



Compulsory care placements among unaccompanied male refugee minors

Tove Pettersson

Professor, Department of Criminology, Stockholm University
tove.pettersson@criminology.su.se

Maria A. Vogel

Researcher, Department of Criminology, Stockholm University
maria.vogel@criminology.su.se

Abstract

The increase of unaccompanied refugee minors in Sweden during the last decades is reflected in an increase in the proportion of unaccompanied male minors subjected to compulsory placements in secure care. Reports have shown that this group differed from other youths in secure care, but research on reasons for compulsory care is scarce regarding unaccompanied minors. In this article, unaccompanied male minors (UAMM) subjected to compulsory care, and whether these differ in relation to other youths, is investigated. We also examine variation *within* the group of UAMM. A general comparison shows that the grounds invoked for the compulsory placement of UAMM follow general gender patterns in certain respects, while in others they are more similar to the grounds described in relation to assessments of girls' behaviour. The UAMM were more often placed in secure institutions. Three groups of UAMM were identified with relatively different problems, although a placement in secure care is the most common one regardless of problem profile. It is argued that the UAMM in some respects seem to be subjected to legal uncertainty with both harsher interventions than appropriate, and as a result, not receiving the care to which they are entitled.

Keywords

unaccompanied minors, compulsory care, secure care institutions, delinquency, cluster analysis

Introduction

Child refugees who arrive in the receiving country unaccompanied by parents or other adult carers are not a new phenomenon, but in 2015 their numbers increased dramatically, both in Sweden and other European countries (Hodes et al., 2018). The unaccompanied refugee minor became a well-established concept in the public consciousness. Approximately 35,000 unaccompanied minors applied for asylum in Sweden in 2015, of whom a majority were boys (Nordens välfärdscenter, 2017). Perceptions of unaccompanied male minors (UAMM) have varied over time, and one means of understanding the way such perceptions are produced is to view them as based in two mutually contradictory narratives. On the one hand, there is the narrative of the vulnerable child in need of protection, and on the other, the narrative of the dangerous, criminal youth (Lems et al., 2020). Over the course of 2015, there was a marked shift in the dominant narrative regarding unaccompanied minors. Having initially been described in the media as vulnerable, traumatised and in need of help, they increasingly came to be depicted as criminal young males who had lied about their age in order

to exploit the welfare systems of receiving countries, and who constituted a threat to public order (Lems et al., 2020). However, this form of dichotomised perception is not unique to views of UAMM, but rather an historically entrenched means of categorising vulnerable children on the basis of whether they are viewed as deserving protection (“children in danger”) or as individuals against whom society must protect itself (“dangerous children”) (Donzelot, 1997; see also Goldson, 2000). Thus, perceptions of UAMM follow historical patterns in the way societies deal with children who are vulnerable and engage in norm-breaking behaviour. In Sweden, the municipal social services have the overarching responsibility for these groups, and the categorisation of these children as being either “in danger” or “dangerous” (Donzelot, 1997) is reflected in the double function of the social services system. On the one hand, social services have a duty to provide support and assistance to children at risk, whereas on the other there is a long tradition of the social services functioning as an instrument of control, disciplining those whose lives do not conform to societal norms.

While children who for various reasons come to the attention of the social services comprise a heterogeneous group, unaccompanied refugee minors have accounted for a significant proportion of this group since the municipalities took over the practical responsibility for reception measures from the Swedish Migration Agency in 2006. Unaccompanied minors differ from other children in that they are automatically referred to the social services, irrespective of the presence of possible psychosocial problems. However, the legislation and guidelines governing the social services’ work with children in need of support is the same irrespective of reasons for referral, and the procedure used to investigate the needs of unaccompanied minors is thus the same as that employed in relation to other children. This work should be guided by the principles of voluntarism and participation, but it is also possible to take children into compulsory care when the need for care is deemed to be substantial and care provision on a voluntary basis is not deemed possible (Care of Young Persons (Special Provisions) Act, commonly known as the LVU Act). Such compulsory placements constitute the most invasive measure that can be taken by social agencies against children in Sweden, and for those who are placed on the basis of behavioural problems (Paragraph 3, LVU¹) and whom the social services deem to require “rigorous supervision” (Paragraph 12, LVU), this means placement in secure care at a state-run institution.

In parallel with the sharp increase in the number of unaccompanied minors arriving in Sweden during the years prior to 2016, there was also an increase in the proportion of UAMM who were subject to compulsory placements in secure care. Internal studies conducted by the National Board for Institutional Care (NBIC), the government agency responsible for secure care institutions, revealed a perception that these children were placed on weaker grounds than those applied to other groups, and that the care goals specified by the social services for these placements were vaguer, and in effect involved internment, the logic being that incarceration would prevent the youths from absconding (Kaunitz & Jakobsson, 2016; Padyab et al., 2020). More recent research has shown that the group is heterogeneous, with some youths being assessed as having less extensive problems than others placed in NBIC institutions, while others are assessed as having more substantial and complex problems (Backlund & Thorén, 2021; Ghazinour et al., 2021). We do not know, however, whether this is also the case for unaccompanied minors subject to other forms of compulsory placement. Overall, we know little about those unaccompanied minors who are deemed to have problems requiring relatively invasive measures from the social services, and there is a lack

1 Placements based on Paragraph 2, LVU focus on cases involving deficient care provision by parents or guardians.

of systematic knowledge regarding the compulsory care placements of unaccompanied minors. If the social services treat unaccompanied minors differently from other youths, which might be the case given what we know about placements in secure institutions, this might have several consequences. One of the consequences may be that they are placed on grounds that may not have a proper basis in law, implying legal uncertainty. This is related to questions of potential discrimination within the justice system. The consequences of that might be a risk for disproportionate interventions, potentially even including being placed in secure care on unreliable grounds. Paradoxically, since the intention with the LVU Act is protection of children at risk of harm, different treatment might also result in them not receiving the care they both need and are entitled to.

