HØGSKULEN I VOLDA

Høgskolen i Molde
Vitenskapelig høgskole i logistikk

Siv Elin Nord Sæbjørnsen
Ph.d.-avhandlinger i helse- og sosialfag 2017: 1

Exploring Adolescent Service Users' Subjective Views about Participation in "Responsible Teams"

Exploring Adolescent Service Users' Subjective Views about Participation in "Responsible Teams"

Siv Elin Nord Sæbjørnsen

Molde 2017

Siv Elin Nord Sæbjørnsen

Exploring Adolescent Service Users' Subjective Views about Participation in 'Responsible Teams'

iv

Acknowledgements

Table of contents

Chapter 1
Introduction

Chapter 2
Context

Chapter 3
Previous research and theoretical framework

Chapter 4
Method

Chapter 5
Summary of findings

Chapter 6
Discussion

References

Paper I

Paper II

Paper III

Appendix

List of tables and figures

Chapter 3

Chapter 4

Chapter 6

Abstract

Aims: The overall aim of this thesis was to explore adolescent service users' subjective views about interprofessional team participation, based on their experiences with the traditional and commonly used Norwegian team arrangement called *'Responsible Team'* [*ansvarsgruppe*]. Additional aims were to generate knowledge by interpreting findings from the adolescents' viewpoints and perspectives and to contribute to identifying the potential of Responsible Teams as well as the conditions required for their success. Specifically, this thesis aims to (1) explore how a sample of 5 adolescent service users perceived participation in interprofessional collaboration teams (Paper I); (2) develop and describe a Q set useful for increasing the potential of eliciting adolescent service users' views about Responsible Teams and their participation in them (Paper II); (3) explore a sample of 26 adolescent service users' subjective views about participation in Responsible Teams by applying Q methodology (Paper III).

Methods: The data for this study were collected through interviews and Q methodology. The study has a qualitative approach, but in accordance with the nature of Q methodology, both qualitative and quantitative techniques are combined in one methodological approach. The participants were adolescents aged 13 to 18 who in addition to receiving help and support from the Norwegian child welfare service also received mental health services. The adolescents had participated in Responsible Teams where representatives from the Norwegian child welfare service as well as mental health services were involved. Five adolescents participated in the qualitative in-depth interviews, which constitute the empirical data in the study presented in Paper I. In the Q methodological study presented in Paper III, 26 adolescents participated. A qualitative content analysis was used in order to analyse the data in the interview study presented in Paper I. The data in the Q methodological study presented in Paper III were analysed using the computer programme PQMethod and were then interpreted applying an abductive approach.

Results and conclusions: When the adolescents' subjective views derived from the interviews (Paper I) were analysed, the theme 'Encountering possibilities for participation' and the following three categories emerged: 1. Active in decision-making – Withdrawal; 2. Trust – Distrust; and 3. Useful – Not useful. The findings show that views on team participation vary from *very positive* to *very negative* among the adolescents and that Responsible Teams may be one way to achieve effective participation. The main findings indicate that effective participation in Responsible Teams is based on the following conditions: (1) a trusting relationship between the adolescent and a professional possessing a powerful position in the team exists, (2) adolescents' participation is facilitated in all team processes and conferences, (3) adolescents' views are in focus, (4) there are good communication skills among the professionals, and (5) adolescents are provided with all the information needed.

Based on the 5 interviews already described (Paper I), a Q methodological tool was developed in order to explore adolescents' views on interprofessional teams and their participation in such teams. In Paper II a visualisation of this tool, 'The Concourse Box', was introduced and described along with an empirical research illustration. The empirical study presented in Paper III utilised the newly developed Q methodological tool.

The interpretation of the data from the Q methodological study presented in Paper III resulted in the following four Q factors: Factor 1. Optimistic and engaged despite bad experiences; Factor 2. Strive to not be defeated by their helpers; Factor 3. Battle weary and resigned; and Factor 4. Content, positive, and full of trust. The findings support the findings from the interview study (Paper I) and emphasise the importance of listening to young peoples' experiences with participation in interprofessional team arrangements. The findings indicate that factors that affect adolescents' views of participation in Responsible Teams have many similarities with factors affecting how professionals perceive interprofessional collaboration, but also that adolescent service users perceive the Responsible Team as being about important issues in their life. According to the findings, the adolescents often maintain attending team conferences even if they, for a number of reasons, do not like being there. The findings clearly indicate that half-hearted efforts to involve adolescent service users in Responsible Teams in terms of not allowing their influence on decision making or 'pseudo-participation' are not only useless, but may be invidious to the adolescent.

Sammendrag

Mål: Det overordnede målet med denne avhandlingen var å utforske ungdommers subjektive syn på tverrprofesjonell teamdeltakelse, basert på deres brukererfaringer med det tradisjonelle norske og mye brukte teamarrangementet 'ansvarsgruppe'. Delmålene har vært å generere kunnskap ved å tolke funn fra ungdommenes synspunkt og perspektiver og bidra til identifiseringen av potensialet i ansvarsgrupper og identifisere betingelser for oppnåelse av vellykkede ansvarsgrupper. Spesifikke mål var å 1) Eksplorere hvordan et utvalg bestående av fem ungdommer som var tjenestebrukere opplevde deltakelse i tverrprofesjonelle samarbeidsteam (Paper I), 2) Utvikle og beskrive et Q-sett som kunne brukes til å forøke muligheten for å bringe fram ungdommer som var tjenestebrukere sine syn på ansvarsgrupper og deres deltakelse i ansvarsgrupper (Paper II), 3) Eksplorere et utvalg bestående av 26 ungdommer som var tjenestebrukere sine subjektive syn på deltakelse i ansvarsgrupper ved å anvende Q metodologi (Paper III).

Metoder: Avhandlingens data ble innhentet gjennom intervjuer og Q metode. Avhandlingen har en kvalitativ tilnærming, men i tråd med Q metodologiens egenskaper er både kvalitative og kvantitative teknikker kombinert i en metodologisk tilnærming. Deltakere som ble inkludert i studien var ungdommer i alderen 13-18 år, som i tillegg til å motta hjelp og støtte fra barnevernstjenesten også mottok psykiske helsetjenester. Ungdommene hadde erfaringer fra deltakelse i ansvarsgrupper hvor representanter fra barneverntjeneste og fra psykisk helsetjeneste var involvert. Fem ungdommer deltok i de kvalitative dybdeintervjuene, som utgjorde det empiriske datagrunnlaget i studien som er presentert i Paper I. I den Q metodologiske studien som er presentert i Paper III deltok 26 ungdommer.

En kvalitativ innholdsanalyse ble brukt for å analysere dataene i intervjustudien som er presentert i Paper I. Dataene i den Q-metodologiske studien, som er presentert I Paper III, ble analysert ved bruk av dataprogrammet PQMethod og ble så tolket ved hjelp av abduktiv tilnærming.

Resultater og konklusjoner: I analysen av ungdommenes synspunkter fra intervjuene (Paper I) kom temaet "Opplevelse av muligheter for deltakelse" og tre kategorier frem: 1. Aktiv i beslutningstaking – tilbaketrekking, 2. Tillit – mistillit og 3. Nyttig – ikke nyttig. Hver kategori begynner med den mest positive koden og ender med den mest negative. Funnene viser at syn på ansvarsgruppedeltakelse varierer fra veldig positivt til veldig negativt blant ungdommene og at ansvarsgrupper kan utgjøre en måte å oppnå effektive deltakelse på. Hovedfunnene indikerer at oppnåelse av effektiv deltakelse i ansvarsgrupper har sammenheng med følgende betingelser: 1) En tillitsfull relasjon mellom ungdom og en profesjonell som har stor makt i ansvarsgruppen, 2) Ungdommers deltakelse er tilrettelagt i alle ansvarsgruppeprosesser og møter, 3) Ungdommens syn er i fokus, 4) Gode kommunikasjonsevner blant de profesjonelle og 5) Ungdommen er gitt all nødvendig informasjon.

Med utgangspunkt i de fem intervjuene som allerede beskrevet (Paper I) ble et Q-metodologisk verktøy utviklet og tilpasset utforskning av ungdommenes syn på tverrprofesjonelle team og deres deltakelse i slike team. En visualisering av dette verktøyet, "The Concourse Box", ble introdusert og beskrevet sammen med en empirisk forskningsillustrasjon i den metodologiske studien som er presentert i Paper II. Den empiriske studien som er presentert i Paper III benyttet dette nyutviklede Q-metodologiske verktøyet.

Analysen av dataene i den Q-metodologiske studien som er presentert i Paper III resulterte i fire Q-faktorer: Faktor 1) Optimistiske og engasjerte tross dårlige erfaringer, Faktor 2) Strever for å ikke overvinnes av sine hjelpere, Faktor 3) Kampslitne og resignerte og Faktor 4) Tilfredse, positive og fulle av tillit. Funnene støtter funnene fra intervjustudien (Paper I) og understreker viktigheten av å lytte til unges erfaringer med deltakelse i tverrprofesjonelle team. Funnene indikerer at faktorer som påvirker ungdommers syn på deltakelse i ansvarsgrupper har mange likheter med faktorer som påvirker hvordan profesjonelle opplever tverrprofesjonelt samarbeid, men også at ungdommer anser ansvarsgrupper for å handle om viktige spørsmål i deres liv. I følge funnene fortsetter ofte ungdommene å delta i ansvarsgruppemøter selv om de av ulike grunner ikke liker seg der. Funnene gir klare indikasjoner på at halvhjertede forsøk på å involvere ungdommer i ansvarsgrupper, i betydningen å ikke tillate deres innflytelse i avgjørelser eller "pseudodeltakelse" er ikke bare nytteløst, men kan være uheldig for ungdommen.

ORIGINAL PAPERS:

This thesis is based on the following papers referred in the text by their numbers (I, II, and III):

1. Sæbjørnsen, S.E.N. & Willumsen, E. (2015). Service user participation in interprofessional teams in child welfare in Norway: Vulnerable adolescents' perceptions. *Child & Family Social Work.* doi:10.1111/cfs.12242

2. Sæbjørnsen, S.E.N., Ellingsen, I.T., Good, J.M.M., & Ødegård, A. (2016). Combining a naturalistic and theoretical Q sample approach: An empirical research illustration. *Operant Subjectivity The International Journal of Q Methodology.* In press.

3. Sæbjørnsen, S. E. N., & Ødegård, A. (2016). Adolescents' Subjective Views about Interprofessional Team Participation: A Q-methodological Study. *Journal of Comparative Social Work, 11*(2).

The papers have been reprinted by kind permission of the publishers.

Chapter 1

Introduction

1 Introduction

1.1 Study background

In Norwegian health and social policies, a clearly stated goal is to improve the coordination of services for vulnerable children and adolescents, aiming to insure that they receive the right service at the right time (NOU: 2009). As a consequence of services becoming more specialized, a considerable number of professionals, representing diverse services, may be involved in providing services for one child (Reeves, Lewis, Espin, & Zwarenstein, 2010). Development of improved collaboration across professions and agencies is thus necessary, and collaboration models have been developed and tested (Winsvold, 2011). According to the Norwegian Board of Health (2014), collaboration among agencies regarding children with complex needs is still lacking.

The Norwegian Child Welfare Service (NCWS), which is often involved in the care of children and adolescents needing complex health and social services, is required to collaborate with other service providers. According to the Norwegian Child Welfare Act of 17 July, 1992, No. 100 (NCWA) (§3-2 and 2a), comprehensive and specific collaboration is necessary in order to meet the needs of children who have complex and long-term needs for services and support.

According to Statistics Norway (SSB) (2015), 53.088 children and adolescents in Norway received NCWS measures during 2014. Of all effectuated measures in this period, *assistant measures*, which implies that the parents have the custody of the child (NCWA, Section 4-4), totalled 43.477. *Care measures,* those in which the NCWS has the custody of the child (NCWA section 4-12 and section 4-8), totalled 9.611 of effectuated NCWS measures in 2014 (SSB, 2015).

Lack of parenting skills is the most frequent reason (25%) reported for decisions about effectuation of NCWS child welfare measures or to advanced demands for the county social welfare boards (SSB, 2014). The next most frequent reasons reported are parents' mental difficulties and illness (17%), other circumstances regarding the parents or family (13%), and a high degree of conflict in the home (10%). By the end of 2013, 39% of all children and adolescents receiving child welfare measures lived in out-of-home placements (SSB, 2014). Many of these children and adolescents, whether they live with their parents or are placed in out-of-home care, receive several health and social services due to their complex needs. Thus, interprofessional collaboration is important in order to provide the help and support that these young people need (NOU: 2009).

When they are functioning well, interprofessional teams can improve service users' outcomes (Reeves et al., 2010). Accordingly, as reviewed by Gallagher, Smith, Hardy, and Wilkinson (2012), when children's effective participation in social work decision making is achieved, it is associated with improved outcomes of services. It is important not only to protect the vulnerable child, but also to involve them as competent actors (van Bijleveld et al.. 2015).

In Norway, the interprofessional team arrangement called *Responsible Team* (RT) or *ansvarsgruppe* [Norwegian] has been used for four decades to coordinate and organise the collaboration processes around the individual child with complex needs. In RTs, professionals collaborate across professions and agencies, and adolescent service users are also normally included. Although fluctuating experiences with RTs are reported (NOU: 2009, Winsvold, 2011), such team arrangements are frequently used and constitute an important arena for service user participation in the NCWS. Despite this, few studies have focused on RTs that have been established for children in receipt of services from NCWS. There are a few exceptions, such as a research report by Christiansen et al. (2015) who investigated experiences with NCWS' measures of assistance of which RTs represented one such measure. Another exception is a study by Hesjedal, Hetland, Iversen, and Manger (2015b) that examined professionals' experiences of interprofessional collaboration in RT conferences. Skivenes and Willumsen (2005) explored parents' experiences with RTs, but only the Swedish studies by Bolin (2014; 2015), that focused on children's agency in interprofessional collaboration, seemed to examine some adolescent service users' experiences with participation in meetings similar to RT conferences. According to a recent review study (Cooper, Evans, & Pybis, 2016), there is a vast lack of research on children service users' views about interprofessional collaboration in health and social services. Christiansen et al. (2015) emphasise that research on the NCWS's measures of assistance, such as RTs, is in a very early phase.

The overall aim of this PhD study is to fill in some of this gap by providing new insights into some adolescent service users' views about participation in the interprofessional collaboration team arrangement, RT. The explorations of the adolescents' subjective views in this study provide some suggestions about why young people's participation may appear difficult and how successful participation may be achieved. The explorations also resulted in some information about how to achieve successful interprofessional collaboration about and together with adolescent service users. Results from the explorations also included information useful for making positive changes in adolescents' situations.

This PhD study applied a new combination of subjects, theory, and methodologies, which contributes to enhancing the potential to elicit, explore, understand, and present adolescents' subjective views. The methodological development presented in Paper II was a very useful element in the explorative work of this study, and it may also be useful for other studies involving children and adolescents.

It is hoped that this study will have value for the development of policies and guidelines concerning services for children in Norway as well as in other countries. Additionally, it may contribute with knowledge useful for improving interprofessional team arrangements, including making adolescents' participation in them more effective. Effective participation may convey improved outcomes for adolescents' who are receiving multiple services.

1.2 Exploring adolescent service users' subjective views about participation in RTs

In everyday life as well as in research, there has been a shift in children's positions and how children are viewed, from 'protecting the vulnerable child' to also involving the competent child. The UN convention on the Rights of the Child (1989) Article 12 as well as the NCWA §6-3 state that children have the right both to express their views in all matters that affect them and to have their views taken into account.

'Protecting the child' versus 'involving the child' has been described as two competing views, which The National Committee for Research Ethics in the Social Sciences and the Humanities (NESH) aimed to merge (Strandbu & Thørnblad, 2010). In the Norwegian ethical research guidelines, therefore, children are described as vulnerable and entitled to particular protection, as well as being central contributors in research about their lives and living conditions (NESH, 2006).

In this PhD thesis, adolescents' views are the focus. Whether their lives are harmonious or complicated, adolescents are in a transitional phase where developmental stages are being completed and development of an independent existence begins (Tetzchner, 2012). According to Tetzchner, adolescence is characterised by formation of identity, a period when exploration and selection of values and attitudes, as well as beginning to find a place in the society as an adult, are supposed to take place. Children in the adolescence phase must develop new and unknown sides by themselves, without being able to foresee the scope of their decisions. The adolescent must choose between different opportunities and responsibilities. Thus, adolescence is often characterised by uncertainty concerning personal and social changes. Adolescents often question the meaning of life in ways that younger children do not. Compared to younger children, adolescents perceive more episodes as emotionally negative, which may be related to puberty and its hormonal changes, but which also characterises this phase. Many adolescents experience uncertainty and stress in relation to new roles and new requirements from school and in social relations. Such stress experiences may cause adolescents' emotional instability (Tetzchner, 2012).

The subjective views that have been explored in this thesis are those of adolescent service users who had needs requiring help from NCWS as well as mental health services and who participated in RTs. With all due respect and humility, I have endeavoured to render and interpret these adolescents' expressions about their experiences from RTs.

1.3 Terms and Concepts

In this thesis, *adolescent* is frequently used to refer to children 13 to 18 years old. This age group is also considered as *children*.

View, *viewpoint,* and *perspective* are used in reference to adolescents' expressed opinions, feelings, and thoughts based on their experiences from participation in RTs. Another relevant term used in the studies presented in Paper I, II and III is *perception,* which refers how adolescents, based on their experiences, perceived participation in RTs. These concepts have a particular relevance to Q methodology and self-reference. William Stephenson, when he introduced Q methodology, was concerned with subjective communication and how subjectivity could be scientifically studied (Wolf, 2010). According to Stephenson (1953), subjective communication derives from self-reference:

statements a person makes about himself, with reference to his personality and interaction with others, as in a diary, journal, or autobiography or in the course of talks, interviews, and the like. All have reference to himself as a self in action, reflection, retrospection, or the like, as more or less conscious matters; or they are statements he makes about others which might be projections of such self-notions.… It is with such statements, gathered in natural settings as far as possible (or in careful retrospections or the like), that Q-technique begins its study of the self. (p.247)

Subjectivity and *subjective views* are also core concepts in this PhD study. The data collected consist of adolescents' expressions about how they, themselves, based on their experiences, feelings, thoughts, personality, and the like, view RTs and participation in them. In conformity with the aim of Q methodology, such 'pure' subjectivity or subjective views were then subjected to scientific exploration. For further descriptions of subjectivity in Q methodology, see Paper II.

As Ødegård and Bjørkly (2012a) emphasise, there may be great differences in how different persons perceive collaboration in case conferences (such as in RTs). In this study, the focus is on the adolescent service users' subjectivity concerning RTs.

Interprofessional team or *interprofessional team arrangement* is frequently used in this thesis when referring to the already described Responsible Team or RT. RTs are one example of interprofessional team arrangements. A fuller description of RT is provided in the next chapter.

The word *vulnerable* is not an objective description; it may therefore be problematic to use when it is undefined. In this thesis, it is used in reference to adolescents, but solely in terms of their having complex difficulties and, hence, being in need of a range of services. The services involve NCWS as well as mental health services, and, in some cases, even other services. In this thesis, *vulnerable* is not used to describe adolescents as being in need of protection from participation. Rather, adolescents are described as being vulnerable *and* competent participants in RTs and in research.

1.4 Aims

The overall aim of this thesis was to explore adolescent service users' subjective views about interprofessional team participation, based on their experiences with RTs. Additional aims were to generate knowledge by interpreting findings from the adolescents' viewpoints and perspectives, thereby contributing further understanding about the potential of RTs and the necessary conditions for their success.

1.4.1 Specific aims

This research sought to

1. Explore how a sample of 5 adolescent service users perceived participation in interprofessional collaboration teams (RTs) (Paper I).
2. Develop and describe a Q set useful for enhancing the potential of eliciting adolescent service users' views about RTs and their participation in RTs (Paper II).
3. Explore a sample of 26 adolescent service users' subjective views about participation in RTs by applying Q methodology (Paper III).

1.4.1 Specific aims

Chapter 2

Context

2   Context

This section provides a brief description of how the Norwegian child welfare system is organised and the form of the interprofessional team arrangement called *Responsible Team* (RT). As previously described, this study focuses on the subjective views of a sample of adolescents in Norway. These adolescents had complex needs and were therefore in contact with several service providers. The NCWS was involved with each of the adolescents and had formed an RT around them. All of the adolescents had experiences from participation in such teams. These experiences were the basis for the subjective views explored in this thesis.

2.1   The child welfare system in Norway

The overall responsibility for the child welfare system in Norway is with The Ministry of Children, Equality and Social Inclusion. The distribution of responsibilities and tasks within the child welfare system are regulated by the Child Welfare Act (1992) and regulations issued pursuant to it (Ministry of Children and Equality, 2012).

The Norwegian child welfare system is organised into two levels. The first is the municipality level. Each of the Norwegian municipalities is required to provide child welfare service to all children and families in need (Norwegian Directorate for Children, Youth and Family Affairs, 2015). Due to the small size of some municipalities, some Norwegian Child Welfare Services (NCWS) are organised in inter-municipality agencies (Lichtwarck & Clifford, 2010). Some of the NCWS's responsibilities are to undertake investigations when a report is received, decide and effectuate voluntary measures of assistance and emergency orders, follow up on children in out-of-home care, prepare cases for the county social welfare board, and approve foster homes (Ministry of Children and Equality, 2012).

The second level is the Child, Youth, and Family Department (Bufetat), which is governed by the Norwegian Directorate for Children, Youth and Family Affairs (Bufdir). Bufetat provides the municipal NCWS differentiated children's homes, foster homes, and specialised measures of assistance, and they are responsible for the training and guidance of foster homes. Additionally, Bufetat is responsible for approval of private and municipal children's homes (Norwegian Directorate for Children, Youth and Family Affairs, 2015).

All the adolescents in this study received services from the NCWS, and Bufetat was also involved with most of the adolescents. In the majority of these adolescents' RTs, both of these child welfare levels were represented, with at least one professional participant from each.

2.2 Responsible Team

Several collaboration team models have evolved in different countries as a result of attempts to find ways to improve the effectiveness and accuracy of targeted services in accordance with service users' needs (Reeves et al., 2010). In Norway, RTs have been commonly used to organise collaboration across professions and agencies and between professionals and non-professionals, as well as to include service users, for more than 30 years. Hence, the collaboration in RTs may be described as interprofessional, interagency, and interorganizational. As well, RT constitutes a venue for service user involvement. The purposes of RTs are to secure interprofessional collaboration, a flow of information, and coordinated services when these are required in order to meet service users' needs (Fylkesmannen i Sogn og Fjordane, 2015). Intentionally, the RT will facilitate means of communication and client-centered services, and the collaboration advantages (Vangen & Huxham, 2009) will benefit the service user.

RTs are frequently used in the NCWS (Ødegård, Iversen, & Willumsen, 2014), which is required to collaborate with other professions and agencies in order to meet with vulnerable children's complex needs (NCWA, §3-2 and 2a).

There are similarities between the RT conferences in the NCWS and the United Kingdom's core group (for children receiving child protection services in the community) and looked-after children review meetings, but they are not the same (Skivenes & Willumsen, 2005). One of the most important differences is that the NCWS serves all children in need. There is not a separate regulatory framework for services for children needing support at home, for those who are in need of protection, and for those who are in out-of-home care, as is the case in the United Kingdom (Parton, Thorpe, & Wattam,1997; Samsonsen, 2015).

Several municipalities in Norway have developed guidelines for RTs, but these do not seem to include specific guidelines about such issues as how to involve the child. Nor do the different guidelines necessarily comply with each other. Hence, RT practices vary between municipalities. Nevertheless, some commonalities exist.

In RTs for children established by the NCWS, representatives from the various services involved with the child are brought together. The child, the child's parents, and individuals who may be identified as the child's 'significant others' (Mead, 2005; Skivenes & Willumsen, 2005) are also commonly included in the RT. The RT coordinator and chairperson of the RT conferences is normally the NCWS caseworker, which is often a social worker by profession.

The group that constitutes the RT meet together in case conferences to plan and follow up on the help and support that the child needs for development and realization of his or her potential. The frequencies of these conferences are adjusted according to the child's changing needs. In RT conferences, status updates, evaluations, and discussions around the table take place (Willumsen & Severinsson, 2005). An RT may be established when the child is very young and may last for many years, but the RT members may change as result of turnover or of the child's changing needs. Older children and especially adolescents will normally be encouraged to participate in the RT conferences. When appropriate, communication between different RT members also occurs between the conferences.

The NCWS categorises RTs as *measures of assistance*, the purpose of which is to contribute to a positive change for a child or family (Norwegian Child Welfare Act §4-4). Measures of assistance, such as RTs, may be provided both to children who receive care measures and also to children living with their parents.

In a recent research report about the NCWS's measures of assistance, such as the commonly used RTs, Christiansen et al. (2015) concluded that such research is in a very early phase:

> There still remains a great demand for descriptive research. At the same time, different approaches to examine the effects of specific interventions are needed. There remains a lack of knowledge about: … How children's participation in intervention plans and coordination groups [RTs] can be further developed. (p.16)

Adolescents' subjective views about participation in RTs explored in this PhD study may contribute to further knowledge development in this field.

Chapter 3

Previous research and theoretical framework

3 Previous research and theoretical framework

3.1 Research about interprofessional collaboration

According to the World Health Organisation (WHO) (2010), a collaborative practice is characterised by several health workers of different professions working together with patients, families, and carers, as well as communities, in order to provide the highest quality of care. Such characterisation is also in line with the collaboration in RTs, where the service users' physical, mental, and social health is at issue.

The general picture is that there exist numerous concepts about collaboration across professions, agencies, and organisations. Across different contexts, the term *collaboration* is commonly used as if everyone knows what it means and entails. However, it is, rather, an imprecise and inconsistently understood and applied concept (Ødegård, 2008). Reeves et al. (2010), in a review study, also discussed a number of concepts related to collaboration in health and social services. A review study about organizational approaches to collaboration in the field of vocational rehabilitation also illustrates the complexity of collaboration (Andersson, Ahgren, Bihari Axelsson, Eriksson & Axelsson, 2011). The review identified a number of barriers as well as a number of facilitating factors to collaboration, which were often described as two sides of the same coin. Moreover, the review identified seven different basic organizational models of collaboration. Some models were used in combination with each other and the degree of complexity, intensity and formalization differed. Andersson et al. (2011) concluded that there is not one optimal model of collaboration that can be applied everywhere. However, one model may be more appropriate than others, depending basically on the needs of the clients or patients concerned (Andersson et al., 2011).

The search strategy in this PhD study showed that varying concepts and combinations of words describing collaboration between professionals and service users in child welfare and child mental health services flourish. Such diversity in how *collaboration* is understood and applied presents challenges to scientific exploration in this research field.

Literature searches in the largest databases, directed at adolescents' perception of IPC and service user involvement, were conducted several times from January 2012 to February 2016. The searches resulted in few hits. Several search strategies were applied, using combinations of the following terms: *interprofessional collaboration*; *adolescent; child welfare/child protection*; *child mental health/psychiatry*; and *service user involvement/participation*. With the objective of retrieving as many relevant studies as possible, each of these terms was expanded by applying truncations and synonyms such as the following examples: (TI) *multiagen* OR multiprofession** OR i*nterprofession** OR *inter-profession** OR *partnership* OR *joint working* OR *cooperative* OR *co-operative* OR *multidiscipline** OR *multi-disciplin* OR *transdisciplin** OR *trans-disciplin* OR *agency cooperation* OR *collaborat** OR *interfac** AND (TI) *adolescent* OR *young people* OR *teen** OR *youth** OR *youngster* OR *young person* AND (SU) *child welfare* OR *child protection* OR "*child* service*" OR "*youth service**" AND (SU) *child mental health* OR *mental health* OR *child psych** OR *psych** OR *couns** AND (AB) *service user** OR *participate**. Similar searches were also conducted in Norwegian data basis, using Norwegian words, but it did not result in any relevant hits.

However, searches in MEDLINE, Academic Search Premier, and SocINDEX with Full Text produced only four references, of which none appeared to be relevant (see Appendix 1 for further details). Additionally, several hand searches in relevant reference lists were conducted, but the total number of relevant studies still was very low. There is always a possibility that flaws and limitations in the search strategy may have impaired the findings, therefore more systematic research is needed in this field.

Studies that emerged from hand searches, such as Oliver, Mooney, and Statham (2010), O'Reilly et al. (2013), and Bolin (2014; 2015), emphasise the lack of research on children and adolescent service users' experiences and views about IPC. In the first systematic review study ever conducted about interagency collaboration across children and young people's mental health, Cooper et al. (2016) underline the lack of children service users' perceptions: '*Just two studies examined, to any extent, the attitudes and perceptions of children and young people themselves*' (p.12). Cooper and colleagues stated that

> *understanding how children and young people, and their*
> *parents/carers, experience interagency collaboration – and its*
> *breakdown – may give important insights into the impact of this*
> *working that are not captured in clinical outcomes alone. (p.16)*

Most studies about experiences of collaboration across professions and agencies focus on professionals' points of views (Cooper et al., 2016). Examples of such studies are Gartska, Lieberman, Biggs, Thompson, and Levy (2014), Hesjedal, Hetland, and Iversen (2015a), and Ødegård and Strype (2009). A few studies have focused on parents' perspectives (e.g., Skivenes & Willumsen, 2005; Widmark, Sandahl, Piuva, & Bergman, 2013), and parents *and* children's views were the focus of a study by O'Reilly et al. (2013). Young people's experiences with public service multiagency workings were explored by Harris and Allen (2011), but the young people had not been included as team participants. Two studies (Bolin 2014; 2015) were identified as focusing on children's views about participation in interprofessional collaboration.

3.1.1 Research on interprofessional collaboration in children's services

In Norway, as in many other countries in the Western world, interprofessional collaboration (IPC) is a health and social policy target as well as a tool in health and social services for children (Willumsen, Sirnes & Ødegård, 2014). That the NCWS is required to collaborate across professions and agencies in order to provide the best help and support for children and adolescents who have complex needs (Norwegian Child Welfare Act §3-2 and 2a) is one example of such policy. Well-functioning IPC has the potential to contribute increased effectiveness as well as improved outcome for service users (Reeves et al., 2010), but research indicates that achieving such collaboration is challenging (Ødegård, 2008).

As a consequence of the interchangeable use of terms within the IPC research field, it may be challenging to achieve an overview of relevant IPC research (Cooper et al., 2016). For example, in their new study about interagency collaboration in children and young people's mental health, Cooper et al. (2016) used no less than 21 different search words that defined collaboration across professions, disciplines, and agencies. Their systematic review of outcomes as well as facilitating and inhibiting factors of interagency collaboration in children and young people's mental health, found that outcomes were mixed. Some of their findings indicated that interagency collaboration was associated with greater service use and equity of service provision, while other findings suggested negative outcomes on service use and quality. Both service users and professionals perceived interagency collaboration as helpful and important, and the researchers found some indications that children and young people benefit from such collaboration. Cooper and colleagues found that both facilitating and inhibiting factors involved working relationships, multi-agency processes, resources, and management. Facilitating factors included *'good communication, joint trainings, good understandings across agencies, mutual valuing across agencies, senior management support, protocols on interagency collaboration, and a named link person'* (p.1). The barriers to interagency collaboration most commonly perceived were '*inadequate resourcing, poor interagency communication, lack of valuing across agencies, differing perspectives, poor understandings across agencies and confidentiality issues'* (p.1).

3.1.2 Children's views about participation in interprofessional collaboration

The only two studies identified in the literature reviews that focused on adolescents' perceptions about participation in IPC, were by Bolin (2014; 2015), from a Swedish context. Both of these studies are concerned with children's agency among children (aged 5 to 20) in receipt of social services support. Both studies were based on the same data from qualitative interviews with 28 children and qualitative data analysis. In her 2014 study, Bolin found that children in her study were not 'powerless agents' in IPC meetings, but that they used strategies such as pretending to be disengaged in order to hide that they did notice what was going on in the meeting. Later, the children used information gained this way, such as exchanges of information, views, power inequalities, their subordinated position, and limited opportunities for input in the meetings, to their own advantage. Leaving a meeting was found to be another strategy children used in order to speed up or end meetings (Bolin, 2014). Bolin (2015) suggested that through different forms of protesting to the presence of certain persons or too many professionals in the meetings and by listening and 'opening up' to the professionals whom they trusted, children also influenced the 'organizational chart' or the composition of meeting participants.

Interprofessional collaboration is, according to Reeves et al. (2010, p. xiii) 'a type of interprofessional work which involves different health and social care professions who regularly come together to solve problems or provide services.' They use the term *interprofessional teamwork* to include not only the professionals on the team, but also the patients and their carers and relatives (Reeves et al., 2010). Increasingly, terms such as *collaborative practice*, *collaborative care*, and *joint working* tend to be used in the literature about collaboration. This development reflects intentions of including service users and other parties as participants in collaboration (Willumsen et al., 2014). In children's services, children obviously constitute the service users.

As pointed out above, literature searches conducted for this study support the claim that there is a vast lack of IPC research that focuses on the perspectives of children and adolescent service users (Bolin 2014; Bolin 2015; Cooper et al. 2016; Oliver et al. 2010; O'Reilly et al., 2013). Whether or not this implies that children's involvement in IPC is rare or that children are not very often included in research on IPC cannot be claimed, but a need for further research on children's views about IPC seem evident. As described earlier, this study investigates collaboration in RTs, but, in contrast to most studies on IPC, this one is approached from the angle of the adolescent service users' views.

3.1.3 Professionals' views

As already mentioned, most studies on IPC in children services focus on the perspectives of professionals (Cooper et al. 2016). Examples of such studies are Darlington and Feeney (2008), Gartska et al. (2014), Hesjedal et al. (2015a), McLean (2012), Ødegård and Strype (2009) and Widmark et al. (2011).

