This means that youths in special youth homes, despite the legal restrictions, also have the right not only to get their basic needs met, but also to receive support in their development—in a, from a holistic perspective, promoting environment²⁵ (Swedish Government Official Reports (SOU), 2020:63; United Nations Committee on the Rights of the Child, 2015).

SPATIAL PERSPECTIVES ON CHILDREN’S RIGHTS

Both the United Nations Child Rights Committee and Children's Ombudsman in Sweden²⁶ have, strongly and repeatedly criticized Sweden when it comes to special youth homes in general, and specifically on coercive means. A considerable amount of the criticism directly or indirectly concerns spatial and material environmental aspects of institutional care, such as isolation²⁷ and general limitation of the youths’ freedom of movement (Children's Ombudsman, 2019; Sandberg Lööf, 2011; United Nations Committee on the Rights of the Child, 2015). The legitimizing of isolating measures has been shown to be especially problematic, since it constitutes a far-reaching

²⁵ Despite the legal restrictions, the youths at the special youth homes, have several rights also according to TCYPA and TLYO, as for example to spend time outside the youth home to get prepared for life after discharge (LVU 15a-b§§; LSU: 12, 18a §§).

²⁶ In Swedish: *Barnombudsmannen, BO*.

²⁷ According to statements (see for example Swedish Government Official Reports, 2020, p. 620) ‘separation’ and ‘isolation’ can be used as interchangeable terms.

intervention and violation of integrity²⁸ (The Health and Social Care Inspectorate (IVO), 2020; the National Parliamentary Ombudsmen (JO), 2019). Further, the very possibility of isolating is thought to increase the prevalence of the measure itself²⁹. This is supported by reports giving voice to the children and youths themselves, who express the experience of isolation, and the transportation to the isolation space, as traumatizing (Barnrättsbyrån, 2021; Eriksson & Klinteberg, 2020).

A review from the Swedish Child Rights Agency (Barnrättsbyrån, 2021) of 1,788 decisions on isolation in special youth homes from 2019–2020 shows that restraint techniques and other forms of repressive and violent measures are used in 80% of all cases. In a third of the cases, it is not clear whether the youth themselves were violent before the isolation, which requires the coercive means to be used, according to law. Those who are exposed to the most violence are younger youths aged 11–15 years, girls, and youths with disabilities. Only about 3% of the isolations concern older boys who have been sentenced, according to TLYO. The techniques, which are taught within the framework of the authority's own conflict management program: No Power No Lose (NPNL)³⁰, involve physical interventions and restraint techniques such as transport grips, holding the youth against a wall or floor, or placing the youth on the floor with legs bent upwards or backwards (Pelto-Piri et al., 2017). The techniques involve consciously inflicting pain to ward off the perceived violence. In the review, several experts on law, psychiatry, medicine, police, and social work dismissed the techniques as out of date and directly life-threatening (see also Aiken et al., 2011). The documentation of actual injuries,

²⁸ The United Nations Child Rights Committee define separation as coherent with article 37 in the United Nations Convention on the Right of the Child: *'torture, other cruel, inhuman, or degrading treatment or punishment'* (See United Nations Committee on the Rights of the Child, 2015).

²⁹ Expert opinion by Karin Sjömillä in a report on how Swedish legislation and case law conform to the rights in the UN Convention on the Rights of the Child: *'As long as the possibility of using methods such as separation and belting is permitted by law, these methods will be used and the child's rights under the Convention on the Rights of the Child are then violated'* [author's translation] (See Swedish Government Official Reports, 2020, pp. 624). Belting refers to a measurement used within psychiatric involuntary care and does not refer to the special youth homes.

³⁰ Central to NPNL is what is known as Basic Security Attention (In Swedish: *Grunläggande Säkerhetshållning, GSH*), which is based on the Police authority's tactics for dealing with violent people and situations. Some adaptation to SiS has been made. Staff are trained for a total of one day and four two-hour sessions consisting of training, for one year. The program implicates education in specific restraint techniques (see Pelto-Piri et al., 2017).

such as fractures and injuries to adolescents' muscles and ligaments, also appear frequently in the report (Barnrättsbyrån, 2021).

According to the report, the methods are used mainly against younger people, and against those with major mental and psychiatric difficulties, and young people who already carry traumas and are often diagnosed with PTSD³¹ (Barnrättsbyrån, 2021). Children's rights organizations have repeatedly criticized the specific use of coercive means, especially as research shows that the use of violence in institutions is a matter of organization, care culture, and leadership rather than a matter of children's problems (Barnrättsbyrån, 2021). Today, other evidence-based methods exist involving low affective approaches that show good results (Harder et al., 2013; van Gink, 2019; van Gink et al., 2020).

AFTER DISCHARGE: THE EFFECTS OF INSTITUTIONAL CARE

Follow-up studies on the youths placed in Swedish special youth homes are few³², but the existing ones show unsatisfactory results (Enell, 2015a; Gudmundsdóttir & Nordqvist, 2007; Pettersson, 2009, 2017; Vinnerljung & Sallnas, 2008; Vogel, 2012). For example, studies have shown that young people's problems remain to a large extent after discharge (Vogel, 2012), a relapse of criminality is common (Pettersson, 2017), and the increased use of alcohol and drugs is common after discharge (Gudmundsdóttir & Nordqvist, 2007). Furthermore, girls with mental health problems placed at special youth homes face residual problems, and more than 50% have been re-enrolled to a special youth home or have faced a legal proceeding within a year of discharge (Vogel, 2012). In addition, the scientific knowledge support for most of the treatment programs used in special youth homes has been shown to be insufficient or developed for other care contexts (Swedish Agency for Health Technology Assessment and Assessment of Social Services, 2016).

Previous research from an international perspective³³, generally showed a lack or absence of support for institutional care of youths. Even though a stay

³¹ PostTraumatic Stress Disorder

³² The latest available follow-up data from The Swedish National Board of Institutional Care is from 2008 (see Gudmundsdóttir & Nordqvist, 2007).

³³ Among the Nordic countries, Norway and Finland lack locked youth institutions, whereas Denmark and Sweden are similar in the way they handle youths with extensive psychosocial problems through locked institutions (Henriksen, Vogel, Bengtsson & Honkatukia, 2021). However, the Swedish use of coercive means as

in an institution can, under certain circumstances, be the only measure for a short period, it can be counterproductive or harmful over time, especially for more well-functioning youths (Andreassen, 2003; Dodge et al., 2006; Van Ryzin & Dishion, 2014). Further, research shows that institutions and programs with the aim of rehabilitating youths have counterproductive effects. The most important reason is that youths with extensive problems are placed together, causing so-called ‘contagious effects’ (i.e., youths with different types of social problems learn behaviors from each other) (Bengtsson, 2012b; Dodge et al., 2006; Van Ryzin & Dishion, 2014).

The repressive actions present in the institutional care of youths, such as the legal mandate to use coercive means within Swedish special youth homes, have been shown to have not only counterproductive but also harmful consequences. Research has shown that employees in institutional youth care often respond to the youth intuitively, expressed through control, repression, and correction (de Valk et al., 2016). However, research also shows that what really works is empathy, alliance, being reliable, respectful, and showing commitment (Harder et al., 2013; van Gink, 2019; van Gink et al., 2020). Furthermore, opportunities for openness during the time at the institution (i.e., the possibility to spend time outside the special youth home) have been shown to affect the results of institutional care for young people convicted of crime (Pettersson, 2017). Creating opportunities for openness is important to counteract the effect of the lock-in itself, and to mitigate the negative effects the restrictions put on the relationship between young people and staff (Pettersson, 2017). However, these opportunities are ‘naturally’ constrained by the built-in legal and spatial restrictions on leaving the special youth home.

stated by law, is unique from a Nordic perspective. This means that comparisons with research from other countries should be made with caution.

SUMMING UP PART 1

As shown in this chapter, even though measures and values within social child and youth care have changed over time, the special youth homes of today constitute complex settings with historical, legal, and spatial heritages. The grounds for placement and the youths' care needs are what a care environment should strive to influence in terms of prosocial change. This requirement is currently formulated in the Convention on the Rights of the Child, which is adopted as Swedish law.

However, the simultaneous demands on care, treatment, and social protection, built-in the legal foundation for placement all form the activities of the special youth homes, causing contradicting demands that ultimately need to be balanced by the staff in everyday interactions with the youths. This puts high demands on the care environment of the special youth home, where, per definition, everything takes place behind the same physical walls.

In addition, the coercive means, and the recently increased focus on security, involve clear spatial and material dimensions, which implies further restrictions on freedom of movement, and constraints on material objects. These restrictions tentatively add to the institution's character of spatial and social separation from the outside world, accentuate the tension between care and control, and further increase the requirements on the care environment. The overall care environment's ability to support the staff to meet different needs and handle different requirements, sometimes difficult to reconcile, seems deficient from the few follow-up studies that have been done. Rather, the youths' problems seem to remain the same. Ideally, the care environment should correspond to the complexity forming the basis for prosocial change that constitutes its purpose.

PART 2. PREVIOUS RESEARCH: SPACES AND MATERIALITIES IN CARING

The following chapter starts with a short historical overview of the field of care environment research. Thereafter, there are sections addressing the institution as an artificial world or a temporary ‘home’; spatial aspects on control, observation, and incidents; and a macro level note on the institutional place.

THE DEVELOPMENT OF THE RESEARCH FIELD

Environmental concepts, such as ‘space’, ‘place’, ‘materiality’ and ‘material objects’, are used in different contexts and ascribed different meanings, with different connotations (for example, Cresswell, 2015; Roxberg et al., 2020; Rönnlund & Tollefsen, 2016). Uniform definitions of concepts related to the environment are hard to find; rather, the concepts seem to be used in different ways depending on the ontological perspective and the context³⁴ (Olausson, 2014; Roxberg et al., 2020; Rönnlund & Tollefsen, 2016).

The importance of the environment for caring actions has historical roots that go far back in time. Hippocrates in ancient Greek times already highlighted the importance of the environment for wellbeing and health. Florence Nightingale, in the 1850s, shed light and argued for the importance of the impact of the environment on health and suffering and became a pioneer in her work with hygiene-improving environmental measures during the Crimean War (Andrews, 2003). In addition to contributing to higher survival rates among soldiers, she also emphasized the importance of a health-promoting physical care environment that helps the patient to recover (Andrews, 2003). The technological development of Swedish hospital care during the middle of the 20th century came to be characterized by ideals of easy-to-work, clean, stripped surfaces, and environments with the ambition to minimize the spread of infections. However, these ideals, which also spilled over into other health and

³⁴ According to Rönnlund and Tollefsen (2016), the prevailing picture of knowledge within Social science research, shows that the Swedish word ‘rum’ corresponds to the English word ‘space’, while ‘plats’ corresponds to ‘place’. However, the application of the terms is not consistent according to the authors (see Rönnlund & Tollefsen, 2016, p. 12).

social care contexts, have changed in step with the development of both society and care environment research (Dahlberg, 2014).

As care environment research has gained ground, collaborations between health and social care researchers and design researchers have increased, as has the acknowledged need to develop sustainable health and social care infrastructures (Swedish Government Official Reports (SOU), 2021:71). Research on the care environment has also increasingly emphasized the importance of understanding the care environment as a whole comprised of a multitude of parts and perspectives (for example, Dijkstra et al., 2006; Edvardsson et al., 2005; Hutton, 2005). Through changes in demography and a development toward integrated care based on a person-centered perspective, requirements for common definitions and standards and a need for development of knowledge concerning care facilities are in high demand (Swedish Government Official Reports (SOU), 2021:71).

In addition to this, there is also a noticeable increase in discussions on what is known as evidence-based design (EBD) among planners and designers. EBD means, in short, an effort to base building design solutions, or parts thereof on evidence from research. This usually involves an endeavor to empirically try to establish a measurable causal relationship between the physical environment and various factors linked to health and well-being—and to apply this to design through an EBD approach (Ulrich, 2012). A purpose with EBD is said to be ‘*positive measured outcomes*’ and ‘*improving the financial performance*’ of organizations (Hamilton & Watkins, 2008, p. 17). Despite a starting point in positivist ideals, qualitative research has recently been added to the basis for EBD. However, research has also shown the challenges in collaborations and interprofessional initiatives on health and social care building design and health-promoting physical environments, in terms of divergent perspectives and use of concepts (Miedema et al., 2019, 2021).

The 21 special youth homes in Sweden are located from the north of Kalix to the south of Lund. As mentioned further above, most of the special youth homes constitutes of previous educational or correctional institutions or rescue homes often located in the countryside and now incorporated in the state authority. This also means that there is a wide variety of designs.



Picture: Nereby special youth home, outside Kungälv, Sweden. Illustration by Ada Forssander from inspiration of a photograph by Tomas Ohlsson/Dagens Nyheter.

The focus on the environment, in terms of premises and the physical environment, within the context of special youth homes has in recent years been brought to the fore due to demands for rapidly increasing capacity (Lindahl & Park, 2017; The Swedish National Board of Institutional Care, 2020b). Alongside the previously mentioned enhanced security work within special youth homes, projects, and initiatives regarding the physical environment have been established. Apart from an earlier report from the authority focusing on the care environment from an environmental psychology perspective (Janssens & Laike), both development projects³⁵, as well as projects focusing on the development of so-called ‘standard

³⁵The development project ‘*Knowledge-based physical environment*’ [Author’s translation] was a collaborative project between The Swedish National Board of Institutional Care, and Centre for Health Care Architecture at Chalmers University of Technology (Lindahl & Park, 2017).

departments'³⁶, have been conducted in recent years. The reason is, in addition to the capacity and efficiency requirements, that many of the premises are, in fact, old, lacking maintenance and new challenges related to security that have not been previously encountered. Some premises have been evaluated and have been found not to meet current legal requirements, such as quality of ventilation, design standards, fire protection, and adaptations for people with disabilities (The Swedish National Board of Institutional Care, 2020b).

THE INSTITUTION: AN ARTIFICIAL WORLD OR A TEMPORARY 'HOME'?

Although no one, to my knowledge, previous study has focused on the care environment within special youth homes, spaces, and materiality is mentioned in a couple of previous studies (for example, Silow Kallenberg, 2016; Wästerfors, 2019). Studies have pointed out the special youth home as an artificial world, a social and spatial setting that limits and complicates both assessment and treatment work with young people (Andreassen, 2003; Enell, 2015b), and with coercive means accentuating the loss of control (Bengtsson, 2012a, 2012b). Enell (2015) shows how the practice of assessment, and the placement converge into an 'assessment universe' that affects the youths' self-identity and characterizes their experiences (Enell, 2015b). Special youth homes constitute an environment that differs significantly from life on the 'outside', and which demands certain social skills and the ability to adapt to rules and regulations, as well as to perform nuancedly in front of other youths and staff (Bengtsson, 2012b).

However, the loss of control is not only attributed to self-presentation but also involves a loss of control over physical space and time (Bengtsson, 2012a). Days characterized by structured and systematised daily routines can evoke feelings of boredom. However, contradictory, the 'empty time' between structured activities has been shown to constitute a not insignificant part of the days at the special youth home (for example, Ahonen, 2012).

³⁶ The work of developing a so-called 'standard department' was part of a project for increased capacity at SiS, which aimed to provide a total of 150 new places by 2019. The standard department has eight private rooms for youths but can be developed to up to 32 rooms. Standard models will also be developed for other premises such as schools, kitchens and dining rooms, car parks and gymnasiums. Today, standard departments are implemented at several special youth homes, for example Ljungbacken, Folåsa and Hässleholm (The Swedish National Board of Institutional Care, 2017a).

Being cared for, or serving a sentence in a special youth home often means a stay over several months, sometimes years, and during formative years as childhood and youth, giving rise to issues related to time perception and lived experiences of the institutional space. Research from forensic psychiatry has revealed time as perceived by the patients, as different from ‘the outside’, as if it has slowed down. This has been argued for related to the length of stay, raising the question of whether a forensic psychiatry facility should rather be viewed as a temporary home (Olausson et al., 2021). In line with this, a striving for normality, and the importance of being able to maintain one’s ‘self’ through access to private belongings, as well as feelings of homelessness or what creates ‘at-homeness’, have been shown important in previous research (Olausson et al., 2019). Levin (1998) discusses the material exercise of power, which means the material manifestation of rules and regulations, in the form of bullet-proofed window glass and locked doors. These spatial manifestations co-exist with what he calls ‘the imitation of the good life’ (1998, p. 42), which implicates the striving to establish a ‘homely environment’, both in terms of the social and spatial environment (Levin, 1998). However, ‘home’ in relation to special youth homes is a non-obvious, relative, and subjective notion. For young people, it is not a ‘home’ in the sense of being able to choose who you invite there, when you leave and how you decorate or make it your own. Institutional life oscillates between institution and forced-on ‘home’: a kind of middle ground between boarding school and prison (Wästerfors, 2013).

The concept of ‘homeliness’ or ‘at-homeness’ could be described as a meaning that is contextually bound, displaying a continuum of being metaphorically ‘at home’ or ‘homeless’ (Saarnio et al., 2016; Saarnio et al., 2019; Saarnio et al., 2018; Öhlén et al., 2014). The sense of ‘at homeness’ seems to be related both to social and spatial dimensions—and to time; ‘to feel at home’, means feeling familiarity with the environment, the structure of the day, but also with other people—and dependent on the time inhabiting the space. Research indicates that time influences the sense of ‘at homeness’ (Saarnio et al., 2018). To enable a sense of ‘at homeness’, staff can contribute by offering comfort, responsiveness to needs, and respect the integrity of the caretaker (Saarnio et al., 2019). However, studies have also shown an environmental lack of ability to support ordinariness and care and treatment within forensic psychiatry, (for example, Olausson et al., 2019). On the contrary, support has been shown for a properly designed physical environment in reducing patients’ powerlessness and loss of control, for example by offering more opportunities to maintain integrity and experience a sense of comfort (Olausson et al., 2021). But to feel ‘at home’ when you are temporarily or for a longer time placed in a special youth home, which to a

large extent resembles an institution, can be said to be a contradiction. Here, the opportunity to be private is what can attribute the experience of a more collective, institution-like environment to a more 'homely' feeling (Skårner, 2012).

An important aspect of feeling 'at home' is place attachment, that is, that the longer you spend in a place, the stronger the relationship with that place, whether it is positive or negative. Place attachment affects identity and self-image and is closely linked to the experience of control (Falk, 2010). The attachment to space and place, through, for example, personalizing the environment, creating familiarity and recognition, as well as relating to, and building relations with other people both within and outside a residential home, has been shown to be important (Falk et al., 2013). Olausson et al. (2021, p.1217) expresses it in terms of making the institutional life 'bearable' when 'a homelike atmosphere is established under non-homelike conditions' (Olausson et al., 2021). In the creation of the 'homely' places, and spaces, such as visitor rooms, become important. In these spaces, the boundary between the inside and the outside is blurred, creating closeness to significant others and constituting a counterweight to the institution (Moran, 2013). The sense of 'homeliness' has also been shown to affect experiences and emotions that are common among young people in institutions, such as anxiety, worry, and depression (Venta et al., 2015).

The question of 'homeliness' in terms of familiarity has been addressed in a study conducted in the field of special youth homes, showing that an environment that is interpreted as harsh, with dominant security arrangements and that feels familiar to the youth becomes an environment that 'fits' with the youth's problems and difficult experiences. An environment that, on the other hand, is adapted to the young people's needs, and which offers comfort, trust, and control, creates a 'reorientation' where treatment alliances can be built, and change achieved (James & Olausson, 2018; F. James & S. Olausson, 2021). However, concepts such as 'homely', or 'home-like', have been discussed, and research shows that a sense of 'at homeness', or a 'feeling of home', seems to be more important than the environment being 'home-like' in terms of the design. This means that the feeling of belonging is more important, while what constitutes a 'home-like' environment is subjective, and thus dependent on previous experiences (Falk, 2010).

SPATIAL ASPECTS ON CONTROL, OBSERVATION, AND INCIDENTS

Further emphasized in previous research is an environment that enables staff to observe, overview, and communicate with patients/clients. Such design solutions have shown positive results in both the work environment for staff and reduced aggressive behavior and increased sense of security with clients (Jenkins et al., 2015; Ulrich et al., 2012; van der Schaaf et al., 2013; Wells et al., 2009). Moreover, environmental solutions enabling surveillance in closed institutions have been highlighted as potentially important for decreasing opportunities to self-harm, especially among girls (Thodelius et al., 2017).

Studies show how everyday situations, as well as self-destructive behavior and violence, are tied to and involve material aspects and the spatial environment as part of both actual, and latent violence constantly present at special youth homes (Andersson, 2021; Wästerfors, 2019). This also relates to research on young people's suicidality, which is tied to place, both through the place's accessibility and through the methods and opportunities the place offers (Thodelius, 2018). Similarly, research has shown that the design of buildings can affect the emergence of destructive social interactions in schools, such as bullying and assaults, as well as the start of fires. Places that have proven particularly vulnerable are hallways, changing rooms, and lounges for students (Thodelius, 2019).

However, spatial solutions for observation and surveillance can also be related to Foucault's notion Panopticon, where spatial design contributes to shaping social interactions and behaviors. It is not (only) the fact that you are in fact monitored that affects how you behave, but the awareness that you *may* be (Foucault, 1991). The uncertainty of whether and when one is observed and, consequently, assessed thus constitutes the disciplining mechanism. This highlights spaces as important for issues of power and control, in terms of a 'spatial construct' (Koch, 2010, p. 3).

Wästerfors (2019) discusses how the experience of crowdedness at a special youth home is closely linked to violence in the way that the already cramped and regulated space of the youth home imposes an increased risk of violence when being further shrunk, compressed, and tightened. This clarifies the importance of 'giving space' to the youth, both in spatial and temporal terms. However, the possibility of spatially separating youths when a conflict starts to arise appears as rare as well as restricted within the setting of the special youth homes (Wästerfors, 2019). The concepts of spatial or social density and crowding-related stress are used when referring to the effects of crowded and

cramped spaces (Evans, 2003; Roush, 1999; Ulrich et al., 2008)³⁷. Studies have shown that a poorly adapted environment, for example, with cramped spaces and too many people or noise, increases stress and aggression (Ulrich et al., 2012; Ulrich et al., 2018; Ulrich et al., 2008). A more conscious design of the physical environment with fewer people, more spaciousness and solutions promoting observation can have a stress-reducing impact, for example in psychiatric settings (Ulrich et al., 2012; Ulrich et al., 2018), and in paediatric care (Pauli Bock et al., 2021). However, constant observation has also been shown to be associated with an increased sense of loss of control if the design solutions for observation and overview not at the same time consider the individual's integrity (Sun et al., 2006).

