

Presentation title:

“We have to do what we can” - an ethnography of welfare workers encountering delinquent children

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Society's responsibility to protect children from harm raises complex questions about consequences when children offend criminal law, as well as when and how authorities are to intervene in order to protect the general public from crime. The processing of child offenders comprises a legal ambiguity between the social vis á vis the criminal jurisprudence. Many welfare systems around the world protect children from the law enforcement system, identifying children as legally irresponsible. Lately, however, an uprising global trend has turned its focus toward the public safety and the integrity of victims with hints of vengeance and more punitive reactions also toward child offenders. Still, issues related to how the children are processed in practice are under-researched, and so are the mixture of jurisdictional, institutional, social, and emotional challenges and dilemmas that social workers and police investigators meet in their everyday work at the frontline of the welfare system. This paper presents an ethnographic analysis of local police investigators and social workers, situated in a disadvantaged neighborhood of Sweden, in their everyday managing of delinquent children. Based on street-level bureaucracy as a theoretical framework, it shows how interprofessional agency emerges bottom-up through public workers' use of discretion in work across bureaucratic boundaries. Findings reveal how policy divergence emerge collectively, out of fusions between individual experiences and professional principles – as opposed to reactions against formal policies. Thereby, the findings illustrate the multifariousness of child delinquency as well as the complexity involved when it encounters the bureaucratic system. Moreover, findings indicate that welfare workers may use their relative autonomy to acknowledge the complexity of their work; thereby making their work more difficult, but with ambitions to improve procedures, and ultimately the futures of the children.