Against this background, this article has both descriptive and theoretical purposes. Since knowledge about unaccompanied minors in compulsory care is scarce, a description of the group is important. We will therefore examine the grounds invoked in relation to compulsory care placements among UAMM, and whether these differ from those invoked in relation to other youths, and also the extent to which the grounds for placement vary within the group of UAMM. Further, we will discuss whether any such differences indicate that UAMM are treated differently from other youths, and, if so, what consequences that may entail. This is done by analysing court decisions on compulsory care from administrative court and, when applicable, appeal court.

The management of unaccompanied refugee minors in Sweden

The systems employed for the management of unaccompanied refugee minors vary between different countries, among other things depending on whether the members of this group are primarily viewed as children or as asylum seekers. In Austria, Dursun and Sauer (2021) have noted that the management of unaccompanied minors illuminates a systemic paradox, since they find themselves in the space between an exclusionary and repressive asylum system and an inclusive and supportive child welfare system, whereas Derluyn and Broekaert (2008) have argued that in the Belgian system, psychological perspectives are subordinated to the legal perspective, which means that possible care needs are ignored. When Sweden shifted the responsibility for practical reception measures for unaccompanied minors from the Swedish Migration Agency to the municipal social services, one important argument was that the same rules should apply to all children living in Sweden (Min. of Justice, 2004). Hence in the Swedish system, the status of unaccompanied minors as children is viewed as having more weight than their status as asylum seekers.

Once an asylum-seeking minor has arrived in Sweden and been registered at the Swedish Migration Agency, he or she is referred to a municipality, which is thereafter responsible for the child. The investigation of the child's situation and needs is regulated by the Social Services Act, and the child is placed either in foster care or in a residential care institution. Unaccompanied minors constitute a group that is both heterogeneous and vulnerable in several ways. Although many cope well in the receiving country, there are also many who suffer substantial psychological and psychiatric problems. These may be linked to the situation in the children's countries of origin that led to the decision to become refugees, and to experiences during the migration process, but also to factors associated with their arrival and adaptation in the receiving country (Garcia & Birman, 2022). If a situation arises where it is necessary to intervene using compulsory measures in order to ensure that a child's care needs are met, an application is made to the administrative court for a compulsory care order. Formally, it is the municipal social welfare boards that submit these applications. However, a substantial majority of the compulsory care placements that are

made on the grounds of a child's behavioural problems begin with an immediate placement (Paragraph 6, LVU).

What governs the care placements of children?

Research on unaccompanied minors has primarily focused on their mental health and issues of policy and practice in the work conducted with this group, and there is also an expanding field of research focused on the children's own perspectives (Lems et al., 2020). Among other things, studies show relatively extensive levels of mental ill-health among unaccompanied minors, *inter alia* in the form of trauma, depression and anxiety (El Baba & Colucci, 2018; Hodes et al., 2018). Research also shows that the risk for suicide is considerably higher among unaccompanied minors than among their same-age peers (Mittendorfer-Rutz et al., 2020). At the same time, other studies show that unaccompanied minors constitute a resourceful and resilient group (Oppedal et al., 2017; Thommessen et al., 2015). The research on policy and practice has among other things examined the management of unaccompanied minors at the systemic level (Backlund et al., 2021; Seidel & James, 2019) and the practical nature of the work conducted with this group (Kohli, 2006; Nelson et al., 2017; Omland et al., 2021). This research often focuses on unaccompanied minors in general, whereas the current study directs its interest at the subgroup of unaccompanied minors who have developed various forms of behavioural problems, and for this reason are viewed as requiring more specific care measures. Research focused on compulsory care placements among unaccompanied minors is scarce, although some of the research examining policy and the system-level management of this group has in part applied a critical perspective, viewing the management of unaccompanied minors as a manifestation of control and criminalisation (Holmlund, 2021; Kovner et al., 2021). Nor is the knowledge gap regarding compulsory care placements restricted to unaccompanied minors, since there is a general lack of knowledge regarding the arguments and reasons invoked for the compulsory placement of children with behavioural problems, and also on the role that factors such as gender, class, and ethnicity may play in both assessments and the arguments invoked in relation to placements.

The existing research has primarily examined the significance of gender, and has directed its attention at how this manifests itself in the context of institutional care. Here, studies have consistently found differences in the way measures are used in relation to girls and boys respectively, both historically and today. Boys are more often subject to control as a result of externalising behaviours directed at others, and for involvement in crime, whereas the control of girls has focused on restricting and disciplining their sexual behaviour (Chesney-Lind & Pasko, 2013; Ericsson, 1997; Ericsson & Jon, 2006), or on achieving protection through control (Vogel, 2016). There are also a small number of studies on the contents of institutional care that suggest that other power dimensions, in addition to gender, may also be of significance, including ethnicity (Gruber, 2013; Basic, 2015; Pettersson, 2021; see also Chesney-Lind & Pasko, 2013).