Ødegård and Strype (2009) explored perceptions of IPC in child mental health care and found that the most prominent constructs of collaboration perceived by professionals were motivation, group leadership, social support, and organizational culture. Widmark et al. (2011) explored perceptions of unit managers and professionals in health care, social services, and schools about barriers to collaboration in the area of children and adolescent mental health. Such barriers occurred in connection with the allocation of responsibilities, confidence, and the professional encounter, and resulted mainly from a lack of clarity about responsibilities, meaning of each other's mission and handling of confidentiality rules. They found that shared responsibility of managers from different organizations is a crucial factor in successful collaboration. They concluded that a holding environment, as a social context that facilitates 'sense making' (Widmark et al. 2011, p. 7), and a committed management have the potential to support professionals in their efforts to collaborate. Hesjedal et al. (2015a) focused on perceptions of NCWS social workers and schoolteachers in their study about IPC concerning children at risk. They suggested three keys to successful IPC for this target group: 'personal commitments', 'creating a positive atmosphere for IPC, emphasising equality among team participants' and 'pulling together towards future goals' (Hesjedal et al., 2015a).

3.1.4 Parents' views

Among the few studies located, Willumsen and Skivenes (2005) and Widmark et al. (2013) are two examples that focus on parents' perspectives on IPC in children services. The study by Widmark et al. (2013) indicates that when the encounter was characterised by structure and trust, the encounter between parents of children who suffered from anxiety or depression and professionals was supportive and served as a holding environment. Important for the creation of trust in such encounters, however, was that professionals were available, were skilled, provided adequate information, and showed empathy and commitment.

Harris and Allen (2011) based their study about young people's experiences with public service multiagency working on interviews with parents and children in primary and secondary school in England. They found evidence that when multiagency work was effectively integrated and professional services were streamlined, it had a positive impact on young people and their families. Young people reported high levels of satisfaction in their relationships with multiagency staff, particularly if they were provided access to stimulating opportunities and in cases were mutual trust were nurtured (Harris & Allen, 2011). According to Harris and Allen, young people tended to perceive multiagency support in terms of the individuals whom they worked with most closely.

In a study about multiagency working regarding children who suffered from educational and mental health difficulties, O'Reilly et al. (2013) explored perspectives of both parents and children (8-12). They found that even children as young as 8 years old had a clear understanding of agencies' remits and the extent of their working together or not. Both parents and children perceived joint working as important in order to help improve children's mental health problems. According to O'Reilly et al. (2013), parents as well as children called for more active collaboration and communication between agencies and children and parents.

3.2 Service user involvement

According to the United Nation's Convention on the Rights of the Child (UNCR), §12 (1989) and the NCWA, §6-3, the child has the right to express his or her views in cases concerning themselves and to have their views taken into account. This implies that children have the right to participate in discussions that convey decisions in cases of significance to them (Strandbu, 2011). Thus, knowledge about service user involvement, in terms of the individual service users participating and having influence on the services they receive (Humerfelt, 2005), is also relevant to the understanding of adolescents' subjective views about participation in RTs. Such knowledge may serve to complement the picture regarding RTs in which adolescent service users' participation is included. Hence, knowledge about service user involvement may contribute to the understanding of the adolescent service users' subjectivity, which has been the focus in this PhD study.

3.2.1 Research on service user involvement in child welfare contexts

Relatively few studies have focused on adolescent service users' views about participation, but some studies exist where adolescents' views are also included. Examples of such studies are Cashmore (2011), Cossar et al. (2013), van Bijleveld, Dedding, and Bunders-Aelen (2015) and Warming (2011). In line with van Bijleveld et al. (2015), Cossar et al. (2013) emphasised the importance of children's participation in decision-making processes. In their study, Cossar et al. found that the child welfare social worker had a key role in decision making in relation to a child and that the child wanted to get to know her and to be able to influence her decisions. This accords with Warming's (2011) findings that children want to be able to influence adults who possess powerful positions in relation to their case. According to studies such as those of Buckley, Carr, and Whelan (2011) and Cossar et al. (2013), it is crucially important that children in need of child welfare services have a trusting relationship with the social worker. However, developing such relationships may be time-consuming (Cossar et al.), and social workers' lack of time is a recognized problem (McLeod, 2010).

International research indicates that many social workers as well as service users perceive service user involvement in child welfare as difficult (Buckley et al., 2010; Gallagher et al., 2012; Healy & Darlington, 2009; Slettebø, Oterholm, & Stavrum, 2010; Vis, Holtan, & Thomas, 2012). Slettebø and colleagues (2010) suggested that professionals' uncertainty about what service user involvement in child welfare is all about and uncertainty about who constitute Bufetat service users may cause differences in the practices. When the target group is not clearly defined, the professionals' roles and functions may appear unclear to service users as well as to collaborating partners. However, both the child and the parents are service users in child welfare contexts, but their views are not necessarily congruent (Slettebø et al., 2010). That service user involvement in child welfare tends to be found difficult by professionals as well as service users was emphasized in studies such as Buckley et al. (2011), Gallagher et al. (2012), Healy and Darlington (2009), Slettebø et al. (2010), and Woolfson, Heffernan, Paul, and Brown (2010). Healy and Darlington found that principles and methods for achievement of participatory practices with vulnerable children in child protection contexts are either patchy or underdeveloped. Nevertheless, Slettebø and his colleagues (2010) suggested facilitating user participation in every meeting concerning the service user's case, so that they feel welcomed and understood.

In their review about children and families' involvement in social work decision making, Gallagher and colleagues (2012) suggested that effective participation, in terms of service user's influencing decision making, is more nuanced than policy directions might allow for. The three strands of effective participation that they identified were: the importance of good relationships, the provision of information, and, in some cases, ensuring support to enable participation (Gallagher et al., 2012). According to a review study by Vis et al. (2011), children's effective participation may also benefit their safety and well-being, although it seems to depend on the child's relationship with the social worker and tailoring the participation process to accommodate children's expectations and abilities. Gallagher et al. (2012) concluded that improved outcomes for the service users are associated with their effective participation, but managerial cultures that are overly bureaucratic and a lack of time available for building relationships can impede effective participation.

Despite several indications of the potential benefits for children of effective participation, several studies conclude that effective user participation appears rare (Cossar et al., 2013; van Bijleveld et al.; 2015; Vis et al., 2012; Vis & Thomas, 2009; Warming, 2011). Although children have legal rights to participate (UNCR, §12; NCWA, §6-3), Vis et al. (2012) found that if social workers for some reason consider participation harmful to the child, they will not facilitate it. Van Bijleveld et al. (2015) concluded that it is important that professionals view the child as a competent social actor; not only as a child in need of protection. Other reasons for social workers not engaging children in decision making may be that they find achievement of effective participation difficult and/or that they lack the skills needed (Vis et al. 2012). Warming (2011) claims that despite social workers' good intentions, curtailments of children's participation harm their self-esteem and trust in and commitment to the basic norm in democratic societies, in terms of the right everyone has to influence decisions that affect their lives.

Though the research discussed above contributed to our understanding of adolescent service users' subjective views about participation in RTs, some important issues needing illumination remain. Considering the scarcity of research on this subject, it seems clear that additional knowledge is needed to enhance understanding and, ultimately, practice in this field. When empirical knowledge is lacking, other theory may help to complement the picture.

3.3 Theoretical framework

Several theories may contribute to understanding the views of adolescent service users about their participation in RTs. In particular, the interprofessional framework developed by Reeves et al. (2010), as well as theory about service user involvement and children's participation in child welfare contexts are presented in this section. However, these theories seem insufficient when attempting to understand vulnerable adolescents such as those whose views have been explored in this PhD study. Honneth's theory about recognition, which is presented and discussed in this section, provides perspectives that may be helpful in understanding adolescent service users' vulnerable situations. Adolescents included in RTs may have a special need for recognition.

3.3.1 Interprofessional teamwork

The interprofessional framework developed by Reeves et al. (2010) was based on teamwork experiences from several countries in the world and across different health and social settings. The framework may be useful in understanding adolescent service users' subjective views about participation in the interprofessional team arrangement, RT. According to Reeves and colleagues, interprofessional teams have key dimensions such as the following:

> clear goals (the primary goal being effective patient/client care), shared team identity, shared commitment, clear team roles and responsibilities, interdependence between team members, integration between work practices. (p. 15-16)

In their view, an interprofessional team is a specific type of work and a focused activity, one which may also include service users and other relevant persons in addition to professionals. A wide range of factors may affect interprofessional teamwork. Through the use of four domains -- relational, processual, organizational, and contextual, Reeves and colleagues clustered a number of factors that impact on interprofessional teamwork.

- *Relational factors* are factors that directly affect the relationships shared by professions. Professional power and socialization are examples of such factors.

- *Processual factors*, such as space and time, are those that affect the work situation of the team.

- *Organisational factors* are defined as factors that affect the local organisational environment where the team operates.

- *Contextual factors* refer to the broader social, political, and economic landscape, in which the team is located.

These domains and factors should not be seen as clearly separated or isolated from one another, but, rather, as being interconnected and interwoven in many ways. Many of the factors in Reeves et al.'s interprofessional framework may be relevant to adolescent service users' views about team participation. The relational and the contextual domain seem to have particular relevance to adolescent service users' views and will therefore be presented in more detail.

The relational domain

Professional power is one of the factors associated with the relational domain. This complex phenomenon cannot be described in detail here, but, for example, in interprofessional teamwork how power is shared and inequalities of power among different team members impact the functioning of a team. However, the power to resist (Foucault, 1978) is also important. In interprofessional teams, the power to resist may be manifested in ways such as non-attendance at team conferences. *Hierarchy* is another relational factor and is closely related to the power factor. For example junior members may be disempowered by senior members, although the opposite, seniors empowering juniors, is also possible. *Team composition* refers to elements such as the size of the team and who is involved. Finally, *team roles* refers to the different roles of the different team members. The role of the team leader, for example, is emphasized as important to team stability and the development of trust and respect.

Team processes is described as a multi-dimensional factor in the relational domain. *Communication* is mentioned as one such dimension, which has conveyed serious mistakes in patient treatments in terms of harming patients. Tensions caused by power inequalities and hierarchy may complicate communication. Another dimension is called *team-emotions*, which refers to the development of a strong commitment to the team because the members find membership or the experience emotionally valuable. The *trust and respect* dimension plays a crucial role in interprofessional teamwork. A team characterized by a high degree of trust and respect is often related to the stability in the team, as well as to long and close collaboration. Before a team member can achieve a team's or another team member's trust, ability must often be proved. Lack of respect is described as a key cause of conflicts. A low level of trust and respect in interprofessional teams often comes from lack of knowledge about each other, a low degree of commitment to team goals, and fragmented interprofessional communication.

The use of *humour* in teams can have several important functions, for example, when emphasising existing rules and boundaries, reinforcing power imbalances, or easing interprofessional tension. *Conflict* may be caused by several of the relational factors, but it does not exclusively entail something negative. If frictions and conflicts are totally absent in the team, there is a risk of developing 'groupthink'. *Team stability* may contribute to the development of reciprocal understanding and trust among the team members, and it may, as well, counteract turnover. *Individual willingness* is an important dimension that deserves focused attention. Ultimately, if the individual team member does not willingly engage, teamwork will not happen. *Team building* is a dimension that refers to activities aimed at enhancing collaborative processes. It may contribute to improving a team's performance, but, given people's heavy workloads, it may be difficult to find time for such activities.

The contextual domain

The contextual domain is associated with the five factors: *culture*, *diversity*, *gender*, *economics,* and *politics*. The *culture* factor is relevant on societal, organizational, and team level. At the team level, *culture* may be described as 'the meanings and perceptions different team members attached to their team as well as their interprofessional interactions' (Reeves et al.,2010, p.86). *Diversity* is also relevant on societal and organizational as well as the team level. It applies to cultures; social, political, and economic systems; organisations; and professions. Diversity can be a promotional factor, but it may also complicate interprofessional teamwork. The *gender* factor is primarily about the inequalities in power among professionals related to their gender. Some professions have traditionally been associated with one gender, such as male medical doctors and female nurses. There has been a shift in which gender dominates certain professions; for example, in particular, medical doctors now tend to be female rather than male.

Political will from a number of international, national, and regional governments, as well as professional associations, has been a crucially important factor in the development of interprofessional teamwork. However, supporting policy documents have often been problematic as they provide little guidance about the development or delivery of teamwork activities and, hence, they leave complex implementation tasks up to locally based organisations. These documents also fail to pay attention to key underlying factors in teamwork, such as power and status imbalances, which play critical roles in shaping the nature of interprofessional relations in teams. One example of the contextual factor *economics*' relevance is that there is still little evidence of cost-effectiveness using interprofessional teamwork across health and social care settings. However, cost-effectiveness may have been an important argument in the establishment of interprofessional teamwork. This ultimate contextual factor is also relevant to the difference in salaries that the professionals get paid for their team performance. Such differences may imply differences in the priority individual team members assign to their teamwork.

Reeves' and colleagues' (2010) interprofessional framework may be relevant not only to understanding professionals' views about teamwork but also to adolescent service users' subjective views about participation in RTs. Their framework is therefore used to illuminate the adolescents' views in the Q study (Paper II and Paper III) and also in Chapter 6 in this PhD study.

3.3.2 Service user involvement

According to Humerfelt (2005), there is not a clear definition of what service user involvement implies, and the concept is referred to as a concept of honour that has a low level of precision. However, service user involvement has been an important element and a priority area in Norwegian health and welfare politics in recent years.

Service user involvement is rooted in the concept of empowerment, which stems from the American civil rights movements in the 1960s and the struggle for black people's rights. 'Power to the people' was the slogan, and civil rights and equal opportunities for all people in society was the main aim (Croft & Beresford, 1996). The Brazilian pedagogue, Paulo Freire, was also an important source of inspiration through his book about the pedagogy of the oppressed (Freire, 1972). According to Rappaport (1981), empowerment promotes people's control over their own lives and contributes increased community participation.

However, some power theoreticians consider that rather than providing more power to vulnerable groups of people, empowerment is more about a hidden and subtle form of power. Illusions of autonomous choice are created, but increased self-regulation, which may be oppressive, is the result (Dean, 2010; Juritzen, Engebretsen, & Heggen, 2012; Powers, 2003).

Service user involvement does not have the same political nor ideological roots as empowerment, but it is still a necessity in the empowerment process and achieving that process's goals on the individual, group, and community levels. Service user involvement is therefore a presupposition to empowerment, but service user involvement does not necessarily presuppose empowerment. According to Humerfelt (2005), the aim of service user involvement is that, by participating and developing their competencies, citizens will become active and better compatriots and users.

Service user involvement is a compounded concept. *Service user* refers to a person who is affected by or uses a service. *Involvement* implies that the user is allowed influence in decision-making processes and in shaping the service provision (St.meld. Nr 34, 1996-1997). The aim of empowering service users may seem implicit in the service user involvement concept. However, the power balance between, for example, social workers and service users will always be in favour of the social worker (Humerfelt, 2005). Given this reality, it seems relevant to illuminate the power aspect in service user involvement and, particularly, regarding professions that are traditionally powerful in relation to the users of health and social services.

Service user involvement and power

In RTs where adolescent service users participate, social workers often have the key roles. They represent a welfare profession that has a complex power challenge. The complex phenomenon of power may, in a simplified way, be described as 'the capacity, held individually or collectively, to influence either groups or individuals (including oneself) in a given social context' (Smith, 2008, p. 23). In the interest of the public, social workers are supposed to exercise statutory authority and, at the same time, identify and represent the interest of the service users. In order to be effective contributors to social justice, the power relationships must continuously be renegotiated, and the potential for constructive solutions must always be aspired to (Smith, 2008).

In order to provide a more detailed understanding of power relations between social workers and service users, Smith (2008) divides power into four main aspects. These are power as potential, power as possession, power as process, and power as product. Each of these represents a way to characterise power relations. Smith (2008) demonstrates how all of these four power aspects may contribute to an understanding of the power relations between social workers and service users. Power relations between service users and service providers are an important factor in the involvement of adolescent service users in RTs. This is discussed in the empirical studies presented in Paper I and Paper III, with references to such theorists as Omre and Schjelderup (2009), Reeves et al. (2010) and Foucault (1978). Below, I will briefly describe Smith's (2008) four aspects of power.

Power as potential may be seen as a facilitative resource that serves to maintain and develop social relations. The Family Group Conference (FGC) model, where the dynamics in power relations between the social worker and the service user may be changed to seek mutual, positive advantage, serves as an example of this power aspect (Smith, 2008). In FGC, family members are allowed control of the process, and they are responsible for deciding who to involve, the conduct of the conferences decision making, and which actions are to be taken.

Power as possession refers to power as something that an individual or an organisation possesses. This could be power as result of having a particular position in a particular context, such as a judge in a trial.

According to Smith (2008), Foucault has, more than any other theoretician, influenced the understanding of power as process. Foucault sees power as something that is being exercised in the interplay of non-egalitarian and mobile relations and that is being substantiated in the direct interactions between individuals in specific settings, rather than something that being imposed on them. Power can be exercised according to aims and objectives of social actors who, again, may be inspired by other networks and influences. Foucault also characterises power by 'resistance' in terms of sporadic and unpredictable actions of non-compliance or counteraction (Smith, 2008). Where there is power, there is also resistance.

Power as product is exemplified by empowerment, which can be understood as a product and result of an interaction process between social workers and service users, where the service users are allowed increased power and control over their lives (Smith, 2008).

An RT is an important venue for service user involvement in the Norwegian child welfare system, which is very often used when the child is an adolescent who is placed in out-of-home care. Children and adolescents have a legal right to participate, but the degree to which they actually participate differs largely. Power constitutes a significant aspect in children and adolescents' participation. In the following section I will illuminate children and adolescents' participation.

Children's Ladder of Participation

As already mentioned, children have a right to express views in cases concerning themselves and to have their views taken into account (UNCR §12; NCWA §6-3), which means that they are entitled to participate in discussions that convey decisions in cases that are of significance to them (Strandbu, 2011). However, this legal right does not seem to have given children extensive power, as children service users influencing decision making appears to be rare (Cossar et al., 2013; Warming, 2011; van Bijleveld et al., 2015; Vis & Thomas, 2009; Vis et al., 2012).

The 'children's ladder of participation' [author's translation] refers to children's degrees of power. The phrase was introduced by Omre and Schjelderup (2009), who developed the ladder on the basis of Arnstein's (1969) 'ladder of citizen participation' in combination with Hart's (1992) 'ladder of young people's participation'. Children's ladder of participation is customised for children as participants in making decisions about their everyday lives and in finding solutions in difficult life situations (Omre & Schjelderup, 2009). Children's ladder of participation may be applied as a tool in evaluations of a specific child's power, but also to demonstrate that what, in general, is referred to as participation does not necessarily imply that a child is given the power to participate.

The nine levels of the children's ladder of participation are (1) children manipulated, (2) children as decoration, (3) children provided selected information, (4) children provided full information, (5) children consulted, (6) children as negotiators, (7) children as partners, (8) children given delegated power, and (9) children as active decision makers. Only the three last levels, from seven to nine, involve degrees of 'participant power', which implies power to effectively influence the result of the decision-making process. Levels three to six are designated degrees of pseudo-participation, and the two first levels are designated non-participation [author's translation] (Omre & Schjelderup, 2009).

Models involving stepwise graduation of participation have been criticised, for example because reality cannot be understood stepwise and linear (Ellingsen, Schjelderup & Omre, 2014). Nevertheless, such models may be useful as basis for reflection about what participation is all about and what it should be.

3.3.3 Honneth's theory about recognition

As already described, several theories may shed light on the subjectivity of participation in interprofessional teamwork such as RTs. However, as, for example, in Reeves et al. (2010), these theories most often examined professionals' experiences simply because most studies of IPC perceptions refer to professionals. There are similarities, but also some significant differences, regarding factors relevant to professionals' versus adolescent service users' experiences of participation in interprofessional teamwork. For example, as already emphasised, knowledge about service user involvement may be relevant to understanding adolescent service users' subjective views about participation in RTs and is therefore presented in this thesis. A theory equally sufficient for illuminating experiences of adolescent service users' as for those of professionals has been hard to find. This could be related to the fact that the adolescents, different from professional RT members, are supposed to contribute with information about their private life and not with professional knowledge. It may, perhaps, seem like a perspective is missing in our seeking to understand children and young people's subjective views about RT.

Thomas (2012) explored Honneth's theory of recognition as an analytical tool in order to understand children's participation. According to Thomas (2012) Honneth's theory deserves critique for its inherent bias against children's agency, sociality and citizenship. Nevertheless, he concludes that Honneth's theory can be an extremely helpful theoretical framework in the analysis of particular examples of children's participation, as well as in 'thinking more seriously about the meaning of children's participation in general' (Thomas, 2012, p. 464). Possibly, Honneth's theory of recognition may provide useful perspectives in order to understand adolescent service users' vulnerable situation as participants in RTs and hence their subjective views. Honneth's theory may perhaps be an additional contribution to how IPC may be experienced by young service users in vulnerable situations. Additionally, this theory may possibly also be a helpful in order to understand some of the potential in RTs. According to the German social philosopher, Axel Honneth, all individuals depend on experiencing recognition from others in order to develop self-confidence, which is, in turn, essential to his or her sound participation in society. Honneth built his theory on Hegel's early work, which describes how subjects are being constructed by their interaction with others and, thus, that the struggle for recognition is so important in the development of personal identity. Basically, by drawing on Mead's social psychology and Winnicott's object relation theory, Honneth expanded Hegel's model about the struggle for recognition. However, Honneth's analysis of Foucault's views on power and Habermas' critical theory have also been central (Skjefstad, 2012) to his theory. Honneth's theory about recognition, which may be applied to both the individual and collective levels of development, is based on three

modes of recognition: love, right, and solidarity (Honneth, 2008). According to Honneth, a real recognition not only identifies the positive features of an individual or a group, but also recognises what is positive in these. Honneth's recognition concept implies, among other things, that recognition by using words alone will not be perceived as recognising unless it is followed up by action. Moreover, only actions aimed at recognising others counts as recognition (Honneth, 2008).

Human beings struggle for recognition in different forms of communities, which Honneth designates *spheres of recognition*. There are three spheres of recognition: the intimate sphere, the rights sphere, and the sphere for social valuation. Experience of recognition, by love, right, and solidarity, in these respective spheres, is crucial to development of the three self-relations, which are self-confidence, self-respect, and self-esteem. The modes of recognition should not be understood as rungs on a developmental ladder, but, rather, as a continuous movement where the rungs build upon one another and work simultaneously.

Understanding recognition presupposes understanding its opposite, contempt and violation (Honneth, 2008). The three forms of violation within the three spheres of recognition are, respectively, bodily violation, denial of rights, and debasement. Experiences of violation may cause serious harm to human beings' self-confidence, which may cause difficulties in their later participation in society. An important aspect of Honneth's theory is the notion that the negative emotional reactions that result from experiences of violation may form the affective basis of motivation for opposition and active actions, that is, struggles for recognition. Inspired by Skjefstad (2012), basic elements of Honneth's theory of recognition may be summarised thus:

Table 3.1 Schematic Presentation of some Main Elements in Honneth's Theory of Recognition

Recognition mode	Recognition sphere	Self	Violation
Love	The intimate sphere	Self-confidence	Bodily violation
Right	The rights sphere	Self-respect	Denial of rights
Solidarity	The sphere for social valuation	Self-esteem	Debasement

According to Honneth, reciprocity is a central issue in recognition relations. He emphasised that it is impossible to experience recognition, whether by love, right, or solidarity, without simultaneously recognising the person who recognises one's self. Experiences of recognition by unconditional and reciprocal love in primary relations consisting of strong emotional bonds between a few persons, such as family and close individuals in the intimate sphere, is the most important and most basic mode of recognition. Sufficient experiences of recognition by love in this sphere are crucial for the individual's development of a sound self-confidence, which is essential to further development of the self-relation and participation in society. Love induces the psychological fundament in every human being, enabling him to trust his own needs, impulses, and unrestrained dare to express his needs.

In the rights sphere, recognition is about experiences of being an autonomous citizen in society, entitled to the same rights and responsibilities as others in the community. Recognition by rights is the basis for the development of self-respect, which forms a consciousness enabling an individual to respect himself because he deserves being respected by everyone else. This mode of recognition is a cognitive form of recognition, controlled by rationality.

Recognition in the sphere of social valuation is about a human being's individual skills and capabilities being valued as useful contributions in the community, which constitutes the basis for the development of self-esteem. Recognition by solidarity is based on emotional as well as rational forms of recognition.

Lacking or insufficient experiences of recognition may cause experiences of physical, psychical, and social violation. Violation may destroy the opportunity to develop an intact identity and self-realisation. Various forms of violation in the intimate sphere may cause the most serious consequences for an individual's development and later participation in society. Examples of violation in this sphere are neglect or various forms of physical abuse or assault. Experiences of violation in the intimate sphere may, for example, cause lack of physical integrity, limited freedom of action, lack of trust in one's self and others, and reactions of shame.

Experiences of violation in the rights sphere, by exclusion from certain rights, may cause loss of self-respect. Systematic denial of an individual's rights implies that he is not believed to have the same moral accountability as other members in society.

Experiences of violation in the sphere of social valuation relate to social status, degradation of the self. Such violation may result in the individual's loss of self-esteem and loss of the potential self-realisation, which is the best possible outcome in this sphere.

Visibility and *invisibility* are two other essential concepts in Honneth's theory about recognition. He describes two forms of invisibility, of which one is about actually not being seen. The other is about being socially invisible, that is, being physically observed, but yet ignored or not heard. As already mentioned, recognition presupposes that one is first being seen and then confirmed by an acknowledging action. In order to become socially visible, it is necessary to first become recognised as an individual, which is a social recognition expressed by gestures such as greeting, smiling, or nodding (Honneth, 2008). Such actions are very important in interactions between adults, and their presence constitutes the difference between acknowledgement and recognition. These actions are bodily expressions that signalise a willingness to interact and show that one is welcome and may expect being positively taken into account (Skjefstad, 2012).

According to Skjefstad (2012), who investigated service users' experiences regarding service user involvement in social services, recognition may be a useful perspective from which to view the relation between power, exercise of judgement, and service user involvement. Skjefstad describes the ability to recognise human beings as the ability to see what is significant about another individual. Such an ability, therefore, constitutes a prerequisite to achieving service user involvement. Recognition is the basis for the development of self-confidence. Self-confidence enables individuals to express their points of view or to claim their rights, which are central elements in service user involvement. Violation -- the opposite of recognition -- may hamper service user involvement, particularly when a low degree of self-confidence reduces the ability to participate (Skjefstad, 2012).

Criticism of Honneth

Honneth's theory about recognition has been criticised by, for example, the feminist philosopher and politician Nancy Fraser. She argues that focusing on recognition may imply that material inequality and injustice regarding human beings' living conditions are overlooked and accepted. Honneth replies to this criticism. According to him, material inequality is an expression for moral recognition structures, which valuates some groups in society lower than others. Thus Honneth prioritises the moral experience of recognition over material redistribution, but he still sees redistribution as important, as he claims that having a certain standard of living is necessary to be able to act as a morally sound person (Fraser, 2000; Fraser, 2007; Fraser & Honneth, 2003).

Honneth's theory about recognition cannot explain everything about adolescents' participation in RTs, but it provides valuable perspectives. The fact that Honneth's theory recognises the subjective experience is particularly valuable in this PhD study, where the focus is on the adolescents' subjective views about participation in RTs.

Chapter 4

Method

4 Method

In line with, for example, William Stephenson (1953), the 'father' of Q methodology, the present study is based on the assumption that reality is socially constructed and that people create their own realities in an inter-subjective context (Berger & Luckmann, 2000; Thomassen, 2006). Individuals' constructed realities, or their subjective perspectives, are products of their interpretation of the world around them (Strauss & Corbin, 1990). These interpretations are influenced by such things as their values, beliefs, and experiences.

Q methodology is a suitable approach when the aim is to explore a person's subjectivity, such as the shared views, feelings, attitudes, beliefs, opinions, or preferences that human beings have. This is in line with Stephenson's intentions with the development of Q methodology, a methodology for scientific investigation of subjectivity. He introduced Q methodology in a letter to the journal, *Nature*, in 1935 (Brown, 1991/1992) and elaborated it in his book *The Study of Behavior. Q Technique and Its Methodology* (1953). Q methodology includes a description of central standpoints from philosophy of science, which coincides with the main ideas of Q, a conceptual framework, a research technique for data collection, and a method for analysis (Good, 2010). Q methodology has been disputed and criticised, particularly in relation to the former prevailing ideal about objectivity. In recent years, however, Q methodology has attracted increased interest among researchers. It has been applied in many research fields (Thorsen & Allgood, 2010), such as social policy (Brown, 1980), human geography (Eden, Donaldson, & Walker, 2005), pedagogy (Thorsen, 2009), social work (Ellingsen, Størksen,& Stephens, 2010) and psychology (Goldstein & Goldstein, 2005).

4.1 Overall design of study

A research design concerns itself with the coherence between research questions, aim of study, which information may illuminate the inquiry most appropriately, and which methods are best suited to collecting this information (Denzin & Lincoln, 2000). According to the aim of this PhD study, an in-depth look into a small sample of adolescents' subjective views was preferred. Several research methods could be used to collect such information. However, qualitative interviews (Kvale & Brinkmann, 2009), in combination with Q methodology (Stephenson,1953), were found to meet the needs for this study well. According to Esteves and Pastor (2004), the combination of approaches used in this study can be characterised as a multi-method design.

The overall design of this PhD study may be described as an explorative, multimethod design because the study comprised 'two or more research methods, each conducted rigorously and complete in itself, in one project' (Esteves & Pastor, 2004, p. 70). Two empirical studies were conducted, aiming to explore adolescent service users' subjective views of participation in RTs. The methods used for data collection and analysis in the qualitative study presented in Paper I were qualitative interview (Kvale & Brinkmann, 2009) and qualitative content analysis (Graneheim & Lundman, 2004). In conformity with Q methodology, the Q study presented in Paper III applied Q sorts for data collection, and data were analysed using the software program PQMethod (Schmolck, 2002) and factor interpretation (Watts & Stenner, 2012). The Q study (Paper III) applied a new way of combining approaches to Q sampling and the Concourse Box, both of which developments were introduced in the methodological study presented in Paper II. The starting point for the Q methodological development (Paper II) was the transcribed interview texts applied in the qualitative study (Paper I), and the findings of each original empirical study (Paper I and Paper III) forms a complete whole (Esteves & Pastor 2004).

4.2 Qualitative Study (Paper I)

Qualitative methods are often useful for gathering information and gaining insight into different perspectives of a phenomenon (Malterud 2013). A qualitative approach was chosen for this study (Paper I) that explored adolescent service users' perceptions of participation in RTs. This original study (Paper I) also constituted the first step in this PhD study.

4.2.1 Design

The study presented in Paper I took a typical qualitative methodological approach, using qualitative interviews and qualitative content analysis to explore adolescents' subjective views about participation in RTs. Semi-structured interviews (Kvale & Brinkmann, 2009) with 5 adolescents were conducted and transcribed. A qualitative content analysis (Patton 2002; Graneheim & Lundman, 2004) was used to identify and analyse themes in the transcribed interview texts.

4.2.2 Participants

In this study, (Paper I) 5 adolescents (3 girls and 2 boys) aged 13 to16 participated. The adolescents were recruited through the NCWS in two municipalities and from Bufetat (second level child welfare system). Four of these adolescents lived with one or both of their parents, and 1 lived in a foster home.

In conformity with the participants in the Q study (Paper III), all the adolescents had several years of experiences as service users in RTs because of long-term and complex needs for health and social services. Professionals representing NCWS and mental health care were involved as members in all the adolescents' RTs. Many of the adolescents' RTs consisted of numerous RT members, professionals, and non-professionals, representing, for example, school, other agencies, services, and care arrangements.

As indicated in the illustration below, the qualitative study (Paper I) included 5 adolescents. Out of these 5, 2 also participated in the Q-study (Paper III), which included (2 + 24) 26 adolescents. Total number of participants in the PhD study were 5 + 24 = 29.
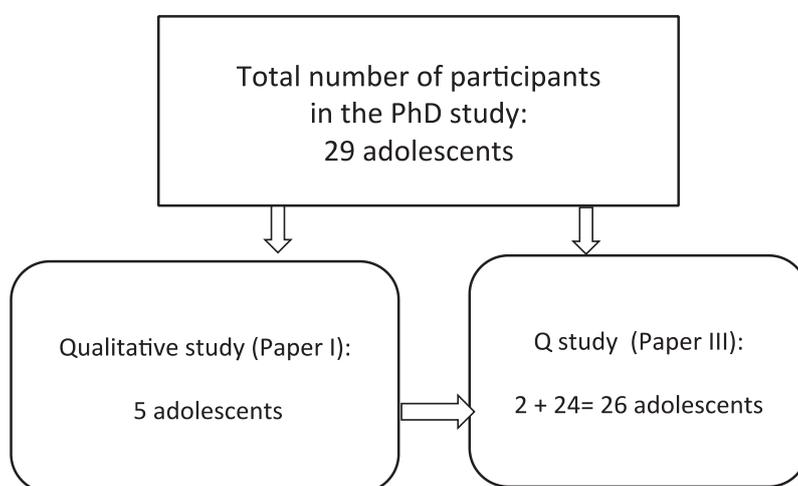
Figure 4.1 Number of adolescents included in the study

4.2.3 Materials and procedure

Research interview is a method of data collection that allows the researcher to enter into the interviewees' perspectives on the basis of a genuine interest (Patton, 2002). Kvale and Brinkmann (2009) describe interviews as a handicraft and advise that interview skills are developed through interview practice. Semi-structured interviews involve the use of a manuscript which provides a thematic interview guide. This may be formulated loosely or be more strictly structured, depending on the degree to which the researcher intends to let the respondent speak freely or stay more focused on specific issues (Kvale & Brinkmann 2009).