Alike Levin (1998), Silow Kallenberg (2016) discusses that the positions of youth and staff are linked to the physical environment of the wards, and to material objects. Her findings refer to incidents and situations involving keys and alarm phones, which contribute to different positions and conditions for staff and youths. The youths, however, oppose, and resist the asymmetric power distribution, manifested in the complex interweaving of material and social relations, by pointing out that the positions are bound to the space and place of the youth home, and might not exist on the outside (Silow Kallenberg, 2016). The interweaving of social and material aspects has also been found in other studies on special youth homes and forensic psychiatry. For example, discipline, and correction have been shown to characterize the care and materialize in care situations within forensic psychiatry (Hörberg, 2008). Enell and Wilińska (2021) found that the physical constraints of being locked in at an institution come with corresponding relational restrictions (Enell & Wilińska, 2021). Analogously, Biszanik, and Gruber (2021) found that security in special youth homes constitutes an intertwined phenomenon, where spatial and material dimensions are inseparable from the emotional work and social practices of the treatment assistants (Biszczanik & Gruber, 2021).

The above indicate that material and spatial factors might be related to what is sometimes referred to as 'ward atmosphere' or 'care culture'. In relation to forensic psychiatry, results have shown that several factors play a role in the

³⁷ While consensus regarding concepts is lacking, *spatial density* usually is referred to as the amount of area per person, and *social density* as the number of persons per room. *Crowding related stress*, on the other hand, is usually defined as stress caused by the fact that there are too many people in cramped spaces. Although both spatial and social density affect perceived stress, the effect has been shown to be greater in terms of social density. Evidence indicates that wards designed for groups of between 8 and 12 individuals, creates the best conditions related to reduced stress and the opportunity to work individually (see Roush, 1999).

experience of ward atmosphere, for example, related to organization and physical environment, but also related to staff and other inmates. Despite a similar physical environment, the experience of the atmosphere can vary between departments due to the composition of the staff group and the patient group (Brunt, 2008). However, the importance of factors related to physical environmental features for the experience of ward atmosphere have been confirmed in previous studies and have also arisen on the respondents' own initiative in studies that did not have this as their main research object (Brunt & Rask, 2007). This points to experiences of care environments as lived and thus as a perceived wholeness where the spatial and social dimensions of life intertwine. Altogether, this indicates that not only are the loss of control over physical environmental features important in themselves but also possess an inherent symbolism of overall loss of control tied to the lock-in at the institution.

A MACRO LEVEL NOTE ON THE INSTITUTION

As discussed further above, the notion of youths defined in terms of 'behavioral problems' are contextually bound and occur in social interactions, constituting clientization processes (Gubrium & Järvinen, 2014; Järvinen, 2001; Scott & Lyman, 1968). In addition, the disciplining and controlling practices tied to an institution can be said to possess a certain function in a society. Disciplining practices and control have been addressed in previous research literature, and often the institution or the prison have been taken as examples (see for example Cohen, 1985; Foucault, 1986; Foucault, 1991; Goffman, 1961). Foucault speaks of disciplinary and pastoral power, respectively, where the former can be linked to hierarchical structures, such as surveillance, and the latter is more about a caring and helping effort that is characterized by one person guiding another. Another type of power is the sovereign, which, according to Foucault, is linked to the state through laws and regulations (Foucault, 1991). In this way, power must be related to the context in which it is exercised, and more viewed as a technology that is linked to position, for example within an organization, rather than to individuals (Foucault, 1991). This underlines the importance of not only considering the impact of the care environment at a micro level, but also what function the social practice of geographical and spatial relocation fills at a macro level (see for example Vogel, 2020).

Previous research has shown that the geographical location as well as the design of buildings play a role in the above-mentioned processes. Both because they literally and physically separate certain groups of people from the rest of

society, but also because institutions and prison buildings, as well as the places they are geographically located, are 'inscribed' with certain meaning (Jewkes, 2018, p. 3). The inscribed meaning reflects the society's intentions, ideals, and will directed at the group forced to stay at the site or in the building. However, the design of an institution or prison also affects the relationships between people within its walls, as well as the self-image of both those who work there and those placed there (Jewkes, 2018; Ugelvik, 2014). In this way, it can be argued that (the design of) a building always conveys the choice of *something* and opts out something else: it reflects priorities linked to values (Koch, 2010).

The institution or prison and its disciplining practices have also been discussed in terms of fulfilling the function of clearly drawing boundaries between those who are included in society and 'the others'—those who need to be corrected, regulated, or transformed to (maybe) be reintegrated into society (Cohen, 1985). These places or spaces have been argued for as 'microcosms' (Foucault, 1986, p. 26), or worlds of their own with fused life spheres (Goffman, 1961), with their function tied to time, or events defined in time, presupposing a special system of entrance and exit (Foucault, 1986; Goffman, 1961). In this way, an institution or a prison could be said to be a place for 'the others', constituting crucial for the processing of 'othering'. However, the process of 'othering' groups or individuals does not necessarily mean placement at a distance, but rather placing these 'others' in an 'elsewhere', where boundaries constitute the spatial and geographical expression of othering (Staszak, 2009).

SUMMING UP PART 2

Against the above outlined research, the design of the environment can be assumed to facilitate or hinder the possibility of interactions through, for example, the emergence of crowding-related stress, opportunities for observation and monitoring, the opportunity to maintain integrity, and opportunities for distraction.

Furthermore, how the environment is perceived and interpreted by those who inhabit it is tentatively influenced by society's values and intentions inscribed in the environment. This could indirectly affect the relationship between young people and staff members in special youth homes.

Previous research highlights the importance of viewing the care environment from a perspective where space, materiality, and social practices are intertwined. This thesis will capture the interactions and practices in the care environment, in relation to the theoretical perspectives and the thesis design.

PART 3. RATIONALE AND AIM

The special youth homes of today constitute complex settings with historical, legal, and spatial heritages. Not only must requirements regarding work environment, safety, and social protection be met, but also requirements on care, treatment, and children's rights. These, many times, conflicting demands must be balanced in the everyday life of the special youth home and in the relationship between young people and staff. This can be said to be the starting point and prerequisite for the core of care and treatment, ultimately manifested in the contact personnel function. However, the conflicting demands should also be balanced in special youth homes' spaces and materialities. The additional restrictions that come with the lock-in, both through legal grounds, and through the restrictions on spaces and objects, can be said to further add to the requirements on the care environment.

RATIONALE

Previous research on care environments is, however, performed in other contexts, and with other target groups, mostly in health and care settings suited for a limited period of stay, and in relation to adults. To my knowledge, no previous study has focused specifically on the care environment of Swedish special youth homes. This, even though the importance of the physical environment is touched on briefly, and formulations with spatial connotations, such as 'borderland' (see Silow Kallenberg, 2016), and 'total institution' (for example, Vogel, 2012; Enell, 2015), is frequently used in several previous studies. Moreover, the importance of a promoting environment is stated in the Convention on the Rights of the Child. Finally, care environment research has to a less extent focused on how the environment affects social interactions and practices in institutional care contexts building on the contact personnel function. Altogether, this makes the present study important in understanding the complex setting of the special youth home, and its impact on youths and staff.

AIM

The overall aim of the research project is to investigate and explore the impact of the care environment on youths and staff, as well as on the interactions between youths and staff, in special residential youth homes run by the Swedish National Board of Institutional Care.

Specific aims:

- I Describe and discuss potential associations between (a) individual characteristics, (b) characteristics of the physical and spatial environment, and (c) criminal activity during the institutional care of youths in special youth homes in Sweden.
- II To explore the social interactions in the spatial and material environment within everyday life at special youth homes in Sweden.
- III To elucidate adolescents' lived experiences of the socio-spatial environment at special youth homes run by the Swedish National Board of Institutional Care (SiS) in Sweden.
- IV To examine staff's experiences of the institutional care environment within special youth homes run by the National Board of Institutional Care in Sweden.

PART 4. THEORETICAL PERSPECTIVES

Social relations and social interactions are central to the activities that special youth homes strive to perform, implicating tentatively that sociomaterial practices are of interest in researching the impact of the care environment on youths and staff. In this thesis, the perspective of caring as a sociomaterial relational practice together with Erving Goffman's dramaturgical perspective will be used to try to make sense of the practices and interactions of youths and the staff, and what role spaces and materialities play in these.

CARING AS A SOCIOMATERIAL RELATIONAL PRACTICE

The philosophical basis for health and care sciences, which emphasizes the relational aspect and ethical awareness, is first briefly described below. Next, the sociomaterial perspective on caring practices is described. Together, they form one side of my two-part theoretical perspective: caring as a sociomaterial relational practice.

PHILOSOPHICAL POINTS OF DEPARTURE IN HEALTH AND CARE SCIENCES

The field of Western health and care sciences builds largely on person philosophy and the ideas of person centeredness (Pesut & Johnson, 2008; Van Herk et al., 2011). Ideas about person philosophy emphasize the importance of viewing the individual as a unique person with vulnerabilities but also with resources and capabilities (Leplege et al., 2007; Ricœur, 1992). Our relationship to, and interaction with, other people is the basis for creation and re-creation of our self; our life narratives are co-created with other people (Ekman et al., 2020; Ricœur, 1992). The ethics of care can thus be viewed as a 'doing'; (good) care shows up in concrete practices (Ricœur, 1992; Schuster, 2006), based on intentions and (the person's) needs (Edwards, 2001). This also includes a sense of justice within the institutions of society (Ricœur, 1992). Awareness of one's own position as a caregiver, and the associated power, is thus an important starting point for reflection, and thus for how care 'happens' (Schuster, 2006; Van Herk et al., 2011). Person centeredness, rather than a model or a method, is an ethics founded on a philosophical ground mainly attributed to person philosophy and the works of Paul Ricœur (1913-2005) (Ekman et al., 2020). A person-centered approach means to put the person and its narrative in the focus of caring. The person is viewed as capable, with power, resources, and expert knowledge of the own body. The perspective is a

sharp contrast to a traditional medical view within health and care, where the person often is over-shadowed by the role as patient (Kristensson Uggla, 2019; Ekman et al., 2020). These philosophical perspectives have also come to characterize the field of care environment research.

However, not only is the relation to other persons essential in caring practices, but the relation of care does not take place in a spatial vacuum; on the contrary, the person's body and actions inhabit time and space (Dahlberg, 2014; Schatzki, 1991). The world and spaces are 'lived', experienced through, and intertwined with the body (Bengtsson, 2001; Dahlberg et al., 2008; Dahlberg, 2014). This means that if the body changes (as in the case with ill health, or tentatively by the restriction of movement and lock-in), the experience of spaces and the world is also changed (Lindwall et al., 2001). Hence, the human is viewed as a subject—a person embedded in the world and space (Dahlberg et al., 2008; Kristensson Uggla, 2019).

ADDING A SOCIOMATERIAL DIMENSION

The theoretical perspective and concept of sociomateriality offer an understanding of spaces and materialities as 'something more' than just physical manifestations that exert an 'external influence' on the human body—but also something beyond merely subjective lived experiences. Rather, the theoretical concept of sociomateriality focuses on social interactions and practices, as embedded in, and impossible to separate from space and materiality (Gherardi & Rodeschini, 2016; Orlikowski & Scott, 2008). Sociomateriality, as a concept, originates from theories on social practices (for example Schatzki, 2018). According to Orlikowski and Scott (2008), 'practices are always sociomaterial, and this sociomateriality is integral, inherent, and constitutive, shaping the contours and possibilities of everyday organizing' (p. 463). This process of sociomateriality is a crucial part of the individual's identity (Fransson et al., 2018; Østerberg, 1998), and of the collective formation of social phenomena (Schatzki, 2018).

According to this perspective, materialities are not just means to achieve or perform certain tasks or activities; rather, they are constitutive of both actions and identities, where a division into 'the material world' and 'the social world' is an analytical construct more than anything else (Orlikowski & Scott, 2008). From this theoretical perspective, caring is a situated activity, a collective competence, and an ongoing sociomaterial practice. It is an everyday professional 'doing', a logic of its own, which implicates involvement in

sociomaterial relations with tools, technology, organizational, and institutional rules (Gherardi & Rodeschini, 2016; Mol, 2008; Mol, Moser, & Pols, 2010).

Care (both ‘good’ and ‘less good’ care) can thus be said to arise in connections, in the nodes where practices, spaces, and objects meet. This makes the question of what these connections look like, how they remain connected or how they are disconnected, and repaired or not become central (Gherardi & Rodeschini, 2016). This could be related to care practices as facilitated or hindered by different spatial contexts: care practices are ‘configured’ differently in different environments (Buse et al., 2018). Hence, caring is something that is ‘done’—a ‘matter of concern’, not only for those involved in the care but also for society. Caring does not only involve the relation between patient—or youth at a special youth home—and staff member (professional care giver) but must be acknowledged in its context and in relation to its specific know-how (Gherardi & Rodeschini, 2016). Furthermore, caring could take on different expressions, and does not necessarily involve words (Mol, Moser, Piras, et al., 2010; Mol, Moser, & Pols, 2010). Rather, caring is an embodied competence achieved through interacting with other human bodies and material objects in sociomaterial relations (Gherardi & Rodeschini, 2016).

GOFFMAN'S DRAMATURGICAL PERSPECTIVE

The other side of my two-part theoretical perspective comprises Erving Goffman’s dramaturgical perspective. Erving Goffman (1922–1982) is usually emphasized as one of the founders of interactionism, and his dramaturgical perspective concerns interaction between people, both in everyday life and in institutions. Heidegren and Wästerfors (2019) state that the question of what social interactionism ‘is’ has many answers. One response that frames an understanding is the perspective of interaction as an ‘intermediate action’. That is, an action (or several) that constitutes an overall event that ‘takes place through or between the respective participants’ [author’s translation] (Heidegren & Wästerfors, 2019, p. 13).

Goffman (1959) argued that ‘impression management’ is central in social interactions between people. This means striving to present oneself in a favorable way, trying to control others’ impressions of, and approach to, oneself. This is to achieve and maintain social order, which according to Goffman is done by all actors acting in accordance with the definition of the situation (Goffman, 1956). The presentation of the self is dependent on the different parts in what Goffman calls the individual’s expressive repertoire, consisting of the setting, appearance, and manners. To achieve credibility in the performance, consistency between different parts of the expressive

repertoire must exist. With inconsistency in an individual's performance, the challenge of the definition of the situation—and hence the social order—will occur (Goffman, 1956).

In 'Asylums' (1961), Goffman focused on social interactions occurring in the specific setting of the 'total institution' (Goffman, 1961)³⁸. The main characteristics of the 'total institution' are the obstruction of interaction with the surrounding world, the fusion of different life spheres both in time and space, and the administration and routinization of daily life as controlled by staff (Goffman, 1961). Goffman describes the inmate's path into the institution in terms of a loss of roles. Being placed in an institution means breaking with previous roles but also with significant others outside the institution. This creates role loss and a changed self-perception, where the idea of the institution is to establish a new, morally desirable character with the inmate.

By *primary adjustment*, Goffman means when the individual acts in accordance with the institution's expectations, norms, and rules, either based on incentives or to escape punishments. This means an adjustment to the organization and an inordinance in the total institution. By *secondary adjustment*, Goffman means a behavior that is contrary to what the institution expects of the individual, that is, to not 'obey', but to act in violation of rules and norms. However, the possibility for the inmate to react to their own situation and the circumstances they are subject to is nullified; they cannot be separated from the situation itself, due to almost all actions being monitored and assessed. Showing anger or irritation is interpreted within the walls of the institution as a comment on other situations and events in which the individual is involved—and often as evidence of the placement itself (Goffman, 1961). This creates a negative spiral in which spaces and things have an important part. This is because the usual means of impression control a person has access to outside the institution are limited on the 'inside' (Goffman, 1961). In addition to the fact that access to attributes for preparing one's presentation and facade (Goffman, 1956) is limited, the setting itself is not self-selected by the inmates. Setting, as defined by Goffman (1956), is dependent on place and consists of '...furniture, decor, physical layout, and other background items which supply the scenery and stage props' (p. 22) for the performances. Dependent on place

³⁸ Even though Goffman describes different types of total institutions in society arguing characterized by the same interaction rituals, he mainly focuses the involuntary institutions.

means that the setting is tied to a specific place, and further, that the social role(s) it enables can be performed there, but not elsewhere (Goffman 1956).

By *decorum* or *decorous behavior*, Goffman refers to the behavior considered appropriate in a specific situation (Goffman, 1956, p. 107; see also Persson, 2012). The requirement of a certain decorous behavior is tied to the place the performance is carried out, (i.e., to the region). The ‘on stage’³⁹ area is the ‘scene’, where the performance is carried out, and the ‘backstage’ is where the actors can rest, put down their social mask, prepare their performance, and express possible negative behaviors that are concealed when on stage. These ‘regions’ are separated through ‘barriers to perception’, defined as separating either audially or visually, or both, through, for example, wooden walls and glass walls (Goffman, 1956, p. 106). According to Goffman, maintaining control over one’s backstage is crucial for performance. The decorum tied to a region consists of moral and instrumental requirements. While the moral demands are considered ends in themselves, the instrumental demands refer to employer-imposed obligations, with the incitement to either impress or avoid sanctions⁴⁰ (Goffman, 1956). Goffman’s theoretical claim concerns the dramaturgical perspective and how individuals adapt their behavior in relation to the expectations of the social situation. The physical framing and material objects are linked to the region and constitute an important part in the situation that takes place, but also in the individual's performance.

SUMMING UP PART 4

In this thesis, theory is used as applied to the empiric data to interpret it (Ragin, 2014). Different ontological perspectives of theoretical concepts should not per se be viewed as incompatible; rather, it is necessary to study complex phenomena from different perspectives, and levels, and related to different units of analysis (Layder, 2018; Ragin, 2014).

In this thesis, the perspective of caring as a sociomaterial practice will be used together with Goffman’s dramaturgical perspective, with special focus on the concept of decorum as related to sociomateriality.

³⁹ Goffman uses the terms ‘front region’ and ‘back region’ or ‘backstage’ (see Goffman, 1956, pp.107;112). However, I chose to use the terms ‘on stage’ and ‘backstage’, for the legibility of the thesis.

⁴⁰ Goffman states that: ‘(...) *decorous behaviour may take the form of showing respect for the region and setting (and can be) motivated by a desire to impress the audience favourably or avoid sanctions*’ (Goffman 1956, pp. 108-109).

PART 5. METHOD AND METHODOLOGICAL REFLECTIONS

Researching the complex phenomena of the care environment in the context of institutional youth care motivates an explorative methodological design and the use of several data collection methods (Layder, 2018; Ragin, 2014). At the same time, three of the studies (II–IV) were conducted with me—the researcher—as the main tool. The fact that the emphasis in my dissertation is on qualitative methods, together with my previous experiences, and interests, has influenced my approach to research generally, and my approach to the work on this dissertation, specifically. Qualitative research, including ethnography, is based on a hermeneutical quest to understand and interpret empiricism (Morse, 2016; skott, 2013). Data that the different methods give rise to are used to compare, and contrast, to achieve an increased understanding and deepened interpretation of the phenomenon of the care environment. In this lies that I have adopted a hermeneutically approach to the dissertation as a whole, where the dialectic between the different parts and the whole has been important for the research process (Kristensson Ugglå, 2019; skott, 2013).

With the above approach also come ontological and epistemological assumptions that are fundamental to how I view the research process and data. Rather than being something that can be observed from the outside, or possible to ‘collect’, data, in the present thesis, is understood as shaped by subjective experiences, cultural, historical, and social context. This means that empiricism can be considered co-produced in the interaction between the researcher, the field, and participants (Kristensson Ugglå, 2019; Nässén, 2013). Hence, practicing reflexivity and awareness of, and reflecting upon, my pre-understanding has been crucial parts in the process of ‘becoming’ a researcher (Nässén, 2013). According to the above statements, this chapter will begin with a reflection on my pre-understanding, before the design, method, and analysis are described in more detail.

ABOUT PRE-UNDERSTANDING AND BODILY MEMORIES

Why do you become interested in a research area in the first place? For me, there are several alternative answers to that question: interest, personal experiences, and random circumstances. Ever since I was little, social issues and politics have been important topics of conversation in my family. My mother had previously worked with young people in social care, and for a short time, before training as a teacher, she was employed at what would later become one of the special youth homes. She had told me about how she, in the 1960s, had traveled far up north in the country to pick up youths and transport them to the youth home. The idea of geographical relocation and of the institution as a place for change characterized by correctional and educational ideals was evident at that time.

I see two closely related reasons for disclosing my pre-understanding: due to transparency and for ethical reasons. First, previous knowledge of a research field, or of related issues, can be a driving force, and at the same time constitute a challenge in relation to pre-understanding. A researcher's life experience, professional experience and knowledge of the research phenomenon and the field influence the research process in different ways, for example regarding interpretation of research findings. Therefore, an important part of the researcher's work is to be aware and reflect upon one's pre-understanding through, for example, writing it down or expressing it in conversations with co-researchers (Polit & Beck, 2016). Second, there are ethical aspects of being open with one's pre-understanding as a researcher. Being honest about your previous knowledge and experiences means enabling others to adequately assess your efforts as a researcher. Pre-conceptions, intentions, and desires are always built into the choices a researcher makes—the difference lies in whether you acknowledge and express them, or not (Nässén, 2013).

Due to personal experiences, commitment, and what in the early days of my career could be described as a kind of interest and later in terms of growing knowledge—I have repeatedly been drawn to issues and areas that in some way have to do with what could be described as 'social vulnerability'. The fact that I have worked with young people in social out-of-home care, both in community care and in a special youth home, as well as with adults with substance abuse and people living in homelessness, has influenced my applying to write a dissertation on this subject in the first place, my choices of methods and theories, and my interpretation of the empirical findings.

Although I never gave institutional space and materialities much thought before I started my doctoral studies, my time working at a special youth home came back to me afterwards. I surely also carry with me conversations, relationships, and events that seemed to mean something to the young people I met during my time as a treatment assistant. However, it did something to me to be part of a locked world where control and observation not constituted temporary derogations but systematized everyday practices. What did we—the staff—aim at with these measures and treatment for young people? The tension that exists in trying to build trusting relationships while over the day, temporarily, and spatially regulating the person with whom you are going to build the relationship and trust, I do not know in theory only—but also in practice. It constitutes an embodied pre-understanding that I bear with me (Dellenborg, 2013a). That my own body has inhabited the institution's spaces both day and night over a period in my life has affected me with equal parts of outside-view of aversion and inside-knowledge and understanding of the difficulties of the institution's everyday life. Thus, although I did not have any previous relation to the participants in the studies, I did have a relationship to the phenomena 'institutional care' and 'young people in community care' prior to my doctoral studies.

My understanding of spaces and materialities in relation to care and treatment in institutions has changed and deepened over time working on this dissertation. I have gained knowledge I did not have before, and I have deepened or re-valued previous knowledge. In this way, my pre-understanding not only needed to be 'handled' and 'reflected on', but has transformed into a new, deeper understanding through the work with this study. When I think back on my time working in institutional care, I not only recall the memories, but the knowledge I acquired through the work with this study also constitutes an interpretive framework for what I experienced back then. And why I have had a hard time letting go of it. My pre-understanding, and my newly gained knowledge intertwine.

A researcher's pre-understanding can also affect the relation to those who participate in the research. I have encountered wide varieties in previous work experience and level of education, as well as age and gender among the staff. Moreover, their work experience in institutional care has also varied; it has not been uncommon for someone with adequate formal education to have worked less time than someone without formal education. This probably means that the similarities between me and staff members have been greater in the cases I have met staff members with formal education in social youth care. This may have affected relationship building and communication with others, more different from me. At the same time, my previous experience as a treatment

assistant (a job I had both as uneducated, during training and after) has probably enabled me to create relationships more quickly than otherwise.