The only Swedish study that has examined how gender may affect compulsory care decisions was based on court judgements regarding compulsory care of youths aged 13–17 (Schlytter, 1999). This study found that the legislation had been formulated on the basis of boys and their problems, and that the courts' assessments of girls and boys followed different norms. Among other things, the study found that, unlike boys, girls were placed on mental health grounds, which Schlytter argued lacked legal basis and thus constituted an extension of legal praxis. Research shows that mental health issues often constitute the overarching explanation in social services assessments of the problems of teenage girls,

irrespective of their behaviour (Vogel, 2016), and that levels of self-reported ill-health are high among girls in secure care (Vogel, 2012). At the same time, research has questioned the extent to which the care provided at these institutions can meet the needs of these girls (Vogel, 2017, 2020). Since it is established that unaccompanied minors also have high prevalence of mental ill-health (El Baba & Colucci, 2018; Hodes et al., 2018), Schlytter's conclusions regarding treatment of girls with mental ill-health is also of interest for the treatment of unaccompanied minors. Are there similar patterns or do they differ from the girls?

A quantitative analysis of data from the forms completed by the social services when applying for NBIC placements for unaccompanied minors found that a need for special care measures for psychiatric problems is raised in just over half of these applications, whereas externalising behaviour is referred to in two thirds (Backlund & Thorén, 2021). When these specified care needs are related to the grounds invoked for the placements, levels of psychiatric problems are significantly lower among those placed as a result of involvement in crime. There is thus good reason to assume that the unaccompanied minors placed in NBIC institutions may include different subgroups, but the question remains whether this is the case for all unaccompanied minors subject to compulsory placements as a result of behavioural problems or only for those in secure care. To analyse this, we carry out a cluster analysis to find out about potential subgroups among unaccompanied minors and, if so, what characterises them. The clusters will also be used to compare these groups in relation to other aspects, such as placements at secure institutions.

Both international and Swedish research has shown that ethnic minorities are subject to discrimination within the justice system (Engen et al., 2002; Estrada et al., 2022; Lainpelto, 2019; Schclarek Mulinari & Keskinen, 2022; Steffensmeier et al., 2017; Wästerfors & Burcar Alm, 2020). It has also been illustrated that people both within and outside of the justice system tend to perceive a crime as more serious when the perpetrator is an immigrant than when he or she is Swedish (Bergström & Sarnecki, 1996; Lainpelto, 2019). Steffensmeier et al. (2017; see also Estrada et al., 2022; Pettersson, 2005) emphasise the importance of paying attention to interaction effects between, e.g., ethnicity, gender, and age for understanding such issues, where, for example, young men from ethnic minorities constitute a group particularly vulnerable to discrimination. Further, a study of unwarranted differences in social services' interventions for children and youth also showed that boys with foreign background were given a lesser degree of support compared to other groups of children, although no difference in amount of needs were identified (Persdotter, 2018). However, we know very little about this in relation to the LVU Act §3 (see Bergström & Sarnecki, 1996 for an exception), and especially when it comes to the situation of unaccompanied minors, even if secure care staff have suggested different treatment (Ghazinour et al., 2021). Given the shift in narratives of unaccompanied minors, from vulnerable children to dangerous criminal youths (Lems et al., 2020), these tendencies within other parts of the justice system suggest that it is important to study the question of equal treatment of the unaccompanied minors in relation to the LVU Act.

Data and method

The data in this article are drawn from a study of children (>18) given compulsory placements as a result of their own behaviour in 2015 and 2016.² The goal of the overarching

2 The study was approved by a regional Ethical Review Board (2018/5:3) to be carried out without consent from those concerned. Court orders are public acts and the assessment is that tracking these young people down and asking for consent would not benefit them.

research project was to examine the significance of dimensions such as gender, class and ethnicity for decisions regarding the compulsory placement of children. All administrative court judgements and case files referring to placements made in accordance with the LVU Act §3 have been examined and coded. The judgements contain a summary of the application from the social services and the court's motivations for its decision. The case files contain all the written submissions that, in addition to the oral hearing, constitute the basis of the court's decision. The most important part of the material presented to the court comprises the social services investigation on which the application is based, but the case files can also include opinion statements from psychologists, excerpts from the population register, and the results of medical examinations.

The data comprise a total of 1,697 cases relating to the compulsory placement of children. Among these, there are 36 individuals, of whom 10 are UAMM, who have been the subject of two cases. The data thus include 1,661 individuals. The number of unaccompanied female minors was very small (17 individuals), and they are therefore not included as a group. There were also 16 cases for which an eventual UAMM status was uncertain. These are also excluded. Since the focus is directed at the judgements made by the administrative courts and the grounds for these judgements, and not the actual problems of the individuals concerned (although they cannot be clearly distinguished from one another), the analysis focuses on cases and not on individuals when comparing UAMM and boys and girls who were not unaccompanied minors. However, the cluster analysis is based on a classification of individuals, therefore individuals constitutes the unit of analysis in this. For the 10 boys who appear in connection with two cases, the information found in the first of the two cases has been included in this analysis.

The analyses are based on different analytical units. To assist the reader, these are presented in Table 1.

Table 1. Study data and sample sizes for different analytical units

Material	Boys, not unaccompanied minors	Boys, unaccompanied minors	Girls, not unaccompanied minors	Total
All judgements from administrative courts	750	380	534	1664
Case files available	492	254	342	1088
Court judgements where socially destructive behaviour is referred to as a criterion in the application and/or judgement.	673	346	512	1531
Cluster analysis sample		346		

In those cases where a judgement has been appealed, the case files are transferred to the court of appeal, and the analysis in these cases is based only on the court judgements from the administrative and appeal courts. Boys account for a majority (66%) of the placement decisions included in the data. A total of 380 placements, distributed across 370 individuals, relate to UAMM, who constitute the focus for this study.