As suggested by Kvale and Brinkmann (2009), the interview guide used in this study (see Appendix III) was developed on the basis of what the study intended to explore – namely, adolescent service users' subjective views about participation in RTs – with the objective of helping aiming to help me as an interviewer to maintain my focus during the interviews. Because an interview is an interaction between two subjects, the formulation of the questions may impact the interviewees' answers (Kvale & Brinkmann, 2009). The questions were, therefore, tried to formulate in adolescents' everyday language, which helped give the interview the feel of dialogue. I was aware that despite well-formulated questions from the interviewer, there was no guarantee that the participants would give sincere answers. Participants may have reasons to veil their sincere opinions or to pretend having a different opinion or attitude (Ringdal, 2001). The interview guide of this study consisted of interview questions and was used in combination with follow-up questions that I, as an interviewer, found useful (cf. Kvale & Brinkmann, 2009).

In the beginning of the interviews, the participants were asked for demographic information and other specific information related to their situations (see Appendix III). The interview guide (Appendix III) was then used to help me focus the adolescents' subjective views on participation in RTs, but the participants were also allowed to speak freely about related issues. As suggested by Kvale and Brinkmann (2009), during the interviews I tried to be sensitive to possible contradictions and appearances of changes in the interviewees' perceptions. I believe that my experience as a social worker, trained in communicating with adolescents, was useful in conducting the interviews.

The interviews lasted 1 to 2 hours. They were audio-recorded and then transcribed verbatim. In addition to becoming the empirical data for this study (Paper I), these interview texts were a starting point for the development of research material (Paper II), which were applied in the Q study (Paper III).

4.2.4 Analysis

A qualitative content analysis was a useful analytical tool for organizing and condensing the meaning of the empirical data (Graneheim & Lundman, 2004; Patton, 2002). The purpose of such an analysis is to study the views from an "inside view" and to try to grasp participants' understanding and subjective views about a situation. Qualitative content analysis is basically concerned with analysing the core content of interviews for the purpose of determining what is significant. The process of the analysis involves identifying, coding, categorizing, classifying, and labelling the primary patterns in the data (Patton, 2002). The adolescents' experiences with RTs, emerging from the transcribed interview texts, constituted the unit of analysis. The texts were first read through to obtain a sense of the whole and to get an idea about tentative topics. In line with Graneheim and Lundman (2004), *meaning units*, that is, words, sentences, and paragraphs containing aspects related to each other through content and context, were identified as the texts were read through several times. The interpretative part of the analysis process involved moving back and forth between the whole and the parts of the interview texts.

The creation of categories is the core feature of qualitative content analysis (Graneheim & Lundman, 2004). In the qualitative study (Paper I), I discussed and reflected upon tentative categories with my co-author, supervisors, and other researchers on several occasions.

According to Furesund, Lykkeslet, Skrondal and Wogn-Hensriksen (2006), validation of the qualitative data material increases when several researchers work together in order to bring meaning to the material so that several possibilities for interpretation are discussed and several perspectives emerge. In the qualitative study (Paper I), to strengthen validity, tentative themes and categories were discussed and presented several ways between my co-author and me, for many hours and over a period of several weeks. Categories were also discussed in a research workshop with PhD students and supervisors and, on several other occasions, also with other research fellows. Input from these discussions were valuable contributions in the revision of the categories developed. Processes similar to those used for the category development were applied to the development of the codes. Additionally, relevant literature was reviewed, and the process consisted of movement back and forth between data, method, and theory. As a result of these processes, my co-author and I agreed about how to sort and label the codes. A table including the theme, categories, and codes developed during the analysis is presented in the study (Paper I).

4.3 Q study (Paper II and Paper III)

This original study (Paper II and III) took a Q methodological approach, aiming to explore adolescent service users' subjective views about participation in RT. This is in line with the aim of Q methodology, which is to explore patterns of subjectivity, such as shared views, feelings, attitudes, beliefs, opinions, or preferences that people have (Ellingsen, Shemmings, & Størksen, 2011). Q methodology has several advantages that are relevant in an exploration of people in vulnerable situations, for example, allowing for a relatively small sample size, providing a systematic study of subjective views, and revealing patterns in how subjective views are manifested among participants (Sæbjørnsen & Ellingsen, 2015).

In a Q study, both qualitative and quantitative techniques are used for data collection as well as for analysis. The participants in a Q study (P set) are given the opportunity to express their subjective views or beliefs by relating to a set of statements (Q set) and sorting the statements into a column matrix or grid (the Q sort procedure) according to the degree to which they agree with the statements (Sæbjørnsen & Ellingsen, 2015). The accomplished Q sorts are then subjected to factor analysis, prior to the researcher's interpretation of emerging factors.

When William Stephenson developed Q methodology, his objective was a procedure tailored for the scientific investigation of subjectivity (Stephenson, 1953). He viewed subjectivity as a behaviour that exists spontaneously rather than just being a response to a 'test' (Brown 1980). This behaviour is subjective in the sense that it is experienced by the 'me' and of psychological significance to the 'me'. According to Stephenson (1953), subjective communication derives from self-reference and consists of

> statements a person makes about himself, with reference to his personality and interaction with others, as in a diary, journal, or autobiography or in the course of talks, interviews, and the like. All have reference to himself as a self in action, reflection, retrospection, or the like, as more or less conscious matters; or they are statements he makes about others which might be projections of such self-notions….It is with such statements, gathered in natural settings as far as possible (or in careful retrospections or the like), that Q-technique begins its study of the self. (p.247)

In addition to subjectivity, *concourse*, *Q sampling*, and *abduction* constitute key elements in Q methodology. *Concourse* refers to the point of departure in a Q study. It is described as the infinite possibilities of thoughts, beliefs, feelings, and so forth about any topic and may be explained as a universe of subjective viewpoints (Brown, 1980; 1991/1992). Brown described *concourse* as 'the flow of communicability surrounding any topic' (1991/1992, p. 3). McKeown and Thomas (2013) referred to it as the 'communication of subjectivity'. Although grasping a concourse in its entirety would be impossible (Stephenson, 1978), the identification of the concourse is fundamental and constitutes the basis for selection of statements for the Q set or Q sampling. See Paper II for a fuller description of the concourse.

Identification of the concourse and Q sampling are critical and time-consuming phases in a Q study. Q sampling may have a naturalistic approach, such as using, for example, statements from natural settings or interviews, a theoretical approach, or a combination of the two, as suggested in the study presented in Paper II. In Q studies, large numbers of statements are often identified as part of the particular concourse, which then are being reduced to a manageable number for Q sort. It is very important that the Q sample represents the concourse adequately. A fuller description of processes in this phase is presented in Paper II.

Although Q methodology may be applied in inductive as well as deductive research, the most commonly used strategy in Q studies is abduction (McKeown & Thomas, 2013). *Abduction* was first introduced by Charles Peirce (1839-1914). He described it as a process of critical thinking applied to discovering a pattern in a phenomenon and to promoting a hypothesis (Watts & Stenner, 2012). Abduction typically investigates facts in pursuit of new explanations and new insights. The observed facts are seen as hints that point to a potential explanation. The logic of abduction in Q methodology is that an explanation can only be given after observation of facts (Stephenson, 1961). However, even after observation, one cannot guarantee that the explanations are accurate; rather, the process is about striving for plausibility and suggesting that certain explanations may be true (Ellingsen, 2011b; Strand, 2005).

4.3.1 Design

The original study presented in Paper III explores 26 adolescent service users' subjective views about interprofessional team participation, using Q methodology. This Q study (Paper III) may be described as a qualitative study, but Q methodology, as already mentioned, involves both qualitative and quantitative techniques. The participants rank ordered a variety of statements (Q set) according to how they themselves related to those statements. The majority of the statements were gathered from the interview texts, which also constituted the empirical data for the qualitative study (Paper I). The Concourse Box and the combined Q sampling approach introduced in Paper II was applied. When the completed Q sorts were analysed in the data program PQMethod (Schmolck, 2002), emerging factors revealed patterns of shared views among the participants. The Q factors were then interpreted by abduction.

4.3.2 Participants (P-set)

In this Q study, 26 adolescents (11 boys and 15 girls) participated.

As was the case in the qualitative study (Paper I), the adolescents had several years of experiences as service users in RTs because of long-term and complex needs for health and social services. Professionals representing NCWS and mental health care were involved as members in all the adolescents' RTs. Many of the adolescents' RTs consisted of numerous RT members, professionals and non-professionals, representing, for example, school, other agencies, services, and care arrangements.

Out of the 26 adolescents, who all lived in the western and southern part of Norway, 22 lived in out-of-home-care arrangements. Four adolescents lived together with both or one of their parents; 6 in foster homes, 15 in children's homes, and 1 in an 'independent living' arrangement. Twenty of the adolescents had been placed in out-of-home-care arrangements by the NCWS more than once, of which 7 had been placed 4 times or more and 1, 12 times.

The adolescents were recruited through the regional and municipal child welfare service, 'The Change Factory' [Forandringsfabrikken], and, additionally, from a private youth care foundation providing out-of-home arrangements. A total of 31 adolescents were invited to participate in the study, of which one did not accept and another did not have the required experiences from RTs. These 2 adolescents were therefore not included.

4.3.3 Materials and procedure

The point of departure for identification of the concourse and Q sampling in this Q study (Paper III) was the accurately transcribed interview texts, which also constituted the data material in the qualitative study (Paper I). In Paper II, this is referred to as a *naturalistic approach* or the *naturalistic contribution* to the Q set. From the interview texts, a total of 258 statements were identified as belonging to the concourse about the adolescents' subjective views about interprofessional team participation. In order to reduce the number of statements to a manageable size for the Q sort, the procedure for a combined approach (naturalistic and theoretical), and the Concourse Box thoroughly described in Paper II was applied. This resulted in a Q set of 42 statements of which 37 derived from the interview texts (naturalistic) and 5 were theoretically constructed on the basis of aspects from the Perception of Interprofessional Collaboration Model, PINCOM (Ødegård, 2007). See Paper II for more details about the development of a Q set.

Several significant issues relevant to the results of the study must be considered in the development of a Q set. Only statements that stimulate self-reference are applicable in a Q study. Factual statements, such as 'The RT conferences goes on for 1-2 hours' is either true or false, and it would be meaningless to scale it into a Q sort grid based on self-reference. However, statements about feelings or opinions about the duration of the RT conferences, makes self-reference scaling possible (Stephenson, 1980). The statements must be worded in a way that the participants will understand, and they must enable the participants to express their views through rank ordering them using the predefined grid. The grid developed for this study (Figure 4.2) allows the participants to rank order the statements according to 11 values, from the negative pole (- 5) through zero to the positive pole (+ 5). In line with, for example, Watts and Stenner (2012), it is assumed that the fewest statements will be valued very strongly, either positively or negatively. Hence, for example, only two statements can be given the value + 5, but six statements can be given the value zero.

Most disagree										Most agree
-5	-4	-3	-2	-1	0	1	2	3	4	5

Figure 4.2 The grid used for this Q study (Paper III)

When aiming at the 'production of the best possible Q set' (Watts & Stenner, 2012, p. 58), it seemed reasonable to conduct thorough testing of the Q set before presenting it to the participants in the Q study. The 42-statement Q set (see Table 3 in Paper III and Appendix IV) and the grid presented above were first tested by three colleagues at Molde University College and then by five young adults, who a few years earlier had been in a situation similar to the adolescent service users included in this study. The young adults were asked to imagine that they were 13 to18 years of age again and to relate to and sort the statements as they would have done at that time. The test participants reported that the Q set and grid was adequate for expressing their subjective views about participation in RTs, but minor changes concerning wording were suggested and complied with.

The 42 statements were sorted by each of the 26 adolescents into the grid (Figure 4.2). They were all asked to sort the statements in accordance with the degree to which they agreed with the statement printed on the card. First, the adolescents were advised to make a preliminary sorting of the statements, dividing the statements into three piles: one pile for statements that they to a high degree agreed with, another one for statements that they to a high degree disagreed with, and, finally, one pile for the remaining statements. The Q sorts were collected during November and December 2012. The figure below (Figure 4.3) illustrates the sorting process using the grid developed for this Q study.
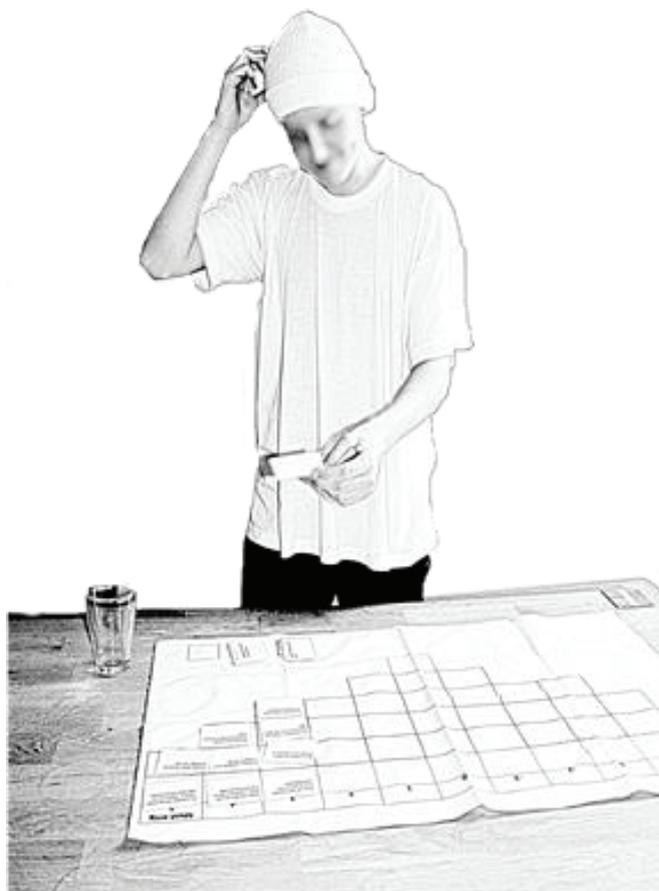
Figure 4.3 An adolescent performing a Q sort

Each Q sort took between 30 minutes to 2 hours. The majority of the adolescents read the statements themselves, but a few needed some help reading, some had questions about the meaning of some statements, and others had comments that they wanted to add. In order to not lose important details or additional information, all the Q sorts were audio-recorded and accurately transcribed.

4.3.4 Analysis

Q analysis involves revealing patterns in subjective viewpoints, and, in the interpretive part of the analysis process, the researcher searches to find the best explanation for these discoveries (Ellingsen, 2011a).

The statistical software program PQMethod (Schmolck, 2002) was used to analyse the adolescents' Q sorts. Each of the adolescents' completed Q sorts (the way each adolescent had sorted the statement cards) was entered into the program and analysed using *by-person* factor analysis. This procedure reveals how participants are grouped through the Q sorting process (McKeown & Thomas, 2013). By-person factor analysis also reveals which statements that the participants who have loaded significantly on the same factor have rated positively or negatively. This is in contrast to traditional quantitative analysis where items, not persons, are subjected to factor analysis (Ellingsen et al., 2010). Participants in a Q study who sort the statement cards in similar ways have similar views on the research topic and are likely to end up on the same factor. Additionally, Q analysis reveals similarities (consensus statements) and divergences (distinguishing statements) between groups of participants (Shemmings & Ellingsen, 2012).

Although the PQMethod program (Schmolck, 2002) allows different solutions for factor extraction, a principal component analysis (PCA) with Varimax rotation was chosen. Solutions with eight, five, and three factors were also considered, but perspectives seemed more fragmented when the number of factors was more than four, and interesting perspectives seemed to disappear when the number of factors was lower than four. Hence, a four-factor solution was chosen for this Q study because it yielded the clearest factors for further interpretations (Paper III).

Each of these factors indicates a perspective that has emerged as a pattern, based on the participants' Q sorts (Ellingsen, Thorsen, & Størksen, 2014). When participants end up on the same factor, it does not mean that these participants have sorted the statement cards exactly as the factor suggests. Each factor is based on the weighted averages (Z scores) of the values given to each statement by those participants who load significantly on that factor (Ellingsen, 2011a; Watts & Stenner, 2012).

The researcher's abductive process in Q methodological research implies that he or she has immersed in the participant's mind (Stephenson, 1986). In the interpretative part of the analysis, the researcher observes a synthesis of meanings and finds the participants' insights that are characteristic for the concourse and its design (Stephenson, 1978). According to Watts and Stenner (2012), abduction, in a search for meanings, always begins with looking for surprising empirical facts. As suggested by Watts and Stenner (2012), the factor interpretation in this Q study (Paper III) was based on the overall configuration of the statements, statements that were ranked higher and lower than in the other factors, and statements that were ranked -5 and +5 (Watts & Stenner, 2012). This procedure resulted in the following designation of the four emerging factors: Factor 1 - *Optimistic and engaged despite bad experiences*; Factor 2 - *Strive to not be defeated by their helpers*; Factor 3 – *Battle weary and resigned*; and Factor 4 – *Content, positive and full of trust.* See Paper III for further details.

4.4 Thrustworthiness

During the research process, all researchers must consider a number of issues related to reliability and validity in order to achieve trustworthy scientific research. Researchers must substantiate their findings; whether they choose quantitative or qualitative methods, reliability and validity issues are equally important in qualitative and quantitative research (Ødegård & Bjørkly, 2012b). In the preparations for this study, it was important to develop a research design well suited for providing valid answers as well as to choose methods that were suitable for providing reliable information about the participants' views. As already described, a multimethod design (Esteves & Pastor, 2004) involving qualitative interview and qualitative content analysis as well as Q methodology was chosen. As with all research methods, the methods applied had both strengths and weaknesses, but it is my experience that the different methodologies applied in this study complemented and enriched each other.

In qualitative research, *reliability* refers to accuracy and consistency, which is crucial for evaluation of the quality of the study. *Validity* refers to 'true knowledge' (Kvale & Brinkmann, 2010). According to Malterud (2013), internal validity is concerned with the applicability of methods according to the aims of the study, the relevance of the sample, data collection, theory, analysis, and presentation in order to find valid answers.

In qualitative research, external validity does not have the same relevance as it does in quantitative research where it is associated with the generalizability of the results. The reason for this is the relatively small number of participants that is normally included in qualitative research. However, findings in qualitative studies may be of transferability value to similar contexts (Malterud, 2013).

Ødegård and Bjørkly (2012b) suggest that a combination of qualitative and quantitative methodologies may strengthen a study's construct validity. In this study, both of the empirical studies (Paper I and Paper III) may be described as qualitative studies, although Q methodology involves both qualitative and quantitative techniques. Nevertheless, it is believed that the application of two different methods in the data collection as well as in the analysis have strengthened the validity of the findings. A combination of methodologies may be a feasible way of expanding our understanding of a complex phenomenon such as IPC (Ødegård & Bjørkly, 2012b) or, more specifically, our understanding of adolescent service users' subjective views about participation in RTs.

For example, the qualitative study (Paper I) was based on rich subjective descriptions about participation in RTs, but only 5 adolescents who were able and willing to elaborate verbally on the topic were included. The Q study (Paper III) not only included many more participants (26), but it also included participants who were unable or unwilling to participate in research that would demand verbal elaboration from them. This could be regarded as cumulative validity, because results from earlier studies have stimulated and pointed in the direction of new steps in the research process (Creswell, 2013; Ødegård, 2008).

In order to ensure the high quality of the research, thoroughness was emphasised in all phases throughout the work on this study. Literature searches in several databases were conducted, and the literature was studied in order to acquire insight and an updated overview of relevant research literature. Fruitful discussions with co-authors and other research colleagues contributed to strengthening the quality of the study (Furesund et al., 2006). Such discussions were particularly useful in the development of the categories and codes (Paper I) and in the interpretation of the Q factors (Paper III).

In Q methodology, validity in terms of the integrity of the study and whether or not the research methods measure what they intend to measure (Bryman, 2004) is not relevant in the same way as in other research methodologies. As already described, Q methodology is concerned with the exploration of subjectivity. According to Brown (1980), it would be meaningless to measure the validity of a viewpoint because the only person who could verify a viewpoint is the person who expressed it. That said, validity is not redundant in Q studies, but, rather, it relates to the researcher's ability to grasp participants' views and understandings through the selected statements (Q set) (Størksen & Thorsen, 2011). It is important to the validity of a Q study that the participants are able to adequately express their views by ranking the available set of statements. For these reasons, thoroughness in the development of a well-balanced Q set was emphasised.

In Q studies, reliability may be considered related to each participant's Q sort as well as the patterns suggested by the factors. The individual Q sorts in Q studies are expected to show a notably high stability (Brown, 1980; Størksen & Thorsen, 2011). In a test-retest, in terms of asking a participant to do the same Q sort once again, the correlation would probably not be perfect ($r = 1$), but a correlation coefficient between $r = .80$ and $r = .90$ could be expected (Brown, 1980). Because it was considered as too demanding to the adolescents to repeat the Q sort test-retests were not conducted in this study. However, other issues of relevance to the reliability of the individual Q sorts were emphasised, such as ensuring the adolescents that their Q sorts would be kept anonymous and that they could use all the time they needed for the Q sort, without interruptions. Most likely the advice given to the adolescents about making a preliminary sort of the 42 cards into three piles was also significant.

According to Brown (1980), the reliability of a Q factor is greater than the reliabilities of the persons who composed it:

> The more persons defining a factor, the higher the reliability - i.e., the more persons who render a viewpoint, the more confidence we have in the scores of the items composing it (p.245)

In the Q study (Paper III), 8 adolescents defined Factor 1 and Factor 2, while 3 defined Factor 3, and 7 defined Factor 4. The reliability of Factors 1, 2, and 4 is higher than of Factor 3 because more adolescents shared views that loaded significantly on these three factors. However, the fact that 3 adolescents loaded significantly on Factor 3 shows that this perspective exists among the group of participants, and findings in the interview study (Paper I) support the existence of such a perspective.

4.5 Ethics

Application for approval of the research project was first submitted to the Regional committees for medical and health research (REK). REK considered that the committee did not have the mandate to approve or disapprove this research project they requested to send the application to The Norwegian Center for Research Data (NSD). NSD gave this research project its approval (NSD; Project Number 30256) (Appendix I).

In line with NSD procedures, the participants were informed both verbally and in writing about the research project. In order to make the compulsory information more available to the adolescents, brochures using a more everyday language, including a picture of me, my phone number, and my e-mail address, was also developed and distributed to all the potential participants. They were all invited to contact me for any questions or comments before, as well as after, participation. All the participants and the parents of those under the age of 16 gave their written consent. They were informed that all information from the adolescents, such as their verbal answers and comments, as well as how they sorted the cards would be treated anonymously. In conformance with NSD's procedures, they were also informed that audio-recordings would be deleted. In order to ensure the anonymity of all participants, they were all given a code based on such items as age, gender, and where they lived..In accordance with NSD procedures, all data have been made anonymous, and the audio-recorded interviews and Q-sorts have now been deleted.

In communication with adolescents about their experiences as participants in their RT, many delicate subjects may have been brought up. Therefore I was careful about not pushing the adolescents to talk about anything that they were not prepared to do.

All the adolescents received NOK 250 for their participation. The decision to offer remuneration was based on a desire to emphasise that their knowledge and their time was valuable in this research. However, it was important to decide on a reasonable amount of money in order to avoid inducing their participation when it was not in accordance with their best interests (Stones & MacMillan, 2010). All the adolescents were asked why they decided to participate, and they all mentioned reasons other than the remuneration, but said that the remuneration was appreciated.

4.5.1 Researchers' preconceptions

The choice of research methods is closely related to an understanding of the basic issues of the philosophy of science. The researcher has ontological assumptions, that is, about reality and the nature of existence as well as about epistemological assumptions such as what we can know and acknowledge (Eliasson-Lappalainen, Jacobsson, Meeuwisse, & Swärd, 2010). The researcher's preconceptions play a significant role in a study. According to Lykkeslet and Gjengedal (2007), it is important when doing research closely associated with her professional practice that the researcher is conscious of her preconceptions, as they have the potential to make her both blind and perceptive at the same time.

Through the whole research process, I strove for open-minded exploration. Nevertheless, it is likely that my experiences from social work with adolescents in difficult life situations may have influenced the research project in some ways. For example, my previous knowledge formed the basis for my interest in the research topic at the outset. Throughout the entire research project, there has been a clear focus on adolescents' subjective perspectives. This focus had a significant influence on my choice of methods and on the way that methods appropriate for gaining insight into adolescents' subjective views were chosen.

According to Kvale & Brinkmann (2009) the knowledge produced from interviews is a product created by the interviewer and the interviewee in common. Hence, interview questions and interpretation of data are other examples of areas in Paper I that may have been influenced by me. The Q methodological study, Paper III, may also to a certain degree have been influenced by my preconceptions, such as in selection of statements for the Q set and in the interpretation of the factors. Considering this, it is also likely that my previous knowledge have contributed to form relevant and understandable interview questions as well as better understanding of the adolescents' statements.

Chapter 5

Summary of findings

5   Summary of findings

Throughout the thesis, the focus has been on the subjective perspectives of adolescents who experience psychosocial difficulties and the team arrangement called 'Responsible Team' (RT). This section summarises the findings of the three studies included in the PhD thesis. They are related to the overall aim, which was to explore adolescent service users' subjective views about interprofessional collaboration teams.

Overall, this thesis may be seen as an exploratory process, where two research projects are related. The qualitative project includes Paper I, which is an empirical presentation of interviews with adolescents, discussed in terms of participation theory and Honneth's theory of recognition. In the next and main phase of the project, Q methodology was used as a main research approach – in two steps:

> (a) First step: Paper II is a methodological paper, describing the development of a methodological tool aimed at enhancing Q method's potential to elicit adolescents' nuanced subjective views about interprofessional collaboration teams. The interviews used in Paper I constituted the basis for the development of this tool, and empirical research were used for illustrations in Paper II. This paper also introduced the Concourse Box, a Q methodological tool developed for visualisation of a combined Q sample approach. The potential of a combined approach to Q sampling was discussed in the light of Q methodological theory.

> (b) Second step: Paper III is an empirical study using Q methodology, including the tools presented in Paper II. The study presents adolescents' nuanced views about participation in interprofessional collaboration teams. Four Q factors emerged from the first phase of the factor analysis. The factors were then interpreted and discussed in the light of IPC theory.

5.1   Summary of Paper I

Sæbjørnsen, S.E.N. & Willumsen, E. (2015). Service user participation in interprofessional teams in child welfare in Norway: vulnerable adolescents' perceptions. Child & Family Social Work. DOI:10.1111/cfs.12242

The first specific aim in this PhD study was to explore how a sample of 5 adolescent service users perceived participation in interprofessional collaboration teams (RTs). Therefore, the aim of this empirical study was to explore adolescents' subjective views about their participation in RTs. Five adolescents aged 13 to 16 were interviewed about their RT and their participation in their RT processes and conferences. A qualitative content analysis was conducted. The main theme identified was 'Encountering possibilities for participation' and this finding was divided into three categories: (1) Active in decision-making – Withdrawal, (2) Trust – Distrust, and (3) Useful – not useful. Each category began with the most positive and ended with the most negative perceptions. The findings were discussed in a theoretical framework about children's effective participation and Axel Honneth's theory about recognition and violation.

The findings in Paper I showed that the study subject of adolescent service users' participation in RTs engaged the adolescents, whose subjective views varied from very positive to very negative. The findings seemed to indicate that RT may constitute one way to achieve effective participation under the following conditions: (1) that there is a trusting relationship between the adolescent and a professional possessing a powerful position in the RT, (2) that the adolescent's participation is facilitated in all RT processes and conferences, (3) that the adolescent's views are focused on, (4) that the professionals involved have good communication skills, and (5) that the adolescent is provided with all the information needed for effective participation.

5.2 Summary of Paper II

Sæbjørnsen, S.E.N, Ellingsen, I.T., Good, J.M.M. & Ødegård, A. (2016). Combining a Naturalistic and Theoretical Q sample Approach: An empirical research illustration. *Operant Subjectivity. The international Journal of Q Methodology.* In press.

The second specific aim in this PhD study was to develop and describe a Q set useful for enhancing the potential of eliciting adolescent service users' views about RTs and their participation in them. Pursuant to this objective, this Q methodological paper was to illustrate how a naturalistic and a theoretical approach to Q sampling could be combined in a way that helped participants express themselves about complicated topics. The study described and illustrated a combined Q sample approach drawing on examples from empirical research about adolescent service users' subjective views about IPC. Additionally, the paper introduced the Concourse Box, which is a Q methodological tool developed for visualisation of a combined Q sample approach.

This paper discussed potential advantages and disadvantages of the described combined Q sample approach and validity issues. The paper also discussed how the rationale behind the Concourse Box might facilitate a well-balanced Q sample when seeking deeper and systematic insight into the subjective views of vulnerable groups of participants. The study states that a combined Q sample approach has the potential to strengthen the validity of a Q study and that the illustrative example should be a valuable contribution to the enhancement of Q methodology.

5.3 Summary of Paper III

Sæbjørnsen, S. E. N., & Ødegård, A. (2016). Adolescents' Subjective Views about Interprofessional Team Participation: A Q-methodological Study. *Journal of Comparative Social Work, 11*(2).

The third specific aim in this PhD study was to explore a sample of 26 adolescent service users' subjective views about participation in RTs by applying Q methodology.

Pursuant to this aim, this empirical paper explored adolescents' subjective views about RTs by applying Q methodology and using the Q methodological tools developed and described in Paper II. A total of 26 adolescents rank ordered a Q set of 42 statements. The Q set was developed on the basis of naturalistic statements from interviews with adolescent service users in combination with theoretically constructed statements based on IPC theory (Paper II). The statements were about viewpoints of RTs. The data material retrieved was subjected to factor analysis. The software program PQMethod is designed to factor analyse data retrieved from Q-sets, and Varimax rotation is the default option (Schmolck, 2002). The factor analytical solution showed four factors. These were interpreted as the following four main perspectives among the participants:

Factor 1: Optimistic and engaged despite bad experiences.
Factor 2: Strive to not be defeated by their helpers.
Factor 3: Battle weary and resigned.
Factor 4: Content, positive, and full of trust.

As these factors indicate, Paper III showed that the adolescents expressed many and differentiated subjective views about interprofessional team participation. When the adolescents felt welcomed and when successful IPC as well as successful service user participation was achieved, the adolescents tended to find RTs useful in improving their situations. The findings also show that adolescents are important co-actors when the objective is that RTs contribute to good and coordinated services for young people in vulnerable positions. The primary conditions for such an aim to be achieved seem to be professionals' benevolence towards the adolescents, a balance of power, and mutual trust and respect among the RT members. Furthermore, Paper III indicated that adolescents' views about RTs may contribute to an improvement of RT practice and enhance the existing knowledge base about IPC. This is discussed in the paper in the context of relevant IPC literature (cf. Chapter 3).

Chapter 6

Discussion

6 Discussion

In this PhD project, the focus was on the subjective views of adolescent service users who experienced psychosocial difficulties and therefore received services from NCWS as well as mental health services. The overall aim was to explore some of these adolescents' subjective views about participation in interprofessional teams, based on their experiences with RTs. Additional aims were to generate knowledge by interpreting findings from the adolescents' subjective viewpoints and perspectives and contribute to the identification of the potential in RTs and conditions for achievement of successful RTs. The papers included in this thesis have provided some new insights into how young service users view interprofessional team participation. Some of the potential in RTs, as well as some conditions for achievement of successful RTs, were indicated. The discussions in this section are based on some of the findings in this PhD study as well as methodological issues.

6.1 Perceptions about participation in RT

RTs established in relation to adolescents in receipt of mental health and social services are meant to benefit the adolescent service user and, usually, to also include the adolescent as an RT member (Skivenes & Willumsen, 2005; Willumsen & Severinsson, 2005). From the outset of the work on this thesis, I aimed at insight into adolescent service users' subjective experiences with RTs, and the interview was chosen as the methodological approach. The interviews that are referred to in the qualitative study (Paper I) showed that the subject engaged the adolescents and that they had differentiated subjective views. It was surprising that there were such great variations in their subjective views about RT, from very positive to very negative.

It was also surprising that as the adolescents were talking about their RTs, they seemed to be talking about something substantially significant to them. The five different RTs that the five adolescents referred to seemed to vary from having caused a very positive change in one girls' life and given her hope for the future to having worsened the complicated life situation of a young boy. Applying Honneth's (2008) perspective, is it possible that the girl had experienced sufficient recognition from professionals in her RT and, hence, that her situation improved because her self-confidence, self-respect, and self-esteem were strengthened? In contrast, also drawing on Honneth's theory, is it possible that the boy had experienced violation from professionals in his RT and, hence, that his self was hurt and his situation thus worsened?

As indicated in Paper I, when the aim is increasing the effectiveness of young service users' participation in terms of their influencing decision making (Gallagher et al., 2012), RTs may be a suitable arena. As emphasised in Paper I, adolescents' effective participation is associated with improved outcomes for young service users (Gallagher et al., 2012; Omre & Schjelderup, 2009; Vis & Thomas, 2009). However, the findings in Paper I also indicate that 'pseudo-participation' (Omre & Schjelderup, 2009) and no influence in decision making not only seems to *not* involve benefits to the adolescents, it seems to hamper development of their trust in professional 'helpers' and may actually be very invidious to the adolescents.