The more obvious differences between me and the youths in my study are due to age, sometimes ethnicity and gender. Not to mention differences in social, cultural, and economic capital and general conditions and opportunities that come with me being a privileged, white, middle-class woman in academia. However, the most obvious difference probably prevailed with an intrusive clarity every time I left the institution. While I could hand in my keys and go out to my car and drive away, the youths were left, remaining in an environment that I could leave at any time. In other words, I have no experience of being locked up in an institution; my bodily preunderstanding of the institution's spaces is as a staff member. In any case, another person's experience always goes beyond what one can understand (Bornemark, 2020). On the other hand, the power of fantasy and theorizing can constitute an opportunity to imagine another person's situation (Swedberg, 2016).

Although I did not mention my previous professional experience during the field work, except in response to specific questions, I think my pre-understanding has impacted how I related to the youths as well as the staff, both socially, spatially, and emotionally. Knowledge of rules and routines, and bodily knowledge and pre-understanding (Dellenborg, 2013a) of the institutional space, as well as my personal experiences, have probably helped me to win the trust of both staff and young people—and likely prepared me for difficult conversations, as well as saved me from some situations that could otherwise have been embarrassing.

THESIS DESIGN

The design of the thesis can be described in terms of multi method triangulation (Weyers et al., 2014). Triangulation can refer to method, data, investigators, or theory—but also paradigms (Noble & Heale, 2019; Weyers et al., 2014). The last one often refers to the paradigms of qualitative and quantitative research, where a combination or bridging is often considered advantageous in terms of comprehensiveness and complementary perspectives (Weyers et al., 2014). In the present dissertation, triangulation primarily refers to method, and should be understood in terms of data comparison and contrasting to deepen knowledge and interpretation. However, triangulation in this dissertation, to some extent, also refers to paradigm and investigators, respectively.

The dissertation includes four studies: one that can be attributed to the quantitative paradigm, and three that can be attributed to the qualitative paradigm. Of the three qualitative studies, two have an ethnographic methodology (studies II and III), while one is qualitative (study IV): **Study I** focus, through its exploratory quantitative design, potential associations between individual and spatial characteristics and criminal activity during institutional care. **Study II** contributes with an ethnographic design, where interactions in the environment at the special youth homes have been observed. **Study III** uses photovoice methodology to study young people's lived experiences of the care environment, using two simultaneous data sources (both interviews and photos). **Study IV**, finally, is studying the staff's experiences of the care environment.

In addition to the above, I have chosen to include previously unpublished register data material in the dissertation. The reason for this is mainly for ethical reasons, and to contextualize my empirical findings, as there are limited official statistics on young people in special youth homes, and a limited number of follow-up studies. For an overview of studies and the complementary registry data material, see Table 1.

Table I.
Overview of Studies I-IV, and Complementary Analyses of Registry Data.

Study	Aim	Design	Method	Participants	Analysis
I	Describe and discuss potential associations between (a) individual characteristics, (b) characteristics of the physical and spatial environment, and (c) criminal activity during the institutional care of youths in special youth homes in Sweden.	Quantitative: Explorative design	Register based data from the Swedish National Board of Institutional Care and The Swedish National Council for Crime Prevention Web based survey	A sample of youths (n=1859) held in involuntary care at a special youth home during 2006-01-01-2016-12-31. Inclusion criteria dependent on departments responded to the web survey	Descriptive statistics and multiple linear regression analyses (Montgomery et al., 2012).
II	To explore the social interactions in the spatial and material environment within everyday life at special youth homes in Sweden.	Microethnography: Participant observation	Field notes, and ethnographic interviews through participant observation. 60 hours	Young people and staff at two special youth homes: Siljegårde and Viskansby.	Theory integrated analysis (Atkinson, 2007) based on Kenneth Burkes (1969) dramatisic pentad and Erving Goffman' s (1956; 1961) dramaturgical perspective
III	To elucidate adolescents' lived experiences of the socio-spatial environment at special youth homes run by the Swedish National Board of Institutional Care (SIS) in Sweden.	Qualitative/Ethnographic: Photovoice	Photographs taken by the young people followed up by in-depth interviews	Fourteen youths (n=14; six boys and eight girls; aged 15 –19) at two special youth homes: Siljegårde and Ötaryd.	Phenomenological hermeneutical method by Lindseth and Norberg (2004), based on the interpretation theory of Ricoeur (1976)
IV	To examine staff' s experiences of the institutional care environment within special youth homes run by the National Board of Institutional Care in Sweden.	Qualitative: Focus groups	Focus group discussions with staff	Staff members (treatment assistants and teachers, n=17) at two special youth homes: Siljegårde and Viskansby	Thematic analysis (Braun and Clarke, 2008)
Complementary analyses of registry data material	Describe (a) individual characteristics at the point of admission and discharge, (b) inpatient care visits and deceased, and (c) criminal activity among youths in special youth homes in Sweden.	Quantitative: Descriptive	Register based data from the Swedish National Board of Institutional Care, the National Board of Health and Welfare, and the Swedish National Council for Crime Prevention	All youths held in involuntary care at a special youth home during 2006-01-01-2016-12-31 (N = 8671). Except from youths who were under involuntary treatment or had been taken under coercion again, at the point of data request.	Descriptive analyses

THE QUANTITATIVE STUDY

The empirical quantitative findings in the thesis derive both from **previously unpublished registry data** from a population of youths enrolled at the special youth homes January 1, 2006, to December 31, 2016 (N = 8671), and from a smaller sample of youths derived from the same population and used in **study I** (n = 1859).

From the Swedish National Board of Institutional Care (SiS), individual-level data were obtained, consisting of data from The Adolescent Drug Abuse Diagnosis (ADAD). The ADAD is a multidimensional structural interview questionnaire that was adopted for Swedish conditions by the Swedish National Board of Institutional Care in the 1990s (in Swedish: ADAD IN)⁴¹. ADAD IN is used at enrollment in any special youth home and consists of 150 items distributed on nine sections corresponding to different life areas: physical health, school, work, leisure time, friends, family, psychological health, crime, alcohol use, and drug use. For each of the nine sections, three outcome scores are applied: one interviewer severity rating, one adolescent self-rating, and a composite score. Regarding self-rating, the youth are asked to report their experiences and behaviors, as well as their frequency and severity (Friedman & Utada, 1989; The Swedish National Board of Institutional Care, 1997).

Based on the ADAD IN questionnaire, the Swedish National Board of Institutional Care developed a discharge interview, ADAD UT. The questionnaire is divided into two parts: one section, where the staff report their observations, and one section, where the youth report their own experiences and behaviors, like ADAD IN. The staff section includes questions on where the youth is discharged to (e.g., the parental home, a treatment home, or another institution), any involvement in violent incidents with staff or other youths, any positive drug tests, and any coercive means used, such as seclusion or private care during the care period. Questions on cooperation with family and social services are also included, as well as what interventions the youth received during their stay at the special youth home. The section of the questionnaire aimed at the youth consisted of questions regarding their experience staying at the youth home, whether they had been able to take part in their care, and the kinds of interventions they had received. In Study I, as

⁴¹ Originally, The Adolescent Drug Abuse Diagnosis (ADAD) was developed by the Philadelphia Psychiatric Center in the late 1980s (Friedman & Utada, 1989).

well as in the descriptive analyzes of the previously unpublished registry data material, the youth self-rating scores from both ADAD IN and UT were used.

Further, data were also derived from the Record of Criminal Acts held by the Swedish National Council for Crime Prevention (Brottsförebyggande Rådet, Brå). The individual-level data consisted of number of legal proceedings per person, decision date for the legal proceeding, and the type of legal proceeding, (i.e., abstention from prosecution, summary imposition of a fine, or verdict). This data was used both in the descriptive analyses of the previously unpublished registry data material, as well as in study 1.

Data were also obtained from the Inpatient Care Registry and from the Cause of Death Registry held by the National Board of Health and Welfare in Sweden. Originally, the idea was to use this data, together with the data from Brå, as outcomes in study I. However, as the data from the various registry holders proved to be extensive, the decision was made to let study I only include data from ADAD IN and UT from SiS, data on legal proceedings from Brå, and survey data. Instead, data regarding inpatient care visits and deaths for the entire population (N = 8671) are included in the findings chapter of this dissertation.

Against the purpose of **Study I**, and since the ADAD IN and UT do not include data related to the spatial and material environment, a decision was made to complement the register data with a survey on environmental characteristics. The supplementing survey was sent to every department head (n = 91) at a Swedish special youth home and based on an initial literature review (Nolbeck & Thodelius, 2019)⁴². The aim of the survey was to map the characteristics of the spatial and material environment at the ward level, drawing on the underlying assumption that spatial factors can influence activities and rehabilitation efforts, as well as enable criminal activity of the youths under care: questions important to the overall aim of the dissertation. The survey was developed based on the initial review, and thus included variables that had been proven important through previous research. However, variables identified as crucial in previous research, albeit not yet investigated, were also included. This was done because, to our knowledge, no previous study on the care environment of special youth homes had been conducted. But also, as our review revealed, care environments for children and youths, especially

⁴² The survey and operationalization of variables for study I are described in detail in the article.

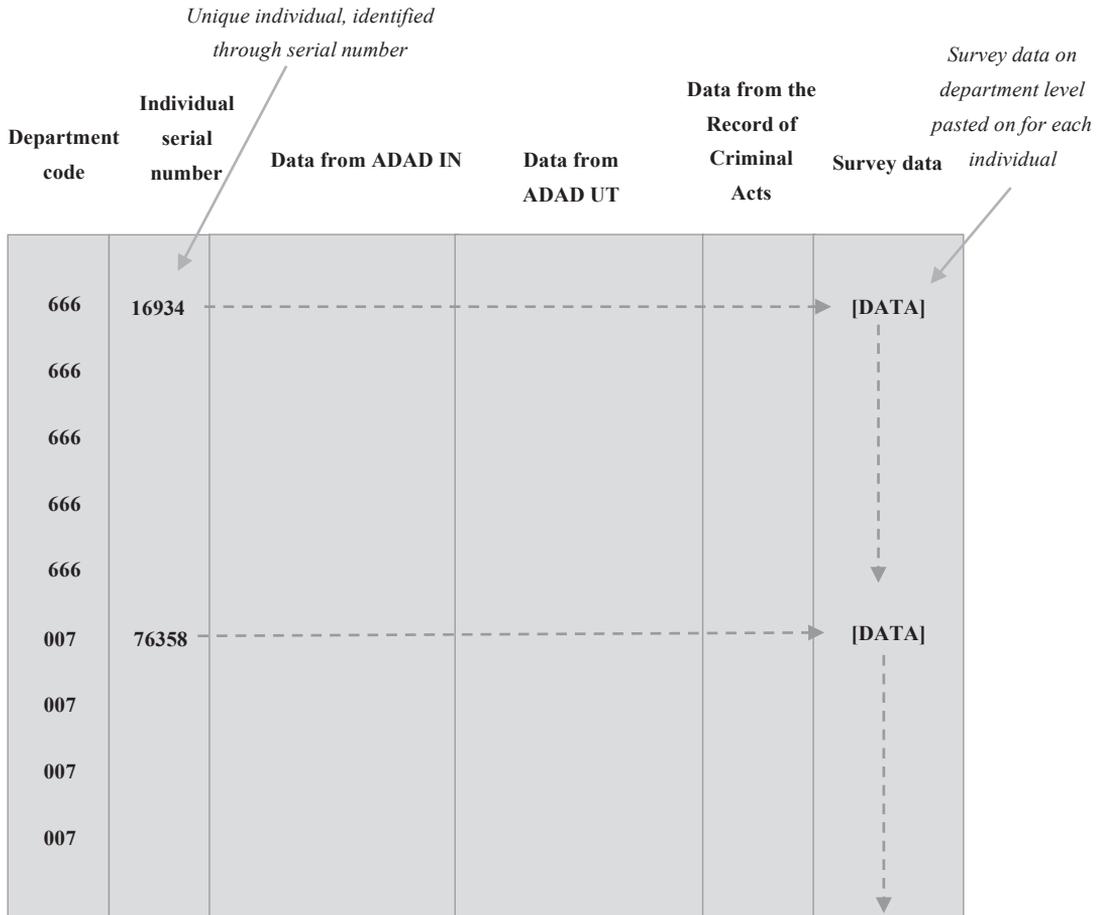
institutional care environments, has not been researched to the same extent as care environments for adults.

The survey, which was web-based, consisted of 44 questions, of which 36 were multiple-choice questions and 8 consisted of open-ended questions where the respondent could make clarifications, add descriptions of the environment, or insert additional information. The survey included background questions, questions on the youths' private bedrooms, and questions on the spaces for coercive means related to seclusion and private care. It also included questions on spatial solutions facilitating and enabling observation and surveillance, questions on common areas, and questions on spaces for activities and possibilities for outdoor activities. The survey was administered from March 27, 2020, to April 24, 2020, and had a response rate of 39.6%, in line with what is considered acceptable for web-based surveys (Baruch, 1999; Baruch & Holtom, 2008). Two reminders were sent out during the survey period to respondents who had not yet answered.

For study I, the inclusion criteria were set to answer the survey, due to the aim of the study. To create a new population based on the inclusion criteria, individual data from the registers were pasted together with the survey data as follows. ADAD IN and UT data were identified for all young people who had been placed in each ward during the current period, using the individuals' unique serial numbers. Subsequently, any data at the individual level from the Record of Criminal Acts from Brå were identified. Individuals without serial numbers were excluded. The data for ADAD IN and UT and Brå were pasted together for each individual, using Excel. Thereafter, since the survey data was at the department level, data for each department were copied and pasted on the data line for each individual from the respective department, using Excel (see Figure 1). Finally, the complete dataset for the new population, based on the inclusion criteria, was imported into SPSS Statistical Package for the Social Sciences, where the data was analyzed. Ultimately, 18 wards and 1,859 youths were included in the study. The codes for 16 wards could not be verified from the authorities, and they were subsequently excluded. Youths still enrolled or re-enrolled at any special youth home at the point of data request were excluded for ethical reasons.

Figure 1.

Overview of Procedure for Creating New Population, Study I.



THE QUALITATIVE STUDIES

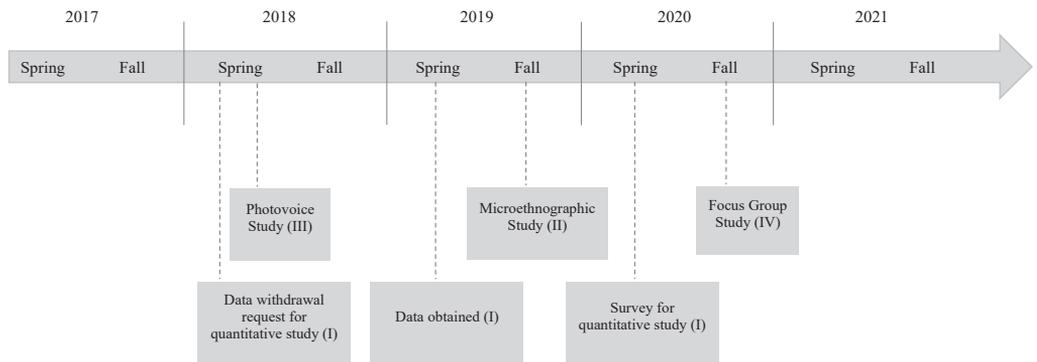
Below will first be outlined the context, and thereafter the method and methodology of the qualitative studies (II–IV).

OUTLINE OF CONTEXT

The qualitative and ethnographic studies were conducted at three different special youth homes located in rural areas a short distance from larger cities and at geographically different locations. One of the youth homes, Siljegärde, was present in all three studies, while Viskansby was present in two (study II and IV) and Ottarryd in one (study III) of the studies. This means that while Ottarryd was visited under the limited period of data collection—for in chronological sense—the first study conducted (III), Siljegärde, and Viskansby were returned to over the years 2018–2020. For an overview of the data collection process, see Figure 2.

Figure 2.

An Overview of the Data Collection Process



Ottarryd and Viskansby are both special youth homes for boys. However, while Viskansby performs care according to the Care of Young Persons Act for boys up to 15 years⁴³, Ottarryd both performs care and enforces punishment according to the Law on Young Offenders for boys from 16 years. Siljegärde is a youth home for girls aged 14 years and above. All three have wards intended for acute admissions, assessments, and treatment. At Ottarryd, data

⁴³ During the time for data collection for study II and IV, Viskansby also had one ward for boys 16 years and above.

collection was conducted at two wards (one assessment and one treatment ward), while data collection at Viskansby and Siljegärde implied data collection including staff and youths from several wards. This means that I visited different wards, the school, and administrative buildings at both Viskansby and Siljegärde.

When entering the area of any of the youth homes, you pass gates posted with signs detailing the rules and prohibitions. High fences with surveillance cameras surround some of the wards, while others have fewer directly obvious spatial institutional markers. However, the three youth homes differ in spatial design and surrounding environment, representing different historical periods in building design and architecture. They also differ in terms of proximity to nature, as well as the youth's opportunity to take part in outdoor environments. At all three homes, youths had restricted access to outside areas, depending on the ward in which they were enrolled and the outcome of their individual risk assessment.

The interiors of the wards of the youth homes differed regarding decoration, but all were sparsely furnished. Ottarryd and Viskansby, which housed boys, were more sparingly decorated, while at the girls' youth home Siljegärde, the staff had tried to create a warmer and softer feeling with the help of textile furnishings (such as sound absorbers), and pastel colors. For all three youth homes, potentially dangerous objects were removed, such as ordinary cutlery, flowerpots, glass, and metal objects. The furniture was usually fixed to the floor or the wall, and bullet-proofed window glass and security doors were accessed by staff through keys, tags, and codes surrounding the wards. To enter or leave the wards, you must be preapproved and given a tag, a security code, and an alarm phone. Regarding school, the youths at Viskansby and Siljegärde normally went to school at other buildings in the institutional area, (i.e., they left the ward on these occasions), however generally escorted by staff. About the two departments from Ottarryd that were included, school activities were carried out at the wards in general. Due to ethical considerations, no further detailed description regarding the spatial and material environment of the three youth homes will be presented.

METHOD AND METHODOLOGY OF QUALITATIVE STUDIES

For **Study II**, *microethnography* was chosen. The methodology is considered especially suitable when studying social interactions in everyday situations in specific settings, involving their 'sociomaterial surround' (Le Baron, 2006, p. 2). The methodology implies studying patterns of interactions in their spatial

and social contexts for a limited period of time (Streeck & Mehus, 2005), viewing social activities, spaces, and objects as co-occurring and interrelated (Le Baron, 2006). This could be argued for in relation to the concept of sociomateriality, as described further above. The works of Erving Goffman have been a source of inspiration for the development of the methodology (Streeck & Mehus, 2005). In Study II, the fieldwork entailed participant observation and ethnographic interviews (Angrosino, 2007; Atkinson, 2007; Roper & Shapira, 2000). Participant observation aims to capture the complexity of situations and extend the understanding of social interactions (Nässén, 2013). The focus is not only on what people do but also on what people say they do, implying the importance of the social, cultural, and historical context as well as the spatial and material surroundings (Dellenborg, 2013b). Often, in microethnography, video recording is used as a complementary data source (Streeck & Mehus, 2005). Due to ethical reasons this was not possible in the context of the special youth home.

Data were collected during 60 hours of fieldwork in August and September 2019, with time evenly distributed between Siljegärde and Viskansby, and with a continuous amount of time of on average 9 hours each day of field work. At Siljegärde, observations were carried out in one treatment ward, while at Viskansby, in two treatment wards. Moreover, observations were carried out in relation to other activities outside the wards, in the institutional area, such as outdoors, in the school and in the sports area. While on site, I undertook the overt observer-as-participant role, further described below. The approach allowed for taking notes during the fieldwork. However, sometimes, the notetaking would have disturbed the social interactions observed, why notes on these occasions were taken after, yet in proximity to the observations made. In ethnographic methodology, analysis is not seen as separate from data production but as a simultaneous activity. This means that the creation of field notes is also viewed as involving an interpretation. This emphasizes the importance of reflexivity (Atkinson, 2007), which is described below.

Ethnographic interviews were conducted as part of the fieldwork and aimed to follow up observations made to deepen understanding. The interviews were conducted when the need for clarification arose, and when practical possible. They were audio recorded or documented through note taking. The handwritten field notes were written up immediately after the fieldwork. During the analysis process, I listened to the audio recorded interviews and

read through the notes from the interviews that were not recorded. Field notes, as well as citations from interviews, were translated into English.

For **study III**, *Photovoice* was chosen. Photovoice encompasses a co-participatory actor-oriented research methodology especially suitable for research with vulnerable groups, and when researching abstract phenomena (Sitvast et al., 2008). Photovoice is commonly defined as a visual ethnographic methodology (Sutton-Brown, 2014). The methodology implicates that the respondents are first given cameras to photograph various aspects of their surrounding environment, where the photos are used as the starting point in the follow up by in-depth interviews (Kvale, 2009; Novek et al., 2012; Walton et al., 2012; Wang & Burris, 1997). The choice of Photovoice was justified, apart from the above-mentioned, since it enables the respondents to verbalise their experiences and emotions of environmental and spatial aspects (Sitvast et al., 2008). Pilot interviews were conducted at one special youth home prior to the data collection of Study III to test the method in the setting of the special youth homes. The results from the pilot study are published elsewhere (see James & Olausson, 2018), and thus not included in this thesis. The youths agreeing to participate were asked to take photos of various aspects of their surrounding environment that they associated with any emotion borrowing a polaroid camera.

The photographing was followed up with in-depth interviews. For safety requirements from the head of the wards, generally, two researchers were present during the interviews (see section 'Ethical considerations' below). The interview used the photos as the starting point and began with an open-ended introductory question: 'Can you tell me why you took this/these photos.' My position as an interviewer was comprised of an open 'not knowing position', attempting to reveal the meaning of the phenomenon to the youth (Dahlberg et al., 2008). In practice, this meant that the young people controlled the interview in such a way that what they wanted to talk about based on the photos was also what became central to the interview. My task as an interviewer thus consisted of being compliant and attentive, asking follow-up questions in relation to the phenomenon care environment, and trying to understand the youth's lived experiences.

The interviews were recorded and transcribed verbatim. The transcripts were made both by me personally (seven interviews), and by a company specializing in the task (seven interviews). Exact wordings, pauses, and sounds such as 'hm' and 'ah', were transcribed, as when the interviewee and interviewees interrupted each other, or spoke at the same time. In the few cases where it was difficult to hear what was said on the audio recording, this was noted both by

me and by the transcription company. As for the interviews transcribed by the company, I afterwards went through all the transcripts while listening to the recorded interviews. This meant that in individual cases I could fill in where the company did not hear what was said, but also that I could correct mistakes that the company committed, as they naturally did not have the specific knowledge of institutional care required to correctly 'decode' context-dependent terms and concepts. This procedure thus helped to reduce the risk of bias and resulted in me listening almost as many times to the recorded interviews that I transcribed myself as to those that I had the company to transcribe. Originally, Photovoice aims to give voice to groups that would not otherwise speak, and to enable advocacy and democratic participation in society. This is done by presenting suggestions for change to decision makers on how the circumstances can be improved for the group(s) involved in the study (Wang & Burris, 1997; Wang & Redwood-Jones, 2001). However, this was not the purpose of the present study; rather, the method was used solely for research purposes.