Coding and variables

The coding scheme used to code the judgements and case files was developed to capture a range of different factors. These include background variables such as gender, age and

migration background, as well as responsible municipality, legal provisions referred to, and criteria relating to the placement, such as different aspects of the assessments made of the children's problems and care needs and different forms of evidence used in support of the invoked placement criteria (e.g., police reports as evidence of involvement in crime or drug tests as evidence of substance abuse). A range of aspects of the children's social situation have also been coded. Variables employed in the article are presented below.

Background variables

The *unaccompanied minors* variable was coded on the basis of whether the individuals were specifically referred to as such in the court judgement, and sometimes also on the basis of additional information from the case file.

Age was coded as the individual's age at the time of the administrative court judgement.

Variables measuring different aspects of socially destructive behaviour

Since the goal of the current study is to examine reasons for placement and assessed problems among UAMM, this section presents the variables used to examine these issues in more detail. The legislation specifies three criteria for placements on the grounds of behavioural problems: *criminality*, *abuse of addictive substances* and *other socially destructive behaviour* (OSDB). The study has coded both the criteria invoked by the social welfare boards in their applications and the criteria specified in the court judgements. These do not always correspond, since the court may, for example, have rejected a placement on the grounds of the criminality criterion, but approved the placement having made the assessment that the individual's criminal behaviour nonetheless constitutes OSDB. Nor are the criteria mutually exclusive, and both an application and a court judgement may refer to more than one criterion.

As regards OSDB, the definition is not as clear as for the other two grounds but is meant to cover other behaviours that are understood to divert from society's fundamental social norms. In the LVU Act's *travaux préparatoires*, OSDB is exemplified by, among other things, spending time in unsuitable environments and company, or engaging in prostitution. Later precedents have also included violent and aggressive behaviour, and the broad definition of the criterion makes it possible to use in relation to many different situations. The coding of this criterion has therefore been formulated in part on the basis of the factors described as being linked to OSDB in the LVU Act's *travaux préparatoires* (e.g., prostitution and spending time in inappropriate environments), legal praxis (e.g., externalising behaviour) and previous research (e.g., sexual behaviour and mental ill-health), and in part on the basis of factors that emerged during the examination of the study data.

Some of the variables mentioned above were included in the cluster analysis, which was conducted in order to identify variations within the group of UAMM. This analysis is described further below.

Cluster analysis

A cluster analysis was conducted in order to identify possible subgroups within the group of unaccompanied male refugee minors. In a cluster analysis you strive for heterogeneity *between* the clusters and homogeneity *within* the clusters. The analysis was conducted in SPSS using the TwoStep procedure, which applies a hierarchical cluster analysis.

The outcomes of cluster analysis are dependent on the measures used to characterise the units being analysed (Hair et al., 2006, p. 561), in this case measures describing

the problems that can constitute socially destructive behaviour. Cluster analysis will always produce clusters, but the identification of clusters does not mean that such clusters actually exist in any valid sense, since “(o)nly with strong conceptual support and then validation are the clusters potentially meaningful and relevant” (Hair et al., 2006, p. 560).

Cluster analysis was conducted using the variables included in the descriptions of OSDB in all cases where OSDB is referred to. This means that the cluster analysis includes 346 of the 370 individuals. The remaining 24 UAMM had primarily been placed on the grounds of substance abuse, in a few cases in combination with criminality. For these individuals, the variables relating to the OSDB criteria were not coded, but the court judgements often describe these youths as manifesting problems which for others *were* referred to as OSDB. It would therefore be problematic to include these individuals in the cluster analysis, since the problems they have been stated as having may have been described to provide evidence of their problematic drug use, e.g., inappropriate company. This group was judged to be too small for inclusion as a separate category in the analysis of subgroups, which means that in addition to the clusters presented, there is also a subgroup among the UAMM whose problems are more exclusively related to substance abuse.

Previous research has identified a number of factors that may be of relevance for distinguishing different subgroups of UAMM. These are externalising behaviour, mental ill-health, problems in their home/care institution (in addition to externalising behaviour), substance abuse, criminality, spending time in inappropriate company, and vagrancy. Table 1 in the appendix presents the frequency distributions for the variables measuring these factors. The initial cluster model included all variables deemed to be relevant based on previous research and that were found among more than a small number of individuals. The modelling was then conducted in a number of steps, with those variables found to have little relevance for the cluster solution being removed, and with the cluster analysis then being respecified based on the remaining variables. This process was repeated until all variables in the analysis had an Importance score of over 0.2. Consideration was also given to the value of the Average Silhouette, which is a measure of the extent to which a cluster solution is characterised by within-cluster homogeneity and between-cluster heterogeneity.³ The AS value increased from 0.3 in the first model to 0.6 in the final cluster solution.

This final cluster solution contains three clusters, and the distribution and significance of the final cluster variables is presented in Table 2. The largest differences between the clusters are in part whether or not cluster members were described as having externalising behaviour, and in part whether or not they were viewed as spending time in inappropriate environments or in inappropriate company with offenders and/or substance abusers. Among those with externalising behaviours, there are two groups, of which one is described as externalising behaviour almost exclusively in the form of aggressive and threatening behaviour, while the other was described as manifesting more externalising behaviour than this. The clusters were labelled on the basis of these dimensions.

³ This ranges from poor (–1 to 0.2) to fair (>0.2 to 0.5) and finally good (>0.5 to 1).