Allowing an adolescent service user's effective participation in RTs is an act of recognition of the adolescent as a person whom they welcome and who has the right to participate and have influence. Through such an approach, RT members can demonstrate that they respect the adolescent which may result in an adolescent's self-respect being strengthened (Honneth, 2008). Moreover, allowing an adolescent to influence decisions in the RT is also recognition that the adolescent is a valuable contributor in the RT. Such experiences of recognition affirm the adolescent's valued ability and contributions and may strengthen the adolescent's self-esteem (Honneth, 2008).

Along the lines of Honneth (2008), Reeves et al. (2010) emphasise that experiences of recognition from a team are fundamental for developing trust in the team. According to Honneth (2008), violation is the opposite of recognition and may cause serious harm. For example, if an adolescent has accepted the invitation to participate in RT and then does not feel welcome and experiences that his right to participate is being violated because he/she is not listened to, then his/her self-respect and self-esteem may be harmed[1]. Additionally, the limited trust that he/she might have had has most likely vanished or even turned into distrust. This is supported by the findings presented in Paper I.

---

[1] Refers to the rights sphere in Honneth's (2008) theory: recognition may lead to development of sel-respect, while exclusion from certain rights may lead to loss of self-respect.

Development of a trusting relationship between the adolescent and the professional seems to be crucial (Buckley et al., 2011; Cossar et al., 2013), but as pointed out by Cossar et al. (2013), 'It takes a lot to build trust'. The girl referred to in Paper I, who expressed most positively about participation in her RT, did not start out with a trusting relationship. As briefly mentioned in Paper I, the chairperson in her RT, as well as the girl herself, invested the time needed to develop such a relationship. Once their trusting relationship had developed, it affected the girl's attitude, and she changed from being reserved and sceptical to being genuinely engaged in the RT. This girl was also the adolescent among the 5 interviewees who participated most extensively in the RT and the RT processes.

The three modes of recognition, love right, and solidarity, are fundamental in Honneth's (2008) theory of recognition. Recognition by love, in terms of feeling loved and taken care of, is a prerequisite for development of self-confidence, which, again, is a necessity in order to develop a sound self, self-realisation, and participation in society. In every human being, love procures the mental basis and enables people to trust their own needs, impulses, and courage to express their needs. Although Honneth (2008) refers to the love mode in the context of the intimate sphere, such as family and close friends/lovers, Thrana (2013) suggests that love should be a core competence in professional child welfare work. An example of such love might be an adolescent experiencing a social worker's endurance in caring for him providing him with the assurance that she likes him even when he has not behaved in very likeable ways (Thrana 2013). Recognition by such love may contribute to the development of self-confidence, and it may constitute a key to the development of a trusting relationship.

Such love is also an example of professionals' possibilities to compensate for adolescents' experiences of lacking recognition from their parents, and, hence, to contribute to the development of fundamental self-confidence.

The boy who expressed most negatively about his RT, who had now withdrawn from participation in RT conferences, seemed to have never achieved effective participation -- rather, at best, 'pseudo-participation' (Omre & Schjelderup, 2009). Interestingly, he also had a trusting relationship with one professional in the RT, which may have contributed to the development of self-confidence (Thrana, 2013; Honneth, 2008) for this boy, but this relationship did not seem to have influenced the boy's involvement in decision making. In addition to what we know about the importance of trusting relationships between children and professional helpers, the study presented in Paper I indicates that this should not be just any professional, but someone who possesses a powerful position in the RT, such as the chairperson. Despite the small scale of this study (Paper I), it may provide important information about a specification of the 'trusting relationship-factor', which seems to be a necessary element in effective participation in RTs.

The theme of the qualitative content analysis (Graneheim & Lundman, 2004) presented in Paper I was 'Encountering Possibilities for Participation', and the categories designated were Active in decision making – withdrawal; Trust – distrust; and Useful – not useful. This analysis indicated a correlation between adolescents being active in decision making and having a high degree of trust as well as to which degree the adolescents view the RT being useful to them. One possible explanation may be that the adolescents engaged more whole-heartedly and committed in the RT when they, through experiences of recognition, love, and rights, as well as social valuation, had developed a high degree of trust and felt comfortable in the RT setting. Possibly, such engagement may even have had a rub-off effect on the RT as a whole, which, in sum, resulted in useful RTs.

Based on the analysis presented in Paper I, development of trust seemed to be a prerequisite to adolescents' effective participation and, hence, that trust and effective participation are prerequisites to adolescent service users perceiving RTs as useful to them. Accordingly, the expressions of the boy who seemed most disappointed about his RT support this understanding. The limited trust that he initially might have had in his professional helpers seemed to have been destroyed. He had tried to participate actively in his RT, but found that he was not allowed to participate effectively and, hence, he had withdrawn from participation in RT conferences. This boy did not see the RT as useful at all.

None of the interviewed adolescents seemed unaffected by or indifferent to the RT subject. Rather, they all expressed either positive or negative views. This discovery supports indications that RTs have the potential to greatly benefit adolescents' lives, but also indicates a caution: that the risk of harming adolescents might be as great as the potential advantages to them. The most important factors in avoiding negative effects seem to be ensuring effective participation and developing trusting relationships between the adolescent and a professional possessing a powerful position in the RT.

6.2 The diversity of adolescents' subjective views about RT participation

The Q study (Paper III) aimed at exploring adolescent service users' subjective views about interprofessional team participation using Q methodology. The subject of the Q study is similar to the subject presented in the qualitative study (Paper I), but, in addition to using a different methodology, the study involved several more participants, and the discussions were based on other theory (IPC). A total of 26 adolescents were involved in this Q study, which resulted in four distinct factors that represent four main perspectives among the adolescents. To a great extent, the findings presented in Paper III supported indications in Paper I and contributed with new and more specific indications. In order to exploit the similarities and differences in these two studies (Paper I and Paper III), I will now discuss some of the findings in Paper III in light of the indications presented in Paper I.

Factor 1 represented the perspective called 'Optimistic and engaged despite bad experiences'. The adolescents belonging to this category seemed to be on the way to developing trust, but they had not yet achieved a high level of effective participation in terms of extensive influence in decision making. This finding supports the indication in the qualitative study (Paper I) that trust has to be developed *before* effective participation can be achieved.

The perspective represented by Factor 2 was 'Strive not to be defeated by their helpers'. The adolescents associated with this factor seemed to distrust their entire RT, and they did not seem to have a trusting relationship with any professional nor to have any of the professionals 'on their side' in the RT conferences. These adolescents seemed far from seeing the RT as useful and from achieving effective participation, but they protested and fought. Bolin (2015) considered such resistance as children's agency and, hence, felt that these individuals were not powerless in IPC. Such kind of power does not involve other RT members' recognition, but it may reflect some 'power to resist' (Foucault, 1978). Importantly, although the adolescents might have managed to influence decision making by employing this kind of power as described by Bolin (2015), would not likely indicate that the RTs were regarded as useful to these adolescents. Rather, in such cases, it is more likely that the adolescents would have perceived that they had won a struggle rather than had been 'defeated by their helpers'. Such acts of resistance may be associated with a struggle for recognition (Honneth, 2008), which refers to the potential motivation for opposition and actions in the negative experiences of violation. However, struggles for recognition may be long lasting and will not necessarily result in achieved recognition, but may add to the adolescents' negative experiences and pain. Rather, the RT and the RT members representing health and social services should exploit the implicit possibility to recognise the adolescent and to try to make him or her feel welcomed and appreciated. This way the RT might actively contribute to building the adolescent's self-confidence.

Factor 3 represents the perspective 'Battle weary and resigned'. These adolescents seemed indifferent about whether or not they liked to attend RT conferences, but this impression might just have indicated that they were tired of and, hence, resigned from the fighting arena. In accordance with Factor 2, they seemed far removed from perceiving RT as useful, and they had not achieved effective participation. However, the adolescents nonetheless seemed to perceive that they had a professional whom they trusted 'on their side'. In the Q study (Paper III), it is suggested that this may refer to a relatively newly established relationship, and, implicitly, that this relationship had not yet influenced the adolescent's power in the RT. However, interestingly, in the light of indications presented in the qualitative study (Paper I), it is also likely that this professional person may not have had a powerful position in the RT and, hence, did not have the power to influence other RT members like, for example, a chairperson might have had.

Factor 4, the fourth perspective, 'Content, positive and full of trust' demonstrates the potential in using RTs as a means of improving the situation of adolescents with complex needs of services. These adolescents had achieved effective participation, and they considered the RT as very useful and important in their lives. They also felt recognised in their RT. Compared to the illustration in Figure 1, Paper I, (see p. 105), these adolescents would probably valuate the usefulness of their RT in the top right corner.

As indicated in the Q study (Paper III), the RTs referred to by Factor 4 do not only seem to have achieved successful, effective participation, but also seem to have had the properties of successful, interprofessional teamwork (Reeves et al., 2010). In contrast, Factors 2 and 3 might demonstrate the risk of complicating the situation of the adolescent service users when not allowing them effective participation nor having developed trusting relationships between the adolescents and a professional possessing a powerful position in the RT.

Findings in the Q study (Paper III) seem to indicate that some factors associated with how IPC is being perceived by professionals (Reeves et al., 2010; Ødegård, 2008) are also important to adolescents' subjective views about IPC. In particular, this is the case with the factors power, trust, and respect. At the same time, Paper III indicates one distinct difference in adolescents' versus professionals' participation in IPC that affects their subjective views to a great extent, namely their different roles. Professionals most likely attend RT conferences because they might be able to contribute with knowledge and services in order to improve adolescents' complicated life situations. The adolescent service users have found themselves in very difficult life situations, and an RT has been provided them as a means of improving their complicated lives. In contrast to the professionals, the adolescents might use their 'power to resist' and choose to not engage if, for example, they find the RT conferences unrewarding (Reeves et al., 2010). Adolescents seem most likely to continue to attend the RT conferences, even long after perceiving the RT as useless. Despite the potential in a struggle for recognition, it may, possibly, be that the more the adolescents expose themselves to the invidious experiences of not being recognised when attending RT conferences, the more they will be hurt. According to Honneth (2008) experiences of recognition or violation in the intimate sphere are fundamental and will also impact on outcomes in the other spheres of recognition. Based on this, it seems likely that some of the adolescents described in this study may have had experiences that made them less robust and more sensitive to feelings of not being recognised in their RT.

6.3 RTs serving the adolescent service users the best possible ways – how may such RTs be achieved?

RTs have been used since the early eighties and are still frequently used, although fluctuating experiences with RTs are reported (NOU: 2009; Winswold 2011) and little research about them exists (Christiansen et al., 2015).

Christiansen and colleagues (2015) call for more research about child welfare assistant measures, such as RTs, and Cooper and colleagues (2016) call for more IPC research based on service users' views. As shown in Paper I and Paper III, adolescents evidently have distinct views about RTs and a willingness to contribute with their knowledge to benefit the development of measures and services for young people that work in accordance with overall objectives. Therefore, given this willingness, an opportune query is who should be entitled to define whether an RT is successful or not? Professionals can make evaluations based on how they perceive the quality of the collaboration, but adolescent service users are more likely to focus their evaluations on to which degree they feel that the RT has helped to improve their situation. In the existing knowledge base about participation in interprofessional teamwork, such as RTs, professionals' views are well represented, but young service users' views are hardly represented. As important knowledge can be gained from having several perspectives, adolescent service users' views should probably be encouraged.

In order to achieve successful interprofessional teamwork in measures such as RTs, ultimately the crucial factor is the individual's willingness to engage (Reeves et al., 2010). According to the findings in these studies (Paper I and Paper III), this factor seems equally important to the achievement of adolescent service users' participation in RTs and the achievement of useful RTs from the view of adolescent service users.

Achievement of service user involvement, such as adolescent service users' participation in RTs, may be hampered by a lack of recognition (Skjefstad, 2012) and, vice versa, recognition may promote achievement of service user involvement. While recognition is important for all people in the development of trust and basic for team members' perceptions of a well-functioning team (Reeves et al., 2010; Ødegård, 2008), for adolescent service users, it may even be much more important because they may lack experiences of recognition in their child-parent relationships (Thrana, 2013). At the same time as adolescents' lacking experiences of recognition may cause difficulties to achieve successful RTs the adolescents need for recognition is also a golden opportunity for the professionals to contribute to the adolescents' well-being. Potentially, if adolescent service users are being recognised by their helpers in RT, by love, right, and social valuation, in addition to receiving services in accordance with their needs, they may develop strengths that will be valuable for the rest of their lives. Different forms of diversity among RT members may pose challenges for the interprofessional team (Reeves et al., 2010), and, clearly, adolescent service users probably contribute to even greater diversity in the RT. However, according to Honneth (2008), common goals can only be realised if the individuals ensure that the others' unique qualities are allowed to unfold. Thus, in order to achieve RT goals, RT members' attitudes characterised by positivity and open-mindedness towards the adolescent seem to be very important.

Reeves et al. (2010) emphasise that political will has been very important in the development of interprofessional teamwork, but that supporting policy documents often lack guidance about issues such as the delivery of teamwork activities, which leaves complex implementation tasks up to local organisations. This may also be said about implementation of service user involvement, and it may be an explanation of why RT practices differ between municipalities. RT is an arrangement involving two political priorities, IPC and service user involvement, both of which are reported to be challenging to implement (Reeves et al., 2010; Slettebø et al., 2010).

In the next section, I will discuss some methodological issues related to choice of design and methodologies that I have reflected upon during the work on this PhD thesis. Whether or not to involve adolescent service users in my research, given their vulnerable positions, was conscientiously considered in the initial phase of this PhD study. Such considerations greatly influenced the choice of research design which I will, therefore, discuss before the other methodological issues.

6.3.1 Involving adolescents in vulnerable situations in research

Research based on adolescent service users' subjective views is relatively rare in the field of service user participation (Sæbjørnsen & Willumsen, 2015) and particularly rare in the field of IPC where professionals' views are far more often explored (Cooper et al., 2016). One possible explanation for this may be that vulnerable adolescents' needs and legal rights to protection (UNCRC, 1989) are still seen as conflicting with exposing them to involvement in research, particularly about emotionally demanding subjects. The two competing views of 'protecting the child' versus 'involving the child' have been debated over several decades (cf. Gilbertson & Barber, 2002; Harth & Thong, 1995; Omre & Schjelderup, 2009; Strandbu & Thørnblad, 2010). However, there has been a shift in views, and Paper I and Paper III support the now prevailing view that children are competent participants in research when children's participation is facilitated and that children appreciate being involved (Omre & Schjelderup, 2009). As mentioned earlier, NESH (2006) has merged the two competitive views of seeing children as vulnerable and entitled to particular protections and, at the same time, being important contributors in research (Strandbu & Thørnblad, 2010). This view probably influences a general view about involving children in research, but it may not yet be entirely adopted by, for example, social workers or researchers.

Involving children in research, rather than excluding them because of a need for protection may give them a greater sense of being taken seriously. Involving children in research as participants or possibly as co-researchers also implies recognition that their experiences and knowledge are important contributions to knowledge development. According to Honneth (2008), when individuals perceive recognition in relation to their contributions to society, it may nourish development of sound self-esteem and even contribute to self-fulfillment. This is possibly part of the explanation of why only 1 out of 28 adolescents did not accept to be involved in the present study (Paper I and Paper III).

Several researchers in Norway, including myself during the data collection for this PhD study, have found that recruiting children for participation in research, for example via the NCWS, is a time-consuming process for several reasons. Even though researchers may have adopted the NESH' (2006) view on children's participation in research, they may hesitate to undertake studies where children's participation is needed. They might just be afraid of not being able to recruit enough participants for their study.

As already mentioned, subjective views of adolescent service users may constitute important contributions to knowledge development that may be useful to improve services as well as young people's outcome. As emphasised in Paper II, including adolescents in vulnerable positions in research and exploring their subjective views about service user participation and RTs should be seen as facilitating having their voices heard. Consequently, their experiences and views may influence service development. What is important, however, is to treat children participants with respect and gentleness and, hence, to choose gentle research methods that will ensure vulnerable children's right to protection and, as well, facilitate collection of rich and nuanced data. Ethical considerations concerning involvement of children and young people in research is very important, but at the same time, it should not be undermined that children's participation in research may also have a positive and empowering influence on the young participants. Adolescents experiencing that they have valuable information to share can make participation in research in to a new and positive experience to them.

6.3.2 Research design

Several issues should be considered when choosing a research design involving children in vulnerable life situations in order to explore subjects that may be emotionally challenging (Ellingsen et al., 2014). For example, it is important to make sure that the research will not expose the children to harmful situations and that the research methods, as well as the content of the research, are adapted to the individual child's age and situation (Backe-Hansen, 2009). In this PhD study, a qualitative design was chosen as the aim was to explore adolescent service users' subjective views about participation in RT. Rich descriptions and nuanced information were desired in order to obtain insights useful to generating knowledge that might contribute to identifying the potential of RTs and conditions needed for realization of that potential. It was, at the same time, important to apply gentle methods for data collection; thus, interviews, including only a few adolescents, and Q methodology were chosen.

The design of this study may also be described as a multimethod design, as two research methodologies were applied, each being rigorously conducted separately in this one project and the results forming a complete whole (Esteves & Pastor, 2004).

```
┌──────────────┐      ┌──────────────┐      ┌──────────────┐
│  INTERVIEW   │ ⇨    │   Q SET      │ ⇨    │  Q-STUDY     │
│ Sample N = 5 │      │ DEVELOPMENT  │      │ Sample N = 26│
└──────────────┘      └──────────────┘      └──────────────┘
       ⇩                     ⇩                     ⇩
┌──────────────┐      ┌──────────────┐      ┌──────────────┐
│              │      │              │      │              │
│ Qualitative  │      │Methodological│      │   Q study    │
│    study     │      │    study     │      │              │
│  (Paper I)   │      │ (Paper II)   │      │ (Paper III)  │
│              │      │              │      │              │
└──────────────┘      └──────────────┘      └──────────────┘
```
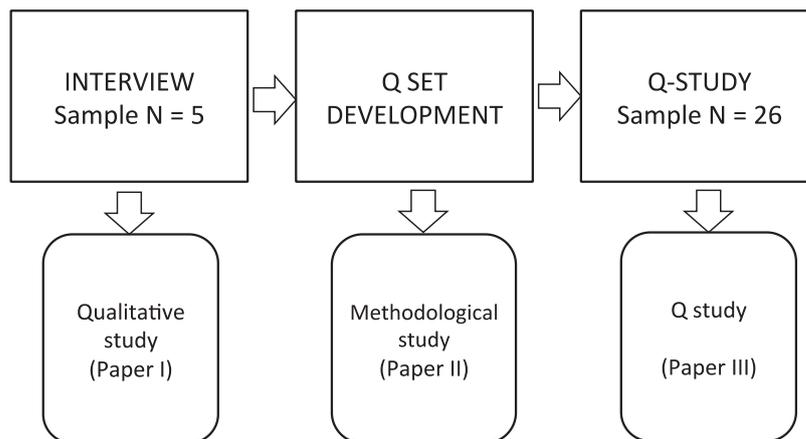
Figure 6.1 Illustration of processes in this PhD study

The above figure (Figure 6.1) illustrates how processes in this PhD study conveyed single, original studies and, at the same time, built on each other and constituted one complete whole.

6.3.3 Interview and content analysis

In qualitative studies including child participants, one common approach is qualitative interviews. For example, interview was the approach in Bolin's (2014; 2015) studies about children's agency in IPC and in Cashmore's (2011) study about children's participation in family law decision making. In the initial study (Paper I) in this PhD thesis, the interview was also a natural choice, as I aimed for rich descriptions of adolescent service users' subjective views about participation in RTs. Data in terms of rich descriptions were expected to be useful in gaining insights about how some adolescent service users might perceive participation in RTs. An additional reason for choosing interviews in the first study was that it might also become useful in the preparations for a Q study (Paper III).

The adolescents involved in Paper I seemed to understand the questions during the interviews very well. They expressed in detail their subjective views about participation in RTs, which resulted in rather rich data material. To the question of why they chose to participate in this research, they all said that they wanted their experiences to benefit knowledge development. Reflecting on the conducting of the interviews, some of the adolescents seemed to speak more freely than others, and one girl seemed a little shy and reticent. It is possible that this girl was not feeling very comfortable with expressing her thoughts in words, which is necessary in interviews. It might have been easier for this girl to express her views in other ways, such as through Q sorting statements worded by other adolescents.

The conduct of the qualitative content analysis (Graneheim & Lundman, 2004) (Paper I) in order to explore the data from the interviews was in several ways a demanding process. Tentative themes, categories, and codes were discussed between my co-author and me several times. Other research colleagues were also involved in attempts to see the data from different angles. The great diversity in the adolescents' perceptions and the fact that the RT seemed to touch so many and important aspects of the adolescents' lives may have contributed to making this analysis demanding. However, the discussions were necessary, and they resulted in agreement about the theme 'Encountering possibilities for participation' and the three categories 'active in decision-making – withdrawal', 'trust – distrust', and 'useful – not useful'. These categories were found to embrace the adolescents' perceptions.

6.3.4 Q methodology issues

The fact that Q methodology was developed for scientific investigation of subjectivity (Brown, 1980; 1991/1992) and that in recent studies, it had been appraised as well adapted for child participants (Ellingsen, 2011b; Størksen & Thorsen, 2011) were important reasons for choosing Q methodology in this study (Paper III). Others reasons were that even with relatively few participants, Q methodology was reported as being suitable for adolescent foster children's disclosing nuanced subjective views and distinct perspectives (Ellingsen, 2011b). That Q methodology also was considered a gentle way of exploring the subjective views of adolescents in vulnerable positions about emotionally challenging subjects (Ellingsen, 2011b) was also an important factor for my methodological choice.

As already mentioned, in the preparations for the Q study presented in Paper III, the interview text constituted a starting point. Using naturalistic statements derived from interview texts is a common and recommended approach for development of statement cards for a Q sort (Ellingsen, 2011b), but to construct statements, for example, on theoretical grounds is also a possibility (Stephenson, 1953). Aiming at exploring adolescents' subjective views about participation in RTs using Q methodology, I was a little concerned that the interview text alone would miss some important IPC aspects. This led to the development and application of the Concourse Box; thus, theoretical aspects were added to the naturalistic statements. This procedure and how different approaches to Q sampling may be combined is more fully described in Paper II. When the time-consuming process described in Paper II is weighed against the results of the adolescents' Q sorts presented in Paper III, it was undoubtedly worth it. For example, some of the theoretically constructed statements appeared to have high psychological significance (Watts & Stenner, 2012) to the adolescents.

Based on the experiences of using Q methodology in this Q study (Paper III), I will give my support to the Q methodological properties referred to in the beginning of this section, which were the basis for choosing the method in this study. Particularly, I would recommend Q methodology when the aim is to explore subjective views of individuals in vulnerable positions, such as children or adolescents who have complex health and social challenges. Some of the adolescents included in the Q study (Paper III) said that they accepted participation in this research because they were allowed to not express themselves verbally. As already mentioned, one of the interviewees referred to in Paper I might have felt more comfortable expressing herself in the Q sort rather than answering my questions during the interview.

The fact that the method allows inclusion of participants who for some reason may not wish to contribute with verbal elaborations and, at the same time, allows comments from participants that would like to comment makes it a very flexible research method. There are reasons to believe that when the topic of investigation may be emotionally challenging to the participants, those who do not like to elaborate verbally about their subjective views are likely to turn down invitations to participate in, for example, research interviews. However, these persons may have experiences that could be of great importance to knowledge development and, hence, to implications for practice.

6.4 Limitations of the study

As with all studies, this PhD study also has limitations, some of which have already been mentioned. For example, while it is suggested that combining qualitative and quantitative methodologies may strengthen the construct validity of a study (Ødegård & Bjørkly, 2012b), this study instead combined two qualitative studies, although Q methodology certainly also involves quantitative techniques. However, the multi-method design (Esteves & Pastor, 2004) applied in this PhD study may have contributed cumulative validity to the study, as results from the first study have stimulated and indicated new steps in this research process (Ødegård, 2008). Nevertheless, as innumerable research methodologies and strategies exist, this PhD study might have achieved the aim of exploring adolescent service users' subjective views about participation in RTs using other research designs.

As already mentioned, in the searches for literature and previous research, it was difficult to identify other studies that included adolescents' views about participation in interprofessional teams, such as RTs, where both child welfare services and mental health services were represented. The reasons for these difficulties were the complexity of variables and numerous words and combinations of words used for IPC and, most likely, also that very few such studies exists. However, it is possible that some relevant studies exist and should have been identified and added to the knowledge base presented in this PhD study.

Some issues emerge when taking Paper I into critical consideration. Due to the small number of participants, the findings certainly cannot be generalised, but when read alongside the other studies referred to, they contribute to a developing knowledge base for child welfare practice and children's participation in RTs. Hence, there are reasons to believe that the knowledge generated in Paper I has transferability value to similar contexts (Guba & Lincoln, 1982). Another issue that should be mentioned is the use of the term *vulnerable adolescent* in the study title (Paper I). Rather, it might have been better to refer to *adolescents in vulnerable situations or positions*, because the term was not intended to infer static characteristics of the adolescents.

Despite thorough analysis using qualitative content analysis (Graneheim & Lundman, 2004), no guarantee can be provided that the theme and categories developed are the best and most accurate understanding of the adolescents' expressions in Paper I. The fact that the interviews as well as the Q set (See Appendix IV or Table 3 in Paper III) used in Paper III were originally in Norwegian and have been translated into English may have caused some bias.

In Paper I Honneth's (2008) theory about recognition as is suggested as relevant to both RT and children's participation, but the theory is perhaps not made the most out of in Paper I. Honneth's theory may be an important contribution to knowledge development regarding inclusion of service users in the collaboration in RTs and similar team arrangements. In order to compensate for this, Honneth's theory is more fully described and utilised in this PhD thesis. Several other theories, such as resilience theory (Borge, 2010) and attachment theory (Bowlby, 1988) might also have been relevant to an understanding of the adolescents' situations.

In conformity with the aim of Q methodology, the Q study (Paper III) intended to explore patterns of subjectivity and not to develop general knowledge about a population. The Q study (Paper III) did not generate knowledge that say something about all adolescent service users of RTs. Rather, it clarifies and adds new dimensions to issues that other methods may have difficulty uncovering (Donner, 2001). In the development of the Q set used in the Q study (Paper III), the best representativeness of the concourse about adolescents' views about participation in RTs was aimed for. Yet, there is always a possibility that inclusion of other statements, reflecting other aspects, would have revealed viewpoints of greater importance.

As with the qualitative content analysis, there is no guarantee that the factor interpretation in the Q study (Paper III) provides an accurate explanation of the adolescents' views, but, rather, the interpreted factors are the results of searches for the best plausible explanations of the adolescents' subjective understanding (Stephenson,1961; Wolf, 2004). Moreover, in discussions about the interpreted factors, there is always a risk that meanings not consistent with reality will be attributed to the findings. However, because of the sizeable amount of available data in Q studies, there is probably a greater risk that important points or connections may be overlooked.

In line with other qualitative studies, the findings in this PhD study cannot be generalised, which was not the purpose to begin with. Rather, the purpose was to explore some adolescents' subjective views about participation in RTs, based on rich descriptions and nuanced information, in order to get insight in these adolescents' experiences with RTs. That said, it might have been useful to add a quantitative study aiming at general knowledge of young service users' views about participation in RTs. For example, it would be useful to know whether indications in this study reflect only the views of adolescents included here or if they are also representative of all adolescent service users' views in Norway. One possible approach to such research might have been a questionnaire based on some of the statements in the Q set from this Q study (Paper III), including a larger sample of informants than in this study. Although such an approach would not have resulted in the same range of detailed information as a Q methodological study, it might possibly have confirmed or disproved such issues as the importance of a trusting relationship between the adolescent and the RT chairperson, as indicated in Paper III.

It might also have added complementary data of comparative value, if perspectives of the chairpersons in the RTs of the adolescents participating in this Q study (Paper III) had been included. For example, the chairpersons could have been asked to sort statements in the Q set used in Paper III, in accordance with how they thought the respective adolescents related to each statement. This advantage of Q methodology (Sæbjørnsen & Ellingsen, 2015) was considered, but not made use of in this PhD study for practical reasons, such as the chairpersons not being available in the different municipalities where the adolescents lived when I was there.

A third possible explorative step this PhD study might have taken, which might have yielded complementary information, would have been to undertake a follow-up Q study by asking the youngest participants to sort the same statements, for example, two years later, based on how they might then have related to the statements. Such a follow-up study would add information about whether the initial picture was stable or had changed after two years.

As with all human undertakings and data interpretation, the studies presented in Paper I and Paper III may involve biases stemming from the authors' preconceptions (Lykkeslet & Gjengedal, 2007). Attempting to counteract such biases, all parts of the study and particularly those regarding interpretation of the collected data were thoroughly discussed with research colleagues.

Having claimed that findings in this PhD study may be of value for the generation of knowledge about IPC as well as about service user involvement and children's participation, it is very important to emphasise that this is only true for a very small part of these research fields. If the respective research knowledge bases were imagined as sand dunes, then this PhD study possibly contributes an extra handful of sand to each.

Despite several limitation of the study, it is important to emphasise that methodological as well as ethical guidelines have been followed in order to illuminate the adolescents' perspectives and by that generate trustworthy knowledge.

6.5 Implications and final comments

Through the use of interviews and content analysis (Paper I), as well as Q methodology (Paper II and Paper III), this study has explored some adolescents' subjective views about the interprofessional collaboration team called 'Responsible Team' or 'RT'. Interpretation of the findings indicates the potential in successful RTs and how successful RTs may be achieved as well as how to avoid unsuccessful RTs.

This study provides new insights in how adolescent service users' subjectively view participation in RTs. Findings may constitute a useful contribution to knowledge development of interprofessional team arrangements, such as RTs, as well as service user involvement and children's participation, but also for development of guidelines for successful RTs.

The two studies (qualitative and Q) were based on a limited number of participants, but some adolescents' voices seemed quite clear: RTs have the potential to improve the situations of adolescent service users, but RTs may also worsen their situations. New and improved RT guidelines, involving aims of whole-hearted effective participation and trusting relationship-building between the adolescent and the RT chairperson may help in achieving successful RTs, but, as pointed out by Reeves et al. (2010), successful RTs ultimately depend on individual willingness.

This PhD study seems to be one of the few studies contributing to the IPC knowledge base, based on adolescent service users' views about team participation. Thus, more knowledge is needed in this field. Q methodology is suitable when exploring adolescents' views and is therefore recommended in new studies involving adolescents. The methodological development presented in Paper II may be also be used in new studies.

In order to develop generalizable knowledge about adolescent service users' views about participation in RTs, quantitative studies should be conducted. Such studies could, for example, be approached by questionnaires based on some of the statements from the Q set used in this study (See Table 3 in Paper III).

In this PhD study, adolescent service users have demonstrated the importance to research of their competence and subjective knowledge about service users' participation in RTs. Despite the fact that the findings in this study are not generalizable in the same way as with for example results in large quantitative studies, this study have yielded findings that support existing knowledge as well as some surprising new findings.

Findings in this PhD study seem to indicate that the interprofessional team arrangement RT do have the potential to improve the situations of adolescent service users having a complex need of services, when the adolescents perceive the RT as useful. The adolescents seem to view RTs as useful when *effective participation* is achieved and that the adolescents' influence in decision making is acknowledged by the professionals. Another important factor for adolescents' viewing RTs as useful, seem to be that a trusting relationship is developed between the adolescent and at least one professional possessing a powerful position in the RT, such as the chairperson.

Findings in this study also seem to indicate that factors that affect adolescents' subjective

views about participation in RTs have many similarities with factors affecting professionals' subjective views about IPC. However, the differing roles of service user and professional participant seem to constitute a distinct difference in how important they think the team is.

The finding indicating that adolescents often seem to continue attending RT conferences even if they, for several reasons, do not like being there should deserve some attention. However, perhaps even more important, is that half-hearted efforts to involve the adolescent service user in RTs in terms of not allow their influence in decision making or 'pseudo-participation' do not only seem useless, but may even complicate the adolescent's situation.

References

References

Arnstein, S.R. (1969). A ladder of citizen participation. *Journal of American Planning Association, 35*(4), 216-224.

Backe-Hansen, E. (2009). *Barn [Children, in Norwegian]* Downloaded from: https://www.etikkom.no/fbib/temaer/forskning-pa-bestemte-grupper/barn/ .

Berger, PlL., & Luckmann, T. (2000). *Den samfunnsskapte virkelighet [The social construction of reality, in Norwegian].* Bergen: Fagbokforlaget

Bolin, A. (2014), Children's agency in interprofessional collaborative meetings in child welfare work. *Child & Family Social Work*. doi: 10.1111/cfs.12167

Bolin, A. (2015). Children's agency in interprofessional collaboration. *Nordic Social Work Research*, *5*(1), 50-66.

Borge, A.I.H. (2010). *Resiliens. Risiko og sunn utvikling [Resilience. Risks and sound development, in Norwegian].* Oslo: Gyldendal Akademisk

Bowlby, J.(1988). *A secure base.* London: Routledge

Brown, S. R. (1980). *Political subjectivity. Applications of Q methodology in political science,* New Haven, CT: Yale University Press

Brown, S. R. (1991/1992). *A Q methodological Tutorial*. Retrieved from http://facstaff.uww.edu/cottlec/QArchive/Primer1.html

Bryman, A. (2004). Social research methods (Second ed.) New York: Oxford University Press.

Buckley, H., Carr, N. & Whelan, S. (2011) Like walking on eggshells': service user views and expectations of the child protection system. *Child and Family Social Work*, 16 (1), 101– 110.