For **Study IV**, data was collected through three *focus group discussions* (FGDs) with staff member participants. The choice of focus group discussions as a data collection method was because it enables participants to interact in a discussion considering a specific topic of interest, making the group dynamics an important and crucial feature (Dahlin-Ivanoff & Holmgren, 2017). In striving to access people's knowledge, attitudes, or experiences and revealing group norms of a certain phenomenon, FGD is especially suitable. The method can facilitate expressions that would not have been uttered in a one-to-one interview session and is especially suitable when using open-ended interview questions (Kitzinger, 1994). In FGDs, the researcher takes on the role of facilitator of a group discussion rather than interviewer (Watts & Ebbutt, 1987). The facilitator must adopt a responsive and alert approach, since some people may have difficulty raising their voices in a group. In the present study, this was strengthened by the fact that two researchers were present during each interview: one who facilitated the group discussion (me in all three FGDs) and one who had the role to observe, jotting down notes and catch-up things missed out on by the facilitator (one of my supervisors) (Watts & Ebbutt, 1987).

To try out the discussion questions, two pilot FGDs were conducted with staff from two other special youth homes prior to data collection. After the pilot study, some adjustments were made, considering discussion questions, and the decision to introduce extracts from previously conducted interviews with youths at special youth homes, within the above-mentioned study III, as facilitators to start the discussions. The two interview extracts consisted of transcribed interview text (one page each), chosen to illustrate different

experiences of being cared for at a special youth home and with spatial and material aspects central to the experience. The interview extracts were read silently by the participants in the initial phase of the FGD, after an initial short presentation of the participants and researchers. Thereafter, the researchers asked the participants for general reflections, which naturally opened for the discussion, engaging the participants in the collective activity of reflecting together over what they had read (Kitzinger, 1994). The facilitator followed the discussion and awaited natural pauses in the conversation, where an open-ended question could be interposed (Watts & Ebbutt, 1987). The open-ended questions concerned the participants' understanding of the phenomenon of 'care environment', their experience of the care environment, supportive, and hindering factors for their work with the young people, and the type of care environment that they believe young people in special youth homes need. The questions are presented in more detail in the article of Study IV.

An additional fourth focus group discussion was planned but had to be canceled because of the prevailing Covid-19 pandemic. Since the material from the first three was extensive and rich, and given the difficulties of gaining access due to the pandemic, it was decided that no further focus group discussion would be held.

HANDLING OF PRE-UNDERSTANDING AND RESEARCHER POSITION

In the methodology of ethnography, and in participatory observational research, the researcher uses oneself as a tool. This could also be said to be true in other qualitative research. This means that awareness of one's own pre-understanding, as well as practicing reflexivity, are important parts of the research process (Dellenborg, 2013a; Nässén, 2013). However, I would argue that this is also important in research that can be referred to the quantitative paradigm. Reflecting on and being aware of one's prior knowledge and any preconceived notions should not be reserved for qualitative research, but rather characterize and be a natural part of all research.

Which research questions you choose to formulate, how you design your quantitative study, and variables you finally choose can be influenced by the pre-understanding, experience, and what interests you have as a researcher. Pre-understanding can also affect what conclusions you draw and how you choose to present your empirical data.

In the work with **Study I**, as well as in the handling of other register data, I have had close supervision and support in both design, handling of data and in the interpretation of the findings. In the handling of the other register data for the dissertation, I have also had the support of a statistician for certain parts. Both my supervisor and the statistician have a different background and experience from me, which has likely reduced the risk that my pre-understanding has affected the interpretations of findings.

In **Study II**, I handled my pre-understanding by writing down and by audio recording of my own reflections before and after each day of fieldwork. The recordings were made using the mobile phone's recording function, usually when I drove to and from the special youth home. The recorded reflections had a spontaneous character and aimed to make me aware of my own preunderstanding. Listening or reading through the reflections afterwards made me acknowledge my taken-for-granted or unreflected statements. But the procedure also involved a reflexive approach to the field, the people I met, and the data that was produced, which may have deepened the understanding of the field and the subject under study.

Study III was, in a chronological sense, the first study conducted. Although I had some knowledge of research before, through previously working for a short time on another research project, I had limited experience of fieldwork, handling of reflexivity and pre-understanding. My main supervisor advised me to write down my pre-understanding before I started working on Study III. This was good advice and resulted in two pages of densely written text. When I now go back and read what I wrote then, I can state that writing down my pre-understanding at such an early stage (only a few months into my doctoral education) made me bring it with me and reflect on it through the work with the studies. This early note, along with the recordings and other notes over the years, has been a valuable source for me to return to, to maintain my awareness of my own pre-understanding.

Study IV was perhaps the biggest challenge for me, in one way, when it came to managing pre-understanding. This is since I have previous experience of working with youths, and specifically as a treatment assistant in a special youth home. However, in the same way as in Study III, we were two researchers on site to conduct the focus group discussions. Even though I had the facilitator role in all of them, the presence of another researcher probably reduced the risk of any preconceived and unreflected conclusions based on my previous experiences. In the same way as in previous studies, I wrote small reflective notes here as well, which helped to maintain my awareness.

Apart from pre-understanding, reflections regarding the researcher's position are of interest when conducting field work or doing other qualitative research where interaction with other people is at the core of the research process. In ethnographic fieldwork, the researcher can take on different roles and adopt various degrees of openness regarding the aim of their presence, depending on the phenomenon being studied, and considering what is practically and ethically possible in the field. While on-site in both studies II and III, I undertook what could be named an overt observer-as-participant role (Atkinson, 2007). This role means that the researcher participates in daily activities, being open to the intended purpose of their presence, not trying to pass as a natural group member (Atkinson, 2007). In such a closed environment as a special youth home, where each visitor needs to identify themselves and pass a series of routines and spaces to finally (hopefully) be accepted, it is difficult, if not impossible, to assume any role other than the one mentioned. In addition, there are ethical aspects to the researcher's position and role, as for example the fact that both oral and written consent must be obtained from the people who participate, which makes a more hidden research role impossible.

In relation to Study IV, my fellow researchers and I were generally only present at the institution at the time we conducted the focus group discussions, which meant that we arrived a little while before and left shortly after. In one case, we were invited by the head of the institution to have lunch in the canteen after the focus group, which we accepted. In other respects, this study differs from ethnographic studies (II and III) in that the time spent in the field was much shorter. For the staff we met, it was clear what our role was: we were visiting researchers there to carry out a focus group. When conducting the study, neither my fellow researchers nor I participated in any activities at the institution.

ON SELECTION AND ACCESS TO THE FIELD— OR WHAT ACTUALLY HAPPENED

This thesis was part of a larger research project, 2017–2019. When the larger research project started in 2017, information, and the question of participation went out to the heads of all special youth homes in Sweden through the authorities' headquarters. Ten institutions showed interest in participating in some way in the research project. These ten then formed the basis from which the selections to the qualitative and ethnographic studies included in this thesis were made.

Although the intentions of a research project are—of course—that the research process should flow smoothly in a linear process, this is seldom the case. Reality comes, so to speak, often in between. Conducting research means being flexible, responsive, and reflective (Dellenborg, 2013b; Nässén, 2013). For me, this has been consistent throughout my work with the studies, without exception. Perhaps it is easy to think in terms of the importance of adaptation and flexibility in relation to qualitative research, where interaction with individuals, and the relationship that needs to be established to enable them to share their experiences is fundamental for research to be conducted at all. However, during the work with this dissertation, it has been clear that even processes such as the implementation of a web survey or request for withdrawal of large quantities of registry data are greatly affected by the relationship with other people and the ability to be flexible and adapt.

Even though the people I have met have often been welcoming and generous both with their time and with their experiences, field work means literally getting right into people's everyday lives and work, despite what field you enter. To perform fieldwork in the field of institutional youth care means a constant adaption and a constant reflexive sensitivity as a researcher. Special youth homes constitute a field characterized by rapid turns in terms of decisions about visits, increased security, and additional restrictions. This meant that it occurred that youth homes that first showed interest in participating later chose to withdraw for various reasons. For example, according to the head of one of the wards at an institution who initially showed interest in participating, there were 'riots among the youths'. According to the manager, the unstable situation, together with understaffing, meant that I could not return to that specific youth home⁴⁴.

Despite the obstacles that arose from time to time, the selection for qualitative studies can be labeled in terms of purposeful sampling, aiming for variety (Polit & Beck, 2016). This was because among the ten special youth homes that showed interest in the larger research project, there was a variation regarding the buildings' design and year of construction, geographical location, assignment (care according to TCYPA and/or execution of sentence according to TLYO), boy, or girl institution and/or wards, and age of the youths. This made it possible to select youth homes that represented a variation, for a first request for participation in the, in chronological sense, first study (III). Hence, data collection for study III was conducted at eight different wards at the special youth homes, Siljegårde, and Ottarryd, from February 28 through June 11, 2018.

When Study II was to be carried out, it seemed natural to return with a request to Siljegärde and Ottarryd, due to the above outlined aim for variety. However, Ottarryd chose not to participate, while Siljegärde accepted. After that, the question went to Viskansby, which accepted almost immediately⁴⁵. The reason Viskansby was asked was that they had shown a recurring interest in the larger research project.

In addition, at Viskansby worked one person, who later proved crucial to my ability to gain access to not only Viskansby, but also to other people who could share with me knowledge and give me insight into the organization and management of the special youth homes. She was head of a department at Viskansby and had many years of experience of the special youth homes, which meant that she had good insight into the security work, intentions, and ongoing work with the physical environment, as well as the staff and young people's conditions. People who prove to play a key role in giving researchers access to the field and facilitating attendance and participation constitute important gatekeepers (McFadyen & Rankin, 2016).

Regarding Study IV, Siljegärde, and Viskansby had already shown interest in participating in further studies, why it again felt natural to return to the heads of these institutions with a request.

⁴⁴ This special youth home is not included in any of the studies in this thesis.

⁴⁵ In the article of study II, Siljegärde is named 'the girls' institution', while Viskansby is referred to as 'the boys' institution'.

THE YOUTHS AND THE STAFF IN THE STUDIES

The registry data material used in **study I**, and in the complementary analyzes presented in the framework of the thesis, constitute a total population of youths (N = 8671) enrolled at any special youth home from January 1, 2006, to December 31, 2016. The decision to request registry data for the total population of young people admitted to special youth homes was made in light of the lack of follow-up studies and official statistics. However, it was also due to the ambition to investigate possible associations between characteristics in the environment (through the survey) and outcomes related to previous research (e.g., criminal activity, as used in Study I). Making a total survey is often difficult, but was, in this case, possible, as young people admitted to special youth homes constitute a limited population.

In the qualitative studies, 32 youths and 31 staff members participated. The youths were between the ages of 14 and 19 and constituted 19 boys and 13 girls. The youths included in **Study II** were between the ages of 14 and 19 years, and constituted of five girls at Siljegärde, and 13 boys at Viskansby. The staff members consisted of eight treatment assistants at Viskansby, and six treatment assistants at Siljegärde. In **Study III**, 14 youths aged 15–19 years consented to take part in the study. From Ottarryd, six boys participated, and from Siljegärde, eight girls participated. A total of 17 staff members: 11 women and six men (13 treatment assistants and four teachers) participated in **Study IV**. The staff members had worked at the current special youth home between 2 and 25 years.

ANALYSIS

The analysis for **Study I** was conducted in two steps. First, descriptive analysis of the population at admission and discharge, the institutional environment, and legal proceedings were conducted. Second, *multiple linear regression analysis* was performed (Montgomery et al., 2012) to describe and explain potential associations between the individual, the environment, and criminal activity during the period of care at a special youth home. ‘Criminal activity during the care period’ was chosen as the dependent variable and constructed as follows. From ADAD UT, the variables ‘positive drug test (not at admission)⁴⁶,’ ‘physical violence against staff,’ and ‘physical violence against other youths’ were chosen and merged. These items were chosen because they comply with the legal definition of criminal offenses outside the special youth home and with the aim of estimating the potential onset and maintenance of criminal activity during the care period (SFS1962:700, 1962).

From ADAD IN, the independent variables were chosen for the regression analysis as follows. Age, gender, age at alcohol debut, smoking, parents living together, and sentenced according to the Law on Young Offenders were chosen from the ADAD IN based on previous research on youths with delinquent behavior (Nordahl et al., 2007). To evaluate the burden of internalized and externalized psychosocial problems, two indices were constructed. Previous research shows that youths’ behavioral problems and criminal activity often are the result of, as well as giving rise to, several interacting factors, including both internalized and externalized psychosocial problems and outward behaviors (Bonta & Andrews, 2007; Nordahl et al., 2007). The index of internalized psychosocial problems ($\alpha = .874$) was created from the ADAD IN variables ‘sleeping problems,’ ‘frequent headaches,’ ‘frequent stomach-aches,’ ‘lack of self-confidence,’ ‘feelings of not belonging,’ ‘difficulty expressing emotions,’ and ‘afraid of hurting oneself physically.’ The index of externalized psychosocial problems ($\alpha = .888$) was created from the ADAD IN variables ‘afraid of hurting someone else physically’ and ‘often lacking impulse control when angry.’

From the ADAD UT question ‘Have the youth experienced any of the following,’ the items ‘self-harm,’ ‘solitary confinement⁴⁷,’ ‘escaping,’ ‘temporary placement at another ward,’ ‘alcohol use,’ and ‘use of narcotics’

⁴⁶ When enrolled at a special youth home, the youth is examined, and must submit several drug tests. This question in ADAD UT does not include these first drug tests but refers to any positive drug tests during the care period.

⁴⁷ The term solitary confinement in study I refers to the coercive mean seclusion.

were included. These variables were chosen as indicators of norm-breaking and antisocial behavior in relation to previous research regarding youths (for example, Nordahl et al. 2007). The variables ‘discharged to’ and ‘mean age at discharge’, from ADAD UT were chosen against previous research on the outcome of institutional care of youths (Vinnerljung & Sallnäs, 2008; Vogel, 2012).

Regarding variables related to spatial factors and the care environment, the following variables were chosen. The ADAD UT variables, ‘Have you felt at home at the ward?’ and ‘Have you felt at home in your private bedroom?’, were chosen as predictors of the youths’ experiences of the environment, related to previous research and the importance of a sense of ‘at homeness’ for the experience of care and treatment (Saarnio et al., 2019; Öhlén et al., 2014). Based on the initial review for study I (see Nolbeck & Thodelius, 2019), variables related to spatial preconditions for control over comfort aspects of the youths’ bedrooms as well as observation and surveillance were obtained from the survey. To estimate the level of social interaction at the ward, the variable ‘social density’ was constructed based on previous research on associations between social density, crowding-related stress, and aggression (Evans, 2003; Ulrich et al., 2012). ‘Social density’ was computed by dividing the number of places at the ward by the number of rooms available to the youths at the ward. To clarify that the variable is estimated as the number of persons per room, and not calculated from information on square meters, as would be the case with spatial density, the variable was named ‘social density’.

The variables related to spatial conditions were also chosen with a foundation in findings from study III included in this thesis, and due to Goffman’s notion of decorous behavior and the theoretical concept of sociomateriality. In the concepts of decorous behavior and sociomateriality, social, and spatial aspects are intertwined in such a way that spatial and material factors influence social actions and interactions. Correspondingly, in study III, it was shown that the care environment is perceived as intertwined by the youths, and as affecting their identity. Based on research on contagious interactions pointing to the importance of length of placement, and Goffman’s notion of the total institution (Dodge et al., 2006; Goffman, 1961), the variable ‘time spent at the ward’ was computed by subtracting the ADAD IN variable ‘age at admission’ from the ADAD UT variable ‘age at discharge.’ In addition to the described variables, the prevalence of legal proceedings was reported for the sample, because of limited official statistics.

For the analysis of the **additional registry data**, the same variables were chosen as in Study I. However, variables were also added from the National

Board of Health and Welfare in Sweden and the Swedish National Council for Crime Prevention. From the Inpatient Care Registry, the variables ‘main diagnose’ and ‘gender’ were added, and from the Causes of Death Register, the variables ‘age at death,’ ‘gender,’ ‘main cause of death,’ and ‘place of death’ were included. From the Record of Criminal Acts, the same variables regarding legal proceedings as in study I were used for the entire population.

In Study II, a *theory-integrated analysis* was chosen. Kenneth Burke’s (1897–1993) concept of ‘the dramatic pentad’ was used as an analytical tool to structure the data (Burke, 1969), and Goffman’s (1956) dramaturgical perspective was used to analyze, interpret, and theorize the findings. Specifically, Goffman’s concepts of ‘setting,’ ‘regions’ and ‘region behavior,’ ‘decorum’ (Goffman, 1956) and ‘primary and secondary adjustments’ (Goffman, 1961) were used. Burke claimed that all narratives involve five elements: scene, act, agent, agency, and purpose (Bowman, 2017; Burke, 1969). In the present study, the element ‘scene’ was the focus of interest, motivated by spaces and material objects belonging to the scene, according to Burke. A theory-integrated analysis process (Atkinson, 2007) was undertaken as follows: data (field notes and quotes from interviews) were transcribed and read repeatedly. Thereafter, Burke’s dramatic pentad was used to systematize and sort the ‘situations’ in the data, due to the five elements. A summary of the sorted situations was conducted, and finally the entire dataset of field notes, sorted situations, and the descriptive summary were read through repeatedly to distinguish ‘observer-identified’ theory integrated themes (Lofland et al., 2006), drawing on Goffman’s work.

In Study III, a *phenomenological hermeneutical* (Lindseth & Norberg, 2004) analysis method founded on the interpretation theory of Ricoeur (1976) was chosen. Through this process, the interpreter strives to reveal the meaning of the text, implicating a dialectic movement between the whole and the parts in the hermeneutic circle. According to Ricoeur (1976), the process of interpretation involves a dialectical movement between surface and in-depth interpretation. The analysis process began with repeated reading of the transcribed interview extracts, trying to grasp the text and formulate the first naive understanding. Thereafter, structural analyses were performed to critically examine, verify, or falsify the naive understanding, which was adjusted marginally. The structured process implies identifying meaning units and categorizing and abstracting them into subthemes and themes. Lastly, a comprehensive understanding of the phenomenon of interest was formulated (Lindseth & Norberg, 2004). In the present study, three structural analyses

were performed, however the first, conducted on the photos, is presented in the article as part of the second structural analysis.

For Study IV, *thematic analysis* according to Braun and Clarke (2006) was used. The aim of this method is to identify and analyze patterns of meanings. An inductive data-driven, primarily semantic thematic analysis was performed, meaning that the themes are strongly linked to empiricism with a primary focus on the explicit meanings expressed. However, a semantic thematic analysis also involves interpretation and theorizing (Braun & Clarke, 2006). The analysis process followed the six steps from Braun and Clarke (2006), however, not constituting as a linear process but rather as a moving back and forth between the whole to the parts and back to the whole. The analysis process is described in detail in the article of Study IV.

Finally, I made the choice to carry out a **synthesis** in addition to the findings from the four studies and the complementary registry data. The procedure for the synthesis can be described as a hermeneutic analysis of the data that was included in the studies, the study articles, and the reflection notes made in connection with the various studies. By relating dialectically between the different parts and the whole, I was able to ‘rediscover’ the material again, see things that recurred throughout the material and gain a deepened understanding of the phenomenon (Morse, 2016; skott, 2013). The purpose was not only to identify themes that are consistent in the four studies, but also to identify differences and contrast different findings against each other to achieve a nuanced overall picture of the phenomenon of the care environment in special youth homes (Ragin, 2014).

ETHICAL CONSIDERATIONS

In all research, ethical considerations are important. When it comes to research with young people in vulnerable positions, such as under involuntary institutional compulsory care, considerations regarding ethics are particularly important (Källström & Andersson Bruck, 2017).

Due to the lack of research on the care environment in special youth homes, studying the environment and the young people's lived experiences of it is therefore important, both due to ethical principles of research with children and young people, and due to children's rights, emphasizing the importance of letting children and young people raise their voices regarding issues that concern them (Källström & Andersson Bruck, 2017; United Nations Human Rights Office of the High Commissioner, 1989).

Furthermore, when it comes to research on the phenomenon of the care environment, specifically in the context of the institutional care of young people, it is important that the research is conducted in place. The care environment needs to be experienced with the body and the senses of the researcher and with the young people. This underlines the importance of this research being done *together with*, and not *on*, the young people (Källström & Andersson Bruck, 2017). In the present study, this was facilitated by the research methods used, as discussed below.

Within the framework of the previously mentioned larger research project, an ethical codex was developed based on the principles of children's rights and research ethics (Andersson et al., 2021; The World Medical Association, 1964). The purpose of codex was to serve as a guide to identify and prevent potential ethical dilemmas in the research process, but also as an action plan for dealing with ethical and rights-related situations and issues. The ethical codex has been published elsewhere (Nolbeck et al., 2019).

The Ethical Review Board in Gothenburg approved **Study I**, on February 28, 2018 (ID No. 028–18). The population of youths enrolled in a special youth home from January 1, 2006, to December 31, 2016, was identified by the Swedish National Board of Institutional Care. Individuals who, at the point of data request, were still enrolled and cared for at a special youth home were excluded due to reasons of integrity and ethics, and in line with decisions from the Ethical Review Board. After identifying, the population was handed over to the National Board of Health and Welfare, who identified the youths from the population within the Inpatient Registry and the Causes of Death Register. Identification was made using the individuals' social security numbers. In the

same way, young people from the population who had faced a legal proceeding were identified within the Record of Criminal Acts by the Swedish National Council for Crime Prevention. All data requested concerned the period January 1, 2006, to December 31, 2016. Before being handed over to the researchers, all data were anonymized by the registrars, which means that the researchers had never possessed knowledge of, nor handled, social security numbers. Instead, the serial number assigned to each individual by the Swedish National Board of Institutional Care at the time of conducting the first enrollment interview, ADAD IN, was used. All data analysis was done by me, together with one of my supervisors with specific competence in statistical analyses and quantitative methodology. In practice, this meant that only I had access to the data material. For the analyses of the registry material published in the thesis, contact was made with statistics consultants at the University of Gothenburg. However, the data were never handed over to them; instead, the data sets were shown to them during the meetings, when needed. On these occasions, only the data relating to any questions discussed were shown.

The survey in study I was sent out via the Sunet Survey system used by the University of Gothenburg, with accompanying cover letter, and the research information, to the email addresses of all department heads at the special youth homes in Sweden. The e-mail addresses were identified through contact with the regional offices, which in some cases also helped to spread information about the survey. However, as it was difficult to access a complete mailing list, the head of the special youth home was contacted in cases where there was no information about email addresses to the department heads of an institution. The information in the web-based survey clarified that answering the survey meant that you agreed to participate. The information also, apart from information on the research study, contained an offer of contact in the case of questions. The information also stated that two reminders would be sent out.