Table 2. Final cluster solution. Figures represent the proportion of cases (%) in each cluster described as having a given type of behaviour. Variables ordered on the basis of significance. Figures in parentheses present the variables' Importance scores. Average Silhouette = 0.6, N = 346

Variable	Only threatening and/or aggressive	Several types of externalising behaviour	Spending time in inappropriate environments
	N = 138	N = 87	N = 121
Externalising, property damage (1.0)	2	100	12
Spending time in inappropriate environments (0.89)	0	0	78
Inappropriate company, criminality (incl. gangs) (0.45)	0	0	46
Inappropriate company, substance abuse (0.28)	0	1	32
Externalising, aggressive and/or threatening behaviour (0.24)	67	100	47

The clusters are deemed to have high criterion validity since they can be described in ways that are meaningful in relation to the study's objectives and also appear to capture subgroups described in previous research (Hair et al., 2006, p. 596f). Finally, an analysis was conducted of whether the clusters differ from one another in relation to other variables included in the dataset, such as the remaining OSDB variables, and in particular those that were not included in the final model but deemed to be potentially important for the identification of subgroups. If the clusters are valid, we would expect to find such differences (Hair et al., 2006, p. 596f), which was also the case.

The presentation of results begins with a comparison between the group of UAMM as a whole and the boys and girls included in the data who were not unaccompanied minors. It then presents results for the three clusters.

Results

Table 3 presents the criteria invoked for a compulsory placement in the application from the social services and those referred to in the administrative court judgement by gender and, among the boys, whether or not they were unaccompanied minors.

Table 3. Criteria invoked for placement in application and those referred to in court judgements (the two are not mutually exclusive), by gender and unaccompanied minor status (%)

	Boys, not unaccompanied minors	Boys, unaccompanied minors	Girls, not unaccompanied minors
	N = 750	N = 380	N = 534
Criteria referred to in application to administrative court			
Criminality	30	27	3
Substance abuse	46	41	26
OSDB	96	92	88
Criteria in administrative court judgement			
Criminality	16	13	2
Substance abuse	40	30	22
OSDB	77	82	77

As shown in Table 3, the most common criterion for compulsory placement for all children is OSDB. This is somewhat more common among UAMM, and they were also placed to a lesser extent on the grounds of either criminality or substance abuse than other boys. Being placed on these grounds is least common among girls, however. It was more common for the court to reject the social services' applications for compulsory placements due to behavioural problems for girls than for either group of boys. As regards age, girls are on average the youngest of the three groups, whereas UAMM are on average the oldest (Table 2 in the appendix).

Similarities and differences regarding OSDB

Comparisons between the three groups (Table 3 in the appendix) show that for many of the different problems referred to in the court judgements, the most prominent differences are based on gender, with boys having similar levels irrespective of whether or not they are unaccompanied minors, whereas girls' levels differ. For both groups of boys, criminality is more commonly mentioned as part of their OSDB than is the case for girls. Further, the court is more often concerned about alcohol consumption among girls, and about them spending time in substance-abuse-related company, than with either group of boys. However, drug abuse is mentioned as often in relation to UAMM as in relation to girls, although the courts more often assessed this substance abuse not to, in itself, constitute grounds for placement in relation to the UAMM.

Various types of externalising behaviour (aggression, threats, violence, property damage) are described considerably more often in relation to boys than girls. Here there is a difference among the boys, however, with unaccompanied minors more often being described as aggressive and threatening, and as having engaged in property damage, but not differing from other boys with regard to assessments of violent behaviour. Having spent time in various types of inappropriate environment is more common as a ground for concern among girls, while the pattern found among boys is similar across the two groups.

In addition to the gender differences described above, there is also a pattern whereby the assessments of UAMM differ from those relating to other boys and are more similar to descriptions of girls' problems. Descriptions of mental health problems are most common among girls, but are considerably more common among unaccompanied minors than among other boys. The descriptions of unaccompanied minors also differ from those of other boys with regard to levels of absconding, and in doing so lie closer to the pattern found among girls. Further, boys who are not unaccompanied minors are described as spending time in inappropriate company linked to criminality to a considerably greater extent than both UAMM and girls.

UAMM also differ from both girls and other boys with regard to some of the problems deemed to constitute OSDB by the social services and the courts. This is particularly clear with regard to spending time in different forms of inappropriate company, which is much less commonly referred to among unaccompanied minors. Descriptions of school problems are also less common among unaccompanied minors compared to both girls and other boys.

Placements in secure care

Table 4 presents acute placements in secure care and whether an NBIC placement was included in the care plan proposed by social services. UAMM have more often been subject to acute placements by comparison with both girls and other boys, and it is also more common that they have been placed in secure care at some point during this acute placement

period. In their applications for compulsory care, social services are also required to include a proposed care plan. Two-thirds of the care plans for UAMM included an NBIC placement, as compared to just under half of the other boys' care plans, and 40% of the girls'.

Table 4. NBIC placement at some point during an acute placement period, and the inclusion of an NBIC placement in the proposed care plan, by gender and unaccompanied minor status (%)

	Boys, not unaccompanied minors N = 750	Boys, unaccompanied minors N = 380	Girls, not unaccompanied minors N = 534
Acute placement at NBIC			
No information/no acute placement	14	6	12
Yes	47	66	47
No	39	28	41
Total	100	100	100
NBIC placement in proposed care plan			
No information	8	10	9
Yes	49	67	43
No	43	23	48
Total	100	100	100

When secure care is deemed necessary, this is often linked to the fact that other care forms have failed for various reasons. Table 5 presents levels of absconding from previous placements, and of being moved from one placement to another. Here it is important to bear in mind that UAMM had been placed either in foster homes or institutions from the time of their arrival in Sweden, but not for the purpose of treatment. Thus, we would expect a higher proportion of UAMM to have been moved between placements, since a first placement with a focus on care provision would involve being moved from a previous placement, whereas this would constitute the first placement for children who have previously been living with their families.