Cashmore, J. (2011) Children's participation in family law decision-making: theoretical approaches to understanding children's views. *Children and Youth Services Review,* 33 (4), 515– 520.

Child Welfare Act, 1992. *Barne- og familiedepartementet (1992). Lov om barneverntjenester av 17. juni 1992, nr. 100.* Oslo: Barne- likestillings- og inkluderingsdepartementet (BLD).

Christiansen, Ø., Bakketeig, E., Skilbred, D., Madsen, C., Havnen, K.J.S., Aarland, I. & Backe-Hansen, E. (2015). *Forskningskunnskap om barnevernets hjelpetiltak [Research knowledge about the child welfare servise' measures of assistance, in Norwegian].* Bergen: Uni Research Helse, Regionalt kunnskapssenter for barn og unge (RKBU Vest)

Cooper, M., Evans, Y. and Pybis, J. (2016). Interagency collaboration in children and young people's mental health: a systematic review of outcomes, facilitating factors and inhibiting factors. *Child: care, health and development.* doi:10.1111/cch.12322

Corr, S. (2006). Exploring perceptions about services using Q methodology. In G. Kielhofner (Ed.), *Research in occupational therapu: Methos of inquiry for enhancing practice* (pp. 389-400). Philadelphia: E.A. Davis Company.

Cossar, J., Brandon, M., Bailey, S., Belderson, P., Biggart, L. & Sharpe, D. (2013) *'It takes a lot to build trust'. Recognition and Telling: Developing Earlier Routes to Help for Children and Young People.* Office for Children's Commissioner, London.

Creswell, J. W. (2013). *Research design: Qualitative, quantitative, and mixed methods approaches.* Sage publications.

Croft, S. & Beresford, P. (1996). The politics of participation. InD. Taylor (Ed.), *Critical Social Policy – A reader: Social policy and Social Relations.* London: Sage Publications.

Darlington, Y., & Feeney, J. A. (2008). Collaboration between mental health and child protection services: Professionals' perceptions of best practice. *Children and Youth Services Review, 30*(2), 187-198.

Dean. M. (2010). *Governmentality: power and rule in modern society.* London: Sage.

Denzin, N.K. & Lincoln, Y.S. (2000). Introduction: The Discipline and Practice of Qualitative Research. In: N.K. Denzin and U.S. Lincoln (Eds.), *Handbook of Qualitative Research.* Thousand Oaks, California: Sage Publications.

Donabedian, A. (2005). Evaluating the quality of medical care. *Milbank Quarterly, 83*(4), 691-729.

Donner, J.C. (2001). Using Q-sorts in Participatory Processes: An Introduction to the Methodology. In R. Krueger, A., M.A. Casey, J. Donner, S. Kirsch & J.N. Maack (Eds.), *Social Analysis: Selected Tools and Techniques, Paper Number 36.* Washington D.C.: Social Development Department, The World Bank.

Eden, S., Donaldson, A. & Walker, G. (2005). Structuring subjectivities? Using Q methodology in human geography. *Area, 37*(4), 413-422

Engebretsen E. & Heggen, K. (2012). Makt på nye måter [New ways of power, in Norwegian]. In E. Engebretsen and K. Heggen (Eds.), *Makt på nye måter [New ways of power, in Norwegian].* (p. 13-18). Olso: Universitetsforlaget.

Eliasson-Lappalainen, R., Jacobsson, K., Meeuwisse, A. &Swärd (2010). Sosialvitenskapelige forskningstradisjoner – en innledning [Social science research traditions – an introduction] in: A. Meeuwisse, H. Swärd, R. Eliasson-Lappalainen & K. Jacobsson, (ed.). *Forskningsmetodikk for sosialvitere. [Research methods for social scientists].* Oslo: Gyldendal Akademisk

Ellingsen, I.T. (2011a). *Adolescent in foster care and their families. A Q methodological study on family perceptions.* (PhD thesis). Faculty of Arts and Education, University of Stavanger.

Ellingsen, I. T. (2011b). Designing a Q sample for a study with adolescent foster children. *Operant Subjectivity -The International Journal of Q Methodology, 34*(3), 125-145.

Ellingsen, I.T., Størksen, I. & Stephens, P. (2010). Q methodology in social work research. *International journal of Social Research Methodology, 13*(5), 395-409

Ellingsen, I. T., Shemmings, D., & Størksen, I. (2011). The concept of 'family' among Norwegian adolescents in longterm foster care. *Child and Adolescent Social Work Journal, 28*(4), 301-318.

Elllingsen, I.T., Schjelderup, L & Omre, C. (2014). Barn og unges medvirkning i barnevernet. [Children and youg people's participation in the child welfare]. In I. T. Ellingsen & R. Østerhaug (Eds.), *Barnevernets brennpunkt. Bestlutningsgrunnlag og beslutninger [The Childwelfare's fire point. Decision basis and decisions]* (pp.181-196). Oslo: Universitetsforlaget

Ellingsen, I. T., Thorsen, A. A. & Størksen, I. (2014). Revealing Children's Experiences and Emotions through Q Methodology. *Child Development Research*, vol. 2014, Article ID 910529, 9 pages, 2014. doi:10.1155/2014/910529

Esteves, J. & Pastor, J. (2004). Using a Multimethod Approach to Research Enterprise Systems Implementations. *Electronic Journal of Business Research Methods,* 2 (2): 69-82

Foucault, M. (1978) *The History of Sexuality, Volume 1: An Introduction.* New York: Random House.

Fraser, N. (2000). Rethinking recognition. *New Left Review* (3), 107-120.

Fraser, N. (2007). Fra omfordeling til anerkjennelse? Rettferdighetens dilemma I en "postsosialistisk" tid. [From redistribution to recognition? Social justice dilemma in a post socialist time, in Norwegian]*Agora: Journal for metafysisk spekulasjon,* 25(3), 104-139.

Fraser, N. & Honneth, A. (2003). *Redistribution or recognition? A political-philosophical exchange.* London: Verso

Freire, P. (1972). *Pedagogy of the oppressed.* London: Penguin.

Furesund, A.S., Lykkeslet, E., Skrondal, T. og Wogn-Henriksen, K. (2006). Lærerikt og spennende å forske sammen: Utfordringer i et forskende fellesskap. *Nordisk tidsskrift for helseforskning, 4 (2),* s. 3–13.

Fylkesmannen I Sogn og Fjordane [County Administration in Sogn and Fjordane]. Referat frå ansvarsgruppemøte. Lastet ned 11.12.2015 [Minutes of responsibility group meetings 11.12.2015.] Retrieved from: https://www.fylkesmannen.no/Sogn-og-Fjordane/Barn-og-foreldre/Barnevern/Referat-fra-ansvarsgruppemote/

Gallagher, M., Smith, M., Hardy, M. & Wilkinsion, H. (2012) Children and families' involvement in social work decision- making. *Children & Society, 26*, 74–85.

Garstka, T.A., Lieberman, A., Biggs, J., Thompson, B., & Levy, M.M. (2014). Barriers to cross-systems collaboration in child welfare, education, and the courts: Supporting education well-being of youth in care through systems change. *Journal of Public Child Welfare*, *8*(2), 190-211. doi: 10.1080/15548732.2014.888697

Gilbertson, R., & Barber, J. G. (2002). Obstacles to involving children and young people in foster care research. *Child & Family Social Work, 7*(4), 253-258.

Goldstein, D.M. &. Goldstein, S.E. (2005). Q methodology study of person in individual therapy. *Clinical case studies, 4*, 40-56.

Good, J.M.M. (2010). 'Introduction to William Stephenson's quest for a science of subjectivity', *Psychoanalysis and History,* 12 (2): 211-43.

Graneheim, U.H. & Lundman, B. (2004) Qualitative content analysis in nursing research: concepts, procedures and measures to achieve trustworthiness. *Nurse Education Today, 24* (2), 105–112.

Guba, E.G. & Lincoln, Y.S. (1982) Epistemological and meth- odological bases of naturalistic inquiry. *Educational Communications & Technology Journal, 30 (4),* 233-252.

Harris. A. & Allen, T. (2011). Young people's views of multi-agency working. *British Educational Research Journal Vol. 37,* No. 3: p.405-419.

Hart, R. (1992). *Children's participation from tokenism to citizenship.* Florence: UNICEF Innocenti Research Centre.

Harth, S. C., & Thong, Y. H. (1995). Parental perceptions and attitudes about informed consent in clinical research involving children. *Social science & medicine, 41*(12), 1647-1651.

Healy, K. & Darlington, Y. (2009) Service user participation in diverse child protection contexts: principles for practice. *Child and Family Social Work, 14* (4), 420–430.

Hesjedal, E., Hetland, H., & Iversen, A. C. (2015a). Interprofessional collaboration: self-reported successful collaboration by teachers and social workers in multidisciplinary teams. *Child & Family Social Work, 20*(4), 437-445.

Hesjedal, E., Hetland, H., Iversen, A. C., & Manger, T. (2015b). Interprofessional collaboration as a means of including children at risk: an analysis of Norwegian educational policy documents. *International Journal of Inclusive Education*, *19*(12), 1280-1293.

Holcomb, H. (1998). Testing evolutionary hypotheses. In Crawford & Krebs. Handbook of Evolutionary Psychology. Mahwah, NJ: Lawrence Erlbaum Associates

Holstein, J. A. & Gubrium, J. F. (2004). The active interview. In D. Silverman (Ed.) Qualitative research: theory, method and practice, 140-161. London: Sage.

Honneth, A. (2008) *Kamp Om Anerkjennelse: Om De Sosiale Konfliktenes Moralske Grammatikk. [The struggle for recognition: The moral grammar of social conflicts, in Norwegian].* Oslo: Pax.

Humerfelt, K. (2005). Begrepene brukermedvirkning og brukerperspektiv – honnørord med lavt presisjonsnivå [The concepts service user involvement and service user perspective – words of honour with low level of precision, in Norwegian]. In E. Willumsen (Ed.), *Brukernes medvirkning! [The service users' participation!, in Norwegian].* (p. 15-33). Oslo: Universitetsforlaget

Juritzen, T., Engebretsen, E. & Heggen, K. (2012). Mindiggjøringens forførende makt [The empowerment's seductive power, in Norwegian]. In E. Engebretsen and K. Heggen (Eds.), *Makt på nye måter [New ways of power, in Norwegian].* (p. 13-18). Olso: Universitetsforlaget.

Knight, J.M. (1999). The Darwinian algorithm and scientific enquiry. Contemporary psychology, 44(2), 150-152.

Kvale, S. & Brinkmann, S. (2009). *InterViews: Learning the Craft of Qualitative Research Interviewing.* Sage, Thousand Oaks, CA

Lichtwarck, W., & Clifford, G. (2010). *Modernisering I barnevernet: Ideologi, kontekst og kompetanse [Modernising child welfare: ideology, context and competence, in Norwegian].* Oslo: Universitetsforlaget

Lykkeslett, E. & Gjengedal, E. (2007). Methodological Problems Associated With Practice Close Research. *Qualitative Health Research,* 17 (5), 699-704

Malterud, K. (2013). *Kvalitative metoder i medisinsk forskning: en innføring* (3th ed.). Oslo: Universitetsforlaget AS.

Mead, G.H. (2005) *Sindet, Selvet Og Samfundet: Fra Et Socialbehavioristisk Standpunkt [Mind, Self and Society from the Standpoint of a Social Behaviorist, in Danish].* Akademisk Forlag, København.

McKeown, B., & Thomas, D. B. (2013). *Q methodology (Vol. 66).* Sage publications.

McLean, S. (2012) Barriers to collaboration on behalf of children with challenging behaviours: a large qualitative study of five constituent groups. *Child & Family Social Work, 17,* 478–486. DOI:10.1111/ j.1365-2206.2011.00805.x.

McLeod, A. (2010) A friend and an equal': do young people in care seek the impossible from their social workers? *British Journal of Social Work, 40* (3), 772–788.

NESH, De nasjonale forskningsetiske komiteer (2006). Forskningsetiske retningslinjer forsamfunnsvitenskap, humaniora, juss og teologi . Retrieved from: http://www.etikkom.no/

Norwegian Board of Health (2014). *Helsestasjonen – hjelp i rett tid? Oppsummering av landsomfattende tilsyn med helsestasjoner 2013 [The public health center – help at right time? Summary of national inspection of public health centers 2013, in Norwegian]* (4/2014). Oslo: Statens Helsetilsyn

Norwegian Directorate for Children, Youth and Family Affairs (2015). About us. Retrieved February 3., 2016 from: www.bufdir.no

Norwegian Ministry of Children and Equality (2009). *Det du gjør – gjør det helt. Bedre samordning av tjenester for utsatte barn og unge [What you do – do it wholly. Better coordination of services for vulnerable children and young people].* NOU 2009:22. Oslo: Barne og likestillingsdepartementet.

Norwegian Ministry of Children and Equality (2012). Division of responsibility in the child welfare services. Retrieved from: www.regjeringen.no

Norwegian Ministry of Labour and Social Affairs (1997). *Resultater og erfaringer fra Regjeringens handlingsplaner for funksjonshemmede og veien videre [Results from experiences from the Government's plans for actions for handicaped people and further directions, in Norwegian]* (St.meld. nr. 34, 1996-97). Oslo: Departementenes servicesenter.

Oliver, C., Mooney, A. & Statham, J. (2010) Integrated Working: A Review of the Evidence. Institute of Education, London.

Omre, C. & Schjelderup, L. (2009) Barn i barnevernet – en studie om barns deltakelse og styrkeprosesser i familieråd [Children in child protection – a study about children's participation and strengths processes, in Norwegian].Trondheim: Tapir Akademisk Forlag.

O'Reilly, M., Vostanis, P., Taylor, H., Day, C., Street, C. & Wolpert, M. (2013) Service user perspectives of multiagency working: a qualitative study with children with educational and mental health difficulties and their parents. *Child and Adolescent Mental Health, 18,* 202–209. DOI:10.1111/j.1475-3588.2012.00674.x.

Parton, N., Thorpe, D., & Wattam, C. (1997). *Child Protection: Risk and the Moral Order.* Basinstoke: Palgrave.

Patton, M.Q. (2002) *Qualitative Research and Evaluation Methods.* Sage, Thousand Oaks, CA.

Polit, D.F. og Beck, C.T. (2010). *Nursing Research.* (7.utg.). Philadelphia: Lippincott Williams & Wilkins.

Powers, P. (2003). *Empowerment as treatment and the role of helath professionals. Advances in nursing science, 26(3),* 227.

Powel, F. (2001). *The politics of social work.* London: Sage

Rappaport, J. (1981). In praise of paradox: a social policy of empowerment over prevention. *American Journal of Community Psychology, 9*(1), 1-25.

Reeves, S., Lewin, S., Espin, S., & Zwarenstein, M. (2010). *Interprofessional teamwork for health and social care.* Oxford: Blackwell Publishing Ltd and CAIPE.

Ringdal, Kristen (2001) *Enhet og mangfold – Samfunnsvitenskapelig forskning og kvantitativ metode [Unity and diversity – Social science research and quantitative method, in Norwegian].* Bergen: Fagbokforlaget

Samsonsen, V. (2015). Assessment in child protection; A comparative study Norway – England. (PhD thesis). Faculty of Social Science, University of Stavanger.

Schmolck, P. (2002). PQMethod. Retrieved 26 March 2012 from www. lrz.de/-schmolck/qmethod/

Shemmings, D. and I.T. Ellingsen (2012). Using Q methodology in qualitative interviews, in *The SAGE Handbook of Interview Research: The Complexity of the Craf*, J.F. Gubrium, et al.., Editors. SAGE.

Skivenes, M. & Willumsen, E. (2005). Brukermedvirkning I barnevernets ansvarsgrupper [Service user involvement in 'responsible teams' in the child welfare service, in Norwegian]. In E. Willumsen (Ed.), *Brukernes medvirkning! [The service users' participation!, in Norwegian].* (p. 15-33). Oslo: Universitetsforlaget

Skjefstad, N. (2012). Brukermedvirkning sett I et anerkjennelsesteoretisk perspektiv [Service user involvement in a recognition theory perspective, in Norwegian]. In A.G. Jenssen and I.M. Tronvoll (Eds.), *Brukermedvirkning. Likeverd og anerkjennelse [Service user involvement. Equality and recognition, in Norwegian]. (p. 54-69).* Oslo: Universitetsforlaget

Slettebø, T., Oterholm, I. & Stavrum, A. (2010) Brukermedvirkning i det statlige regionale barnevernet [Service user involvement in the governmental regional child welfare, in Norwegian]RAPPORT 2010/3.

Smith, R. (2008). Social Work and Power. New York: Palgrave Macmillan

Statistics Norway, SSB. (2014). Statistisk sentralbyrå [National Statistics Norway, In Norwegian], retrieved December 12, 2014, from http://www.ssb.no/

Statistics Norway, SSB. (2015). Statistisk sentralbyrå [National Statistics Norway, In Norwegian], retrieved February 19, 2016, from http://www.ssb.no/

Strand, T. (2005). Peirce on educational beliefs. *Studies in Philosphy and Education, 24,* 255-276.

Stephenson, W. (1953). *The study of behavior: Q –Technique and its methodology.* Chicago: University of Chicago Press.

Stephenson, W. (1961). 'Scientific creed – 1961', *The Psychological Record,* 11, 1-25.

Stephenson, W. (1978). Concourse theory of communication. *Communication* (3), 21-40.

Stephenson, W. (1980). Newthon1s fifth rule and Q methodology: Application to educational psychology. *American Psychologis,* 35 (10), 822-889.

Stephenson, W. (1986). Protoconcursus: the concourse theory of communication. *Operant Subjectivity 9,* 37-58 and 73-96.

Stones, M., & MCMillan, J. (2010). Payment for participation in reserach: a pursuit for the poor? *Journal of Medical Ethics, 36* (doi:10.1136/jme.2009.030965).

Strand, T. (2005). Peice on educational beliefs. *Studies in Philosophy and Education, 24,* 255-276

Strandbu, A. (2011). *Barnets deltakelse. Hverdagslige og vanskelige beslutninger [The child's participation.Everyday- and difficult desicions, in Norwegian].* Oslo: Universitetsforlaget

Strandbu, A. & Thørnblad, R. (2010). "Sårbare" barn som deltakere i kvalitativ forskning [*'Vulnerable' children as participants in qualitative research, in Norwegian*] Forskningsetikk og etisk forskning . *Barn 1*, 27-41

Strauss, A., & Corbin, J. (1990). *Basics of qualitative research* (Vol. 15). Newbury Park, CA: Sage.

Størksen, I. & Thorsen, A.A. (2011). Young children's participation in a Q study with visual images: Some comments on reliability and validity. *Operant Subjectivity,The International Journal of Q Methodology,* 34(3): 146-171

Sæbjørnsen, S.E.N. & Ellingsen, I.T. (2015) Q-metode – et praktisk redskap ved innovasjon i kommunene [Q-method – a practical tool for innovation in the municipalities, in Norwegian]. In E. Willumsen & A. Ødegård (Eds.), *Sosial innovasjon – fra politikk til tjenestutvikling [Social innovation – from politics to service development, in Norwegian].* (p. 249-266). Bergen: Fagbokforlaget A/S

Sæbjørnsen, S.E.N., Ellingsen, I.T., Good, J.M.M. & Ødegård, A. (2016). Combining a naturalistic and theoretical Q sample approach: An empirical research illustration. *Operant Subjectivity The International Journal of Q Methodology.* In press.

Sæbjørnsen, S.E.N. & Willumsen, E. (2015). Service user participation in interprofessional teams in child welfare in Norway: vulnerable adolescents' perceptions. *Child & Family Social Work*. DOI:10.1111/cfs.12242

Sæbjørnsen, S. E. N., & Ødegård, A. (2016). Adolescents' Subjective Views about Interprofessional Team Participation: A Q-methodological Study. *Journal of Comparative Social Work, 11*(2).

Tetzchner, Stephen von, (2012). *Utviklingspsykologi [Developmental Psychology, in Norwegian],* (2. edition). Oslo: Gyldendal Akademisk

Thomas, N. (2012). Love, rights and solidarity: Studying children's participation using Honneth's theory of recognition. *Childhood*, *19*(4), 453-466.

Thomassen, M. (2006). *Vitenskap, kunnskap og praksis-innføring I vitenskapsfilosofi for helse- og sosialfag [Science, knowledge and practice: Introduction to science philosophy for health and social profession, in Norwegian].* Oslo: Gyldendal Akademisk.

Thorsen, A.A. (2009). *Theachers' priorities and beliefs: A venture into beliefs, methodologies, and insights (PhD thesis). University of Stavanger.*

Thorsen, A.A. & Allgood, E. (Eds.) (2010), *Q-metodologi. En velegnet måte å utforske subjektivitet [Q methodology. A suitable way to explore subjectivity, in Norwegian],* Trondheim: Tapir Akademisk Forlag

Thrana, H.M. (2013). Kjærlighet: en kjernekompetanse i profesjonelt barnevernsarbeid? [Love: a core competence in professional child welfare work, in Norwegian]. *Norges Barnevern 1* (90): 4-17

United Nations (1989) *Convention on the Rights of the Child.* Available at: http://www.ohchr.org/Documents/ProfessionalInterest/crc.pdf (accessed March 2014).

van Bijleveld, G. G., Dedding, C. W., & Bunders- Aelen, J. F. (2015). Children's and young people's participation within child welfare and child protection services: a state- of-the- art review. *Child & Family Social Work, 20*(2), 129-138.

Vangen, S. & Huxham, C. (2009) En teoretisk forståelse av samarbeidets synergi.[A theoretical understanding of the synergy of collaboration] In E. Willumsen (Ed.), *Tverrprofesjonelt Samarbeid I Praksis Og Utdanning [Interprofessional Collaboration in Practice and Education].* (pp. 67–87). Oslo: Universitetsforlaget,

Vis, S.A. & Thomas, N. (2009) Beyond talking–children's participation in Norwegian care and protection cases: Ikke bare snakk–barns deltakelse i Norske barnevernssaker. *European Journal of Social Work*, 12 (2), 155–168.

Vis, S.A., Strandbu, A., Holtan, A. & Thomas, N. (2011) Participation and health–a research review of child participation in planning and decision-making. *Child & Family SocialWork*, 16 (3), 325–335.

Vis, S.A., Holtan, A. & Thomas, N. (2012) Obstacles for child participation in care and

protection cases – why Norwegian social workers find it difficult. *Child Abuse Review*, 21 (1), 7–23.

Warming, H. (2011) Children's participation and citizenship in a global age. Empowerment, tokenism or discriminatory disciplining? *Social Work & Society*, 9 (1), 119–134.

Watts, S., & Stenner, P. (2012). *Doing Q methodological research. Theory, method and interpretation.* London: Sage Publications Ltd.

Winsvold, A. (2011). Evaluering av prosjektet Sammen for barn og unge–bedre samordning av tjenester til utsatte barn og unge. Oslo: NOVA.

Widmark, C., Sandahl, C., Piuva, K., & Bergman, D. (2011). Barriers to collaboration between health care, social services and schools. International Journal of Integrated Care, 11(3).

Widmark, C., Sandahl, C., Piuva, K., & Bergman, D. (2013). Parents' experiences of collaboration between welfare professionals regarding children with anxiety or depression – an explorative study. *International Journal of Integrated Care,* 13, 1-11.

Willumsen, E. & Severinsson, E. (2005) Parents' collaboration and participation in a residential child care setting. *International Journal of Child & Family Welfare*, 8 (1), 19–31.

Willumsen, E., Sirnes, T., & Ødegård, A. (2014) Tverrprofesjonelt samarbeid – en fortsettelse [Interprofessional collaboration – a continuation]. In E. Willumsen & Ødegård, A. (Eds.), *Tverrprofesjonelt samarbeid – et samfunnsoppdrag [Interprofessional collaboration – A social assignment]* (pp. 19-29). Oslo: Universitetsforlaget.

Willumsen, E., & Skivenes, M. (2005). Collaboration between service users and professionals: legitimate decisions in child protection–a Norwegian model. *Child & Family Social Work*, *10*(3), 197-206.

Wolf, A. (2004). Research strategies for policy relevance. *Social Policy Journal of New Zealand* (23), 65-85.

Wolf, A. (2010). Subjektivitet I Q-metodologi [Subjectivity in Q methodology, in Norwegian]. In A.A. Thorsen & E.Allgood (Eds.), *Q-metodologi: En velegnet måte å utforske subjektivitet [Q methodology: A suitable way to explore subjectivity].* Trondheim: Tapir.

Woolfson, R.C., Heffernan, E., Paul, M. & Brown, M. (2010) Young people's views about the child protection system in Scotland. *British Journal of Social Work*, 40, 2069–2085.

Worlds Health Organisation (2010). Framework for Action on Interprofessional Education & Collaborative Practice (WHO7HRH7HRH710.3).

Ødegård, A. (2007). Exploring perceptions of interprofessional collaboration in child mental health care. *International Journal of Integrated Care, 7*(1-13). Retrieved at: http://www.ijic.org/

Ødegård, A. (2008). Exploring Perceptions of Interprofessional Collaboration in Child Mental Health Care. (PhD thesis). Department of psychology, Faculty of Social Science, University of Oslo.

Ødegård, A. & Bjørkly, S. (2012a). The family as partner in child mental health care: problem perceptions and challenges to collaboration. *Journal of the Canadian Academy of Child and Adolescent Psychiatry,* 21:2

Ødegård, A. & Bjørkly, S. (2012b). A mixed method approach to clarify the construct validity of interprofessional collaboration: An empirical research illustration. *Journal of Interprofessional Care.* Doi: 10.3109/13561820.2011.652784

Ødegård, & Strype, J., (2009). Perceptions of interprofessional collaboration in child mental health care in Norway. *Journal of Interprofessional Care,* May 23 (3), 286-296.

Ødegård, Iversen, H.P., & Willumsen, E. (2014). Samhandlingsreformen – hvilken betydning vil den få for utsatte barn og unge? [The collaboration reform – What significance will it have for children and young people?] In I. T. Ellingsen & R. Østerhaug (Eds.), *Barnevernets brennpunkt. Bestlutningsgrunnlag og beslutninger [The Childwelfare's fire point. Decision basis and decisions]* (pp.181-196). Oslo: Universitetsforlaget

Paper I

Service user participation in interprofessional teams in child welfare in Norway: vulnerable adolescents'

perceptions

Service user participation in interprofessional teams in child welfare in Norway: vulnerable adolescents' perceptions

Siv Elin Nord Sæbjørnsen* and Elisabeth Willumsen†

*Assistant Professor and PhD student, Faculty of Health and Social Sciences, Molde University College, Molde, and

†Professor, Faculty of Social Sciences, University of Stavanger, Stavanger, Norway

Correspondence:
Siv Elin Nord Sæbjørnsen,
Molde University College,
P.O. Box 2110,
Molde NO-402,
Norway
E-mail: sisa@himolde.no

ABSTRACT

Children's participation has been a requirement in the Norwegian child welfare system for decades and children's effective participation has the potential to benefit children's outcomes. However, research suggests that effective user participation is still relatively rare and that user participation is seen as 'difficult' by both service users and professionals. One way to ensure children's rights to participation in Norway is to include adolescent service users in the interprofessional team formed around the child. Knowledge about experiences of adolescents in this kind of participation may provide important insights. This study explores five adolescents' perceptions about participating in such teams. Qualitative interviews and qualitative content analysis was used. We found that adolescents' participation in interprofessional teams may constitute one way to achieve effective participation. Both facilitating factors and impediments to effective user participation were found. The study suggests new ways to facilitate positive circles of participation and to increase the likelihood of improved child welfare outcomes from processes which secure more effective interprofessional help and support.

INTRODUCTION

Service user involvement constitutes a priority area in Norwegian health and social services (Skivenes & Willumsen 2005). The Norwegian Child Welfare Service (NCWS) and other services involved in providing child welfare services must comply with the requirements of the United Nations' Convention on the Rights of the Child (UNCRC 1989) and the Norwegian Child Welfare Act of 17 July 1992, No. 100 (hereafter NCWA). According to UNCRC (1989) article 12 and the NCWA §6-3, children have the right to express their views in cases concerning themselves and to have their views taken into account.

The NCWS is required to collaborate with other sectors and levels. For children with complex and long-term needs, more comprehensive and specific collaboration is necessary (NCWA, §3-2 and 2a). As

a means to meeting the children's rights requirements, children's participation in formal meetings has been recommended by several authors (Omre & Schjelderup 2009; Vis & Thomas 2009). However, effective user participation appears rare (Omre & Schjelderup 2009; Vis & Thomas 2009; Warming 2011; Vis *et al.* 2012; Cossar *et al.* 2013; van Bijleveld *et al.* 2015) and both service users and professionals tend to find user participation difficult (Healy & Darlington 2009; Slettebø *et al.* 2010; Woolfson *et al.* 2010; Buckley *et al.* 2011; Gallagher *et al.* 2012).

To date, relatively few studies have focused on vulnerable adolescents' perceptions about participation. Some studies about children's participation have included data on adolescents' views, such as Thoburn *et al.* (1995), Warming (2011), Cashmore (2011), Cossar *et al.* (2013) and van Bijleveld *et al.* (2015).

The purpose of our study is to contribute more knowledge about participation in order to improve outcomes for vulnerable adolescents. To do this, the study focuses on adolescents' perceptions about their participation in the interaction processes of the interprofessional team.

Adolescent service user participation in interprofessional teams: the Norwegian context

In NCWS, an interprofessional team, called the *ansvarsgruppe* or 'responsible team' (RT, hereafter) is commonly used to bring together representatives from services involved with a child who has complex needs. An RT brings different professionals together and includes non-professional members, such as the child, the parents and the child's 'significant others' (Mead 2005; Skivenes & Willumsen 2005). Intentionally, RTs will ease ways of communication, facilitate client-centred services and clients will benefit from the synergy of collaboration (Vangen & Huxham 2009). Implicitly, however, the professionals involved must have an altruistic approach, rather than the traditional professional territory protective approach (Axelsson & Axelsson 2009), in order to sharpen the focus on the child's need.

The group meets together in case conferences, the frequency of which is adjusted according to the child's changing needs. RT conferences are the venue for status updates, evaluations and discussions around the table (Willumsen & Severinsson 2005). An RT may be established when a child is very young and may last for several years. The individuals involved may change as a result of turnover or the child's changing needs. Communication between RT members also occurs between RT conferences when appropriate. Older children and adolescents will normally be encouraged to attend.

The NCWS serves all children in need: children needing support at home, including those in need of protection and services for those in out-of-home care, which is not under a separate regulatory framework as in the UK (Gilbert *et al.* 2011). There are some similarities between RT conferences and the UK's *core group* (for children receiving child protection services in the community) and *looked-after children review meetings*, but also some differences (Skivenes & Willumsen 2005). The intention of UK core groups and Norwegian RTs may be the same, but the organization is different.

Several municipalities have developed guidelines for RTs, but these do not seem to include specific guide-lines about involving the child nor do they comply with each other. Hence, the RT practices vary between municipalities.

The RT coordinator and the chairperson of the RT conference has traditionally been the NCWS case-worker, who will often, but not necessarily be a social worker. Municipalities are free to organize additional child care services, such as a street unit, referred to later in this study. The street unit mentioned was made up of social workers given the mandate to reach out to vulnerable adolescents with help and support. They were based in a city-centre building, with offices, kitchen, living room and conference rooms. The staff were available day and night; they were mobile and coordinated and chaired some RTs.

PREVIOUS RESEARCH

Several studies have explored service user involvement in child welfare, where parents, children or both are characterized as service users. As reviewed by Gallagher *et al.* (2012), effective participation, which implies service users' influencing decision-making, is more nuanced than policy directions might allow for. They identified three strands of effective participation: the importance of good relationships, the provision of information and in some cases ensuring support to enable participation. They conclude that improved outcomes for clients are associated with effective participation, but that overly bureaucratic and managerial practice cultures and lack of time available to build relationships can impede such intentions.

The importance of children's participation in social work decision-making processes was emphasized in a study of Cossar *et al.* (2013). They found that if a social worker had a key role in decision-making in relation to a child, the child wanted to get to know her and to be able to influence her decisions. This is in line with Warming (2011) who found that children want to be able to influence adults who has a powerful position concerning their case. Van Bijleveld *et al.* (2015) emphasize the importance of professionals' image of children as competent social actors and not only in need of protection. They suggest that children should have a central position in decision-making processes. The significance of children having a trusting relationship with the social worker is evident (Buckley *et al.* 2011; Cossar *et al.* 2013). It takes time to build such relationships (Cossar *et al.* 2013) and social workers' lack of time is a recognized problem (McLeod 2010).

As reviewed by Vis *et al.* (2011), children's participation in decision-making may also benefit children's

safety and well-being, although not automatically. The relationship with the social worker and tailoring of the participation process to accommodate children's expectations and abilities seem to be important. Vis *et al.* (2012) found that many Norwegian case managers did not engage children in decision-making despite the fact that child participation had been made mandatory through child welfare regulations and despite the potential benefits for children's outcomes (Vis & Thomas 2009; Vis *et al.* 2012; Gallagher *et al.* 2012). Vis *et al.* (2012) suggested that social workers' reasons for not engaging children in decision-making may be that they consider participation as harmful to a child, they may find effective participation difficult to achieve and some may feel that they lack the skills needed. However, Warming (2011) concludes that, despite good intentions, curtailments of children's participation harm their self-esteem and trust in and commitment to democratic societies' basic norm, namely the right everyone have to influence decisions that affect their lives.

Slettebø *et al.* (2010) investigated service user participation in the Norwegian National and Regional Child Welfare Service (Bufetat) and found that ideals about user participation are contradictory and that the user's perspective challenges the professional value base. They suggest facilitation of user participation in every meeting concerning the service user's case, so that they feel welcome and understood.