The qualitative and ethnographic **Studies II–IV** were approved by the Ethical Review Board in Gothenburg, March 7, 2017, (ID No. 1158–16). For these studies, oral, and written consents to conduct research at the selected special youth homes were collected from the head of the special youth homes prior to data collection for each of the studies. For Study II, consent from the ward managers was then obtained, prior to data collection. Thereafter, the youths and the staff were informed orally and in writing. This was done through the ward managers passing on information from the researchers. For this study, to meet the needs of youths with intellectual disabilities at one of the wards, clear, and comprehensible written information, together with a photo of me, was presented prior to data collection. While on site for data collection for the qualitative studies, youths were invited to the study by the researcher(s),

providing oral information. This meant information about the research project, including the opportunity to ask questions. The voluntariness and right to withdraw at any point without needing to state any reason, and without facing any consequences was stated, and they were given time to consider the invitation.

For the youths who agreed to participate, written consent was obtained in studies II–III. In Study II, oral consent was obtained from the staff members who agreed to take part in the research. In Study IV, the staff members were informed orally, through the ward managers passing on information from the researchers. The staff members who showed interest in participating in the research were given information about the date and time of the focus group discussion by the researchers' contact person at each special youth home (a head of a ward at Siljegärde, and a treatment assistant at Viskansby). While on-site, the staff members were once again invited and provided oral information, together with the opportunity to ask questions and time to consider the invitation, stressing the voluntariness and right to withdraw. Thereafter, written consent was obtained from the staff members who agreed to participate. For youths under the age of 15 years, written consent was obtained from their parents or guardians. Ultimately, this concerned one (1) youth included in Study II. In Study II, one girl and one boy who did not want to participate were excluded, together with three boys under the age of 15 whose parents or guardians could not be reached to provide consent. In Study IV, one staff member who had announced in advance that he wanted to participate canceled last minute. The reason for this was that he could not leave the ward because of understaffing. No data were collected for youths or staff members who did not participate.

The choice of methods for data collection in the qualitative studies was made regarding research ethics principles and children's rights. Photovoice is a method that is particularly suitable when researching vulnerable groups (Sitvast et al., 2008; Walton et al., 2012; Wang & Redwood-Jones, 2001). The fact that the young people in Study III were given the opportunity to take photographs meant that they were actively involved in the research: it was what they themselves considered important that became the focus of the interview (Walton et al., 2012; Wang & Redwood-Jones, 2001). The use of photos has also been found to facilitate the opportunity for children and young people to express opinions, thoughts, and experiences related to abstract phenomena, such as the care environment (Sitvast et al., 2008; Wang & Burris, 1997). Further, ethnography, generally, constitutes a methodology that implies reflexivity and ethical awareness of the researcher position, and hence these constituted critical issues in both studies II and III.

In study II, I conducted the field work on my own, while in studies III and IV, one more researcher (one of my supervisors) was present during the interviews and focus group discussions. In Study III, this was a requirement from the staff at both Ottaryd and Siljegärde, for security reasons. This meant that ethical reflections related to the interview situation constituted critical issues in both the planning and conduct of the interviews with the young people in Study III. For example, various power equalizing strategies were used, such as my fellow researcher and I placing ourselves on the floor while the youth sat on the bed or a chair. In addition, a lot of time was spent ‘hanging out’ with the young people in the department, playing cards and getting to know them, before the interviews were conducted.

All collected data within the research project were handled according to the General Data Protection Regulation (GDPR) (Official Journal of the European Union, 2016), and stored in a locked and fireproof safe deposit box at the Institute of Health and Care Sciences, Sahlgrenska Academy, University of Gothenburg. When writing and publishing results from the studies, careful ethical considerations were made, such as the anonymization of units, individuals, and situations. For example, fictitious names were used in Study II and Study IV, and in the thesis.

PART 6. FINDINGS

In this section, findings from the registry data material are first presented, followed by a brief presentation of results from each study. The synthesis is then presented through the main themes that have emerged in the form of headings.

FINDINGS FROM THE REGISTER DATA MATERIAL

To contextualize studies I–IV, the findings section will start with an overview of the findings from the registry population (N = 8671). First, general characteristics of the population will be outlined; thereafter, data on legal proceedings and visits to inpatient care per person, as well as number of deaths, will be reported. The reason for reporting this is that previous research on young people in institutional care shows that they have poorer general health, they have more often attempted, or succeeded in committing suicide, and they have commonly engaged in criminal activity or drugs (see for example, Pettersson, 2010, 2017; Vogel, 2012). As much as possible, comparisons will be made with the national statistics for young people in general.

GENERAL CHARACTERISTICS OF THE STUDY POPULATION

The median age at admission for the population (N = 8671⁴⁸) was 16 years (mean 15.82), with a range of 9–20 years (see Table 2). Of the registry population, 67.2% were boys and 32.8% girls. In comparison with the latest available (2020) general statistics from the Swedish National Board of Institutional Care, the gender distribution in the registry population shows a somewhat greater proportion of boys. However, the proportion of girls varied between 26–38.8% over time⁴⁹. Furthermore, about two-thirds of the registry population stated that their parents were divorced/not co-living. The latest available report of the ADAD IN results (2017) showed that the corresponding figure was 74% (The Swedish National Board of Institutional Care, 2017c).

⁴⁸ Note that missing range from 461–2635, with the lowest number missing for the variable ‘Age at enrolment’, and the greatest number for ‘Have you felt at home at the ward?’ (n = 2635) and ‘Have you felt at home in your private bedroom?’ (n = 2631)

⁴⁹ Calculation of the proportion of girls admitted to SiS over time has been done manually on the basis of absolute figures on the gender distribution among youths admitted to special youth homes, in the authority’s annual reports for the years 2006–2020.

This indicates a somewhat skewed study population with respect to parental marital status. Moreover, on placement according to the law, a majority (70.7%) of the study population were placed according to the Care of Young Persons Act, §. 6 (immediate placement). This differed from the official statistics from the Swedish National Board of Institutional Care, where 49–51% were placed immediately (The Swedish National Board of Institutional Care, 2017b, 2020c).

Table 2. Descriptive characteristics of a total population of youths ($N = 8671$) admitted to special youth homes 2006–2016. Data from the Swedish National Board of Institutional Care.

Variable	% ^a
Gender distribution, M/F	67.2/32.8
Mean age at enrolment, years (median)	15.8 ^b (16)
Previously placed at other special youth home	13.3
Placement according to law section	
Unplanned/Acute (TCYPA §6)	70.7
Own destructive behavior (TCYPA §3)	16.4
Difficult home conditions (TCYPA §2)	0.9
Placement due to both §2 and §3	3
Voluntary placement (chap 4 §1 TSSA)	4
Sentence according to TLYO	5
Parents divorced/not co-living	67.1
Discharged to	
Other treatment institution	34.1
Parental home	30.5
Foster home	17.7
Other ^c	9.3
Mean age at discharge, years (median)	16.2 ^d (16)
Have you felt at home at the ward?	
Not at all/A little	23
Quite a lot/A lot	74.6
Have you felt at home in your private bedroom?	
Not at all/A little	35.6
Quite a lot/A lot	61.5

Note. TCYPA = The Care of Young Persons Act, TSSA = The Social Services Act, TLYO = The Law on Young Offenders. ^a Note that missing range from 461–2635, with the lowest number missing for the variable 'Age at enrollment', and the greatest number for 'Have you felt at home in the ward?' ($n = 2635$) and 'Have you felt at home in your private bedroom?' ($n = 2631$) ^b *Sd* 1.663. ^c Other refers to a special youth home, aftercare, independent living, relative, supported housing, psychiatric clinic, custody, or prison. For 6.3%, no data was available. ^d *SD* 1.719

Regarding re-enrollment to a special youth home, this applied to 13.3% of the total population⁵⁰. In the latest available report of the ADAD IN results (2017), there were no presented numbers of re-enrollment; however, information regarding previous placement in a ‘treatment institution’ was available, showing that 21% have been placed once, 16% have been placed twice and 29% have been placed three or more times (The Swedish National Board of Institutional Care, 2017c).

The mean age at discharge for the study population was 16.24 (median 16) years. Of the total population, 34% were discharged to another treatment institution, 30.5% to parents’ homes, and 17.7% to foster care. The latest available statistics showed, after manual calculation, an average discharge age of 16.8 years (The Swedish National Board of Institutional Care, 2020f). Information about where the young people have been discharged to is not available through official statistics.

Most of the study population (74.6%) stated that they felt at home at the ward, while 61.5% felt at home in their private bedroom. The latest available official statistics showed that 82% of young people stated that they have felt at home at the ward quite a lot or a lot, while fewer (70%) have felt at home in their private bedrooms. Girls have felt at home to a lesser extent than boys, and they have also felt less safe at the ward (The Swedish National Board of Institutional Care, 2020f).

⁵⁰ The analyses refer to ADAD IN 1, which means that information on whether the youth have re-enrolled after this first completion of the enrollment interview is missing.

CRIMINAL ACTIVITY, INPATIENT CARE VISITS, AND DEATHS

Of the total population of youths enrolled in a special youth home between 2006–2016, 69% (n = 6013)⁵¹ faced a legal proceeding under the period. Of the legal proceedings, 72.5% are attributed to boys, while 27.5% are attributed to girls (see Table 3). This is in line with previous research stating gender differences in criminal behavior generally, and among youths at special youth homes specifically (for example, Pettersson, 2017, 2021). A slightly greater proportion (15%) of the youths facing legal proceedings have been previously placed at another special youth home, as compared to the population in general (13.3%).

A total of 34,623 legal proceedings were attributed to youths facing legal proceedings, with a range of 1–63 crimes per person. There was a greater proportion of youths who committed several crimes (>10) that were discharged to the parental home than in the population in general. The most common was to commit one crime (49.9%), while a high number of crimes (range 10–63) was attributed to a minority of the youths (2.6%). Of the legal proceedings, 61.7% constituted verdicts, 29.5% constituted abstention from prosecution, and 8.9% constituted summary imposition of a fine. Of the *individuals* facing a legal proceeding, 71.8% got a verdict, while 19.7% got abstention from prosecution and 8.4% got a summary imposition of a fine. The data did not show if the legal proceeding was undertaken before placement at the special youth home, or after discharge.

⁵¹ Note that missing range from 35–1663, with the lowest number missing for the variable ‘Age at enrollment’, and the greatest number for the variables ‘Have you felt at home at the ward?’ (n = 1663) and ‘Have you felt at home in your private bedroom?’ (n = 1659).

Table 3.

Descriptive Characteristics of Youths Facing Legal Proceedings (n=6013), Youths Visiting Inpatient Care (n = 5516), and Deceased Youths (n = 222) Among the total Youth Population in Special Youth Homes 2006–2016. Data from the Swedish National Board of Institutional Care, the National Board on Health and Welfare, and the Swedish National Council for Crime Prevention.

Variable	Youths facing legal proceedings (N = 6013) %	Youths visiting inpatient care (N = 5516) %	Deceased youths (N = 222) %
Gender distribution, M/F	72.5/27.5	60.1/39.9	79.1/20.9
Mean age at enrollment, years (median)	16.1 ^a (16)	15.82 ^c (16)	16.79 (17) ^f
Previously placed at other special youth home	15	14.6	20.6
Placement according to law, section			
<i>Unplanned/acute (TCYPA, §6)</i>	68	69.1	69.4
<i>Own destructive behavior (TCYPA, §3)</i>	18.4	17.5	21.4
<i>Difficult home conditions (TCYPA, §2)</i>	0.7	1.1	1.5
<i>Placement due to both §2 and §3</i>	3	3.6	1.5
<i>Voluntary placement (TSSA, Chapter 4, §1)</i>	3.3	3.9	3.1
<i>Sentence according to TLJO</i>	6.5	4.8	2.6
Parents divorced/not co-living	68.3	72.5	69.4
Discharged to			
<i>Other treatment institution</i>	35.8	34.5	36
<i>Parental home</i>	32	31	27.4
<i>Foster home</i>	16.4	18.5	15.2
<i>Other^g</i>	9.7	6.4	21.3
Mean age at discharge, years (median)	16.5 ^b (16)	16.24 (16) ^j	17.11 (17)
Have you felt at home at the ward?			
<i>Not at all/A little</i>	21.4	22.2	22
<i>Quite a lot/A lot</i>	76.3	75.2	73.6
Have you felt at home in your private bedroom?			
<i>Not at all/A little</i>	35	36.7	39
<i>Quite a lot/A lot</i>	62.8	60.8	56.6

Note. TCYPA = The Care of Young Persons Act, TSSA = The Social Services Act. ^aNote that missing range from 35–1663, with the lowest number missing for the variable ‘age at enrollment’, and the greatest number for the variables ‘Have you felt at home in the ward?’ (n = 1663) and ‘Have you felt at home in your private bedroom?’ (n = 1659). ^bNote that missing range from 2422–3132, with the lowest number for the variable ‘age at enrollment’, and the greatest number for the variables ‘Have you felt at home in the ward?’ (n = 3132) and ‘Have you felt at home in your private bedroom?’ (n = 3131). ^cNote that missing range from 21–63 with the lowest number missing for the variable ‘age at enrollment’, and the greatest number for the variables ‘Have you felt at home in the ward?’ (n = 63) and ‘Have you felt at home in your private bedroom?’ (n = 63). ^dSd 1.592. ^eSd 1.682. ^fSd 1.738. ^gOther refers to either special youth home, aftercare, independent living, relative, supported housing, psychiatric clinic, custody, or prison. For 3–4.6% no data was available. ^hSd 1.649. ⁱSd 1.732. ^j1.731.

Moreover, the analysis indicated that while few of the youths facing a legal proceeding were frequently criminal, the legal proceeding often led to a verdict. However, from official statistics, 52 percent of all ninth graders in 2019 stated that they have committed a crime on at least one occasion during the last year (The Swedish National Council for Crime Prevention (Brå), 2020b). This indicates that it is not uncommon to commit crimes during adolescence, regardless of whether you have been placed in social out-of-home care or not.

Regarding inpatient care visits, 63.6% (n = 5516) of the population have made at least one visit to inpatient care, of which 60.1% constitute boys and 39.9% girls. The mean age at enrollment at a special youth home was 15.82, and about 69% were placed immediately, whereas 4.8% had a placement as a result of a verdict. The average number was 7 visits per person. National official statistics on visits to inpatient care among youths and young adults 0–29 years in Sweden 2020 show that 434 out of 1,000 inhabitants have visited inpatient care (The National Board of Health and Welfare, 2020). In comparison with the population in this dissertation, the young people in the special youth homes have visited inpatient care slightly fewer times than their peers (418/1000)⁵², being in line with previous reports (Children’s Ombudsman, 2019). The most common diagnoses were childbirth (8%), combined drug abuse (4.5%), acute alcohol intoxication (4%), harmful use or acute intoxication of drugs or medicines (10.5%)⁵³, and Attention Deficit and Hyperactivity Disorder (ADHD) (2.1%).

In the population, 2.6% (n = 222) have deceased during the period. The mean age at point of death was 21.27, however, with a range from 15 to 29 years. Of the deceased, 79.1% constitute boys, while 20.9% constitute girls, and a majority (69.4%) have been placed immediately, while 2.6% of the deceased have been placed as a cause of a verdict. The most common causes of death are due to other synthetic narcotic substances (20.3%), suffocation (12.6%), or narcotics such as heroin (8.6%) or methadone (6.8%). For 11.3%, there is no code in the register. In terms of place of death, 34.7% have died in private

⁵² In the current population (N = 8671), the young people have visited inpatient care a total of 36,270 times over the period 2006-2016. The visits were made between the ages of 0-31 years.

⁵³ Merge of the ICD-10 categories: use of other and unspecified drugs or medicines (3.1%), harmful use of several drugs in combination (2.9%), acute intoxication caused by several drugs in combination (2.4%), harmful use of cannabis (2.1%).

residence, 25.7% in another/unknown location and 23,9% in hospital, while a minority have died in nursing homes or special housing (6.8%).

The statistics above show a great variety within the population, both in terms of the challenges the youths bring with them when enrolling, as well as health-related problems and criminal activity. This points to the challenge of creating a care environment that satisfies and supports a wide range of needs.

FINDINGS FROM THE FOUR STUDIES

The findings from **Study I** showed associations between crime during care, and solitary confinement, escaping, alcohol use, and the duration of placement. Using Erving Goffman's (1961) notion of 'the total institution', criminal activities during care could be interpreted as rational reactions to a stressful situation in such a way that repressive strategies increase the risk of further violence and criminal activity. The impact of spatial factors on crime during care, should be further investigated.

In **study II**, the findings show that staff members' control over objects and settings mean correspondent control over the definition of what place the special youth home is, and what takes place there. The decorous behavior required by the staff constitutes sociomaterial control practices, rather than care practices. The findings point to the importance of viewing spaces and objects as crucial parts of care practices and highlight the intentions inscribed in institutional design and objects.

The findings in **Study III** are presented through the themes 'The dense walls of institutional life' and 'Create and capture the caring space'. The environment is experienced as intertwined social and spatial space, and as an additional 'other' that puts distance between the youths and the staff. The youths strive to present themselves as worthy of increased freedom and access to the outside through negotiating with their behavior. The youths appear to understand themselves through the sociospatial other, which leads to reinforced feelings of social exclusion.

The analysis of the data material in **Study IV** showed two main themes: 'Risk management and damage control in a restricted environment' and 'Compensating and reconstructing ordinariness—trying to make the best of it', with three subthemes each. The staff experiences the care environment as constituting conflicting demands and gaps between needs and possible achievements given the prerequisites. This balancing act constitutes a constant struggle that could be interpreted in terms of conflicting moral and

instrumental demands, where the staffs' knowledge of what the youths need, and the required decorous behavior collide and result in sociomaterial control practices—rather than care practices.

SYNTHESIS OF FINDINGS

The synthesis of the findings from the four studies showed four through-going themes, which are presented below. *First*, the physical environment of the special youth home is expressed in terms of dominating deficiencies and few benefits, characterized by extensive security arrangements and ramified restrictions on spaces and objects. *Second*, this deficient and security-inscribed environment is interpreted as a controlling space (by young people) and as a dangerous place (by staff). *Third*, the above-mentioned seems to contribute to emphasized sociomaterial control practices among staff and corresponding reluctant adaption practices among youths. *Fourth*, the design of the environment, and existing intertwined temporal, spatial, and material restrictions, also seem to be influenced by a constant awareness of the special youth home being a 'special place' with a 'special clientele'. The four themes can be said to be closely linked to and reinforce each other.

DOMINATING DEFICIENCIES—FEW BENEFITS

From all studies included in the thesis, it is evident that the existing care environment is generally expressed in shortcomings, while an enabling and supportive care environment is formulated in terms of wishes and aspirations, both by youths and staff. Apart from the visible security arrangements also confirmed in Study I, the environment is described in terms of dull, boring, uncomfortable, despicable, old, often broke, and disgusting, by the youths in both Studies II and III. The environment is perceived by both youths and staff as spatially restricted, socially dense, crowded, and full of noise, such as beeping security doors, rattling keys, sudden emotional expressions, or bodies accidentally slamming into security window glass. The perceived cramped spaces create consequences for both youths and staff, affecting the youths' integrity and the staffs' ability to work with the youths (studies II and IV). The deficiencies of the environment contribute to collective constraints on time, space, and objects.

The opportunity for the youths to withdraw from social interaction as well as opportunities to create a more personal environment, supporting a sense of 'at-homeness', is perceived as limited by both young people and staff. To be able to put something up on the walls, make your own room less boring and more personal is wished for, however experienced as restricted, by almost all youths.

The staff, on the other hand, describe how they try to create conditions for the youths to personalize their room, but how they are hindered by limited resources, safety regulations, risk assessments, and general orders from the employer about what is not allowed in terms of material objects. The opportunity to be private is perceived by youths as limited also through the fact that the staff have keys and access to the youths' private bedroom. Apart from that the youths must ask a staff member to unlock the door to their room⁵⁴, the possibility of being private on their own terms is perceived as limited, due to the ever-present risk of a staff member suddenly entering the room. On the other hand, the young people were left alone in their rooms for periods, without contact with staff or other youths. The experience of different places and spaces, such as the bedroom, seems emphasized by the rules closely linked to different times of the day; while the bedroom could serve as a self-chosen place to retreat to during the day, several youths expressed it as a forced place associated with anxiety and loneliness during so-called sectioning at night⁵⁵. For some girls, the lock-in in the evening is perceived as so stressful that they sneak into each other's rooms to sleep together. On these occasions, an armchair is turned into a bed so that everyone can fit. Still others describe how the lock-in in the evening has made them 'make chaos' for staff to take them out of the sectioning. Taking some air, a sandwich, or talking for a while with someone on the staff is described as highly desired but difficult to achieve. Under strong feelings of desperation, shouting, breaking things and 'creating chaos' thus appear to be a rational alternative and a way to relieve strong emotions and get in touch with another person.

Further, the possibility to move and to change setting when changing activity is expressed as desirable but severely limited according to both youths and staff. To get the opportunity to move within the ward, outdoors, and to other places at the institution—as well as to get outside the institution area enabling other experiences, practical, and social skills training—were expressed as important to get ready for life after discharge. However, the possibility of moving physically, and spatially is severely limited within the special youth home. In addition to the restrictions built into the basic premise of compulsory care, the restrictions also appear to ramify into constraints on everyday objects

⁵⁴ At one of the wards at Ottaryd the youths had access to lock tags so they could unlock their private rooms by themselves. However, this seemed to be an exception.

⁵⁵ The sectioning applied at the three visited youth homes meant that the corridors where the private rooms of the youths were located, were locked in the evening so that the young people could only come out in the corridor to go to the toilet. In this way, the youths were referred to their room from about ten in the evening until the next morning. This was expressed as very stressful and anxious by most youths included in the qualitative studies.

and situations not obviously articulated through the law, such as restrictions on food, personal belongings, regulation of temperature, or furniture fixed to the wall impossible to move. The lack of control over environmental aspects created headaches, itchy, and watery eyes and nose, and a general feeling of discomfort. The limited opportunity for movement, and the experience of the environment as boring, and scarce, was accompanied by a correspondingly boring, contentless everyday life adding to the preexisting experience of loss of control.