Table 5. Prior absconding or movements between placements according to information contained in the case files, by gender and unaccompanied minor status (%). NB: Case file information is available for fewer youths than information from court judgements

	Boys, not unaccompanied minors N = 492	Boys, unaccompanied minors N = 254	Girls, not unaccompanied minors N = 342
Absconded from earlier placement			
No information	0	2	0
No prior placement outside the home	24	0	13
Among placed outside the home			
No absconding	41	18	19
Yes	59	82	81
Total	100	100	100
Moved from one placement to another			
Among placed outside the home			
No	49	19	49
Yes	51	81	52
Total	100	100	100

As shown in the table, there are differences between UAMM and other boys regarding levels of both absconding and prior movements between placements. There is no difference in levels of absconding in relation to girls, but the level of prior movements between placements is higher among UAMM even in this comparison.

Comparison between the three clusters of unaccompanied male minors

As mentioned in the method section, one of the three clusters of UAMM contains individuals who are primarily described as having aggressive and/or threatening behaviour, one contains individuals described as having a range of different types of externalising behaviour, and the third is primarily characterised by descriptions of the cluster members spending time in inappropriate environments. A comparison of the cluster members' age (Table 4 in the appendix) shows that the group deemed to spend time in inappropriate environments is generally younger; one-tenth are aged 13 or younger, compared to 4% of those only described as aggressive/threatening and 1% of those with a range of externalising behaviours. It should be emphasised, however, that a majority of all three clusters are aged 16 or over.

The social services' applications for compulsory care more commonly invoke the criminality and substance abuse grounds in relation to the group that spends time in inappropriate environments, although OSDB constitutes the most common ground invoked in relation to all three groups. The same pattern can be seen in the court judgements (Table 4 in the appendix). Table 6 presents the distribution of descriptions of a range of different problems that are deemed to be manifestations of OSDB (excluding those included in the cluster analysis) across the different clusters.

Table 6. Prevalence of different problems that the administrative courts refer to as being related to socially destructive behaviour, by cluster membership among UAMM. (%)

Type of socially destructive behaviour	Aggressive and/or threatening	Several types of externalising behaviour	Inappropriate environments
	N = 138	N = 87	N = 121
Criminality, alcohol and drugs			
Criminality	54	54	73
Alcohol	13	11	16
Drugs	33	33	56
Prevalence of mental ill-health			
Mental ill-health	37	56	24
Self-harming behaviour	26	31	13
Attempted suicide	6	7	5
Mental ill-health in total	49	63	31
Keeping inappropriate company			
Older individuals	1	0	11
Unspecified	5	1	11
Absconding behaviour			
Absconding/running away from placement	59	47	81
Vagrancy	14	3	17
Disrespecting boundaries and rules			
	29	44	30
School problems			
	38	31	39

As shown in the table, one of the most prominent differences between the clusters is that the two groups assessed to have externalising behaviours have more extensive mental health problems, whereas descriptions of criminality and drug use are more common in the group characterised by spending time in inappropriate environments. Descriptions of keeping inappropriate company are also more common in this latter group, as are descriptions of absconding, although absconding is often referred to in relation to all three clusters. At the same time, the group described as having a range of externalising behaviours is also described as most often having difficulties respecting boundaries and rules.

There are also differences between the clusters in the degree to which the social services' applications have been rejected by the court. This was most often the case for those who were only described as aggressive/threatening (15%), whereas applications relating to those described as spending time in inappropriate environments had only been rejected in 1% of cases. For those described as having several types of externalising behaviour, the application had been rejected in 10% of cases. Thus, the administrative courts have determined that the social services have less often provided sufficient evidence of the presence of OSDB in relation to the externalising clusters, or have been of the view that care should be provided on a voluntary basis in these cases. Table 7 presents the reasons given by the administrative courts as necessitating the provision of compulsory care.

Table 7. Reasons given by administrative courts as necessitating the provision of compulsory care, by cluster membership (%). Several reasons may have been given in relation to the same individual

Motivation for use of compulsory care	Aggressive and/or threatening	Several types of externalising behaviour	Inappropriate environments
	N = 138	N = 87	N = 121
Application rejected	15	10	1
For those where compulsory care is imposed:	(N = 117)	(N = 78)	(N = 120)
No consent from child	50	50	50
Previous absconding	38	15	42
Lack of insight	19	23	15
Lacks competence for self-care	13	16	9
Previously terminated ongoing care measures	7	3	3
Previous measures unsatisfactory	22	23	18
No information	3	3	0

Generally speaking, the reasons viewed as necessitating compulsory care are similar, with the only major difference between the groups being that prior absconding is more seldom stated as a reason for the use of compulsory care for those described as having several types of externalising behaviour.

Secure care placements for unaccompanied minors

As shown above, it is more common for UAMM than for other children to be given NBIC placements, both in the form of acute placements and placements proposed in the care plan. Table 8 presents the distribution of the three clusters of UAMM across these two secure care placement forms.

Table 8. Proportion of UAMM who have spent time in an NBIC institution at some point in connection with an acute placement, and proportion for whom NBIC care has been proposed in their care plan, by cluster membership (%)

	Aggressive and/or threatening	Several types of externalising behaviour	Inappropriate environments
	N = 138	N = 87	N = 121
Acute placement at an NBIC institution			
No information/no acute placement	7	3	4
Yes	64	67	68
No	29	30	28
Total:	100	100	100
NBIC placement proposed in care plan (for those where compulsory care is imposed)			
No information	11	10	5
Yes	69	67	72
No	20	23	23
Total:	100	100	100

Despite the clusters' different characteristics, there are few if any differences in the extent to which secure care is used as either an acute or planned placement form. Approximately 70% of the young males who have been subject to acute placements have spent time in an NBIC institution at some point, irrespective of their cluster membership, and the proportion for whom an NBIC placement has been proposed in the care plan is also similar across the three clusters. Thus, despite the assessments of both the courts and the welfare boards pointing to a divergence in the nature of UAMM' problems, secure care appears to constitute the principal care option chosen for this group of children.