One possible reason why effective user participation is relatively rare and both service users and professionals find it difficult, is that they may have different perceptions of what service user participation is about (Healy & Darlington 2009; Vis & Thomas 2009; Slettebø *et al.* 2010; Gallagher *et al.* 2012).

In their study about children in the Norwegian child protection system and their participation in family group conferences, Omre & Schjelderup (2009) introduced 'Children's participation ladder'. Their ladder is relevant to our study, as it focuses children's participation in decisions concerning their everyday life and about finding solutions to difficult situations in life. The nine-ladder levels are: (i) children manipulated; (ii) children as decoration; (iii) children given selected information; (iv) children given full information; (v) children consulted; (vi) children as negotiators; (vii) children as partners; (viii) children given delegated power; and (ix) children as active decision-makers (author's translation). Only the three last levels imply degrees of what they designated *participant power*, which indicates the participant's power to influence. Vis & Thomas (2009) defined participation

as when children had an understanding of what was going on in a case, had expressed their view about the decision and finally that the children's view had affected the decision.

In many parts of the world, child protection legislation and policies enshrine the ideals of service user participation. However, principles and methods for achievement of participatory practices with vulnerable children are either patchy or underdeveloped (Healy & Darlington 2009). Research on children's participation tends to come from three areas of practice: child protection casework and meetings, family group conferences and review processes and meetings for children in care. In contrast, our study may be seen as broader, concerning a process that should be used with all vulnerable children who need targeted child welfare services. Our study seeks to provide insight in adolescent service users' perceptions about participation, based upon their experiences with RTs.

To the understanding of vulnerable adolescents' situations as participants in RTs, Axel Honneth's theory of recognition may be helpful. According to Honneth (2008), experiences of reciprocal recognition by the three modes of recognition; *love*, *rights* and *solidarity* is essential for development of a sound *self*. However, experiences of misrecognition may harm the self-development and cause feelings of being insulted, injured and violated.

Recognition by love refers to the *intimate sphere* and primary relationships particularly between child and parents, but also between friends and erotic relationships between lovers. Being loved because of the person one is, is fundamental for development of self-confidence, which is significant to the individual's autonomous participation in public life. Recognition by rights in the *rights sphere* give rise to development of self-respect. Recognition in the *solidarity sphere* is about being socially esteemed by a society and appraised as a contributor valuable for the society. Realization and development of self-esteem are potential outcomes in this sphere.

Love, rights and solidarity should not be seen as developmental levels, but rather as constant movements, where the modes build on each other and contemporaneously intersect (Honneth 2008).

AIM

This study focuses on five adolescents with experiences of RT processes and conferences in Norway.

The aim is to explore these adolescents' perceptions about their participation in RTs. This study is the first step in a larger project.

METHOD

This study has an explorative and interpretive design. Qualitative methods are often useful for information gathering and for gaining insight in different perspectives of a phenomenon (Malterud 2003). Qualitative interviews were conducted and transcribed. A qualitative content analysis (Patton 2002; Graneheim & Lundman 2004) was used to identify and analyse themes in the transcribed interview text in order to organize the data and condense the meaning. The manifest and implicit meanings were explained by developing categories and codes and then labelling them. The interpretative part of the analysis involves a back and forth movement between the whole and parts of the text (Graneheim & Lundman 2004) as well as between method and literature.

Sample

This study is based on interviews with five adolescents, two boys and three girls aged 13–16, who had experiences as subjects of RT processes and of attending RT conferences as service users. One inclusion criterion was that representatives from both NCWS and mental health services were involved in the RT formed around the adolescent. The adolescent was identified as having psychosocial difficulties because of complex needs for services. The participants were recruited via NCWS in two different municipalities and the Regional Child Welfare Service. They all lived on the west coast of Norway. One lived in a foster home, two lived with one of their parents and two lived with both parents. The NCWS had been involved with all the adolescents for several years.

Ethical considerations

Approvals were obtained from the Data Inspectorate in Norway (NSD, project number 30256) and the NCWS. All the participants and the parents of participants under the age of 16 signed an informed consent. All data have been anonymized and the audiorecorded interviews will be deleted according to NSD's procedures. Many delicate subjects may be brought up during interviews with adolescents about their experiences with their RT. The interviewer was careful about not pushing the adolescents to talk about anything they were not prepared to.

Open interviews

The interviews were semi-structured and a thematic interview guide including suggestions for interview questions was applied in combination with follow-up questions that the researcher found appropriate (Kvale & Brinkmann 2009). The questions were about the adolescents' perception of their *responsibility team* and their participation in RT processes and conferences. Interview skills are obtained by interview practice (Kvale & Brinkmann 2009). The interviews were conducted by the first author (S.E.N.S), who has a social work background and is experienced in communicating with vulnerable adolescents. The interviewer tried to be sensitive to possible contradictions and appearances of change in the adolescents' perception during the interview (Kvale & Brinkmann 2009). The interviews, which lasted for 1–2 hours, were audiorecorded and transcribed.

Qualitative content analysis

Qualitative content analysis was used to analyse the empirical data (Patton 2002; Graneheim & Lundman 2004). The transcribed interview text constituted the unit of analysis. The text was read through several times to obtain a sense of the whole.

The core feature of qualitative content analysis is the creation of categories (Graneheim & Lundman 2004). Tentative categories were discussed and reflected upon by the researchers on several occasions: in a research workshop with PhD students and supervisors and on several occasions with research advisors and research colleagues. Categories were revised and similar processes were applied for development of the codes. Relevant literature was also reviewed and the process consisted of a back and forth movement between data, method and theory. These processes resulted in the researchers' agreement about how to sort and label the codes.

The theme, categories and codes developed during the analysis are presented in Fig. 1.

FINDINGS

During the interviews, the adolescents reflected on their experiences and unravelled their perceptions about RTs and their involvement in RT processes and conferences. They commented that the extent of their involvement and perceptions about the usefulness of the RTs had changed over the years.
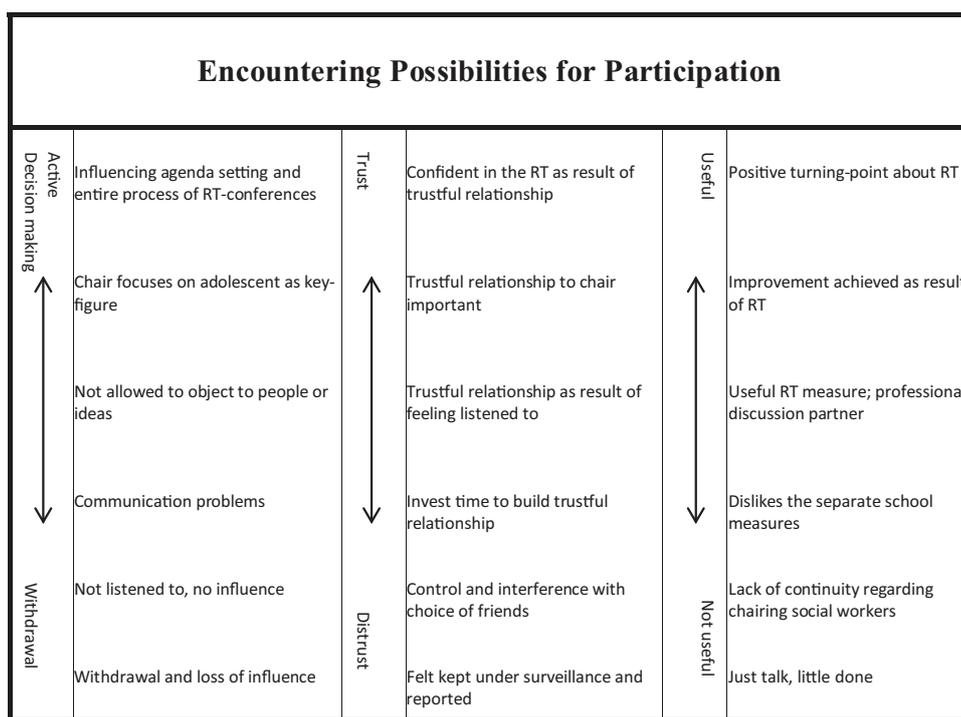
Encountering Possibilities for Participation

Active Decision making ↔ Withdrawal	Trust ↔ Distrust	Useful ↔ Not useful
Influencing agenda setting and entire process of RT-conferences	Confident in the RT as result of trustful relationship	Positive turning-point about RT
Chair focuses on adolescent as key-figure	Trustful relationship to chair important	Improvement achieved as result of RT
Not allowed to object to people or ideas	Trustful relationship as result of feeling listened to	Useful RT measure; professional discussion partner
Communication problems	Invest time to build trustful relationship	Dislikes the separate school measures
Not listened to, no influence	Control and interference with choice of friends	Lack of continuity regarding chairing social workers
Withdrawal and loss of influence	Felt kept under surveillance and reported	Just talk, little done

Figure 1 Adolescent service users' perceptions about responsible teams (RTs). Each of the three categories begins with the most positive and ends with the most negative perception.

Encountering possibilities for participation

After thorough analysis, three categories were identified: 'active decision-making – withdrawal', 'trust – distrust' and 'useful – not useful'. All the adolescents' perceptions related to these categories, each of which embraces the area between two contradicting points. Thus, we speak about degrees in each category, from positive to negative, and these can change over time. First, *active decision-making – withdrawal* refers to the adolescent's participation in connection with to the extent of influence they perceived themselves to have. Second, *trust – distrust* is about the importance of trust. Third, *useful – not useful* means the RTs, in terms of outcomes, possibilities and results.

Active in decision-making – withdrawal

All the adolescents in this study perceived that they were permitted to attend RT conferences, but they seemed unequally informed about the RT, about the RT members and their roles both during and outside the conferences. They all perceived that attending the RT conferences was important if they wanted to stay informed and wanted to express about their own needs. Adolescents who had a limited overview described their influence as limited or almost absent.

One girl aged 16 seemed particularly well-informed, participated extensively and perceived herself as having a real influence:

> Before we have conferences I and XX [chairperson from the street unit with whom she has a trusting relationship] always talk about what I want us to bring up and what I don't want them to bring up. So, we discuss a little. Then, the situation and how things are going is discussed between all of us in the conference. I'm fully included in the decision-making, because it's kind of *my conferen*ce. (. . .) It's me who decides it and I'm also allowed to make suggestions myself too.

This girl also described active participation in decisions about who should be included in the RT. Interestingly, although she felt free to do it, she said that she would not necessarily reject demanding and complicated suggestions brought up in the conferences because 'It could be something that I just felt I should do'. She described a feeling of commitment about accomplishing her part of the tasks the RT had agreed upon.

Perceiving herself as the key person, she naturally attended the RT conferences and emphasized the

value of support from the chairperson, who was a street unit social worker, with whom she had a trusting relationship:

> XX strongly focuses that everyone has to listen to me. (. . .) 'She's the boss and she decides. It's her we'll listen to . . . It's her problems we have to use as the starting point . . . Nothing can be done without her involvement, because it's she who has to make the decisions.' . . . They never do anything without asking me first and if I say that I don't want this or that, they will listen to me.

The perceptions of a 13-year-old girl contrasted strongly with those of the girl mentioned earlier. She had attended RT conferences for many years, yet described everyone but herself as actively participating and that she simply did not think she was allowed to make objections in the conferences.

A boy, aged 15, found that active participation is more than being present and allowed to speak in RT conferences. He brought up the importance of good communication and communicative skills:

> To make it work it takes people that I *can* talk to.

He had experienced that good and unstrained communication between himself and the professionals was necessary, although not a matter of course.

Another boy, aged 15, found it very difficult to participate when he '*knew* that the professionals did not *listen*' to him. He was asked whether he had ever tried to suggest how his situation could improve.

> . . . only the others made suggestions. I've really not bothered suggesting much, because the few times I actually did say something, they never listened to what I said. Or, they've listened, but they haven't *done* anything about what I've said.

This boy called for action, confirming that he was heard and allowed to have influence. He commented that because the professionals did not listen to him, he decided not to listen to them.

The adolescents had views about who should be included in the RT conferences, but they expressed stronger opinions about who they would like to exclude. Some of them said that they disliked their teachers' attendance at the RT conferences and that, as a result, the teachers were more informed about their lives than they wanted. One boy did not manage to stop his teachers from attending the RT conferences and decided not to attend when the teachers were present. The other boy in this study had decided to withdraw and not attend the RT conferences anymore at all:

> I mean, actually, that they can just go on as they want . . . even though I'm so much against it . . . because I'll hear from my mum what happened and what they've said. So, if they've said something which is wrong, something that I don't agree with, I'll go to them the next day and tell them 'that is completely wrong' . . . but, then it'll already be recorded by the Child Protection and all those sort of things, so . . . I'm tired of all the fuss.

During the interview, this boy became aware that he held strong opinions about his RT, although he had never perceived himself to be very reflective. He said that he was not used to his opinions being of interest to anyone. Thus, when the researcher asked for his perception, all his thoughts came out at once. Towards the end of the interview, he came to a turning point in his mind-set. He regretted that he had withdrawn and wished that he had shared his opinions in the RT conferences.

TRUST – DISTRUST

Not all the adolescents in this study trusted the RT or individual RT members, but those who did emphasized trust as a core issue for their own participation. One girl described a deep and trusting relationship with her social worker and spoke about her as one of the reasons that her RT became a success:

> I like everyone there and I like it very much in my RT. I'm close to all of them, in a way. . . . I think they'd listened less to me if it wasn't for XX . . . I think they'd still try to do the best for me, but not the same way.

This trusting relationship with one powerful professional led on to general trust in the entire RT. It had been important for her trust-building to experience that the RT members kept their promises and that they did not break confidentiality.

Another girl, aged 15, who described that her situation had improved after the RT was established, perceived herself as having a trusting relationship to a street unit social worker. This professional participated in her RT, but was not the chairperson or the coordinator; although the girl would have preferred this:

> It would've been better if I knew the leader of the conferences. . . . It'd been better if YY was the chair . . .

A boy, who did not trust the RT as a whole, described a trusting relationship with his therapist. He mentioned her as 'the only professional who has ever listened to me'. She was an RT member but not a chairperson or coordinator.

One girl described what helped her to change from a sceptical to a trusting attitude towards some social workers:

. . . the first time I was here [street unit's locations] I was very sceptical and almost wouldn't go there, because I thought I was asked so many questions all the time. . . . Why would it be helpful to them that I answered them and so on . . . ? I barely knew them, but when I did get to know them, I understood a little more about why and then it went along much better.

Trust-building takes time (Cossar *et al.* 2013). The girl started out 'very sceptical' but moved on gradually to establishing a trusting and productive relationship with the professionals, as the necessary time was invested in building such relationships. She said that unless adolescents know and trust the professionals, they will not get honest answers to their questions.

Trust was mentioned as a necessary building block for achieving useful collaboration between adolescents and professionals. The boy mentioned earlier who distrusted his RT described the professionals' activities as attempts to control him:

. . . they try to control my life, how I'm going to develop and who I'd be with. I've heard that they've been talking shit about my friends to my mother and other pupils. . . . 'You mustn't hang out with them, because they're dangerous. . . . They have a bad influence' . . . on me . . . even though it's them [his friends] who best understand my life situation.

Having concluded that the professionals were seeking to control him and separate him from his friends, this boy did not believe that they actually wanted to listen to his opinions.

He explained that he almost felt as if he were being kept under surveillance by his helpers and that they passed on information to other professionals without his permission.

. . . I have some teachers and they . . . included the principal . . . they engage so very much in my private life . . . could think they sat outside my window watching . . . and wrote everything down and reported it in the next conference. And they say so much . . . rubbish! If I'm bored at school or fall asleep or am angry, they go to the principal and tell him that I'm depressed. Then, he goes to the child protection. . . . Then there'll be lots of meetings and they intend to find out why I'm depressed and why I'm so angry and all that . . . even if it's just private things that've happened, which they shouldn't have anything to do with.

This boy felt lied about and wrongly accused. He distrusted the professionals who had been appointed to be his helpers.

USEFUL – NOT USEFUL

With only one exception, the adolescents in this study perceived that the RT had somehow been useful. A

girl, who was very satisfied with the help and support she received, perceived her RT as constantly improving. She described a positive turning point in the work of her RT:

At first, I didn't think it was very useful, but after four times or so, I saw that things developed a lot. It is very different from the first time . . . they write down everything that has been said and things . . . We propose suggestions for action in every conference, which must be accomplished by the next conference. It has helped me quite a lot . . . It has just become better and better. The conferences, earlier, I thought they were pointless, but now I think they very much have a point and I've improved a lot in many ways.

Another girl said that she was not quite sure *how* the RT had been useful to her. She did not like to attend the RT conferences, but after some moments of reflection she said:

. . . but things *do* go better because of these conferences.

One boy did not describe his RT as useful, but he appreciated the RT's decision about providing him a therapist:

No, I don't think that I need help from anyone. I do talk with PP . . . [therapist] and I've always done that if I had something I needed to talk about . . . and then she has told me what to use to help and how I can forget things that've happened . . . And that has usually helped.

This boy had experienced his therapist's advices as helpful and had appreciated talking to her. The other boy in this study also perceived talking to his therapist as particularly valuable. Both of them would prefer the NCWS to end their involvement with them and their families, but they wanted to continue the conversations with their therapists.

Some adolescents perceived that RT decisions intended to improve their situation had sometimes affected them negatively.

. . . it's extremely boring compared to those who are in the normal Norwegian class . . . they always have fun and . . . So, I sort of regret that I joined that special class, though . . .

The boy had participated in RT decision-making about taking special classes, but he disliked it there and missed the normal classes. He was also unhappy with some other RT decisions, but he still perceived the RT to be useful in many ways.

Turnover among case workers, who were also chairpersons, was something regretted by some of the adolescents. The fact that they had to open up and explain difficult things about their life for constantly changing professionals was perceived as difficult.

One of the boys found the RT less useful than the other adolescents. According to him the conferences

were 'just talk', little was done to improve his situation. He was just looking forward to the RT to be ceased and perceived the RT to be an impediment to his well-being.

DISCUSSION

In this study, the adolescents' perceptions about the usefulness of RTs seem to coincide with perceptions about participant power and the degree to which they really participate, as well as their perceptions about trusting professionals.

Effective participation – facilitating factors and impediments

In line with several studies (Omre & Schjelderup 2009; Vis & Thomas 2009; Gallagher *et al.* 2012), the adolescents in this study saw participation as inextricably linked with their ability to have some power over the decisions taken about them. Seeking to increase effective participation, where children are enabled to influence decisions, is important because it has the potential to improve their outcomes, health, safety and well-being (Vis *et al.* 2011).

One significant factor for the achievement of effective participation is that a trusting relationship between the child and a professional is developed (McLeod 2010; Buckley *et al.* 2011; Vis *et al.* 2011; Gallagher *et al.* 2012; Cossar *et al.* 2013). Such relationships seem to counteract negative perceptions about being involved with the child protection system (Buckley *et al.* 2011). Our study supports these findings and suggests that one trusting relationship may lead to a more general trust in the RT. Importantly, trust is a prerequisite for achievement of fruitful collaboration and the benefits associated with it (Vangen & Huxham 2009).

One girl in our study described being very sceptical, but as a trusting relationship developed over time, the girl developed a general trust in her RT. Furthermore, she said that she would not necessarily turn down demanding suggestions from her RT because it could be something that she felt she ought to do. This may indicate a feeling of commitment and partnership with the professionals (Thoburn *et al.* 1995; Omre & Schjelderup 2009; Woolfson *et al.* 2010).

Drawing on Honneth's (2008) theory about recognition, this girl seems to have increased her self-confidence through love from her social worker, which enabled her to participate. She experienced recognition by being allowed to participate in accordance with her legal rights (UNCRC, article 12 and NCWA §6-3), which may have contributed to her feeling of self-respect. The RT recognized her through solidarity. They saw her as an RT member with valuable contributions, which may have contributed to her feeling of self-worth. Experiences of recognition through love, right and solidarity is vital for development of self-esteem, which is of great importance for a person's participation in the society (Honneth 2008). This girl's experiences of recognition and possibly self-realization may have positive impact on how she fares in future life.

The most disappointed adolescent in this study felt injured and that the RT members did not care about him, but despised him. They had breached confidentiality and violated his legal rights, which resulted in that he distrusted his appointed helpers. In response, he chose to withdraw from the RT conferences, although he initially wanted to participate. His experiences may have harmed this boy's self-confidence, self-respect and self-esteem and may negatively impact how he fares in life (Honneth 2008). This example emphasizes the importance of the collaborating professionals' genuine respect for the service user and his or her rights and the RT's recognition of him or her as a partner, in conformity with their recognition of the professional RT members. RTs without respect for and recognition of the service user might as well be perceived as conspirators against the service user.

Interestingly, and in line with writings of Kvale & Brinkmann (2009) about potential effects from interview processes, the interview for this study seems to have had a consciousness-raising effect on this boy, who was not aware that he had so many opinions of his own. He was not used to being asked. His reflections during the interview resulted in that he regretted his withdrawal from his RT. In the debate about children's participation, the point has been made that some children choose *not* to participate. We have to agree with McLeod (2007), that when children choose not to participate, one should take a closer look at reasons for their decision and explore other ways to involve them.

Trusting relationship increases likelihood of effective participation

The significance of a trusting relationship between a child welfare worker and the child seems to be well documented, although it does not seem to be the

most common practice. Several studies have added to the knowledge about what it takes to build a trusting relationship, which should be built on empathy, helpfulness, openness and willingness to listen (Maiter *et al.* 2006; De Boer & Coady 2007). Trust-building is time consuming (Cossar *et al.* 2013) and lack of time is often a problem in child welfare services (McLeod 2010). Importantly, child welfare workers should be ensured enough time and resources for this vital part of their work. Good communication skills should be ensured by training and guidance (Vis *et al.* 2012).

Successful participation involves encouraging and supporting children to express their views (Healy & Darlington 2009). The girl referred to earlier also perceived that her social worker helped her to draw the RT's attention to her as the key person. In this case, the social worker was also the coordinator and the chairperson in the RT conferences. These powerful positions may have enabled her to get the other professionals' support when she introduced the girl as the key person and allowed for her extensive participation. The point here is not the social worker profession because the effect would probably have been the same if the trusted professional held a different profession, but possessed the same powerful positions and empowered the girl as the social worker mentioned did.

The disappointed boy also described a trusting relationship with an RT member, his therapist, but, in contrast to the example earlier, this does not seem to have influenced his relationships with other RT members. A point might be that the therapist did not possess any powerful positions in the RT.

What this study adds to the knowledge about trust-building relationships is the potential benefit of the trusted professional having a powerful position in the RT. Trusting relationships and provision of participant power seem to be prerequisites for achievement of effective user participation for vulnerable adolescents in RTs.

Providing the adolescent with sufficient information and transparency in decision-making processes are important (Healy & Darlington 2009; Gallagher *et al.* 2012). The youngest girl in this study had attended RT conferences for years, but did not know about her right to make objections in the conferences. This reflects a lack of information and violation of her rights, which may appear to harm her and her relationship to the RT (Honneth 2008). Such 'participation' may only serve as decoration (Omre & Schjelderup 2009).

RT – one possible way to achieve effective participation

Vis & Thomas (2009) found that, compared with those who only participated through individual consultations with a case manager, the odds of a child participating effectively was more than tripled if they attended a meeting and by many more times if they attended two or three. They suggest that if children's views are to be taken fully into account, participation may need to be facilitated as a process that may involve a series of meetings and consultations. In order to gain the potential benefit of children's effective participation, it is necessary to find ways to engage children in decisions that are affecting their lives (Vis *et al.* 2011). We suggest that an RT may constitute one such way of participation, if a trusting relationship is built between the adolescent and a professional who has a powerful position in the RT, preferably the chairperson.

Entering the positive circles of participation, as exemplified by the girl in our study, may be a good way to achieve adolescents' participation. However, it is equally important to avoid or change the negative circles of participation as demonstrated by the boy.

Methodological considerations

Content analysis was used to analyse the data in this study, the aim of which was to explore adolescents' perceptions about their participation in RTs. The categories active in decision-making – withdrawal, trust – distrust and useful – not useful were found to embrace the adolescents' perceptions. This study has limitations, such as the small number of participants. The findings cannot be generalized, however, this study, when read alongside the other studies referred to, contributes to a developing knowledge base for child welfare practice. There are reasons to believe that the generated knowledge is of transferability value to similar contexts (Guba & Lincoln 1982).

IMPLICATIONS FOR THEORY AND PRACTICE

This study has explored vulnerable adolescents' perceptions of the Norwegian 'responsibility team' approach to children's participation through seeking their perceptions and enabling them to talk about their experiences. Our study supports previous

research and adds to the still small body of knowledge. We suggest that an RT may constitute one way to effective participation, based on some conditions:

- Trusting relationship between adolescent and a professional possessing a powerful position in RT.
- Facilitate adolescent's participation in all RT processes and conferences.
- Focus the adolescent's views.
- Professionals have good communication skills.
- Adolescent is provided with all the information needed for effective participation.

A larger study will be carried out, aiming to reveal more nuances and shared viewpoints within vulnerable adolescent's perceptions about participation in RTs.

ACKNOWLEDGEMENTS

REFERENCES

Axelsson, S.B. & Axelsson, R. (2009) From territoriality to altruism in interprofessional collaboration and leadership. *Journal of Interprofessional Care*, **23** (4), 320–330.

Buckley, H., Carr, N. & Whelan, S. (2011) Like walking on eggshells': service user views and expectations of the child protection system. *Child and Family Social Work*, **16** (1), 101–110.

Cashmore, J. (2011) Children's participation in family law decision-making: theoretical approaches to understanding children's views. *Children and Youth Services Review*, **33** (4), 515–520.

Cossar, J., Brandon, M., Bailey, S., Belderson, P., Biggart, L. & Sharpe, D. (2013) 'It takes a lot to build trust'. *Recognition and Telling: Developing Earlier Routes to Help for Children and Young People*. Office for Children's Commissioner, London.

De Boer, C. & Coady, N. (2007) Good helping relationships in child welfare: learning from stories of success. *Child and Family Social Work*, **12** (1), 32–42.

Gallagher, M., Smith, M., Hardy, M. & Wilkinsion, H. (2012) Children and families' involvement in social work decision-making. *Children & Society*, **26**, 74–85.

Gilbert, N., Parton, N. & Skivenes, M. (2011) *Child Protection Systems. International Trends and Emerging Orientations*. Oxford University Press, New York.

Graneheim, U.H. & Lundman, B. (2004) Qualitative content analysis in nursing research: concepts, procedures and measures to achieve trustworthiness. *Nurse Education Today*, **24** (2), 105–112.

Guba, E.G. & Lincoln, Y.S. (1982) Epistemological and methodological bases of naturalistic inquiry. *Educational Communications & Technology Journal*, **30** (4), 233–252.

Healy, K. & Darlington, Y. (2009) Service user participation in diverse child protection contexts: principles for practice. *Child and Family Social Work*, **14** (4), 420–430.

Honneth, A. (2008) *Kamp Om Anerkjennelse: Om De Sosiale Konfliktenes Moralske Grammatikk*. Pax, Oslo.

Kvale, S. & Brinkmann, S. (2009) *Interviews: Learning the Craft of Qualitative Research*. Sage, Thousand Oaks, CA.

McLeod, A. (2007) Whose agenda? Issues of power and relationship when listening to looked-after young people. *Child & Family Social Work*, **12** (3), 278–286.

McLeod, A. (2010) A friend and an equal': do young people in care seek the impossible from their social workers? *British Journal of Social Work*, **40** (3), 772–788.

Maiter, S., Palmer, S. & Manji, S. (2006) Strengthening social worker-client relationships in child protective services. *Qualitative Social Work*, **5** (2), 167–186.

Malterud, K. (2003) *Kvalitative Metoder I Medisinsk Forskning – En Innføring*. Universitetsforlaget, Oslo.

Mead, G.H. (2005) *Sindet, Selvet Og Samfundet: Fra Et Socialbehavioristisk Standpunkt*. Akademisk Forlag, København.

Omre, C. & Schjelderup, L. (2009) Barn i barnevernet – en studie om barns deltakelse og styrkeprosesser i familieråd. Trondheim: Tapir Akademisk Forlag.

Patton, M.Q. (2002) *Qualitative Research and Evaluation Methods*. Sage, Thousand Oaks, CA.

Skivenes, M. & Willumsen, E. (2005) Brukermedvirkning i barnevernets ansvarsgrupper. In: *Brukernes Medvirkning!* (ed. E. Willumsen), pp. 94–111. Universitetsforlaget, Oslo.

Slettebø, T., Oterholm, I. & Stavrum, A. (2010) Brukermedvirkning i det statlige regionale barnevernet RAPPORT 2010/3.

Thoburn, J., Lewis, A. & Shemmings, D. (1995) *Paternalism or Partnership? Family Involvement in the Child Protection Process*. H.M.S.O., London.

United Nations (1989) *Convention on the Rights of the Child*. Available at: http://www.ohchr.org/Documents/ProfessionalInterest/crc.pdf (accessed March 2014).

van Bijleveld, G.G., Dedding, C.W.M. & Bunders-Aelen, J.F.G. (2015) Children's and young people's participation within child welfare and child protection services: a state-of-the-art review. *Child & Family Social Work*, **20**, 129–138.

Vangen, S. & Huxham, C. (2009) En teoretisk forståelse av samarbeidets synergi. In: *Tverrprofesjonelt Samarbeid I Praksis Og Utdanning* (ed. E. Willumsen), pp. 67–87. Universitetsforlaget, Oslo.

Vis, S.A. & Thomas, N. (2009) Beyond talking–children's participation in Norwegian care and protection cases: Ikke bare snakk–barns deltakelse i Norske barnevernssaker. *European Journal of Social Work*, **12** (2), 155–168.

Vis, S.A., Strandbu, A., Holtan, A. & Thomas, N. (2011) Participation and health–a research review of child participation in planning and decision-making. *Child & Family Social Work*, **16** (3), 325–335.

Vis, S.A., Holtan, A. & Thomas, N. (2012) Obstacles for child participation in care and protection cases – why Norwegian social workers find it difficult. *Child Abuse Review*, **21** (1)**,** 7–23.

Warming, H. (2011) Children's participation and citizenship in a global age. Empowerment, tokenism or discriminatory disciplining? *Social Work & Society*, **9** (1)**,** 119–134.

Willumsen, E. & Severinsson, E. (2005) Parents' collaboration and participation in a residential child care setting. *International Journal of Child & Family Welfare*, **8** (1)**,** 19–31.

Woolfson, R.C., Heffernan, E., Paul, M. & Brown, M. (2010) Young people's views about the child protection system in Scotland. *British Journal of Social Work*, **40,** 2069–2085.

Paper II

Combining a Naturalistic and Theoretical Q sample

Approach: An empirical research illustration

Combining a Naturalistic and Theoretical Q Sample Approach: An Empirical Research Illustration

Siv Elin Nord Sæbjørnsen
Molde University College

Ingunn T. Ellingsen
University of Stavanger

James M.M. Good
Durham University, UK

Atle Ødegård
Molde University College and University of Stavanger

Abstract: An important step in any Q-methodological study is the identification of the concourse and the development of the Q set. Inspired by the writings of William Stephenson (1953) and Steven Brown (1980) about the development of the Q set, we illustrate how two different approaches to Q sampling, naturalistic and theoretical, may be combined. We draw on examples from a Q study scrutinizing adolescents' subjective viewpoints about collaboration and participation in interprofessional teams. The example is used to illustrate how naturalistic and theoretical approaches to Q sampling may be combined in the same research design. The Concourse Box is introduced as a new tool to help visualize these joint contribution

Introduction

Q-methodological studies aim at exploring patterns of shared subjectivity. Based on the concourse theory of communication (Stephenson, 1978), the participants are asked to relate themselves to a set of statements concerning the research topic by sorting them into a matrix of columns (Q-sort grid) ranging from most like to most unlike their situation or some other condition of instruction. By completing a Q sort the participants reveal their subjective points of view (McKeown & Thomas, 2013). Therefore, it is essential that the set of statements is well-suited to the Q-sorting task and the research objective. Yet, the identification of the concourse and the process of Q sampling from it, is seen by some researchers as one of the most demanding parts of the Q methodological research process (Brown 1991/1992; Ellingsen, 2011).

Researchers have found that Q methodology is particularly suitable for research with children and others who tend to be excluded from participation in research (Ellingsen

et. al., 2014; Størksen et. al., 2011; Brown 2006). An important reason for this is that Q methodology facilitates the detection of weak voices; hence, researchers that have a special interest in empowerment have adopted the method (Brown, 2006). The main contribution of this paper is to consider the methodological challenge concerning the relationship between the concourse and Q sampling that arises in such contexts of "weak voices" and to present an approach that has been shown to help address this challenge. We illustrate how naturalistic and theoretical approaches to Q sampling may be combined in a way that helps participants to express themselves about complicated topics. Briefly, 'naturalistic Q sampling' refers to processes of finding and gathering potential Q-set items, such as statements, from naturally occurring subjective viewpoints about the topic of interest expressed in newspapers, everyday conversations, interviews, or the like. From a sample of such statements, a representative Q set may be derived using either a theoretically structured frame or the researchers' own judgements of representativeness. "Theoretical Q sampling" refers to processes that seek to find, build or construct statements based on some theory. The Q sampling in our illustration combines these two sampling strategies. Items were predominantly drawn from natural expressions but some theoretically constructed items were added to enrich the Q-set.

In the remainder of this paper, we a) describe and illustrate naturalistic and theoretical sampling, b) introduce the concourse box, which is a visualisation of a combined Q-sample approach, c) discuss advantages and disadvantages of combining a naturalistic and a theoretical Q-sample approach, focusing on how the rationale behind the concourse box may facilitate a well-balanced Q set when seeking deeper and systematic insight into viewpoints of vulnerable groups of participants.