A CONTROLLING SPACE—A DANGEROUS PLACE

The perception of the physical design of the environment, as described above, is accompanied by interpretations of the symbolic and metaphorical meanings of the environment. From the qualitative studies, it is evident that the physical environment and the material objects of the special youth homes always ‘hide’ symbolical meanings: the design of spaces, and material objects, as well as what is given or denied access, is interpreted as ‘something more’ than just due to their physical, absolute being. This is evident from the statements of the youths, and present in the interviews with staff. The youths experience the environment as dominated by security, and control with few elements of what they interpret as a sense of ‘at homeness’ or caring (Studies II and III). They understand themselves through the environment: it is inscribed with security and criminal connotations, so they ‘must need’ such an environment; it affects their view of themselves. This means that the environment is not only ‘boring’, ‘despicable’ or directly affects young people’s bodies, but also indirectly influences their self-image and interpretation of themselves, and of other people. In this way, a locked kitchen door is interpreted not only in absolute terms of restricted access, but also in terms of limitations on one’s behavior and self-determination and of the institution’s view: one is viewed as incapable. The loss of control over the setting, materiality, and everyday activities seems to add to the preexisting experience of loss of control associated with involuntary placement. The perception of time as slow and contentless seems to add to this; between structured activities such as lessons or visits to a psychologist, ‘nothingness’ is created consisting of empty time, where nothing happens, creating frustration, boredom, and passivity.

The presence of personal belongings is interpreted as inhabiting a corresponding symbolism. Having your own clothes, access to important things or photos of family members, is a way to preserve the self and control, but also an important piece in your own narrative: a reminder of the outside. Hence, objects, and spatial solutions that the youths refer to as ‘home-like’, personal, or familiar, seem to evoke, and support a sense of ‘at homeness’ and

a sense of being cared for. This indicates that although the feeling of ‘at homeness’ may be what the youths want to achieve, this can be facilitated or hindered by the design of the physical environment, and what objects are available to young people. However, the possibility of accessing attributes associated with evoking a sense of ‘at homeness’ seems dependent on the staff’s ability and willingness to approve and offer support in such access. Support usually seems to be absent or conditioned. In this sense, the design of the physical environment and the approval or disapproval of objects are closely intertwined with legal restrictions, rules, and routines: the former constitute the latter’s material manifestations.

Only by interpreting the rules and their materializations correctly and demonstrating an acceptable behavior can the youths gain access to desirable material objects, and spaces that could support a sense of ‘at homeness’. In the absence of what the staff interprets as acceptable behavior or ‘motivation’, there are no increased degrees of freedom or access to valuable objects, and the stay in the institution is potentially extended—the youths face a constant risk to remain.

The staff also experienced the environment as characterized by security arrangements, control, and restrictions (Studies I and IV). However, with the important difference that they legitimize security in light of the special youth home as potentially dangerous. For them, the environment conveys not only a confined and cramped enclosure, but also a socially dense environment—and consequently a necessarily and inescapable security-oriented space. The space of the special youth home is interpreted as potentially dangerous due to the interpretation that the youths are potentially dangerous, legitimizing security arrangements, risk assessments, and environmental solutions for observation and surveillance (Studies I and IV). Hence, risks must constantly be considered, and managed—the suspicion is constantly present that there are youths who *could* be dangerous, or once were.

However, the staff also expressed a desire to be able to offer the youths a more ‘homely’ environment. However, in the absence of adequate materialities, they strive to create at least the ‘sense of a home’ (IV). That sense means getting close to building trust, but at the same time setting boundaries and offering safety, hindering the youths from hurting themselves or others. However, the staff interpret the possibility of establishing ‘homeliness’, also in terms of ‘a sense’, as severely obstructed due to the perceived dangerousness of the institutional context, and of the youths. The risks are interpreted as associated with the young people, both as individuals and collectively: the care

environment is interpreted as ‘determined’ by what the young people can ‘cope with’, what they can ‘handle’.

SOCIOMATERIAL PRACTICES: CONTROL VS. RELUCTANT ADAPTION

The deficient physical environment and its safety arrangements, and the correspondent interpretations of it as controlling or dangerous, are accompanied by corresponding sociomaterial practices. The staff’s experience of the special youth home as a cramped, dense, restricted, and dangerous risky place seems to emphasize practices characterized by control, limitations, and collective constraints (Studies I, IV): sociomaterial control practices that aim to maintain and restore order. Both in actual terms, and as interpreted by the youths. The youths’ experiences of the environment and materialities on their bodies, and their interpretation of the environment, create both resignation and adaptation, but often frustration and resistance (Studies II, IV). This seems to constitute a reluctant adaption: while wanting to resist the simultaneous constraints and forced adaptation, they are forced to conform to staffs’ sociomaterial control practices to be interpreted as behaving acceptable, and thus to ‘get out’ of the institution. However, while the youths’ commuting between adaption and resistance are associated with risk-taking due to their behavior constantly being evaluated, staffs’ control practices are consistent with both the physical environment’s design and symbolic securitized ‘prescription’, and the legal framework.

The staff possess control over access to spaces, and objects, through tags, keys, and codes. However, they experience a conflict between what they would like to give the youths and what is ‘possible’ due to the perceived ever-present risks. To handle this conflict, the staff end up constantly balancing risk management and damage control, on the one hand, and trying their best to compensate and reconstruct an ordinary ‘homely’ life, on the other. However, the balancing act has a preponderance, since ‘security always comes first’ (Study IV). This balancing is directly expressed in the management of the care environment; the staff locks and unlocks doors, removes objects considered dangerous, brings them out again, and constantly evaluates the youths’ ability to manage access to different objects and spaces, collectively, and individually. This is recognized by staff as necessary, or sometimes even as part of the care, while by the youths it is acknowledged not as care, but as control. The ‘home-like’ environment, as well as the sense of ‘at homeness’, seems thus conditional. In these the staffs’ perceptions and experiences appears a clear division of the youths: those who are perceived as behaving, or as ‘motivated’ are those who are considered worthy of, and able to ‘handle’ a more ‘homely’

environment and a sense of ‘at homeness’, while those who quarrel and are not considered ‘capable’ of such, are those who are interpreted as dangerous, those who pose a ‘danger’ and a ‘risk’.

The youths’ dependence on the staff to get access to ‘homeliness’ is associated with risk taking from the staffs’ point of view, both in direct terms through the feeling of potentially jeopardizing security, and in indirect terms through risking one’s legitimacy as a staff member. Therefore, objects, and spaces associated with ‘homeliness’ and freedom are used as ‘reinforcement’ and accessed only through negotiation. The sense of ‘at homeness’ must be ‘earned’, that is, when youths show motivation and that they ‘can handle’ certain objects and the access to certain spaces, or the outside—only then do they become accessible. The staff takes a risk by adopting a sociomaterial environment that supports a sense of ‘at homeness’: they may be interpreted as ignoring security, being naive, and consequently as not sufficiently legitimate institutional workers.

Sociomaterial control and reluctant adaption practices seem to lead to social interactions between staff and youths, characterized by distance, suspicion, and mistrust. The inscribed security of the physical environment and the interpretation young people and staff make of it seem to set the ‘tone’ for the interactions between youths and staff members. Taken together, the law, rules, and the physical environment constitute the scenery and props that enable certain practices and interactions—but seriously complicate others.

The institution’s environment not only distances young people and staff physically from each other, but also socially. The dual role of the staff: to create closeness and trust in one moment, and in the other to section and isolate the young people, not only in special circumstances, but daily and systematically, constantly undermines potentially caring practices and relationships. The gap that arises constitutes a vacuum characterized by a lack of trust, and sense of ‘at homeness’—in which caring interactions leading to prosocial change would have, under other circumstances, been possible to achieve. In this vacuum, relationships, and interactions with other youths emerge as rational alternatives to the youth. The vacuum can be challenged by individual staff members’ unconventional solutions, taking risks, and enabling a sense of ‘at homeness’ by inviting the youth to certain spaces, objects, and conversations. However, there are few such examples in the qualitative material. More often, the vacuum seems to remain for the youth to fill on their own, either through sociomaterial care-like practices with themselves (e.g., through personal belongings), or by turning to other youths. Repressive measures and control practices such as isolation, withdrawn degrees of freedom or disapproval on symbolically

valuable objects are not acknowledged as caring by the youths, and risks increasing the distance, further emphasizing the tug of war between sociomaterial control and reluctant adaption practices—and risks leading to further violent and criminal actions (Study I). The coherence between the law, rules, environmental design, and practices seems to drive youths and staff apart. Creating both depression, anxiety, and frustration (Studies I—III), as well as difficult-to-achieve treatment work and feelings of inadequacy (Study IV).

A SPECIAL PLACE WITH A SPECIAL CLIENTELE

The identification of the youth home as a special place with a ‘special clientele’ reappears. The young people acknowledge that they are admitted to a special place because they exhibit certain (disapproved) behaviors, and the staff acknowledge that they work in a place perceived as different from other places regarding risks and dangerousness. Although the staff have control over access to the institution’s rooms and objects in everyday life, they express a loss of control and a powerlessness due to increased securitization and organizational and bureaucratic obstacles (Study IV). They describe a shift over time: from soft and relationship-oriented to focus on security issues, hard factors, and evaluation. There is ‘a lot of no’s’ on objects and activities that previously were part of the treatment. The staff and the youths are aware of the outside’s constant gaze on the institution.

The uncertainty and loss of control that comes from not knowing ‘what,’ ‘who will come’ and ‘what it brings with it’ (Study IV), due to centralized decisions, necessitates sociomaterial collective constraints. Someone else, somewhere else, determines the preconditions for the setting. Increased security, restrictions, and risk management have consequences in everyday life for those on the inside. But are consequences of an awareness of the ‘outside’s’ definition of the situation as acknowledged by the staff—the special youth home possesses a certain function in society, namely, to handle a ‘special clientele’ of potentially dangerous youths.

PART 7. DISCUSSION

The aim of this thesis was to investigate and explore the impact of the care environment on youths and staff as well as on the interactions between youths and staff in special youth homes in Sweden. From the findings, it is evident that both youths and staff view the care environment as an intertwined whole, constituting spatial, material, and social aspects. Below, the findings will be discussed in relation to the theoretical perspectives of the thesis and against previous research. *First*, the environment as security inscribed will be discussed as a starting point for how young people and staff experience the character of the care environment. *Second*, Goffman's concept of 'decorum' is discussed as an aspect of sociomateriality to show how the findings could be interpreted in terms of conflicting moral and instrumental requirements, where the security inscription of the environment could be viewed as a 'pre-scription' for certain practices put on the staff. *Third*, the consequences for the interaction between staff and youths are discussed in terms of interrupted sociomaterial caring practices and, *fourth*, conditional access to caring practices. *Fifth*, a macrolevel note on the relation between the special youth homes' function in society, and the staffs' emphasis on sociomaterial control practices are addressed. *Finally*, opportunities to redefine and re-configure the care environment and practices within special youth homes are discussed.

A SECURITY INSCRIBED SOCIOMATERIAL REALITY

The data material is full of stories and events in which young people and staff interact with security doors, plastic cutlery, slippers, rules, and activities structured in time and space—when interacting also with each other. These can all be understood as sociomaterial relations from which practices (caring or others) emerge (Gherardi & Rodeschini, 2016; Orlikowski & Scott, 2008). However, if caring is the 'matter of concern' (Gherardi & Rodeschini, 2016) for the professionals working in a hospital or a nursing home, 'the matter of concern' in the context of the special youth home is not necessarily and solely caring, but also security issues and societal protection. Security and risk management is interpreted by the staff as being the precondition for, yet simultaneously constantly overturning, caring practices. This confuses and messes up the understanding of which collective sociomaterial practices shall be the overriding objective, and how the balancing act between caring and security issues should be carried out.

In addition to the care environment affecting both young people and staff in a very direct way, the findings show that the environment could be understood as ‘inscribed with’ (Jewkes, 2018) security and control, from both the perspective of the youths, and staff. Thus, not only the materialities but also this inscription affects the interactions in a concrete, inevitable, and often intrusive way. The security inscription can be understood as materialized in every aspect of everyday life at the special youth home. The bodies of young people are regulated in space and time: their bodies are prevented from entering certain spaces, forced to remain in others, forced to endure bodily and sensory contact with uncomfortable, and inhospitable materialities. They are embedded in the institutional space, affecting their lived experience of not only the special youth home but also of their own identities (Bengtsson, 2001; Dahlberg & Segesten, 2010; Fransson, 2018). The staff, on the other hand, are left out to provide care and treatment in the spaces that are available, with certain objects and without others: their bodies are embedded in the institutional space during their working hours.

However, the inscribed meaning also reflects the intentions and values that the organization and society direct toward the group ‘young people in special youth homes’. The design of the spaces, and materialities, hide a symbolic meaning and a message, which affects the relationships and the self-image of both the staff who work there and the young people who are placed there. The presence of certain materialities (such as security doors, alarm phones, and lock tags) and the absence of others (such as ordinary cutlery and personal items) contributes to the distancing between young people and staff already present in a locked institutional environment (Ugelvik, 2014). Spaces and materialities do not only constitute ‘dead’ materialities or a neutral scenery, but appear from the findings as active agents, and crucial parts of social practices—both caring and others (Buse et al., 2018; Gherardi & Rodeschini, 2016; Orlikowski & Scott, 2008).

The environment is inscribed with connotations to security and control and is correspondingly interpreted, characterizing the lived experiences of the youths inhabiting the institutional spaces, causing a negative place attachment (Falk et al., 2013). Young people interpret the environment as controlling and intertwined with rules and time-space restrictions, such as sectioning at night, locked kitchen doors, or fixed furniture. The staff interprets the environment as a dangerous place with potentially dangerous young people, demanding, and legitimizing a high level of security. However, the security inscription risks reinforcing the feeling of being at a dangerous place, causing a negative place attachment for staff (Biszczyk & Gruber, 2021; Falk et al., 2013). The security inscription makes it difficult for the staff to (re)create a caring sense of ‘at homeness’ and makes the institutional stay less bearable for the young

people (Olausson et al., 2021; Saarnio et al., 2019): the youths do not acknowledge the staff's practices as mainly caring, but as controlling.

Then there are times when I feel that If I (...) hear that clicking, that sound when they unlock that staff door again, I do not know what I'll do... It's a reminder that it's locked. I mean, they need a tag and a code to get into a room! That's absurd. I need to be in a locked place, it's gone that far ... (...) So, it's like, both a self-hatred and a hatred for them...

Youth Mario, Viskansby, September 2019, Study II

INSCRIPTION AS PRESCRIPTION: 'DECORUM' AS AN ASPECT OF SOCIOMATERIALITY

The special youth home can be understood as a place where young people constantly perform on stage and are under constant assessment, with restricted possibilities to be private (for example Enell, 2015b). In line with the present findings, this also seems to be true to some extent for the staff during their working hours spent at the institution. The on-stage regions inscribed with connotations of security and control can, in line with Goffman's concept of decorum, be interpreted as including moral and instrumental requirements (Goffman, 1956). The moral requirements can be understood, against the findings, as conflicting demands of both 'caring' and 'guarding' at the same time. The instrumental requirements, in turn, can be understood as an encouragement of just certain practices: a kind of 'prescription' about a certain, specific behavior of the staff, with a preponderance of security and guarding.

This prescription can be understood as manifested through the inscription of the design of the institutional spaces, and the presence/absence of certain materialities, and is closely connected with legal regulations. However, while the moral requirements constitute a conflict between caring practices and guarding security, the instrumental requirements seem more one-sided: 'security always comes first'. The way in which caring and guarding practices should or could be integrated into coexistence is a conflict that remains unresolved: it is left to staff to deal with in everyday life, to the best of their ability. Thus, security, and caring practices constitute opposites and are difficult to reconcile. The environment constitutes not harsh in just actual terms, with locks, alarms, and security doors, but also in symbolic terms, with

the imposed security mindset and an awareness of what the young people who are placed here ‘are capable of’ (Wästerfors, 2018).

I follow into the staff room, it’s crowded. Staff gather for handover; some quit for the day and others begin their work shifts. Fanny works around the clock. She recounts a story with Ally’s interrupted home economics lesson to the other staff members.

Fanny: *Then Jenny (the home economics teacher) called and was worried and said, ‘well I don’t know, she was standing there with the knife, and I don’t know about girls and knives ...’ (...). And another time she called and asked about youth Nelly and knives and then she said, ‘yes, I got to know what she had done, and I wish I did not’ ...*

Extract from field notes, Siljegårde, August 2019, Study II.

According to Goffman (1956), decorum can be understood in terms of how we act when we are in sight of others. In the special youth home, the opportunity to withdraw from social interaction is perceived as very limited by young people, thus forcing them to be on stage (Enell, 2015b; Goffman, 1961). The sociomaterial environment constitutes a ‘tense’ environment that ‘stands on its toes’ and that is perceived as cramped and ‘dense’, not necessarily and solely in terms of the number of people per room—but in terms of a perceived crowdedness and emotional ‘denseness’ (Andersson, 2021; Roush, 1999; Ulrich et al., 2008; Wästerfors, 2012; Wästerfors, 2019). Emotions and expressions of emotion require space, that is, room for maneuver, but this is lacking (Wästerfors, 2019). Not only does the experienced crowding affect the staff’s ability to perform caring practices according to escalated conflicts and emotional tenseness (Evans, 2003; Ulrich et al., 2012; Wästerfors, 2019)—the staff and the youths are constantly in sight of each other.

Hence, decorum could be interpreted as an aspect of sociomateriality, and thus be understood as both material and social. Material, since decorum is linked to the region where the performance takes place, and social because it could be interpreted as an obligation and encouragement of certain practices through the moral and instrumental requirements (Goffman, 1956). Against the findings, the moral requirements in this context seem to be in conflict: on the one hand, the staff ‘know’ what the young people ‘need’, but on the other hand, they also ‘know’ what the organization, and by extension society, ‘need’. Hence, they sense a moral obligation both to the youths, and to the organization and society: they feel morally obligated to both perform care for the sake of the youths, and at the same time uphold security and societal protection. However, the interpretation of ‘caring’ in this context seems messy, as does the relation

between caring practices and guarding security. A conflict that would not necessarily have to be a contradiction remains unresolved. Or rather: it finds its solution through the security-prescribed environment and the emphasis on control and collective solutions.

The incentive to act in accordance with the requirements of the decorum is, according to Goffman, either to impress the audience—both colleagues and young people, in this case—or to avoid sanctions (Goffman, 1956). The latter could be understood as striving to avoid social consequences, such as being viewed as less credible in one's performance or as problematic for the rest of the team, through challenging the definition of the place (Goffman, 1956). In the findings, it is recurrent how the staff assess one another in terms of how well they manage to 'solve' the conflicting moral requirements and adapt to the instrumental demands putting 'security first'. Lacking sufficient 'space familiarity' ultimately has consequences for one's performance, as shown in Study II.



*Photos of a security door and a room for seclusion, Siljegärde, August 2019, study II.
Photos: Kajsa Nolbeck*

In line with Silow Kallenberg (2016), the findings of this dissertation show how the institution's physical environment and material objects in a very concrete way are closely linked to the positions held by young people and staff. Locked doors, the presence of security windows and high fences, could be said to hide a certain employer-imposed decorous behavior (Goffman, 1956, p. 107), further enhanced through access-giving materialities such as keys and alarm telephones. At the same time, they provide actual access to space, but also constitute symbols of power, distancing staff and youths (Silow

Kallenberg, 2016). In this way, practices (caring and others) can be said to be facilitated or hindered—namely ‘configured’ differently in different settings (Gherardi & Rohdeschini, 2016; Koch, 2010)—and give rise to correspondent ward atmospheres (Brunt, 2008; Brunt & Rask, 2005, 2007; Buse et al., 2018). The way practices are configured in the setting of the special youth home, due to the findings in this thesis, implicates a constant sociomaterial activity from the staff, involving locking and unlocking doors, being constantly prepared and on guard, and retrieving and removing material objects. This constant ‘doing’, evaluation, and assessment could be understood in terms of what Mol, Moser, and Pols describe as ‘tinkering’ (Mol, Moser, Piras, et al., 2010; Mol, Moser, & Pols, 2010). However, rather than fine-tuning caring practices, the tinkering of the staff is characterized by shaping and reshaping spaces in a constant evaluation of the youths collectively and individually, due to perceived risk and dangerousness. This is acknowledged by the youths not as caring but as visible sociomaterial control practices.

INTERRUPTED SOCIOMATERIAL CARING PRACTICES

The ethics of care can be understood as emphasizing relationships and responses to another person's needs on their terms (Gherardi & Rodeschini, 2016; Ricœur, 1992). In this perspective, caring practices can be understood as intertwined sociomaterial practices, spatially, and temporally situated activities performed collectively. It is bodily and sensory work, which means involving one's own body and senses with other people's bodies, material objects, rules, and time; a ‘tinkering’, and constant finetuning of practices (Gherardi & Rodeschini, 2016; Mol, Moser, Piras, et al., 2010; Mol, Moser, & Pols, 2010). In this way, caring can also be said to be consistent with psychosocial treatment work in terms of positively influencing problem-generating processes (Bernler, 1993). In caring practices, the experience of being viewed as a capable person and offered the possibility to maintain control of what is possible is foundational for the practices to be experienced and acknowledged as caring from the point of view of the client or patient (Ekman et al., 2020). Hence, for practices to be confirmed as caring, it is crucial to be viewed as a person involved *in* rather than an object *of* the act ‘caring’ (Mol, 2008). This means that ‘caring’ is co-produced (Mol, 2008), and must be acknowledged as such with, in this case, the youth. However, while the security arrangements and control practices are (re)interpreted by staff into legitimized parts of caring practices, they are based on a worst-case scenario that becomes insensitive to, and disregards individual variations. Instead of shifting the focus from control to support to gain trust in the relationship (Billquist & Skårner,

2009), young people seem to experience it as rather the opposite: the caring practices transform into control, against the fund of the security-inscribed spaces.

The findings show that everyday objects and personal belongings are crucial to support a sense of ‘at homeness’ as a foundation for caring, with the youths (Lovatt, 2018; Olausson et al., 2021). The opportunity to make one’s room personal, through access to personal belongings, can support a sense of ‘at home’, but also enable a reorientation toward change (James & Olausson, 2021; Olausson et al., 2021). The possibility of ‘*cultivating a sense of at home*’ (Lovatt, 2018, p. 372) could thus enact caring practices. This possibility can be understood in relation to Goffman’s concept of backstage (Goffman, 1956). The spatial opportunity to preserve one’s integrity is highlighted as important in previous research (Evans, 2003; Ulrich et al., 2008), but appears to be difficult to achieve within the special youth home based on the findings. The young people have access to their own bedrooms, but since the staff possess access-giving props as keys, the opportunity to be private is conditional.

The access to what can be interpreted as a ‘reliable backstage’ thus appears obstructed for the young people. Instead, it remains for them to trust the staff to create, and make accessible for them, ‘a backstage style’ (Goffman, 1956, p. 128–129), which could be interpreted as a ‘sense of’ a backstage. This could be acknowledged as an informal, close relationship with the staff from the youths’ perspective, enabling a sense of ‘at homeness’. A space where the youth can only ‘be’: a space for escaping the role of ‘youth at a special youth home’, and the constant balancing between the institution’s negative expectations and demands for moral carrier (Goffman, 1961). This is also expressed as crucial by the staff, meaning that a sense of ‘at homeness’ constitutes the basis for ‘good caring practices’ in the eyes of the staff.