Discussion

The results show that assessments of problems experienced by UAMM follow common gender patterns for some, while for others they are more similar to assessments focused on girls, while the problems experienced by still other UAMM diverge markedly from those found in the group of children who are subject to compulsory care placements as a whole. The results also show that, similar to previous studies about youths in secure institutions (Backlund & Thorén, 2021; Kaunitz & Jakobsson, 2016), UAMM in compulsory care are not a homogeneous group but are rather comprised of three subgroups with relatively different problem types, although two of these three groups are somewhat more similar to each other. This section discusses how we might interpret the study's central findings with the focus on the two paradoxical problems that different treatment might result in. 1) The question of legal uncertainty, with the possible consequence of disproportionate interventions, and 2) the risk of not getting the help they are both in need of and entitled to.

The comparisons between UAMM and others subject to compulsory care indicate that the social services refer to school problems in their applications for compulsory care less often in relation to UAMM. One explanation for this may be that they are not subject to compulsory schooling requirements to the same extent as others (due to their age and/or their refugee status), which may lead to less focus being placed on their educational careers. It may also be related to the fact that many of them have arrived in Sweden relatively recently,

and therefore have not had time to get started in the Swedish school system. This would in turn be reinforced further by their extensive experience of movement between placements, which is likely to make continuous school attendance more difficult. It may of course mean that UAMM do not have problems in school to the same extent as others placed in compulsory care, or that they have as yet not had time to accumulate the same level of school problems due to the relative brevity of time spent in Swedish schools. However, given the central role played by school in language development, integration and subsequent income opportunities, the limited focus on schooling in the social services' applications raises the question of whether expectations and demands relating to schooling and its significance are lower for UAMM than for other children. If this is the case, there is a risk that this could also mean that less focus is directed at schooling when it comes to providing these children with support, which would in turn decrease their chances of improving their situation following their time in care. If so, it can be seen as a problem that unaccompanied minors are not getting the help they need, since the specific set of problems they are described as having impacts on the type of care they receive.

The findings also show that UAMM are more often described as exhibiting externalising behaviours in the form of being aggressive and threatening, and of engaging in property damage, but are not deemed to be violent to a greater extent than other boys with a court decision regarding compulsory care. Given the results of the cluster analysis, it seems likely that some of the UAMM have had difficulties dealing with their situation at residential care institutions. The subgroup that in the analysis was labelled as spending time in inappropriate environments presents higher levels of criminality, drug use and inappropriate company, and is thus reminiscent of the group sometimes referred to as "street children" (Backlund & Thorén, 2021). The two other subgroups, identified as being characterised by different combinations of externalising behaviours, instead present higher levels of mental ill-health, which is particularly the case among those assessed to be manifesting a range of different externalising behaviours. These two groups are thus similar to the group identified by Backlund and Thorén (2021), who were deemed to have special care needs with regard to psychiatric problems, but among whom there were no significant links to criminal behaviour. The group assessed to be manifesting several different forms of externalising behaviours is also often described as having difficulties showing respect for boundaries and rules, which further reinforces the view that they have experienced difficulties coping with the situation at residential care institutions. It can be questioned whether compulsory care is a correct measure for youths who mostly seem to have problems handling their situation in residential care, probably to a large extent due to mental health problems. In that case this is a question of legal uncertainty, but *also* a question of the children not getting the help they need (cf. Ghazinour et al., 2021). We will discuss this further on. However, to be sure about this conclusion, a more in-depth analysis of the cases is needed.

One of the study's most central findings is the high proportion of UAMM who are placed in secure care, both acute and as a proposed form of care. This finding is reinforced by the fact that secure care constitutes the most common form of placement for all three subgroups, despite differences in problems. One likely explanation is that members of all three clusters have very high levels of prior absconding and of being moved between different placements. For the group characterised by spending time in inappropriate environments, the choice of secure care may seem more understandable, since such a placement may be viewed as a form of protection for children in a very vulnerable situation (particularly those who are very young) who are also prone to absconding. For the two groups described as having externalising behaviours and relatively high levels of mental ill-health, however, the choice of secure

care is less apprehensible. Given that their problems can primarily be interpreted as a reaction to difficulties coping with living in an institutional environment at the residential institutions in which they have initially been placed, it appears counterproductive to incarcerate them in an even more highly regulated and closed institutional environment. This is connected to the problem of the youths getting the correct help they are (legally) entitled to. It should also be emphasised that since these two groups have extensive mental health difficulties, they are also likely to require help from child psychiatry. Ghazinour et al. (2021) suggest that one group of unaccompanied minors in secure care needs both more help from the health care system and a different kind of placement than both residential care and secure institutions. Our results support that such a group still seems to end up in secure care. Hence, they are similar to girls placed in secure care, whose problems also often include high levels of mental ill-health, and there has been considerable criticism over the years focused on the suitability of NBIC placements for these children, and on the secure care institutions themselves for failing to provide better provision for those with care needs of this kind. In this sense the placements may also be discussed in relation to legal uncertainty in line with Schlytter's (1999) argument of the lack of legal basis and, in that case, it might also be argued that some of the unaccompanied minors are exposed to an extension of legal praxis – something some of the staff interviewed in Ghazinour et al.'s (2021) study seem to agree on.