Q methodology and Subjectivity

When William Stephenson developed Q methodology, he aimed at a procedure tailored to the scientific investigation of subjectivity (Stephenson, 1953). The emergent subjectivity, "unsullied" by any expert interpretation, constitutes the data that is made available for investigation. Stephenson (1953) saw subjectivity as behaviour, behaviour that spontaneously exists and is not just a response to a "test" (Brown 1980). This behaviour is subjective in terms of being experienced by "me", and of psychological significance to "me". Subjectivity manifests itself in notions and dialogues, in which it can be scientifically studied by others (Wolf, 2010).

Concourse

In Q methodology, the concourse theory of communication (Stephenson, 1978) is central. Stephenson's concourse theory generalizes what he had previously referred to as "universes or populations of statements" (Stephenson, 1953). As he puts it: "Subjective communication is grounded, theoretically, in statistical quantities of statements about a situation" (Stephenson, 1980, p. 23). Brown (1991/1992, p. 3) later described concourse as the flow of communicability surrounding any topic and McKeown and Thomas (2013) have referred to it as the communication of subjectivity. A concourse contains communication about all possible aspects that might surround a topic (Ellingsen, Størksen, & Stephens (2010). These elaborations of the notion of concourse indicate that the borders of a concourse are not absolute or distinctly defined. That said, being clear about the research topic and to whom it relates helps the researcher to sketch in the boundary of the concourse.

According to Stephenson (1980) the concept of concourse stems from the Latin concursus and is rooted in the original meaning of the word "conscious", a word whose

meaning has changed over the centuries. The concept "conscious of" is a modern word and has a meaning different from the original conscius, which meant to know (something) together with (someone). Stephenson also introduced the notion of conscirring, as a general theory for subjective communicability (Stephenson, 1980). The word consciring stems from scio and con, meaning "know" and "with". The notion of consciring relates to the sharing of knowledge. For Stephenson, then, communication is rooted in self-reference, is communicable and can be expressed orally or through visual images or other possible manifestations of meaning (Brown, 1991/1992; Stephenson, 1978; Thorsen, 2006). Furthermore, all subjectivity is rooted in common knowledge and is sharable:

> ...all subjectivity is rooted in conscire, in the common knowledge, the shareable knowledge known to everyone in a culture. The sharing is what should have been called consciousness, and it meant merely being communicable in common. (Stephenson, 1980, p. 15)

However, common knowledge, as quoted above, does not mean that everyone has to share the same view in order to be able to understand (Brown, 1991/1992). According to Brown (1991/1992) when relating to an issue, we may very well have a broader understanding of the theme, regardless of our views or opinions about the topic. However, if common knowledge is lacking, reflecting upon and sharing opinions about a topic will also be limited. The notion of concourse as embracing all possible aspects surrounding a topic means that it is impossible to grasp a concourse in its entirety (Stephenson, 1978). Therefore, it is important to balance the need to identify a concourse that delimits the "common knowledge" of interest, and at the same time recognising that such bounding can only be approximate.

Q sampling

In the literature there is a confusing variety of terms and discussion relating to approaches to making a set of items for Q sorting, thus we begin with clarifying our terms. We find it fruitful to make a distinction between identifying a concourse and developing a Q set[1]. Identifying a concourse may be understood as delimiting the research topic, often by elaborating its main themes or components. Developing a Q set refers to practices that establish a large number of statements from which the Q set subsequently will be drawn and the steps entailed in creating that Q set. Thus, in our usage, Q sampling refers to the combined activities entailed in developing a Q set, including the important step of reducing a large number of statements to a manageable number. In the Q-sampling process, the researcher will often face a relatively large number of statements, as many as 200 or more, which need to be reduced to between 40 and 80 (Ellingsen, 2011; Watts & Stenner, 2012). The number of statements included in the Q set will depend on the research topic as well as the participant group. It is important that the final Q set comprises statements that may reflect the participants' subjective views and that it adequately represents the identified concourse of the research topic.

When identifying the concourse, a common approach is to interview people who have knowledge of or experience with the research topic, as this can help to set the fuzzy borders described above. Every statement included in the Q set must be

---

[1] From here on we will use "statements" as a description of items in a Q set, while bearing in mind that items may be images or other items.

formulated in a way that the participants subjectively can relate to; in other words, it must stimulate self-reference. When generating the statements for the Q set, it is advisable to retain the everyday language that is familiar to the participants doing the Q sorting. This makes it easier for the participants to make an immediate response to the statements when sorting them. Thus, when developing the concourse as part of Q sampling, other sources may also be used, such as newspapers, literature and everyday talk.

It should be possible for each participant to relate differently to each statement based on the psychological significance it may have for them, often referred to as the scalability of the statements (Watts & Stenner, 2012). For example a statement such as "I like to attend case conferences", which is used in a study about how adolescents with complex social needs experience interprofessional collaboration, may be rated anywhere from strongly positive to strongly negative by different participants, since taking part in such conferences has a different psychological significance for each participant. In addition to variations in the ranking, the reasons for high (or low) psychological significance may also vary. A factual statement, on the contrary, will usually lack the scalability needed. For example, a statement such as "A case conference is a meeting" or "I attend case conference meetings" will be difficult to rate in accordance with the participants' subjective views because of its factual, either/or character.

The Q set is extracted from the concourse and should constitute the essence of the concourse. However, in order to represent the concourse adequately, the Q set needs to be heterogeneous, while at the same time retaining some degree of homogeneity (Stephenson, 1953; Brown, 1980). A carefully delimitation of the identified concourse aims at a Q set that covers the concourse in a balanced way (Watts & Stenner, 2012), and where all statements retain a common currency. This means that the Q set should grasp the width as well as the depth of the subject delimitation matter under exploration. It needs to be homogeneous in the way that it relates to the topic or subject at hand. At the same time, heterogeneity is required in order to grasp as many different aspects as possible within the concourse in order to make it possible for participants to elicit their perspectives through the Q sorting procedure.

Fisher's balanced block design

Stephenson (1953) introduced Fisher's balanced block design (FBD) as a helpful tool for Q set selection, a tool which has been used in many Q studies since then. For example, Brown (1980) referred to a study by Reich (1971) when he explained the application of FBD as a means to facilitate Q set selection. In Table 1 two main effects in Reich's design, A (consciousness) and B (values) are used to ensure full coverage in the selection of statements, Main effects A and B have, respectively, three levels a), b), c) and d), e), f). The total number of possible combinations is nine. In Table 1 we illustrate the nine combinations as nine cells, based on the main effects A and B and levels a) to f).

According to Stephenson (1952, p. 223) a Q sample "may be designed purely on theoretical grounds, or from naturally-occurring (ecological) conditions, or as required for experimental purposes, to suit the particular requirements for an investigation". In

Table 1: Effects and Levels – 9 Combinations

itself, applying FBD may be seen as using theory in order to structure the Q-sampling process. Kvalsund and Allgood (2010) applied FBD in a pure theoretical Q-sampling approach in a study about teachers' experiences with communication. They developed the effects and levels on the basis of the theories of authors such as Mead (1934), Buber (1965/1988, 1965/2002) and Giddens (1991). Their design resulted in 12 possible combinations and constituted a theoretical starting point for Q sampling and also a structure to balance the sample, from which the researchers constructed three statements in each of the 12 cells, giving a total of 36 statements in the final Q set. These 36 statements were *built* by the researchers, and solely based on the theory they had used for the development of the effects and levels.

Another example is provided by Ellingsen et al., (2011), who conducted a study on family perception among children in foster care. The researchers collected naturalistic statements from interviews with foster children and their carers. Hence, the statements included in the Q set were *found* in the interview texts. Moreover, inspired by the FBD, the authors prepared a scheme based on a horizontal and vertical categorisation of central themes that appeared to them in the interviews in order to facilitate a representative Q set selection (Ellingsen, 2011). When all the possible statements from the interviews were sorted into crossing categories, the statements for the Q set were selected. This procedure resulted in a reduction of 246 statements to a set of 39 statements to represent the concourse.

Both of the empirical examples presented above aimed at using FBD-inspired sampling designs to capture the full diversity of the Q sample that at the same time ensured that all statements retained common "membership" in the concourse. There are clear merits in both approaches. On one hand, a theoretical approach may be beneficial when the researcher aims at exploring how theoretical perspectives bear resemblance to the "lived" world of Q sorters, or when theory may help the participants to express themselves about complex themes. A naturalistic approach using found statements, on the other hand, has the advantage of using language that is familiar to the Q-sorters and may capture important themes in the concourse that theories do not. Such statements pick up aspects of the subject that may not "fit" theories, but are relevant to the interviewees. However, we suggest that when applying a combined approach, the study may benefit from advantages associated with both the approaches described.

A combined Q sample approach: An empirical research illustration

In a project focusing on subjective viewpoints of adolescents who were in need of complex health and social services about their participation in inter-professional teams, naturalistic and theoretical sampling were combined (Sæbjørnsen & Ødegård, in progress). In this article, we describe the methodological approach used in the study, and introduce the Concourse Box to illustrate the development of the Q set (see Figure 1).

In Norway, collaboration teams are often established to coordinate and support the provision of services to users with complex needs (Sæbjørnsen & Willumsen, 2015). The team meet together regularly in conferences addressing issues in order to improve the person's situation (Kinge, 2012), but communication between team members also occurs between conferences when appropriate. In the example study, the collaboration team that formed around each individual adolescent consisted of a group of different professionals, non-professionals and the adolescent. Examples of non-professional members of the team are parents, foster parents and significant others in the adolescent's life.

The empirical research illustration is based on a study with adolescents, aged 13 to 18, who had experienced participation as service users in collaboration teams. When adolescents participate in collaboration teams, they acquire experience of what it is to be service users and they also engage in collaboration processes with the other actors present. In this regard, adolescents' subjective viewpoints about what is going on in these meetings are important since collaboration in interprofessional teams often is encumbered with high complexity and members of the team may emphasize different aspects of collaboration while interacting (Ødegård, 2006; Strype, Gundhus, Egge, & Ødegård, 2014). It is particularly important to grasp the adolescents' perspectives as they may find it more challenging to express their views in such constellations of professionals and other actors.

The naturalistic contribution to the concourse

In preparation for the generation of the Q set for the study of adolescents' subjective viewpoints about their participation in the collaborative team, five adolescents with such experiences were interviewed. The interviews were semi-structured and explored their experiences with and participation in the collaboration team, and the team process. The transcribed interview texts showed the rough boundaries of the concourse, while also providing a total of 258 statements from that concourse.

Many of the statements were about the adolescents themselves, but also about other participants in their collaboration team, such as their parents or professionals representing different services and also about the collaboration team as a whole. They expressed views about their experiences, feelings, beliefs, expectations and their concerns. These expressions formed the basis for the development of an FBD-inspired scheme, which aimed at facilitating the selection of the final Q set. In the two-dimensional scheme, the horizontal dimension of the scheme was divided into three categories concerning *whom* the statement was about or was relating to: *A) me* (the adolescent), *B) others* (one or several of the other team members) or *C) the collaboration team* (the team as a whole).

The vertical dimension comprised four categories: *D) structure*, *E) process* and *F) result* and *G) miscellaneous.* The categories stem from Avedis Donabedian's classical model for the evaluation of the quality of medical care from 1966 (Donabedian, 2005). The quality dimensions in this model – structure, process and outcome – may, according to Ahgren (2007) and Øvretveit (1998), be illuminated through the perspectives of leadership,

profession and service users. Because these quality dimensions are relevant to interprofessional collaboration (IPC) as well as to service-user participation, they were used in order to define the categories for the vertical dimension in the concourse. The only alteration was that "outcome" was replaced with "result", which is in line with Ahgren's (2007) use of Donabedian's model. Drawing on Donabedian's (2005) model in the selection of the Q set is also a use of theory. However, it was at this point only used to categorise naturalistic statements found in the interviews and not for constructing or building statements. A fourth miscellaneous category (G) was added, as some statements fell outside the other categories but were still relevant to the topic and merited inclusion as part of the concourse. These statements were more multifaceted and touched on several additional themes, each of which contained very few statements. It was considered appropriate to gather these statements in one category rather than develop several new categories containing fewer statements.

The 258 statements were subsequently categorised into the scheme as illustrated in Table 2. None of the statements that emerged in the interviews was at this point excluded.

Table 2: FBD-Inspired Categorization Scheme

	A Me	B Others	C Collab. team
D Structure	30	38	17
E Process	43	43	37
F Result	5	6	15
G Misc.	24		

Table 2 illustrates how the intersecting of themes that emerged in the interviews constituted the primary step in identifying and ensuring representation in the Q set of the naturalistic elements of the concourse. A naturalistic approach was important because the aim for the study was to explore the adolescents' experiences, and therefore it was crucial to let their voices be the primary source for the Q set. Their statements capture perspectives available in the concourse that are important and which may not be reflected in theories. Furthermore, statements in a natural voice can help the researcher

to adapt language and the use of concepts in the final Q set to make it easier for participants to associate with.

The number of selected naturalistic statements by category is illustrated in Table 3:

Table 3: Selection of Empirical (Natural) Statements

	A Me	B Others	C Collab. team
D **Structure**	3/30	4/38	3/17
E **Process**	4/43	4/43	4/37
F **Result**	4/5	3/6	2/15
G **Miscellaneous**	6/24		

As illustrated in Table 3, the numbers of the selected statements vary in the different categories. Furthermore, the 258 statements were reduced in the usual way – avoiding overlaps and opposites, and aiming for similar numbers in each cell, which resulted in a set of 37 statements.

The theoretical contribution to the concourse

Theory may have the potential to complement a naturalistic sampling. We do not intend to suggest that theory should overrule the adolescent's reflections upon the topic, but complex issues may be difficult to articulate. Theory can point to matters of complexity that are missing from the naturally-voiced statements. Hence, employing a theoretical approach as a second step has the potential to fill in nuances in the concourse, and thus better enable the adolescent Q sorters to provide their views.

In an attempt to supplement and enrich other aspects of interprofessional collaboration (IPC) in the concourse, we searched for relevant theoretical input from the IPC literature. There are several IPC models in the literature (Leathard, 2003), however, PINCOM (Perception of interprofessional collaboration model) was chosen because of its conceptual character offering an overview of different aspects considered important to professionals' perception of IPC. Originally, PINCOM was developed to include aspects of collaboration on individual-, group- and organizational level (Ødegård, 2006). As our study seeks knowledge about participation in collaboration teams, we preferred a modified version of PINCOM where the organizational level is left out (cf. Strype et al., 2014), The modified version include twelve collaboration aspects, four individual aspects and eight group aspects (see Table 4). These were used to supplement the concourse identified through a naturalistic approach (see Table 3).

In order to achieve a balanced Q set (Brown, 1980, Kvalsund & Allgood, 2010), a relatively equal representation of the 12 collaboration aspects was aimed for. This procedure involved using the list of the 12 collaboration aspects in order to examine if these aspects could be associated with or were mirrored in the 37 selected statements.

A naturalistic statement such as "I believe that all persons present in the RT conferences [collaboration team conferences] are genuinely interested in my opinions" from category A/E (me/process) was associated with the IPC aspect called "social support". However, the naturalistic statement "I know that I may participate a lot in the decision making if I want to" also from category A/E (me/process) was associated with both "power" and "social support". Some of the selected statements were associated with several of the listed collaboration aspects. This explains why the total number of times IPC aspects are represented in naturalistic statements, as shown in Table 4, is higher than total number of selected statements presented in Table 3. As shown in Table 4 the "Personality Style" and "Group Leadership" aspects seemed to be underrepresented among the selected statements.

Table 4: List of the 12 Collaboration Aspects – Representativeness in Selected Naturalistic Statements

	12 collaboration aspects	Representation in selected naturalistic statements
1	Motivation	5
2	Role expectancy	4
3	Personality style	
4	Power	16
5	Group leadership	1
6	Coping	8
7	Communication	11
8	Social support	14
9	Group culture	11
10	Group aims	9
11	Group domain	5
12	Group environment	6

The underrepresentation of the PINCOM aspects "Personality Style" and "Group Leadership", may be seen as constituting a theoretical gap in the selected naturalistic statements. Attempting to fill this gap in the Q set, five new statements that included these two IPC aspects were constructed for the categories that consisted of less than four selected statements (A/D, B/F, C/D and C/F, see Table 3). The researchers aimed at phrasing the constructed statements as naturally as possible, in order to harmonize with statements articulated by the participants. For example, in order to include the IPC aspect

"personality style", the following statement were constructed : "To achieve good results, I think it is more important that I like their personality than that they are skilled professionals". This statement was categorised as a B/F (others/result) statement. Only one statement was associated with "group leadership", hence the statement: "I think the meetings would have been better if I was the chairperson" was constructed.   This statement was categorised as an A/D (me/structure) statement.

Altogether, five statements were theoretically constructed for the Q set and the total number of both the naturalistic and theoretical statements for the Q set was 42. However, as shown in the 12 collaboration aspects list, naturalistic statements may also correspond with theory or theoretical concepts, nevertheless, they are found in the ways in which adolescents reflect upon the research topic – and therefore are to be considered as naturalistically-rendered statements.

Visualization of a combined sampling approach – The Concourse Box

As already argued, when combining the naturalistic and the theoretical Q sample approach, advantages from both approaches may be gained. It is suggested, therefore, that this combined approach to the development of a Q set may also be useful for other studies. The springboard for this article is our experience of using such a hybrid approach in a study on adolescent's experiences of IPC. Although our Q-sampling approach may be described as a three-dimensional design, the focus here is not so much to highlight three-dimensionality, but rather to describe one way in which different Q sample approaches may be combined.

The Concourse Box as presented in Figure 1, may in itself be an illustrative way to elicit the heterogeneity, depth and richness of a concourse, independently of whether or not the Q set is a combination of naturalistic and theoretical statements. However, in our study, the first and second dimension refers to the crossed categorisation of the found statements – rendered from the naturalistic approach. The third dimension arises from an explicit aim to add theory to complement the concourse, from which the researchers also build additional statements. The horizontal level (categories A, B and C) represents the first dimension, the vertical level (categories D, E, F and G) represents the second dimension and the theory (the 12 collaboration aspects) represents the third dimension.

.

Figure 1: The Concourse Box – The Content of the Concourse Box, the Categorised Statements, is Associated with the 12 Collaboration Aspects.

Third dimension, collaboration aspects

1 Motivation
2 Role expectancy
3 Personality style
4 Power
5 Group leadership
6 Coping
7 Communication
8 Social support
9 Group culture
10 Group aims
11 Group domain
12 Group environment
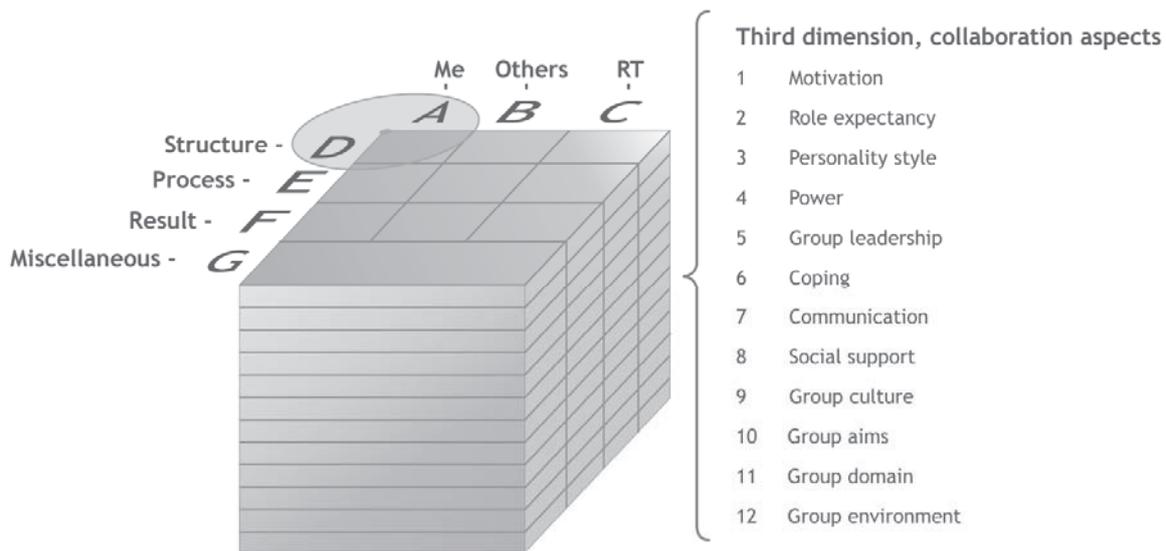
The circle inside the Concourse Box points at category A/D (me/structure). This category includes statements articulated by adolescents concerning themselves as service users (me) and in relation to the structure of IPC. Additionally, the statements in category A/D are relevant to some theoretical aspects of collaboration (PINCOM aspects). One tenet of the FBD is to have mutually exclusive categories, and this was achieved among the naturally selected statements. However, for the theoretically constructed statements, this was not the case. IPC participation for adolescents in a vulnerable position is a complex theme, and some can find it difficult to elaborate on the topic. Therefore the PINCOM aspects were found useful to complement the natural sampling. We allowed for multi-placing the 12 PINCOM aspects, as the aim was first and foremost to identify possibly missing aspects. In order to explain how the three dimensions are represented in every statement, some examples may be helpful. One of the statements in category A/D is "The fact that I participate with my opinion is more important than other group members' participating with their opinions". This statement may also be associated with some theoretical collaboration aspects: 1) motivation - because it may say something about why adolescents participate and how important they think their participation is; 4) power – because it may reveal whose voice they experience as most important among the participants in the collaboration team and 7) communication – because it may say something about communicating "opinions" in the collaboration team. Another example is a statement in category A/E (me/process): "Before the meetings I always talk to a professional who I trust, about how I am doing and things like that". This statement may also be associated with theoretical collaboration aspects: 7) communication – because it relates to the adolescent's communication with the professional, 8) social support – because it has to do with the adolescent's trusting at least one of the professionals in the collaboration team, which may be an important part of feeling socially supported and 9) group culture – because it may say something about the culture of the collaboration in the sense that they may have an attitude that also allows the adolescent's participation in the preparations for a conference and thus lets the adolescent's voice be heard. A third example, from category B/E (others/process) is: "I feel sure that all the persons involved in my collaboration team intend to work for my best possible outcome". This statement may be associated with the following theoretical collaboration aspects: 1) motivation –

to which degree the adolescent perceives that his best interests constitute a motivating factor for the members' engagement in the collaboration team; 8) social support – because it may reveal how the adolescent feels as part of the team, and feels socially supported by the members' focus; 10) group aims – because the adolescent perceives that working for his best interests is a shared aim of the whole team and 11) group domain – because the adolescent's best interests constitute the domain of the collaboration team.

The Concourse Box visualizes the three dimensions used in Q sampling and it may serve as a figurative synopsis of the applied Q set design and process in the example study. Along with the written explanation, it may facilitate an understanding t of the primary step of the categorisation of the found statements and show how a consideration of the IPC aspects constituted a second step in the Qset selection.

The 42 statement Q set and the sorting grid were pilot-tested on five young adults, who a few years previously had been in a situation similar to the adolescent service users in our study. These five young adults sorted the cards and reported that the Q set and grid were adequate for expressing their subjective views on the topic. However, some minor changes in wording were suggested and implemented for the final study.

Discussion

In this article we have focused on a combination of a naturalistic and theoretical approach to Q sampling and illustrated how it might be done. However, is anything to be gained from such an approach or is it just more complicated and time consuming? What could be the possible merits of augmenting the interview-derived statements with theoretically constructed statements? And does a combined approach have the potential to strengthen the validity of a Q study? These are questions that will be discussed in the following section. We conclude with some observations about the implications of our findings for researching vulnerable groups.

What is to be gained by combining natural and theoretical sampling?

With respect to collaboration teams as referred to in our example, the PINCOM aspects relate to IPC, which theoretically denotes something different than service-user participation. One could argue that IPC and service-user participation may be seen as two sides of the same coin, or perhaps also as a compound phenomenon, although, theoretically speaking, they constitute two individual phenomena. However, for the adolescents, the collaboration team is not about theory. They will naturally associate it with experiences and practical matters, such as the help and support that they receive. That said, their perception of IPC will probably also impact on their perception of service-user participation and vice versa.

In the Q study focusing on adolescent service-users' views, the starting point was naturalistic statements, gathered from interviews with adolescents who have experience with IPC. "It is with such statements, gathered in natural settings as far as possible (or in careful retrospection or the like), that Q technique begins its study of the self" (Stephenson 1953, p. 147). The naturalistic approach aimed at grasping aspects of the concourse derived from hands-on experiences and in a wording that the participants easily could relate to. According to Ellingsen (2011), a Q set consisting of

statements that the participants can easily understand may increase the feasibility of the participants' expressing their own views by Q sorting.

One could argue that the naturalistic sampling approach could be sufficient for developing the Q set representing the concourse. However, we chose to also put on some theoretical lenses when searching for a balanced Q set. This procedure led to the construction of five additional statements to cover specific themes emphasised in theory on IPC, with the purpose of strengthening the heterogeneity in the Q set. That said, the overall aim was to access the participants' views about taking part in collaboration teams, and not to restrict their possibility of revealing their perspectives. The inclusion of the theoretical aspect did not mean leaving out statements from the interviews with the adolescents themselves, but rather opened an opportunity for them to reveal a broader perspective on IPC. Furthermore, the way the two approaches were merged implied an alternative way of viewing the naturalistic statements. In fact, the theoretical lenses allowed for viewing the naturalistic statements in theoretical terms. Although adding theory did not sully the naturalistic statements, one rational query to this attempt to develop a combined approach might be: Why did the researchers not stick to the naturalistic approach and instead try to secure the IPC aspects (see Table 4) by simply including them in the interview guide? Obviously, that would have been less time-consuming, but would they have achieved the same heterogeneity in the Q sample and would they be able to claim that their study explored perceptions about IPC? The main reason for this was to ensure as open an approach as possible. A theory-driven interview guide could run the risk of reducing the chance of grasping aspects that are important to the participant group.

Interviewing adolescents about their collaboration team may arouse strong emotional memories related to difficult situations in their lives. The collaboration team is concerned with their personal, complicated life situation, which they need interprofessional help to sort out. Therefore, their responses in the interviews may result in statements predominantly about issues that the adolescents see as most important to focus on or issues they find problematic and think need to be changed. However, questions about matters such as personality style or leadership (see Table 4) may be perceived as less absorbing. During the interviews, it was important to let the adolescents talk about what they found relevant and important, both aspects that were of high psychological significance and aspects that were not remarkably positive or negative. The reason for that was to facilitate their contributions to knowledge development about IPC in as comprehensive a manner as possible. The PINCOM aspects included are reported as relevant for how collaboration is perceived by professionals (Ødegård, 2006), a fact which gives rise to the idea that they also may influence adolescent service users' perceptions about collaboration teams, even though these aspects were not addressed in the interviews. In fact, in the example research project, four out of the five theoretically constructed statements were distinguishing statements that had an impact on the interpretation of the resulting factors. For example one of the statements about group leadership: "I think the RT conferences [collaboration team conferences] would have been better if I was the chairperson myself" is a theoretical constructed statement that scored significantly on several factors. In advance, such a statement might not have crossed their minds, but when confronted with it, the participants had distinguishing opinions about it. This statement is relevant to the leadership aspect and is also about the 'me/structure', category A/D as shown in Figure 1.

On the other hand, the theoretically constructed leadership statement "I experience that the way the RT conferences are being led means a lot to what we achieve in the RT conferences", was not strongly valued and did not score significantly on any of the four factors. That statement was categorised "collaboration team/structure" C/D and is more about type of leadership in general and is not concerned with who should be in the role of the leader. These findings may indicate that the adolescents had clear viewpoints about leadership, but not necessarily about all facets of the leadership aspect.

Another interesting discovery is that none of the adolescents interviewed had mentioned anything about "personality style" (see Table 4), but the theoretically constructed statement "To achieve good results I think it is more important that I like the personality of the persons involved than that they are skilful professionals" showed high psychological significance on three out of four factors. This statement was evidently important to the adolescents, despite the personality style aspects absence in the naturalistic statements. The way in which the adolescents in our example study related themselves to these theoretically constructed statements supports the argument that a combined approach may result in a more nuanced Q sample, which again may yield more balanced data from the Q sorts.

Based on the significance these theoretically constructed aspects revealed, as exemplified above, we feel entitled to claim that something has been gained by adding theory. It is our understanding that the theoretically constructed statements constitute a significant supplement which seemed relevant for the participants' ability to express their views about collaboration teams. By applying a combined Q sample approach, we gained a strengthened heterogeneity and a well-balanced Q set.

The task of identifying a concourse for a Q study is about limiting and concretising the subject matter and achieving an overview of the facets and nuances that can be communicated about a subject, often within a certain culture. The resultant concourse, can be seen in the several hundred statements that may have emerged, and which then constitute the field for the selection of statements for the Q set. Such Q sampling, however, is sometimes subject to questions about validity, especially from those who are unfamiliar with or relatively newly introduced to Q. Hence; we believe that such questions deserve more attention.

The importance of content validity in research involving vulnerable groups

Thoroughness in the Q-sampling phase is important in order to achieve a qualitatively sensitive Q study and is also important to the validity of the study (Dennis, 1992/1993; Gallagher & Porock, 2010). The notion of validity is, in general, concerned with the integrity of a research study and whether or not the research methods measures what they intend to measure (Bryman, 2004). William Stephenson's intention in developing Q methodology was to reveal subjectivity. As no external criteria or gold standard can tell whether a person's subjective feeling is right or wrong, the conventional notion of validity is not of any significance in Q methodology (Brown, 1980):

> In Q methodology, the meaning and significance of items is determined by the subject, so that the observer acquires knowledge of their meaning a posteriori, i.e., after the subject has sorted them (Brown, 1980, p. 191).

It is the participant who determines the meaning of the statement. The participant expresses his or her viewpoints as the sorting is done, based on the sorter's understanding of the statement and how he or she relates to the statement. It would be meaningless to measure the validity of a viewpoint, as the only person who could verify a viewpoint is the person who expressed it (Brown, 1980).

Although the notion of validity is not relevant to Q methodology in the same way as in other research methodologies, validity is not wholly redundant in Q studies. Gallagher and Porock (2010) emphasise that content validity is very important at the beginning of a Q study and that the Q set must be representative of the concourse. The statements' relevance to the concourse is emphasised by Dennis (1992/1993) as a clear validity issue, but not all Q researchers will agree with such a claim. As already argued, there is no external way to "check" validity, as no external criterion exists for a person's point of view (Brown, 1980). This means that a Q sort from "similar" adolescents would possibly elicit other aspects in the factors. However, we will argue that if you give the participants "good material" (statements) you also will get "good" factors, in the sense that the participants feel they were able to express their perspective through the Q sort. Hence, validity in Q methodology relates, in some way, to the researcher's ability to grasp participants' perspectives and understandings through the selection of statements (Størksen & Thorsen, 2011). The core question is whether or not the participants are able to adequately present their views in terms of the available set of statements. Therefore, in order to increase the likelihood of a Q set useful for adolescents to express their views about participation in collaboration teams, the researchers aspired for thoroughness in the Q sampling and chose a Q sample approach that combined naturalistic and theoretical sampling of statements.

Vulnerable groups of people may find it easier to participate in research when it does not require verbalising their views. They are given the opportunity to voice their perspectives through the Q sorting procedure, and their Q sort is as valid as any other Q sort. For some, Q sorting may even be the most applicable way to reveal a nuanced subjective view about a sensitive subject. For participants who for some reason find it difficult to elaborate on their views, it is perhaps even more crucial that the Q sampling is thorough and well developed in order to elicit their subjective views. Their Q sort will be their only subjective expression, while other participants may add information by elaborating on the statements in the Q sample. Through a well-balanced design and a strong effort to secure content validity, we may be better able to ensure that their voices can be heard, which, in our view, are the most important voices when it comes to improving welfare services for vulnerable groups.

Concluding remarks

Theoretical sampling may not be applicable for all studies. Some themes will have a closer link to theory than others, while others will have a more inductive exploratory character. The most appropriate field for the application of a combined Q sample approach is perhaps that of studies aiming to explore subjectivity in relation to specific theoretical subjects that the interviewees may find difficult to isolate from other aspects that they associate with the overall interview theme. Particularly, when the interviewees have strong emotional experiences in relation to the theme, as was the case in our illustrative empirical research project, it may be difficult to talk about certain aspects of the theme and not just focus on what they have strongest feelings about.

Drawing on experiences from a study of adolescents' perceptions about collaboration and service-user participation we have demonstrated and argued for the value of a combined Q sample approach. In order to help visualize this combined sampling procedure we have also introduced the Concourse Box (Figure 1). Combining a naturalistic and theoretical approach may strengthen the heterogeneity of the Q set and at the same time sharpen the focus of a Q study. It is our contention that a combined Q

sample approach has the potential to strengthen the validity of a Q study and therefore, that this illustrative example should be of value in contributing to the enhancement of Q methodology. In the light of our own experience, supporting a natural sampling approach with a theoretical sampling approach is possibly particularly beneficial for the investigation of vulnerable groups.

Acknowledgement

References

Ahgren B. (2007). Creating integrated care: evaluation and management of local care in Sweden. *Journal of Integrated Care; 15*(6):14-21.

Barbosa, J. C., Willoughby, P., Rosenberg, C. A., & Mrtek, R. G. (1998). Statistical methodology: VII. Q-methodology, a structural analytic approach to medical subjectivity. *Academic emergency medicine, 5*(10), 1032-1040.