Photo of a bed and teared wall with doodles, taken by a boy at Ottarryd, March 2018, study III

However, the emotions the institution evokes are opposite to the sense of ‘at homeness’ to the youths, consequently demanding a re-shaping to be acknowledged by the youths as evoking a sense of ‘at homeness’. However, this re-shaping is constantly hindered as the staff lack support on how to resolve the conflicting moral and instrumental requirements. Thus, ‘both sides’ miss out on the caring practices that could be evoked by creating a sense of ‘at homeness’ (Falk et al., 2013; Saarnio et al., 2019). The youths’ lived experience of a lack of sense of ‘at homeness’ conflicts with the results from ADAD UT in both Study I and in the analyses of the other register data, where a majority state that they felt at home at the ward and in their bedroom. The discrepancy between the results could be interpreted as ADAD UT rather measuring signs of secondary adjustments (Goffman, 1961) than reflecting a true experience of ‘sense of at homeness’.

Caring could be said to be associated not only with space and materialities, but also with time affecting sociomaterial caring practices. According to Davies (1994), caring could be understood as an unbound process time, ‘taking as long as it takes’ (Davies, 1994; see also Buse, p. 248). Caring is thus difficult to fixate to specific, limited pieces of time but must constitute an ongoing act, sensitive to the needs and unpredictability of people and their bodies (Buse & Twigg, 2018). Caring activities can thus easily come into conflict with institutional rules and routines (Buse & Twigg, 2018; Malone, 2003), demanding support in how to, as a staff member, resolve such conflicting requirements. Building a relationship and treatment alliance can be understood as a careful tinkering, a sensitivity to the person’s needs, and a soft compliance that is reflected in action (Buse & Twigg, 2018; Mol, Moser, & Pols, 2010), requiring both physical and narrative proximity (Malone, 2003).

However, at the same time as the youths do not have a real, reliable backstage, they are temporally and repeatedly separated from other people during certain times, certain occasions, or when exhibiting a certain (undesirable) behavior.

No, well I think that... Well, I'm at a department where, if you might use kind of the wrong word, but parenting, well we have quite strict rules... (...). If you miss school... then you're left in your room... (...). And that's to get them up, to get them to feel that it's... well... positive, it's good to go to school, it's more boring to be in your room. Because there are many that just want to sleep longer, I'm tired, I'll skip school today'. No, then you're on sick leave for the rest of the day. And if you need to be in your room all day, then it's not so damn nice to sit in there all day. Then you go up automatically.

Treatment assistant Jack, Viskansby, 2020, Study IV

They become distanced and lose both actual and narrative proximity to both staff and other youths (Malone, 2003). These segregating practices are not something that happens occasionally but take place regularly and systematically due to the findings.

Staff attempts to build treatment alliances are systematically thwarted, as acknowledged by themselves. The scenery and props that are available to them are inscribed with control and security—and thus set a corresponding tone and expectation of the interaction between youth and staff. The institutional space and time ‘color’ the relationship and require constant management from both sides (Billquist & Skårner, 2009). This leads to controlling practices and a distance that seems difficult to bridge, and ‘adds’ to the already present distance due to the legally enforced lock-in at the institution (Goffman, 1961; Ugelvik, 2014). Not only do the controlling practices segregate and spatially separate youths and staff in actual terms—this physical distancing is accompanied by a social distancing that seems to act independently of the time of day. In step with bifurcating control practices (where legal restrictions on spaces turn into restrictions on bananas and yoghurt, as in study II) (Cohen, 1985), a corresponding bifurcating distance occurs, which undermines the treatment alliance. The body experiencing the hard bed, not being able to move as it wants, not having the possibility to retreat to a reliable backstage, feeling cramped—*this* constitutes the youths’ lived experience of how ‘caring’ is configured in this setting (Gherardi & Rodeschini, 2016).

However, the configuration means that ‘caring’ transforms into sociomaterial control practices in the eyes of the youths. To lock and unlock doors, remove things and ‘dress down’ the environment, guard boundaries and control spaces and times are sociomaterial practices that undermine caring practices if not carried out with a reflective and sensitive awareness, letting the youths acknowledge them as ‘caring’. Everyday concerns involving everyday materialities could be used in treatment activities but are due to the findings not identified like treatment by the young people; instead, everyday ‘going concerns’ are interwoven with disputes, where (access to) materialities and spaces constitute micropolitical resources for positioning (Wästerfors, 2011).

This gives rise to a broken trust between young people and staff, leading to interrupted caring practices (Gherardi & Rodeschini, 2016)—since caring must be acknowledged as such by the one cared for, or at least not acknowledged as oppressive control (Mol, 2008). The interruption seems to cause loyalty- and moral conflicts with the staff, and further undermine safety and trust among the young people, leading to a reluctant adaptation, enforcing secondary adjustments and resistance (Goffman, 1961). Instead of openness and reorientation, the special youth home constitutes a boundedness, a time-space fixation of the young people in a setting that offers props, scenery, and sociomaterial practices that (risks) ‘fit’ with the image they understand that the ‘System’ has of them, and which they already have of themselves (James & Olausson, 2021).

CONDITIONAL ACCESS TO CARING PRACTICES

Segregating practices as restrictions of movement and control of access to spaces and places do not necessarily have a foundation in legal regulations in the context of the special youth home, as shown in the findings. On the contrary, restrictions, and control seem to branch out and spill over into a kind of micro-control of breakfast yoghurt, temperature regulation, and fixed furniture. This is perceived by the young people as further repressive measures, in addition to the lock-in at the institution, and to the security-oriented institutional environment. The control bifurcates into further controlling practices (Cohen, 1985), constituting access to spaces and materialities as issues of negotiation. This can be understood as the staff interpreting the young people as incapable, as if they cannot ‘handle’, or have consumed the trust to possess such materialities. They can be understood in terms of actual or potential concerns that need to be addressed (Wästerfors, 2018). Hence, youths must earn or regain trust.

Access to what can create ‘at homeness’, or ‘a sense of a backstage’ from the point of view of the youth, is thus conditional: only by demonstrating an acceptable behavior can the youths gain access to what for them constitutes caring. It is only when a primary adjustment, (i.e., when the youth exhibit the behavior that the institution requires) (Goffman, 1961), access to spaces, objects, and situations that can strengthen a sense of ‘at homeness’ becomes available to the youth. Thus, the features of the care environment that could support a sense of ‘at homeness’, and facilitate sociomaterial caring practices

by the staff, are reserved for those who ‘are capable’ and ‘motivated’; for those in the right place, at the right time, exhibiting the right behavior (Levin, 1998).

They say it should be individualized, but it is not. It feels hard, it's like I get a punishment that I didn't deserve. Why can't I have my phone if I have behaved? I think there will only be more and more rules, and I'm not sure how long I can manage.

Youth Ally, Siljegårde, August 2019, Study II

Given the young people’s problems when enrolling, it seems evident that performing as ‘capable’ and ‘motivated’ is difficult for most of the young people, confirmed both in this thesis and in previous research (Nordahl et al., 2007; Vinnerljung & Sallnäs, 2008). Further, against the findings and previous research, the institutional environment can be interpreted as more demanding than other environments (Andersson, 2021; Andreassen, 2003; Enell, 2015b; Wästerfors, 2019). The result, for many youths, is recurring failures, where 'evidence' for the placement itself is piled up in the record system (Emerson & Messinger, 1977; Goffman, 1961). In this way, it could be interpreted that the youths must be institutionalized before they can have access to what could form the basis for relational practices acknowledged as caring (Goffman, 1961, see also Pettersson 2017).

To oscillating between adaptation and resistance, between negotiating with one’s behavior, and ‘making chaos’ and resist through scribble on the wall appears against the findings, in this context as a rational alternative in a situation that is perceived by the youths as extremely stressful. Goffman (1961) describes how inmates use the limited equipment they have access to, to resist the institution and assert independence (Goffman, 1961). Similarly, Wästerfors (2019) has shown how youths in special youth homes generate drama and elation in a structured and monotonous everyday life, using everyday material objects (Wästerfors, 2019). However, rather than interpreting the youths as quarrelling and creating disputes involving everyday situations and objects, ‘just because’—they could be interpreted as reacting to their situation (Wästerfors, 2011).

Similar findings are present in the current thesis: hiding food, sneaking into each other at night, and smuggling in forbidden objects are acts of resistance and a way to preserve a small piece of oneself in a situation that is perceived as characterized by power and oppression (Foucault, 1991; Goffman, 1961).



Photo of a wall with doodles in a bathroom, taken by a boy at Ottarryd, March 2018, study III

However, these acts are often interpreted against the fund of the institution (Goffman, 1961), where not only is the environment inscribed with connotations to security, but the young people who are placed there (i.e., inhabiting the locked spaces) are perceived as ‘inscribed’ with correspondent connotations (Ugelvik, 2014). Their actions are interpreted in light of this ‘inscription’; what happens within the walls of the institution is interpreted not only as a comment on other situations in which the individual has been involved at the institution (Goffman, 1961), but also in light of the environment’s security inscription (Jewkes, 2018).

In here, I always must think about what I do and say, what I do when I’m angry. If I get angry, I get to be here longer, if I say the wrong things at the wrong time, I stay here longer. If I don’t listen to the staff, I will stay here longer. Some days I feel like ‘fuck it, I don’t give a shit about anything’, but it doesn’t work, then I get to live here even longer. In the beginning, when I got here, I was pissed off... But if I keep going like that every day, it would be like: ‘he’s not ready to move out’.

Youth Jack, Viskansby, September 2019, Study II

The environment is viewed as a ‘fit container’ for the youths’ resistant behaviors (Burke, 1969), tentatively counteracting what reasonably should be

its purpose: social and identity-wise re-orientation as a result of geographical and spatial re-location (James & Olausson, 2021; Wikström & Treiber, 2016).

In the lack of a sense of ‘at homeness’, the perceived distance to the staff and interrupted caring practices, the youths are left to try to fill the void by themselves, either through personal belongings and memories, or through turning to other youths. This could open up for unproblematic friendships characterized by warmth and closeness, but also for identification with young people with similar or more difficult problems, leading to reinforced destructive patterns like what in previous research has been termed ‘contagious peer interactions’ (Bengtsson, 2012b; Dodge et al., 2006; Van Ryzin & Dishion, 2014). Several young people have told me about how they have learned various destructive behaviors, such as addiction and crime, while at a special youth home.

Rather than interpreting these processes as young people intentionally striving for crime or abuse, they can, in light of the findings, be interpreted as being made possible by the institution. Rather than a one-sided control from staff over young people, it can be understood as moral negotiations, about the right way of working or behaving—for example, negotiations about whether practices should be understood as caring or not (Åkerström & Wästerfors, 2012).

Those of the young people who, after all, are interpreted by the staff as if they are not in need of comprehensive security arrangements, and thus viewed as more ‘capable’, are often still subject to collective repressive measures, due to the findings.

Kajsa: But does that mean that if you have what you... you described here before, cozier, and so on, and then there is someone who cannot cope with that, like, does it affect everyone? [general support]

Viveca: It's the same for everyone [general support] (...)

Amalia: And sometimes it does not go well at all. Of course, then you also must enforce the rules ... that affects everyone, even those who have behaved very well and had a good time before. Then, you may have to start to lo ... lock the kitchen and ... yes.

Focus group discussion with staff, Siljegårde, 2020, Study IV

This is undertaken as a security measure, ‘just in case of’, due to both the design of the spatial environment, and because of the interpretation of the youth collective. But the lack of possibility to spatially separate the youths is at the same time an actual, lived reality for staff—a real, perceived problem that they face daily, and feel compelled to deal with through collective action. They need to, hands-on in their daily work, practically solve what could be interpreted as an organizational problem of conflicting moral and instrumental requirements. So even if the staff are responsible for, through the sociomaterial control practices, contributing to what can be understood from the point of view of the youths as access to ‘caring’ being conditional, the responsibility for the preconditions for this being the case is beyond the control of the individual staff members. The young people in the special youth homes may act as young people in general would have done under the same circumstances: the sociomaterial practices could be interpreted as contextually and situationally bound expressions of micropolitics (Wästerfors, 2009).

A PLACE ON THE OUTSKIRTS AT THE CENTRE OF ATTENTION

Of course, one could easily argue that the ‘youth in general’ and the youth at a special youth home differ in several aspects. The use of concepts such as ‘antisociality’, ‘norm breaking’ or ‘behavioral problems’ in documents from the authority, as well as the legal formulations and definitions, outline that there is a difference between youths in general, youths that need to be protected (TCYPA § .2) and youths that society needs to be protected from (TCYPA §. 3, TLYO). Where there needs to exist, for the sake of the last-mentioned youths, special youth homes with the aim of ‘*particularly close supervision*’ (SFS1990:52, 1990).

Hence, in the context of special youth homes, the three types of power, according to Foucault, can be said to be both present and legitimized (Foucault, 1991). Consequently, the special youth home is not the place for all kinds of young people—just anyone—but is interpreted as a place for a ‘special clientele’, as Anna in Study IV expresses it.

At the same time, the staff expressed an interpretation of the youths as attributed different degrees of danger or problems, underlining the importance of protecting those who are considered not so dangerous (yet) from the others. Wishes for being able to separate young people spatially are based on the notion that young people could be differentiated into subgroups and attributed different degrees of dangers or protection values (Donzelot, 1997). Thus, the interpretation of the special youth home as a dangerous place would not have been possible without the legitimized legal restrictions, which constitute the framework for the institutional setting (Foucault, 1991). The social practices and the environment within the institution are shaped by the awareness of the social phenomenon ‘young people in special youth homes’, but the social practices ‘on the inside’ also contribute to maintaining that very social phenomenon (Schatzki, 2019). The outside gaze is constantly on the institution (Goffman, 1961).

Maria: *But you noticed, when the newspaper was here, and it was just focused on the young people, and you were like ‘Okay but...’. How we work and what kind of work environment we have...*

Lisa: *It’s not that important.... No, it’s not that important for the newspaper, because they... (...) sell nothing then, it’s just this ... (...) ... yummy, that’s what they want.*

Viveca: *What view do they have of us and how the kids are treated and how we as staff... yes...*

Focus group discussion, Siljegärde, 2020, Study IV.

At half past nine in the evening, the alarm telephones, that everyone in the staff, including me, has in their waistband, had gone off (...) Two boys have escaped from another department and staff members Mehdi and Sami have been out searching for them, and now return to the department shaken by confrontation with an old man and his son living near the special youth home.

Mehdi: *And then he started yelling about Arab bastards and everything and then I said, ‘we work here, we are looking for some missing young people. We work for the State!’ Mehdi pulls his staff badge with the authority’s logo, which hangs in the waistband, as to show that he has legitimacy. That was the sickest thing! Then he started talking about reporting, but it’s us who must report the way he behaved!*

Extract from field notes, Viskansby, September 2019, Study II

When staff face the conflicting moral and instrumental decorum, ending up acting in correspondence with ‘security first’, their acts are related to the definition of what kind of place the youth home ‘is’, and to their awareness that the ‘outside’ will judge, those of their actions which possibly ‘seep out’. The staff’s reinterpretation of security arrangements—from control to protection—and the (by the youths, perceived) shift from support to control, is therefore logical and understandable. Correspondingly, it is understandable that the participation that may be highlighted by the staff within the framework of the control—that is, the care practices that, in fact, *do* take place—is not approved, nor interpreted as such, by the young people (Billquist & Skårner, 2009; Wästerfors, 2018).

The processes of control and exclusion can be argued for not only being maintained through sociomaterial control practices at a micro level, but also being maintained at a macro level through practices such as geographical relocation and spatial separation of certain groups to certain places, for example, youths with behaviors defined as ‘problematic’ to special youth homes—a path dependent practice rooted in history (Swärd, 2020). These places or spaces can be argued to possess a certain given function in society (Foucault, 1986). With this perspective, the special youth homes could be argued for being a gathering place for young people with the common denominator of them meeting the criteria required to be relocated ‘elsewhere’, to a place intended to bring about change in what society has defined as problematic. At these places and in these institutional spaces, social control practices intertwine with symbolic and ‘real’ space, with the function of controlling and regulating the undesirable (Foucault, 1986; Foucault, 1991). A stigmatizing space is prescribed, assigned, to the youths (Staszak, 2009), but also to the staff, whose preconditions for inviting young people to participate in the interpretation of the dimensions of caring and control, are being circumvented (Billquist & Skårner, 2009). Having access to the range of power techniques that staff in the special youth homes have, requires careful handling, adequate competence in how to best balance control and support, as well as collegial and organizational, but also legal support. This seems to lack, against the findings.

Against the above, the special youth homes can be argued to possess the function of ‘a last resort’ within the Swedish social child and youth care (Emerson, 1981; see also Andreassen, 2003; Levin, 1998; Vogel, 2012). Both through the youths placed there often have faced several previous placements and measures, and through the coercive practices, which limits the youth in time and space—in an ‘elsewhere’, beyond or on the fringes of society (Staszak, 2009). Thus, the special youth homes as a last resort not only appears

as a social measurement, but also as a spatial and geographical one. The clientization processes that take place in the social interactions, can thus be argued to be closely related to the function of certain places—such as a special youth home—and the practices tied to them. This makes the special youth home a place for 'the others' and a place for 'othering' (Staszak, 2009); a place on the outskirts but with a crucial function in and for society: they are at the center of attention. The boundary to the rest of society must be clearly drawn—not only symbolically but also physically, materially. In this context, geographical and spatial demarcation and regulation of access can be seen as a social and cultural practice for separating the included from the excluded (Koch, 2016). This value on a macro-level, is reflected on a micro-level inside the institution: in the staff's desires for spatial configurations of avoidance (Koch, 2016), such as spatial separation of young people perceived to have different problems.

The staff's expressions and fears regarding a 'different' youth clientele today, and the increased focus on security breathe a picture of reality where the danger lurks around the corner, or in some cases, already has found its way into the institution. The pursuit of, and maintenance of, an orderly and regulated society involves the elimination of such social disturbances (Elliott and Turner, 2015). The 'others', those who threaten social order, must be separated, and excluded: society must be closed spatially for social order to be maintained, leading to what could be called a 'securitization' (Elliott & Turner, 2016). The 'inside' of the institution seems to act as a mirror of society in this respect. The increased 'securitization' within the special youth homes and the sociomaterial control practices can be viewed as an expression of rational strategies for counteracting what is perceived as increased dangers and risks in society. It fits.

RE-CONFIGURATION OF CARING PRACTICES?

However, caring practices and security practices need not necessarily be understood as opposites. Rather, both young people and staff express that security, in terms of feeling safe and carefully setting boundaries, contributes to change, and thus could be argued for important parts of sociomaterial caring practices. This is considered particularly important for young people who risk injuring themselves. In those cases, the controlling practices are undertaken to avoid the young people harming themselves with materialities, as consistent with previous research (for example Thodelius, 2018)—and this is acknowledged as caring practices by the youths. However, instead of the control being incorporated into, or existing in parallel with, the support to create a sense of safety (Billquist & Skårner, 2009), the control generally overshadows the caring practices, from the young people's perspective. Spaces and (absence of) objects speak for themselves, so to speak.



Photo taken by a girl, Siljegärde, June 2018, study III.



Youth Sara showing a seed while planting outside. Siljegärde, August 2019, study II.

Both staff and young people state a desire for a less institution-like environment, an environment that can be adapted as needed, an environment that considers the different challenges and needs of individuals, and which enables young people to maintain control over their integrity and identity. An environment where the security arrangements do not *actually*, nor are *interpreted as* counteracting the caring practices by (Huey & McNulty, 2005; Inderbitzin, 2007)—but rather support practices to transform into a caring sense of safety. To try to recreate ordinariness in terms of as everyday an environment as possible, with everyday places and paths, is viewed as desirable, and could be related to what Levin (1998) calls ‘the imitation of the good life’ (Levin, 1998). This is thought to encourage independence and a

sense of freedom, allowing young people to regain a small share of power and control in their situations.

In the data material, certain differences in access to personal belongings and creation of 'at homeness' related to gender can be discerned. The girls' rooms at Siljegårde were often more decorated, while the boys' rooms at Viskansby and Ottarryd were often more stripped down, with fewer personal belongings. Although access to self-selected materialities was limited for both girls and boys, boys' rooms appear less cultivated (Lovatt, 2018). This may be because the image of girls and boys in institutional care differs, for example, in what they can be interpreted as needing (Gruber, 2013; Vogel, 2020; Vogel, 2012). But it can also be due to subjective experiences and desires linked to space, and what creates a sense of 'at homeness', shaped by structures that have to do with notions of gender, ethnicity, class, and sexuality (Molina, 2007). Thus, there is no universal sense of, or relation to, 'home', which can serve as a reference point in every context and for every subject. Rather, spatial, and material concepts are situated in the intersection between power-and socially constructed categories, have different meanings to different persons, and are closely related to experience and context (Molina, 2007). This means that the question of what 'a sense of at homeness' and 'sense of a backstage' means to the person is an important part of the 'tinkering' that constitutes caring practices, requiring time, and sensitivity.

Vera: (...) well, Mary [teacher in arts and crafts] I love her, and she loves me, I'm her favorite or something, I don't know (...) no, but we have a really good connection, so I can, like, go there after school and stuff, and pick up some feathers and threads if I need (...)

Kajsa: So, that place means a lot to you?

Vera: Yees

Kajsa: How about the other places you've been to, have there been opportunities to, like, be artistic?

Vera: No (...) That's why I probably like Mary more (...) (she's) always there...

Kajsa: Does this make a difference for how you feel?

Vera: Yees, well, like, every time I'm angry in school I always go down to Mary, and I'm like 'I'm so angry', and she's like 'well, take a paper and pen and draw a little'

Interview, Siljegårde, June 2018, study III

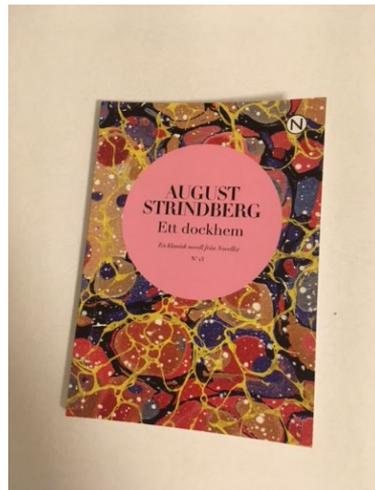
Against the findings, changes in the environment are believed to be difficult to achieve, due to a range of factors, both interpreted as related to the prescription of required decorous behavior, and due to administrative and bureaucratic hindrances. Thus, changing the setting, preferably ‘escape’ the youth home, is viewed as the main alternative from the findings. Both young people and staff come back to the fact that they need to ‘get out’ of the institution to get closer to each other. When on the outside, the young people can distance themselves from the role ‘youth at special youth home’, and the staff can distance themselves from the role ‘staff at special youth home’. To leave the institution and go ‘outside’ changes the interactions and re-configures and transforms the practices. It appears as leaving the institution reconnects and repairs the nodes of sociomaterial relations from which what could be acknowledged as caring practices by both staff and youths can arise (Gherardi & Rodeschini, 2016).

Against the findings of this thesis, such repair-work and re-negotiation would need to—however seems not to—be carried out incessantly in the special youth homes to (re)create caring sociomaterial relationships that are systematically interrupted due to the security-inscribed environment and the messed controlling/supporting/caring practices. Rather, such re-pair work seems dependent on the individual staff member. Extensive work would be required to (re)integrate or alleviate the impact of the security-inscribed environment (Buse et al., 2018).