In many ways, the study confirms the NBIC's own view (Kaunitz & Jakobsson, 2016) that there appears to be a group of UAMM for whom NBIC placements are not warranted. Since the LVU Act is intended to function as a piece of protective legislation, unwarranted placements in secure care must be viewed as problematic. There is also the question of whether these children are regarded as “children in danger” or as “dangerous children” (Lems et al., 2020; see also Donzelot, 1997). The similarity between UAMM and girls in compulsory care is interesting in this regard, since previous research strongly suggests that these girls first and foremost are viewed as “children in danger”, and primarily as a danger to themselves. Previous research suggests that unaccompanied minors have increasingly come to be viewed as “dangerous children”, but to clarify this issue in the current sample, a qualitative analysis of the court judgements is required with a more nuanced focus on the descriptions and arguments presented in these judgements. An analysis of this kind will be able to clarify whether these compulsory placements are the result of concern that these children may harm themselves (children in danger) or primarily due to an inability to manage them at non-secure residential care institutions and the perception that they are manifesting externalising behaviours (dangerous children). We will be conducting an in-depth qualitative analysis of this kind on the basis of the cluster solution as a continuation of the quantitative analysis presented in this article.

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Appendix – Compulsory care placements among unaccompanied male refugee minors

Table 1. Number and proportion (%) of individuals included in the cluster analysis for whom different factors of interest to the cluster analysis were present. Italicised variables were included in the initial cluster analysis. N = 346

	n	Percent
Externalising behaviour		
Externalising, aggressive	198	53
Externalising, threatening	192	52
<i>Externalising, aggressive and/or threatening</i>	237	64
<i>Externalising, property damage</i>	104	54
<i>Externalising, violent</i>	152	41
Problems at institutional care homes (besides externalising behaviour):		
<i>Absconding/running away</i>	221	64
<i>Disrespect for boundaries and rules</i>	114	33
Substance abuse		
<i>Drug use</i>	139	41
<i>Inappropriate environment, substance abuse related</i>	40	12
Positive attitude towards drugs	3	1
Criminality		
<i>Criminality</i>	208	61
<i>Inappropriate environment, criminality (incl. gangs)</i>	56	16
Pro-criminal attitudes	1	0
Inappropriate company and environment		
<i>Inappropriate environment</i>	95	28
<i>Vagrancy</i>	44	13
Mental (ill-)health		
Mental ill-health	129	37
Self-harming behaviour	79	23
Attempted suicide	20	6
<i>Mental ill-health, self-harming and/or attempted suicide</i>	160	46

Table 2. Age distribution by gender and unaccompanied minor status. Percent

Age	Boys, not	Boys,	Girls, not
	unaccompanied minors	unaccompanied minors	unaccompanied minors
	N = 750	N = 380	N = 534
13 or under	8	5	13
14	13	10	21
15	23	17	25
16	26	41	22
17	31	27	19

Table 3. Prevalence of different problems related to socially destructive behaviour by gender unaccompanied minor status. Percent

Variable	Boys, not	Boys,	Girls, not
	unaccompanied minors	unaccompanied minors	unaccompanied minors
	N = 673	N = 346	N = 512
Criminality			
Criminality	62	60	36
Keeping inappropriate company, criminality (incl. gangs)	33	16	18
Pro-criminal attitudes	6	0	0
Substance abuse			
Drug use	31	40	41
Alcohol use	16	14	32
Keeping inappropriate company, substance abuse related	28	12	35
Positive attitude to drugs	4	1	2
Externalising behaviour			
Externalising, aggressive	49	57	35
Externalising, threatening	41	55	21
Externalising, property damage	19	30	10
Externalising, violent	43	44	28
Absconding behaviour			
Absconding/runaway, from placement	33	64	52
Absconding/runaway, from home	18	1	43
Absconding/runaway, total	45	64	77
Vagrancy	8	12	13
Inappropriate environment			
Inappropriate environment, criminality	5	4	1
Inappropriate environment, drugs	6	3	19
Inappropriate environment, criminality & drugs	11	7	8
Inappropriate environment, unspecified	13	14	27
Keeping inappropriate company, other			
Inappropriate company, older persons	14	4	30
Inappropriate company, unspecified	12	6	17
Disrespecting boundaries and rules			
	23	33	23
School problems			
	75	36	69
Mental ill-health			
Mental ill-health	21	37	44
Self-harming behaviour	7	23	31
Attempted suicide	1	6	7
Mental ill-health, self-harming behaviour and/or attempted suicide	23	46	54
Sexual risk-taking			
Sex for payment	0	1	6
Other sexual risk-taking behaviour	1	2	17
Inappropriate environment, sex	1	1	9
At least one of the above three	2	3	25
Crossing sexual boundaries/sexual perpetrator			
	4	3	1

Table 4. Age and criteria for compulsory placement in administrative court judgements, by clusters based on the courts' descriptions of problems linked to socially destructive behaviour. Percent

	Only threatening and/or aggressive	Several types of externalising behaviour	Inappropriate environments
	N = 138	N = 87	N = 121
Age			
13 or under	4	1	10
14	11	7	12
15	20	21	14
16	35	42	47
17	30	29	17
Total:	100	100	100
Criteria: application			
Criminality	27	12	40
Substance abuse	36	29	45
Socially destructive behaviour	97	97	99
Criteria: court judgement			
Criminality	12	5	17
Substance abuse	23	20	33
Socially destructive behaviour	83	88	94