Caring is not something that is ‘given’ once and for all but is an ongoing process that requires adaptation and sensitivity (Gherardi & Rodeschini, 2016). But such repair work requires the competence of staff and of the organization, as well as support in how to handle the formal sovereign and disciplining power that has been assigned to staff, the power techniques one has access to alongside the helping and supporting dimension (Billquist & Skårner, 2009). It requires space for reflection on treatment and how to, in practical everyday life, resolve the conflict between control and support—between security and caring practices—in how to configure one’s individual actions and the collective practices so that control does not overshadow the support more than necessary.

To be able to give space for sociomaterial caring practices that could be acknowledged as such by the youth, settings, and materialities inscribed with the meaning of caring, and the correspondent decorous behavior of sociomaterial caring practices need to be given space in the context of the special youth homes.

This gives rise to the critical issue of intentionally defining what caring practices constitute in *this* context, critically examining the boundaries between security practices and caring practices and identifying correspondent spaces and materialities. Material objects, the design and technology of the environment can interrupt and disturb the feeling of ‘home’, ‘sense of a backstage’ and the experience of ‘good caring practices’ (Buse et al., 2018). However, they can also help re-configure and restore what has been interrupted. After all, caring practices are not what happens occasionally, but are done in everyday life, involving staff, youth, materialities, and spaces.



Photos taken by a girl, of to her valuable objects. Siljegärde, June 2018, study III

PART 8. METHODOLOGICAL AND THEORETICAL CONSIDERATIONS

The design of the thesis, and the different methods used, have shed light on the phenomenon of the care environment from different angles. This, together with coauthors from different disciplines, has strengthened the validity and trustworthiness of both the studies, and the dissertation (Noble & Heale, 2019).

VALIDITY AND RELIABILITY IN THE QUANTITATIVE STUDY

The quality and trustworthiness of quantitative studies are often referred to in terms of validity and reliability. Validity refers to how well a method, or test measures what it intends to measure. To be able to comment on the validity, a questionnaire or a measure instrument ideally needs to be evaluated and tested, for example, by comparison with other similar instruments. Reliability refers to consistency across time (test–retest reliability), items (internal consistency), and researchers (interrater reliability) (Bowling, 2002; Polit & Beck, 2016).

Access to data for Study I was a complicated and lengthy process, especially since the competence and experience differed between the different authorities. The organizations' conditions in terms of competence, time, and staffing affected me. This was also the case regarding the implementation of the survey in Study I. Because the Swedish National Board of Institutional Care lacked lists of e-mail addresses for all heads of institutions, I had to add a lot of time to call around to the institutions. Here, contact with the earlier mentioned head of a department at Viskansby proved to be crucial, as she was able to facilitate direct contact with several heads of institutions and the regional offices.

In Study I, as in the analyzes of the additional data material, both data from the ADAD IN and UT questionnaires and registry data from official registrars were used. A previous psychometric study of the Swedish version of the ADAD showed good interrater reliability, and concept validity (Börjesson et al., 2007; Ybrandt et al., 2008). The shorter discharge interview, 'ADAD UT', has not been tested, which makes it difficult to comment on its reliability and validity, and hence the trustworthiness of the results from it. In Study I, two indices were constructed. The internal consistency of these was good, with Cronbach's' alpha coefficients of .874 for the index of internal psychosocial problems, and .888 for the index of external psychosocial problems. For ADAD, the dropout rate differed between different variables, which means that

the reliability can be considered higher for some variables but lower for others. However, ADAD is the only data source available that contains data about young people in special youth homes. Hence, despite shortcomings, it today (2022) constitutes the only data source available to describe the youth population of involuntary institutional care in Sweden.

The complementing survey in Study I was developed by me in cooperation with my supervisors. Although the internal or theoretical validity can be said to be acceptable, as operationalization of questions was done in light of an initial literature review and consideration of available research (Andersson, 2016; Bowling, 2002), it has not undergone any reliability test. The questionnaire was tested on a small number of managers ($n = 4$) at special youth homes before it was sent out; however, this test was intended to ensure that the introductory text, concepts used, and the structure of the questionnaire were comprehensible. The decision to design a survey by myself was made considering the lack of instruments that measure the environment, specifically in institutional youth care⁵⁶. Although there are instruments for evaluating the environment in other care contexts, for example, in elderly care (for example Nordin et al., 2015), our literature review showed that factors other than those established may be important in the context of institutional care of young people. For that reason, I considered it important to design a more open questionnaire. This decision also proved advantageous when analysing the material, as a lot of important information was available in the open answers. However, the fact that the survey is not reliability tested affects the trustworthiness, the external validity, and the generalizability of the results from study I, which must be described as limited (Andersson, 2016; Bowling, 2002).

Sweden, like the rest of the Nordic region, has a long tradition of public registers. However, the trustworthiness of register data depends on the accuracy of the information provided to the holding authority. The Inpatient Care Registry contains data on all care occasions at publicly run care facilities in Sweden from 1987 onwards. Reporting is statutory, and information on enrollment and discharge date, gender, and age is often complete, while information on diagnosis is missing in 1–2% of cases (National Board on Health and Welfare, 2020). Also, for the Cause of Death Register, reporting is statutory, and the loss (for the variable cause of death) is between 1–2%. Data on cause of death have been shown to be more reliable for young people than

⁵⁶ Designing such a measuring instrument was the original idea for Study IV included in the dissertation. However, that idea had to be abandoned early in the planning, as it would have become a too extensive work within the framework of a dissertation.

for the elderly, and for violent deaths and rapidly developing diseases, than for chronic and long-term illnesses (The National Board of Health and Welfare, 2010). The statistics over legal proceedings are based on data from administrative systems used by prosecutors, customs prosecutors, and courts (The Swedish National Council for Crime Prevention (Brå), 2021). All registers used in this thesis can, in light of this, be considered to be of high quality with high trustworthiness, which strengthens both Study I and the supplementary analyzes.

Due to the lack of research on the effects of the environment on youths in institutional care, Study I was exploratively designed—thus facing several challenges. First, data from different datasets and time periods are combined. We tried, in the study, as far as possible to ensure that the design of the included special youth homes had not changed over time regarding design by studying documents available from the authority (The Swedish National Board of Institutional Care, 2015). However, these documents contained limited information, which means that there might be changes that did not come to our knowledge. Although they are unlikely to overturn our results, this affects the trustworthiness of the study. Second, the choice of inclusion criteria (wards that answered the survey) means that which young people, from the register material that have been included in the study, depends on which departments responded to the survey. This could give rise to selection bias. However, when analysing the wards included in the study, a variation was shown according to the type of setting (urban/rural), type of ward, and age of the ward.

Third, both the dependent variable ‘criminal activity during care’, and the associated independent variables ‘solitary confinement’, ‘alcohol use’, and ‘escaping’, are all indicators of norm-breaking behavior. This may indicate a redundant relationship, which gives rise to questions regarding validity. However, it can be argued that the independent and dependent variables measure different degrees of severity regarding norm-breaking behavior, which strengthens our analyses. Fourth, the variable ‘social density’ is based on the survey questions on the number of places and the number of available rooms and thus should be viewed as a proxy variable and a rough estimate. Within the research field of care environments, different operationalizations are used when measuring spatial or social density and crowding (Ulrich, 2019). This, together with the fact that measuring square meters on-site at the institutions had been a resource-intensive, not to say impossible task, meant that we had to construct a measurement based on available data. Hence, the

social density could be higher than our estimation since our calculations did not include staff density.

Both the characteristics of the sample of youths used in Study I and the findings from the complementing analyses differ somewhat from the official statistics. This could be due to several reasons. One explanation could be the time perspective. While official statistics and previous studies use data from a shorter period (between 6 months and five years, see for example Pettersson, 2017), the present study includes data from a ten-year period. This can make visible variations that usually do not appear in data from a shorter period. Furthermore, the difference can also be attributed to the fact that the analyses include young people placed because of care, and because of conviction, in line with Vinnerljung and Sallnäs (2008). The fact that the official statistics are limited makes the above analysis important for understanding the population of youths in Swedish institutional youth care.

TRUSTWORTHINESS OF QUALITATIVE STUDIES

In qualitative studies, the quality of the research is often discussed in terms of trustworthiness, referring to credibility, dependability, confirmability, and transferability. Credibility refers to the ‘truth’ of the data and the study’s findings, while dependability relates to replicability of the study, and confirmability to the degree of ‘neutrality’ or ‘objectivity’ in interpretation of the findings. Transferability relates to whether the findings are applicable to other contexts, populations, or similar phenomena (Polit & Beck, 2016).

In this dissertation, and especially in the qualitative studies, the young people’s voices as well as the voices of the staff are expressed. The fact that the dissertation and the studies are based on empirical data, where the very purpose has been to give space to the opinions, thoughts, and experiences of the people in the field, strengthens the study’s confirmability. This means that it is not the researcher’s perspective or opinion that dominates, but those who have participated in the research (Polit & Beck, 2016).

Further, the use of different data sources strengthened the credibility of the studies. In the three qualitative studies, three different methods were used: microethnography, photovoice, and focus group discussions. In Study II, the main data source was fieldnotes from participant observations, supplemented by ethnographic interviews. In study III, a combination of photographs taken by the youths, and follow-up in-depth interviews were used. The triangulation

of methods and methodologies strengthens the credibility of the studies, and of the overall findings discussed in this thesis (Noble & Heale, 2019; Weyers et al., 2014). During data collection, I made an effort to confirm observations and statements by regularly asking follow-up questions. In all three studies, the findings were illustrated and strengthened through the presentation of citations, photos, and extracts from field notes and ethnographic interviews, which further enhanced the credibility.

The use of different analysis methods can also be said to strengthen credibility. In general, the dissertation is based on induction, that is, on what emerges in empiricism, rather than by applying a predetermined model or theory (Kennedy, 2018). However, in the analysis of the data in Study II, I used Kenneth Burke's dramatisic pentad to systematize and structure the data. However, I adopted a theory-integrated analysis, where themes were identified in the empirical data, rather than applying Burke's whole theory and pentadic analysis (Atkinson, 2007).

Dependability can be said to be strengthened through providing detailed information on the method and methodology as well as the procedure of analyses when reporting the studies (Polit & Beck, 2016). In Study IV, the same questions were used to facilitate the discussions in all focus groups, which further strengthens dependability since the groups got the same questions. Regarding transferability, neither the aim of the qualitative studies in this thesis nor the purpose of ethnographic or qualitative methodologies is striving for representativeness or generalizability, but to provide an in-depth interpretive understanding of social interactions, people's life worlds, or people's values and ideas tied to a specific phenomenon in a specific context (Le Baron, 2006; Polit & Beck, 2016). This means that the findings from the qualitative studies might not be—always and in any case—transferable to all staff and youths, or clients, in institutions. Rather, the findings can be considered generalizable to other similar situations and contexts, where the theoretical assumptions used are applicable, and as descriptions of what *could* arise given the context and conditions (Gobo, 2004).

A significant part of qualitative research considers building trust with people you meet in the field. The fact that those who participate in the research feel trust increases the chance that you, as a researcher, get to share their experiences, and opinions, and that you are invited to participate in everyday life—which in turn strengthens credibility. The common denominator between me and all staff members, '(former) employee in institutional care', probably made it easier for me to get access and at least temporarily 'pass as' an acceptable member of the institution. This has been clear in the staff members'

attitude toward me. After an almost always initial wait-and-see attitude—which sometimes also meant to be ‘tested’ by, for example, being joked with in front of the young people or being tried in various practical tasks where only parts of the information were given—I received various signs of being ‘approved’. Examples of this are different trusts, both to be served more information than I asked for, to participate in various activities and conversations that would not be necessary, as well as offers to work extra. An example is during the data collection for Study II, at Siljegårde, when one of the girls became angry at the teacher in home and economics studies. The youths are generally not allowed to walk by themselves in the institutional area but must be escorted by staff. This also meant that I was not allowed to walk the area with the young people myself, without the company of staff, for security reasons. The teacher seemed to have completely forgotten about my role and why I was there when she carelessly asked me to take the youth back to the ward. When I reminded her, she did not take any major notice, but said that it would ‘probably go well’. Given my previous experience, and that I had managed to establish a relationship with the girl, the two of us walked out the door to the ward, without any other company.

Even though I experienced the relationship and trust building with the staff as generally easy, there was one specific case where I experienced difficulties in establishing a relation to a staff member: a relatively young woman, newly employed treatment assistant in a ward in Viskansby, who seemed bothered by my presence. Although I clarified the purpose of my research study and tried to adopt as informal an approach as possible to her, I felt as if she thought I was there to assess specifically her. At least that was what her behavior signaled; this led to me not being given access to a specific teaching situation, even though other staff members did not mind that I would have participated. However, apart from this event, I was given access to the spaces, places, and situations that I wanted and that the research ethics allowed.

All young people who wanted to participate in the qualitative studies were allowed to do so, given that they were 15 years or older or that their parents or guardians could be reached. Generally, after an initial phase of distanced observation from the youths’ side, most of the young people were curious and interested in talking to me. There can be several reasons for this. Everyday life in a special youth home can be contentless and characterized by waiting and unemployment without much input from the outside world. A researcher—or anyone from outside—visiting can be a welcome and exciting feature. Furthermore, many of the young people I spoke to during my visits had many years of experience of being placed in social out-of-home care. They were thus

used to having to repeat their life stories to new people. Maybe I was just one in the line of those to whom they told their life story, and who then left them.

My previous experience working with young people may also have influenced my approach to them. Perhaps they felt that I was honestly interested in their thoughts and experiences, and that I was used to, and relatively comfortable, in the institutional environment and in relation to them. The relationship between me and the youths can hardly be described as reciprocal (again, I could leave whenever I wanted). However, perhaps it was a *little* more reciprocal than the relationship between the youths and the staff members. I was not there to maintain the controlling routines that characterize the institution—I was someone from outside who was there to listen to them. I possessed no formal power over their situation, yet—or perhaps precisely because of that—I got to take part in their lived experiences.

However, the fact that I had a Polaroid camera with me during the data collection for Study III seemed to increase the youths' interest. Many of them had never seen such a camera, and they were fascinated by the fact that the image appeared before their eyes. The camera became a natural gathering point, where our attention was focused on an object that we could talk and joke about and around. Sometimes, the young people were quick and snapped a photo of me without me having time to react, which gave rise to a lot of laughter and facilitated further conversations and later the interview itself. The advantages made me take the camera with me also during the data collection for Study II⁵⁷, and I both used it myself and invited the young people to use it if they wanted.



Picture of a Polaroid photo taken by a boy, Ottaryd, study III.

⁵⁷ The camera was only present during data collection at Siljegärde for study II. At Viskansby, the head of the institution did not approve photographing.

ABOUT RETURNING TO PLACES AND SPACES

The fact that I, in the qualitative studies, returned to places and spaces I had previously visited at Siljegärde and Viskansby can be viewed both as a challenge in relation to pre-understanding and as a strength in terms of trustworthiness.

At Siljegärde and Viskansby, managers as well as staff members were generally welcoming and interested in facilitating my presence. However, during data collection for Study III at Ottarryd, I experienced a somewhat other, perhaps not directly reluctant, but much more hesitant attitude from the head and the deputy head of one of the departments. Although it did not have any direct consequences in the form of denied access, I felt monitored and constantly observed in a different way here. It happened that the deputy manager tried to prevent me from talking to some of the guys, referring to the fact that they were ‘not in good condition’. In these cases, however, it still ended with me talking to those of the boys who wanted to participate, not because I insisted, but because the *boys* did. They wanted to decide for themselves, and perhaps it became difficult for the deputy manager to maintain the opinion that the youths were not in shape to talk to me when they were obviously in shape enough to express that very wish. Ottarryd declined to participate in Studies II and IV, referring to the institution being under pressure due to instability and incidents. It is difficult to know exactly what was behind their rejection, and it is possible that the findings would have been somewhat other if Ottarryd had been involved in further studies.

Although the opportunity to return to Siljegärde and Viskansby meant that I had to work continuously with reflexivity and handling my pre-understanding, I view the returning as a strength for the dissertation. For each study—and each year that passed—I felt that I had deepened my understanding of the care environment at these special youth homes. However, I also saw how changeable the institutional care of young people is. Each time I returned, several of the staff members had left, several of the young people had moved, and new ones had moved in. The environments, on the other hand, looked pretty much the same except for a department at Siljegärde, where they had added a little more textile and some sound absorbents in pastel colors trying to make the department more adapted to the young people's needs. But except that it was the same dressed-down environment, stagnant air, the same TV constantly going on with some reality show, the same big heavy leather sofa fixed to the floor, and gloomy, dark décor, at every ward. Young people with different needs came and went, but the environment seemed to be permanent. This inflexibility is recurring in the data material and would probably have

appeared even if I had not returned to the same places (it also appears in the survey in Study I), but I would never have experienced it myself with my body and my senses if I had not returned to the same special youth homes.

THEORETICAL CONSIDERATIONS

The theoretical framework used in this dissertation can be attributed to an interactionist perspective. Even though the sociomateriality perspective originates from Social Practice Theory, it refers to interaction between people, spaces, and objects, from which social practices arise. Thus, it could be argued that it is possible to relate to the dramaturgical perspective of Erving Goffman. This constitutes the ontological assumption that underlies the interpretation of the dissertation's findings.

Although the focus in this dissertation has been on what happens between people in the institutional environment, it is important to also discuss the societal function of such an environment, and how it tentatively relates to social phenomena at the macro level, as done in the discussion part. However, the use of theorists that can be attributed more to a macro perspective on space and place (as for example Cohen, 1985, Foucault, 1986, and Schatzki, 1991) can be seen as contradictory in relation to the interactionist perspective. However, rather, one can view the perspectives as complementary. While Goffman focuses on what happens between individuals in a specific setting, theoretical perspectives that concern thought systems and structures, offered by theoretical perspectives such as Foucault's, focus on abstract discourses (Hacking, 2004).

Although theoretical triangulation may not have taken place in the true sense of the word, since the interactionist and sociomaterial perspectives run as a common thread throughout the dissertation, it can be argued that complementary theoretical perspectives have been used in at least one study. In study III, the phenomenological perspective and lived experiences of the phenomenon of the care environment are at the center of attention. Taking part in the young people's lived experiences of the care environment in the special youth homes has been crucial for the purpose of the study, and for a deepened hermeneutical understanding of how the care environment affects both them and the staff.

In study III, the concept of socio-spatiality was used. According to this concept, space is understood as the intertwining of objective and social dimensions, where space is not just viewed in absolute terms but also social (Schatzki, 1991; Zieleniec, 2008). However, since I early on understood that

not only the spaces but also the materialities were important to both youths and staff in their experience of the care environment—I decided to use the concept of sociomateriality.

Further, Goffman’s work relies on field work conducted in the setting of old mental institutions and might be argued to be less applicable to the present special youth homes, as has been argued recently (see for example Enell et al., 2018; Wästerfors, 2019). Rather, the special youth home of today could be viewed as more ‘permeable’ and ‘porous’ (Wästerfors, 2019, p.32)⁵⁸. Subsequently, the ‘total’ character in the exact definition that Goffman presented in his work might be less valid, that is, the settings he studied might not be completely comparable to the Swedish special youth homes of today. However, the ‘total traits’ in the sense of an all-encompassing grip on its inhabitants could be argued to be of use (Wästerfors, 2019, p. 32–33) in analyses of the care environment of special youth homes.

Last, Goffman does not write much in *The Presentation of Self in Everyday Life* (1956) about what is meant by the term decorum, nor are there, as far as I know, other texts in which he discusses or clarifies this term. This means that my understanding of the concept of decorum as an aspect of sociomateriality constitutes *my* interpretation based on the specific findings in this dissertation. Thus, this interpretation can also be criticized for constituting an extrapolation. However, at the same time, this constitutes the theoretical contribution of the dissertation.

⁵⁸ Wästerfors (2019) mentions for example, that the environment of the special youth home today constitutes a more supporting setting than old mental institutions and prisons, for example regarding the youths’ access to a private bedroom and right to take part in leisure activities within the institutional area.

PART 9. LOOKING AHEAD

CONCLUSIONS

This thesis contributes to knowledge on the care environment within institutional youth care, specifically Swedish special youth homes. It acknowledges spaces and materialities as crucial parts of social practices and points to practices being ‘configured’ and experienced due to the social and spatial context of a setting. Goffman’s concept of decorum could be interpreted as an aspect of sociomateriality due to the findings. This perspective recognizes the moral conflict built into the emphasis on risk management imposed by the organization and society, parallel with the care and treatment task. Moreover, the one-sided security inscription of spaces and the presence or absence of certain materialities encourages controlling practices and hinders caring practices. The staff experience a lack of support on how to solve this conflict in their everyday work, resulting in collective constraints and sociomaterial control practices re-interpreted as caring by the staff—however not acknowledged as such, by the youths. This creates distance between staff and youths, evoking a reluctant adaption that could open for the youths to turn to each other. This thesis acknowledges the care environment as a sociomaterial reality, affected by organizational resources and competence, and legal regulations.

IMPLICATIONS

The practical implications of this thesis are presented in five take-home-messages:

First, acknowledge spaces and material objects as crucial parts of caring practices. Do not view them as merely ‘dead’ matter, that do not matter.

Second, define what ‘care’ and ‘caring practices’ constitute in the specific context, and how they relate to other potentially contradicting requirements on security, risk management and society protection.

Third, define what ‘a caring environment’ means in the specific context, and address how the impact of security arrangements on caring practices can be mitigated. Can security arrangements be concealed in such a way that the environment is not decoded or experienced merely in terms of control?

Fourth, offer staff education, development opportunities and support, through research and experience-based dialogue, on how to manage the balance between care and security in everyday work with young people.

Fifth, offer a care environment that encourages staff to adopt caring practices, which are also recognized as such by young people. This creates the conditions for trusting treatment alliances and prosocial change.

FUTURE PERSPECTIVES

The findings of the present thesis point to the importance of acknowledging spaces and materialities as crucial parts of social practices. Further research is required in various fields, such as social work, health, and care sciences, building design and organization, and management, including, but not limited to, the following points:

- Investigate care environment issues from an organization and management perspective: identify facilitating and hindering factors related to resources, organization structure, and management in institutional youth care.
- Study the implication of concepts such as ‘care’, and ‘caring practices’ in more detail in the context of institutional youth care, and how they relate to other concepts such as ‘security’, ‘risk assessment’ and ‘societal protection’.
- Assess how security arrangements could be designed and implemented so they are neither interpreted as controlling by youths, nor are they hindering staff’s caring practices.
- Investigate the phenomenon of care environment related to different groups’ needs for care and treatment. Apply an intersectionality perspective to clarify different needs, and to counteract unreasonable differences in care environments.
- Further investigate potential associations between spatial factors and outcomes of care, for example, related to onset and relapse in criminal activity, or health and social care consumption after placement at a special youth home.
- Develop collaborations between expertise in building design, care science, and social work science to jointly identify further research, as well as key factors that can easily be implemented in everyday life at special youth homes.

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