Bolin, A. (2015). Children's agency in interprofessional collaboration. *Nordic Social Work Research*, *5*(1), 50-66.

Brown, S. R. (2006). A match made in heaven: A marginalized methodology for studying the marginalized. *Quality and Quantity, 40*(3), 361-382.

Brown, S. R. (1991/1992). A Q methodological Tutorial. Retrieved from http://facstaff.uww.edu/cottlec/QArchive/Primer1.html

Brown, S. R. (1980). *Political subjectivity. Applications of Q methodology in political science,* New Haven, CT: Yale University Press.

Bryman, A. (2004). *Social research methods* (Second ed.). New York: Oxford University Press.

Buber, M. (1965/2002). *Between man and man.* London: Routledge Classics.

Buber, M. (1965/1988). *The knowledge of man. Selected essays.* NJ: Humanities Press International, Inc.

Dennis, K.E. (1992-1993). Looking at reliability and validity through Q-colored glasses. *Operant Subjectivity, 16,* 37-44

Donabedian, A. (2005). Evaluating the quality of medical care. *Milbank Quarterly, 83*(4), 691-729.

Ellingsen, I. T., Thorsen, A. A. & Størksen, I. (2014). Revealing Children's Experiences and Emotions through Q Methodology. *Child Development Research*, vol. 2014, Article ID 910529, 9 pages, 2014. doi:10.1155/2014/910529

Ellingsen, I. T. (2011). Designing a Q sample for a study with adolescent foster children. *Operant Subjectivity -The International Journal of Q Methodology, 34*(3), 125-145.

Ellingsen, I. T., Shemmings, D., & Størksen, I. (2011). The concept of 'family' among Norwegian adolescents in long-term foster care. *Child and Adolescent Social Work Journal, 28*(4), 301-318.

Ellingsen, I., Størksen, I. & Stephens, P. (2010). Q methodology in social work research. *International Journal of Social Research Methodology, 13* (5), 305-409.

Gallagher, K., & Porock, D. (2010). The use of interviews in Q methodology: card content analysis. *Nursing Research, 59*(4), 295-300.

Giddens, A. (1991). *Modernity and self-identity. Self and society in late modern age.* Cambridge: Polity Press.

Halvorsen, K. (2008). *Å forske på samfunnet. En innføring i samfunnsvitenskapelig metode.* Oslo: Cappelen Akademisk forlag.

Kinge, E. (2012). *Tverretatlig samarbeid omkring barn. En kilde til styrke og håp?* Oslo: Gyldendal Akademisk.

Kvalsund, R., & Allgood, E. (2010). Kommunikasjon som subjektivitet i en skoleorganisasjon. In A.A. Thorsen and E. Allgood (Eds.), *Q-metodologi: en velegnet måte å utforske subjektivitet (*pp. 47-82). Trondheim: Tapir akademisk forlag.

Leathard, A. (2003) *Interprofessional Collaboration: From Policy to Practice in Health and Social Care.* Hove and New York: Brunner-Routledge.

McKeown, B., & Thomas, D. B. (2013). *Q methodology* (Vol. 66). Sage publications.

Mead, G.H. (1934). *Mind, self, and society.* Chicago: University of Chicago Press.

Ødegård, A. (2006). Exploring perceptions of interprofessional collaboration in child mental health care. *International Journal of Integrated Care, 6*(4). DOI: http://doi.org/10.5334/ijic.165

Øvretveit, J. (1998). *Evaluating Health Interventions*. Open University Press.

Reich, C. A. 1971. *The greening of America.* New York: Bantam Books.

Stephenson, W. (1952). Q-methodology and the projective techniques. *Journal of Clinical Psychology, 8* (3): 219-229.

Stephenson, W. (1953). *The study of behavior; Q-technique and its methodology.* Chicago: University of Chicago Press.

Stephenson, W. (1978). Concourse theory of communication. *Communication, 3*(1), 21-40.

Stephenson, W. (1980). Consciring: A general theory for subjective communicability. In D. Nimmo (Ed.), *Communications yearbook 4* (pp. 7-36). New Brunswick, NJ: Transaction.

Størksen, I. & Thorsen, A.A. (2011). Young children's participation in a Q study with visual images: Some comments on reliability and validity. *Operant Subjectivity, The International Journal of Q Methodology,* 34(3): 146-171.

Størksen, I., Thorsen, A.A, Øverland, K. og Brown, S. (2011). Experiences of daycare children of divorce. *Early Child Development and Care, 182(7),* 807-825. http://dx.doi.org/10.1080/03004430.2011.585238

Sæbjørnsen, S.E.N. & Ødegård, A. (in progress). Interprofessional collaborative teams – a venue for service user involvement. A Q study about adolescents' views.

Sæbjørnsen, S.E.N. & Willumsen, E. (2015). Service user participation in interprofessional teams in child welfare in Norway: vulnerable adolescents' perceptions. *Child & Family Social Work*. DOI:10.1111/cfs.12242

Strype, J., Gundhus, H. I., Egge, M., & Ødegård, A. (2014). Perceptions of interprofessional collaboration. *Professions and Professionalism, 4*(3). http://dx.doi.org/10.7577/pp.806

Thorsen, A.A. (2006). A pathway to understanding Q-methodology. *Journal of Human subjectivity, 4*(2), 33-53.

Watts, S. & Stenner, P. (2012). *Doing Q Methodological Research - Theory, Method and Interpretation*. London: Sage Publications.

Wolf, A (2010). Subjektivitet I Q-metodologi. In A.A. Thorsen and E. Allood (Eds.), *Q-metodologi: en velegnet måte å utforske subjektivitet* (pp. 23-37). Trondheim: Tapir akademisk forlag.

Paper III

Adolescents' Subjective Views about Interprofessional Team Participation. A Q-methodological Study

Article

Adolescents' Subjective Views about Interprofessional Team Participation: A Q-methodological Study

by

Siv Elin Nord Sæbjørnsen (corresponding author)
Research Fellow
Molde University College, Norway
E-mail: sisa@himolde.no

Atle Ødegård (co-author)
Professor
Molde University College, Norway
E-mail: atle.odegard@himolde.no

_____

Keywords:
adolescents, Q-methodology, subjectivity, interprofessional collaboration, service user involvement, social work.

Abstract

Background: One common arrangement in the Norwegian child welfare system is the interprofessional collaborating team, not unlike the English core group. This team is often referred to as the 'responsible team' (RT) and is arranged when a child has needs that call for several services. Few studies about interprofessional collaboration focus on views of service users and, in particular, those of child and adolescent service users.

Aims and objectives: The present study aims to explore adolescents' subjective views about their participation in RTs. This study contributes further knowledge about the field of interprofessional collaboration, especially regarding the participation of adolescents.

Design: Non-experimental, exploratory research design.

Methods: Q-methodology was used to explore 26 adolescents' subjective views about their collaboration within the responsible teams that were formed to support their welfare. Q-methodology is known as being particularly suitable for revealing vulnerable people's nuanced subjective views and perspectives. The adolescents in this study were asked to rank order a set of 42 statements (Q-set). PQMethod was used to analyse the data.

Results: Four factors emerged and revealed patterns of shared views among the adolescents. Factor 1: *Optimistic and engaged despite bad experiences*, Factor 2: *Strive to not be defeated by their helpers*, Factor 3: *Battle weary and resigned,* and Factor 4: *Content, positive and full of trust*.

Implications: The present study may be relevant to researchers, health and social policy makers, in addition to professionals working in services that aim to improve children's situations through interprofessional collaboration.

Keywords

Acknowledgements

Introduction

Collaborative practice

As in many other countries in the Western world, interprofessional collaboration (IPC) is both a health and social policy target, and a working tool in health and social services in Norway (Willumsen *et al*., 2014). According to the World Health Organization (2010), collaborative practice happens when several health workers from different professions work together with patients, families and caregivers, as well as communities, to provide the highest quality of care. Aiming at enhanced effectiveness and improved accuracy in the provision of targeted services in accordance with the service users' needs, several models of collaboration teams have evolved in different countries (Reeves *et al*., 2010).

The Norwegian 'Responsible Team' (RT) is one example of a collaborative practice arrangement. RT is a collaboration team model that has been commonly used in Norway for approximately 30 years (Norwegian Ministry of Children and Equality, 2009). RTs are frequently used by the Norwegian Child Welfare Service (NCWS) (Ødegård *et al*., 2014), which is required to collaborate with other agencies in order to meet children's complex needs (Norwegian Child Welfare Act of 1992, §3-2 and 2a). The child, the parents and other persons of significance are most often included as members of an RT, and they meet together for case conferences (Skivenes & Willumsen, 2005).

In recent times, there has been a shift in the practices of child welfare from a perspective of professionals working *for* a child, to professionals *collaborating with* a child (Ellingsen *et al.,* 2014). According to the 1989 UN Convention on the Rights of the Child §12 and the Norwegian Child Welfare Act §6-3, children have the right to express their views in cases concerning themselves. Despite the increasing amount of IPC research (Ødegård et al., 2014), research focusing on children's and, especially, adolescents' perspectives on this approach, is still lacking (Cooper *et al*., 2016). One reason for this is that the use of interchangeable terms in the field of IPC research makes it difficult to search for relevant previous research (Brown & White, 2006; Ødegård, 2006; Reeves et al., 2010).

This study contributes knowledge about adolescent service users' subjective views to both the research and practice fields. The study uses several contested concepts that

exist in this research field, such as collaboration and culture. However, the application of the Q-methodology implies that the adolescent participants did not have to relate to these concepts, but rather to specific statements produced by other adolescents.

Adolescents' participation in interprofessional teams

Literature searches were conducted in MEDLINE, Academic Search Premier and SocINDEX with Full Text, targeting adolescents' perception of IPC and service user involvement, but produced few hits. Several strategies were applied, based on combining the following terms: (a) *interprofessional collaboration*, (b) *adolescent*, (c) *child welfare/child protection*, (d) *child mental health/psychiatry,* and (e) *service user involvement/participation*. Each of these terms was expanded by applying truncations and synonyms, with the aim being to retrieve as many relevant studies as possible. This resulted in only four references, of which none appeared to be relevant. Hand searches in relevant reference lists were also conducted, but the total number of relevant studies still seems very low. Although there is a possibility that flaws and limitations in the search strategy may have impaired the findings, more systematic research is needed in this field. A broader literature search strategy might have resulted in references to other studies that have dealt with service users' views in interprofessional work, from other disciplines and contexts, though not social work specifically (cf. Cooper & Spencer-Dawe, 2006; Shaw, 2008; Sitzia, Cotterell, & Richardson, 2006).

Oliver *et al*. (2010), O'Reilly *et al*. (2013), Bolin (2014; 2015) and Cooper *et al*. (2016) also emphasize the lack of studies, including opinions from children and adolescent service users, about IPC. Previous research in related fields does exist, such as studies focusing on perspectives of professionals (e.g. Gartska *et al*., 2014; Hesjedal *et al.,* 2013; Ødegård & Strype, 2009), parents (e.g. Skivenes & Willumsen, 2005; Widmark *et al*., 2013), and parents and children (O'Reilly et al., 2013). Harris and Allen (2011) explored young people's experiences with public service multiagency working, but the young people had not been included as part of a team. Only two studies that focused on adolescents' perceptions about participation in IPC were identified.

The two studies identified were by Bolin (2014 and 2015), who based her studies on children's agency in IPC. According to Bolin (2014), children respond to IPC meetings

in child welfare work by pretending to be disengaged, and appearing to be present in body only. By adopting these mannerisms, they hide the fact that they notice the information exchanges, views, inequalities in power and their subordinated positions and restricted opportunities for input in these meetings (Bolin, 2014). According to Bolin, children use different strategies in order to impact decision making; hence, they are not actually powerless agents, but instead express agency.

A number of types of factors contribute to how well (or not) RTs are able to elicit collaboration and participation with the adolescents they seek to serve. We have found that the theoretical framework presented by Reeves *et al*. (2010) involves a range of factors, several of them having a high relevance for the present study. These factors are linked to four domains: *relational, processual*, *organizational* and *contextual*.

For example, relational factors include *professional power, hierarchy, trust and respect,* and *individual willingness.* Reeves *et al*. (2010) describe professional power as an important factor in interprofessional teams. Different forms of power exist within the team, and power among the members of a team will always be unequal. The hierarchy factor, which refers to the organization of the team, is closely related to the power factor. In his study conceptualizing relative distancing in interprofessional education, Green (2013) described hierarchical distancing as the way students ascribed authority and status to their own and other professions. Drawing on Green's (2013) concept, hierarchical distance may, for example, result in an adolescent being ascribed a very low status in the RT, which may then complicate integration of the adolescent in the RT. However, in hierarchical teams, seniors may disempower juniors, but the opposite may also happen.

Achievement of high levels of trust and respect is often based on team stability and close collaboration over a long time. A team member's achievement of other team members' trust is often based on that he has proven his abilities. A lack of respect is described as a key to conflict. When there is a lack of trust and respect among team members, there can be several causes: lack of understanding of each other, lack of commitment on some members' parts, and members holding differing team goals. Team members' willingness to collaborate is a crucial factor in whether or not the

collaboration will take place. Ostensible collaboration may occur, but is up to the individual team member whether to engage or not (Reeves *et al*., 2010).

Examples of contextual factors are *culture* and *political will.* For example, the culture factor is concerned with behaviours, beliefs and values. Interprofessional teams create a local culture that affects how the team members interact, which may be of significance as to whose input is listened to. As pointed out by Green (2014), many countries express a *political will* to IPC, but supporting policy documents are often problematic. Documents may lack guidance about the development of teamwork activities, while additional underlying factors such as power and status imbalances seem envisaged (Reeves *et al*., 2010).

Aims

The present study is part of a larger research project, and builds upon elements of two previous studies (Sæbjørnsen & Willumsen, 2015; Sæbjørnsen *et al*., 2016). The primary aim was to explore adolescents' subjective views about RTs, whereas a secondary aim was to discuss implications of the results on interprofessional teams' arrangements.

Method

Participants

Twenty-six adolescents (11 male and 15 female) aged 13 to 18, who had service user experiences from RTs, participated in this study. All had complex health and social service needs, including needs for mental health services. NCWS had been involved with all of the adolescents for several years. Twenty of them had been placed in out-of-home care by the NCWS more than once. Of these, seven had been placed in care four times or more, and one had been placed 12 times.

The adolescents were recruited through the regional and municipal child welfare services, The Change Factory (Forandringsfabrikken in Norwegian), and also a private youth care foundation, provided out-of-home care. Of the invited adolescents, only one did not agree to participate in the study. All the adolescents lived in the western and

southern parts of Norway. Four of them lived with their birth parents, six in foster homes and 15 in children's homes and 'independent living'.

Q-methodology

This study employed Q, a methodology which was developed for a scientific investigation of subjectivity, such as views, feelings and beliefs regarding a topic being investigated (Brown, 1980, 1991/1992). Q provides an innovative approach to qualitative analysis by the way qualitative data are quantified (Shemmings, 2006). The fact that Q allows participants to express their views without verbal elaboration makes it a method that is sufficient for obtaining perspectives of children or others who may find verbal elaboration cognitively or emotionally challenging (Ellingsen *et al*., 2011).

This Q study comprised the following five steps commonly used in Q studies (Brown, 1991/1992; van Exel & de Graaf, 2005):

- Identification of the *concourse*, which constituted the point of departure for the development of the research tool. Brown (1991/1992) described the concourse as 'the universe of communicability surrounding any topic'. Interviews were used to approach identification of the concourse for this Q study.

- Development of the set of statements, called the Q-set or Q-sample. The statements were selected from interview texts and theory.

- Selection of P-set (the group of participants).

- Administration of the Q-sorts. The participants were asked to rank order the statements in a predefined grid, in accordance with the degree to which they agreed with the statements.

- Analysis and interpretation of the data obtained from Q-sorts and participants' comments during the sorting procedures.

The emerging factors revealed through a by-person factor analysis will disclose patterns of the participants' shared viewpoints. Different from data reduction models, in which the *items* are factor analysed, it is the person who is subjected to factor analysis in Q. Hence, Q is often referred to as a 'by-*person* factor analysis' and not a 'by-*variable* factor analysis' (Stephenson, 1936; Watts & Stenner, 2012). Each factor represents one main perspective among the participants, e.g. a comparison between

the different perspectives. The Q study process is described in further detail in the following sections.

Materials and procedure

In order to identify the concourse for this study, in-depth, semi-structured interviews with five adolescents experienced with RTs were conducted. From the transcribed interview texts, a total of 258 statements were identified as belonging to the concourse about adolescent service users' perceptions of RTs.

The selection of statements for development of the Q-sample involved the application of a categorization tool called a *Concourse Box* (Sæbjørnsen *et al*., 2016). The purpose was to reduce the number of statements to a manageable number for Q-sort, and to still ensure the inclusion of important aspects. As a result of this process, the number of statements gathered from interview texts was carefully reduced to 37. In addition, five statements were theoretically constructed and added, as some theoretical aspects seemed underrepresented among the statements from the interviews. The reason for adding statements based on theoretical aspects is that they can help point to matters of complexity missing from naturally voiced statements and thus, better enable the adolescent participants to provide their views (Sæbjørnsen *et al.,* 2016).

The Q-sample and Q-sort grid (Fig. 1) were tested by young adults who had previously been in situations similar to those of the participants in this study. Based on feedback from the test participants, a few statements were amended and the number of statements (42) was considered manageable for adolescent service users' Q-sorts. The Q-sample was presented to the participants on 42 statement cards, with one statement printed on each card. The participants were then asked to sort the statement cards into the Q-sort grid (Fig. 1) in accordance with the instruction: 'according to which degree you, in your situation, agree with the statement'. In order to simplify the sorting procedure, the participants first read through the statements and conducted a preliminary sort into three piles (*agree*, *disagree* and *neutral/uncertain*).

Figure 1:

The Q-sort grid used for this study

Most disagree										Most agree
-5	-4	-3	-2	-1	0	1	2	3	4	5

The participants sorted the cards without interference from the researcher or others. All the Q-sort situations were audio recorded in order to capture any additional information from the adolescents, such as: 'I agree with this statement now, but would not have agreed with it earlier.'

Analysis

The 26 Q-sorts were entered into the computer programme PQMethod (Schmolck, 2002) for data analysis. The participants' Q-sorts were then subjected to factor analysis using a principal component analysis with a Varimax rotation (Shemmings, 2006; Stainton Rogers, 1995). The rotation of factors is used according to the criterion of simple structure, meaning that the factors are distinct from each other and the factor structure can then be meaningfully interpreted by the researcher (Munro, 1997). The emerging factors revealed how the viewpoints that participants shared were clustered together, and which statements were typically rated positively or negatively by participants on the same factor.

Factor interpretation in Q studies is based on the understandings that the factors represent (McKeown & Thomas, 1988). Through interpretation, the researcher searches for the best plausible explanations (Stephenson, 1961; Wolf, 2004). The interpretation of each factor in this study was based on the overall configuration of the participants' statements, statements that were ranked higher and lower than in the other factors, and statements that were ranked -5 and +5 (Watts & Stenner, 2012).

Factor designation is based on the factor interpretation. For further and well-described information about factor analysis in Q-methodology, see Watts and Stenner (2012).

Ethical considerations

Approvals were obtained from the Norwegian Centre for Research Data (NSD; Project Number 30256). Initially, the participants were informed both verbally and in writing about the research project. The participants and the parents of those under the age of 16 gave their written consent. They were informed that all information from the adolescents, such as how they sorted the cards and their verbal comments, would be treated anonymously. In conformance with the NSD's procedures, the audio recordings would be deleted.

Findings and preliminary discussions

A principal component analysis with a Varimax rotation resulted in four factors (Table 2). The correlation between the factors was low (Table 1), indicating the presence of differing perspectives:

Table 1: Four factor correlation matrix

	F1	F2	F3	F4
F1	1.0000			
F2	0.1977	1.0000		
F3	0.1606	0.2279	1.0000	
F4	0.4618	-0.1014	0.1778	1.0000

The factor loadings indicate the degree to which each Q-sort correlates with each of the four factors, as shown in Table 2. An X marks a Q-sort loading significantly on one factor. The closer a Q-sort is to 1, the more equal it is to the factor:

Table 2: Factor matrix with an X indicating a defining sort

Q-sort	F1		F2		F3		F4	
1	0.1883		- 0.2153		0.4451		0.5390	X
2	0.5438	X	0.2773		0.4218		0.0283	
3	0.0887		0.5820	X	0.1845		- 0.0828	
4	0.1964		- 0.0630		0.6686	X	0.0605	
5	0.5444	X	0.1600		0.1114		0.3170	
6	0.1377		0.4880	X	- 0.1262		0.0463	
7	0.2679		0.6708	X	0.1935		- 0.2668	
8	- 0.1051		0.2148		0.6101	X	- 0.3648	
9	0.0011		0.6204	X	- 0.3206		0.3545	
10	0.4866		0.5958	X	0.1833		- 0.1789	
11	0.5550	X	0.2120		0.1885		0.3952	
12	- 0.0472		0.2487		0.7803	X	0.2529	
13	0.4686	X	- 0.1864		0.1031		0.2066	
14	0.4457	X	0.1685		0.1547		0.0986	
15	0.2816		- 0.0489		- 0.1741		0.5404	X
16	0.4942	X	- 0.4492		- 0.1091		0.1664	
17	0.0790		- 0.1772		0.3740		0.4818	X
18	0.3981		- 0.3359		- 0.1410		0.6390	X
19	0.6037	X	0.1851		- 0.2267		0.0136	
20	0.5814	X	0.0348		- 0.0103		0.0729	
21	0.1995		- 0.1864		0.1824		0.7750	X
22	0.0993		0.4320	X	0.1165		0.0952	
23	0.4470		0.0651		- 0.1063		0.6656	X
24	- 0.2049		0.3785		0.1034		0.7880	X
25	- 0.0170		0.7347	X	- 0.1711		- 0.0671	
26	- 0.1442		0.7040	X	0.2739		- 0.3065	
Expl.variance %	12		15		10		15	

Eight of the 26 participants define Factor 1, as they loaded significantly on this factor. Eight define Factor 2, three define Factor 3 and seven define Factor 4.

A common approach in Q is a visual inspection of the factors. The resulting factor scores (z scores) were converted back to the original values of the scale used in the factor matrix. Table 3 shows how each of the statements was typically sorted by each of the four factors:

Table 3:Factor scores for each of the 42 statements

No.	Q-sort statements	Factor arrays			
		1	2	3	4
1	My participation, with my opinions, is more important than the others'participation, with their opinions.	4	5	0	0
2	I may participate in the decisions about who may be involved in the RT.	- 3	- 3	- 4	0
3	I would prefer the conferences to be held somewhere else.	- 4	0	- 2	- 4
4	I know that I may participate a lot in the decision making if I want to.	- 1	- 1	0	4
5	I feel sure that all the persons involved in the RT intend to work for my best possible outcome.	3	- 3	0	2
6	It frequently happens that decisions to which I disagree are taken in the RT conferences.	0	3	4	- 3
7	Nothing actually comes out of the RT conferences for me.	- 4	3	- 1	- 5
8	Once you get involved with the NCWS, you are stuck with them forever.	- 3	4	4	- 3
9	Without these RT conferences, I would have been worse off than I am today.	0	- 3	1	4
10	I know several other kids and young people who, - like me, have RT conferences.	3	- 1	2	- 4
11*	I think my experiences are very important for those who develop services for kids and adolescents.	2	3	1	0
12	I like to attend the RT conferences.	1	- 5	1	- 2
13	I think my parents would like to join the RT conferences.	5	1	- 3	- 2
14	I think we have the RT conferences too often.	- 5	- 2	- 2	- 3
15	It is difficult to speak in the RT conferences because so many people are present.	- 1	2	- 2	- 3
16	I have one or more professionals 'on my side' who see to it that what I want emerges in the RT conferences.	4	- 2	5	5
17	I think it's good that what we talk about is written down.	3	1	3	- 1
18	I frequently get my way when I say what I mean.	- 2	- 4	- 4	- 1
19	I'm anxious that NCWS will decide things that I don't agree with, for example, that I have to move and stuff.	- 2	4	5	1
20	RT conferences have been a good way to solve problems.	0	- 3	0	3
21*	I long to become 18 years old because then I can make decisions on my own, for example, if I want to live on my own.	3	2	3	2
22	I think it is all right if the other pupils know that I have these RT conferences.	2	- 1	1	- 2
23	I decide myself whether I want to attend the RT conferences.	3	- 1	3	1
24	I think the chairperson in the RT conferences does a good job.	1	- 1	- 2	1
25*	I think the timing of the RT conferences is ok.	- 1	1	0	1
26	Before the RT conferences, I use to talk to a professional whom I trust about how I am doing, what we are going to talk about in the conference, etc.	0	- 2	0	2
27	It happens that persons who are present at the RT conferences pass on things from the conferences which they should keep confidential.	- 2	0	- 1	- 5
28	I think there is a good atmosphere in the RT conferences.	1	- 4	- 2	- 2
29	When decisions have been made in the RT conferences, I always comply with them.	- 2	- 5	- 1	0
30	At school, I get treated the same way as pupils who are not in involved with the NCWS.	2	1	- 1	1
31	I find that the way the RT conferences are chaired influences a lot of what we achieve.	0	2	2	0

32	I think the RT conferences will impact my future choices, like, for example, about getting an education.	- 5	0	2	0
33	I think the RT conferences would have been better if I were the chairperson myself.	- 3	0	3	- 4
34	I'm aware of why the different individuals are present in the RT conferences.	2	1	1	3
35	I think the RT conferences last too long.	- 4	4	- 3	- 1
36	I believe that all the persons present in the RT conferences are genuinely interested in my opinion.	- 1	- 4	- 5	2
37	I believe that all the adults in the RT conferences like each other.	1	3	- 4	- 1
38	In the RT conferences, we talk about things that I find important for the improvement of my situation.	4	0	2	5
39	I have frequently made suggestions in the RT conferences that have resulted in an improvement of my situation.	- 1	- 2	- 3	3
40	To achieve good results, I think it is more important that I like the personality of the persons involved than whether they are skilful professionals.	5	5	- 1	3
41	The quality of the solutions we arrive at in RT conferences is highly related to the degree to which the RT is used to collaborate.	1	2	4	4
42	I would find it difficult if my caseworker quit.	0	0	- 5	- 1
Explained variance		12%	15%	10%	15%

Note: Values with underlining represent distinguishing statement values for the specific factor at significance level *p* <.0.5. *Distinguishing statements* refers to key viewpoints in each factor (Watts & Stenner, 2012), and to their being significantly unique for each specific factor. The distinguishing statements are underlined factor scores in Table 3. For example, it is typical and unique for participants associated with Factor 3 to have a statement number 42 on -5. Statements marked * represent consensus statements. Only statements 11, 21 and 25 are marked as consensus statements, which means that they are ranked quite similar in all the factors (Watts & Stenner, 2012).

Factor interpretation

The interpretations presented below are not absolute explanations of the adolescents' perceptions, but rather the results of our search for the best plausible explanations of the adolescents' subjective understanding that the factors represent (Stephenson, 1961; Wolf, 2004). In line with this, the designation of the factors was based on the interpretation of each factor, but, undoubtedly, other designations might also have been appropriate.

Factor 1: *Optimistic and engaged despite bad experiences*

This factor was labelled, *Optimistic and engaged despite bad experiences,* because the adolescents seemed enthusiastically involved in the RT conferences, even though they seemed to have previously had some negative experiences. Comments during the Q-sort, such as, 'It hasn't always been like this', supported the impression that their optimism and trust might be rooted in new, positive experiences. Still, these adolescents seem a little sceptical, which may indicate that they had had some

previous negative experiences in mind. Eight participants correlated significantly with Factor 1, which explains 12% of the total variance.

The configuration of the statements on Factor 1 may indicate that the adolescents associated with it trusted the professionals' intentions to work for the adolescents' best interests (statement #5/+3). They seem less anxious than other factors that the NCWS would make decisions they would disagree with, though some scepticism may remain (statement #19/-2). They do not seem to worry about the NCWS being difficult to get rid of (statement #8/-3), and they seem inclined to find the atmosphere in the RT conferences to be all right (statement #28+1). These adolescents also seem to find it rather important to preserve the contents in the RT conferences in report documents (statement #17/+3).

The adolescents' loading on Factor 1 gave the impression of their being quite satisfied with the RT conferences concerning meeting place (statement #3/-4), time (statement #25/-1), duration (statement #35/-4), subjects (statement #38/+4) and outcomes for themselves (statement #7/-4). More than any other factor, these adolescents expressed a belief that their parents would like to join the RT conferences (statement #13/+5), but comments during the Q-sort indicated that this was not always the case for all of them. The adolescents did not give the impression that they enjoyed attending the RT conferences (statement #12/+1), although they might have wished that the conferences were held more often (statement #14/-5). Despite the faith that they assumingly had in the RT, they did not get their way very often (statement #18/-2), and they may have had some doubts that all the participants in the RT conferences were really interested in their opinions (statement #36/-1). They seem quite sure that the most important opinions in the RT conferences were their own (statement #1/+4), and they seem to find RT members' personalities an important factor in having good results in RT conferences (statement #40/+5).

Factor 2: Strive to not be defeated by their helpers
Adolescents' loading on Factor 2 seems to felt run over, worked against, not listened to, and disrespected. They seem to doubt that the RT members intended to work for their best interests (statement #5/-3), and that RT members were interested in their opinions (statement #36/-4). These adolescents do not seem to perceive having had

a professional speaking for them in the RT conferences (statement #16/-4), and they might not have had a trusting relationship with any of the professional RT members (statement #26/-2). However, they seem to think that the other RT members liked each other (statement #37/-4).

Factor 2 gives the impression that these adolescents perceive that the NCWS is hard to get rid of (statement #8/+4), and that they are afraid of the power of the NCWS (statement #19/+4).

These adolescents expressed negative sentiments about attending the RT conferences (statement #12/-5 and #28/-4), which they seem to think had not been of much help (statement #7/+3 and #9/-3). They do not seem to have found the subjects addressed in the RT conferences highly relevant (statement #38/0). The adolescents expressed the opinion that RT conferences lasted too long (statement #35/+4) and were not particularly appropriate for problem solving (statement #20/-3), and they may have felt that too many people attended them (statement #15/+2). They perceived likely having little influence on decision making (statement #4/-1), and that the decision about whether they would attend RT conferences was not entirely up to them to make (statement #23/-1). Possible indications that these adolescents have a 'fighting spirit' are that they seemed to not comply with RT conference decisions (statement #29/-5), and that they perceived that their experiences constitute information useful to policymakers (statement #11/+3).

Factor 3: Battle weary and resigned
Three participants loaded on Factor 3. They seemed to feel worked against and not listened to. They seemed battle weary and resigned, and possibly more mature than those associated with the other factors. Factor 3 has commonalities with Factor 2, but there are also some evident differences. More than the other factors, these adolescents seemed to fear the power of the NCWS (statement #19/+5) and felt that NCWS was difficult to get rid of (statement #8/+4). Rating statement #42 at -5 may indicate that they would have preferred that their caseworker had quit.

Factor 3 seems to indicate that the adolescents believed that the RT was uninterested in their opinions (statement #36/-5), and that the parents disliked attending the RT

conferences (statement #13/-3). They expressed that they frequently disagreed with the RTs (statement #6/+4). These adolescents expressed having had poor experiences when making suggestions that had improved their situations (statement #39/-3), and that they lacked influence on RT composition (statement #2/-4). Placing statement #37 on column -4 indicates that they perceived that the adult RT members liked each other and perhaps that they felt not included in the group solidarity, yet they do not seem to have been very incompliant concerning RT decisions (statement #29/-1). The ranking of the statement about whether they liked to attend RT conferences (statement #12/1) may indicate carelessness or perhaps the loss of a previous 'fighting spirit'. Factor 3 indicates that the adolescents knew about other adolescents who were in situations similar to themselves (statement #10/+2). At school, they may have felt they were treated somewhat differently than other pupils (statement #30/-1).

Factor 3 seems to imply that the adolescents perceived the chairing of RT conferences to be somewhat important for achieving results (statement #31/+2), but they were not impressed by the chairperson's job (statement #24/-2). More than in the case of any of the other factors, these adolescents seem to imply that RT conferences would have been improved if they themselves had chaired the conferences (statement #33/+3).

Interestingly, these adolescents seem convinced that they had at least one professional on their side who was voicing their concerns (statement #16/+5). However, comments made during the Q-sort, regarding things having changed lately, may imply that these relationships had been established only recently.

Factor 4: Content, positive and full of trust
The configuration of the statements on Factor 4 gives a strong impression that the adolescents loading on it are satisfied, positive and active in the RT, and that they trust their helpers. They seem to perceive that at least one professional voiced their concerns (statement #16/+5) and, to some extent, that they had a trusting relationship with a professional (statement #26/+2).

These adolescents do not seem to doubt their possibilities for participating extensively in the decision-making (statement #4/+4), and to some degree they may have been able to get their way (statement #18/-1). They seem to have often agreed with the RT's

decisions (statement #6/-3), and to have felt that their situation improved as result of suggestions they themselves made (statement #39/+3). Less so than in the case of the other factors, these adolescents seem to have protested the RT's decisions, although they did not absolutely comply with them (statement #29/0). More than in the other factors, these adolescents seem to have been involved in the composition of the RT (statement #2/0), and the number of attendees did not seem to particularly bother them (statement #15/-3).

More than the other adolescents, Factor 4 adolescents seem to perceive RT members as having been genuinely interested in their opinions (statement #36/+2), and that these other members were true to client confidentiality (statement #27/+5). They seem to perceive that the subjects in RT conferences were very relevant (statement #38/+5), that RT conferences were appropriate for problem solving (statement #20/+3) and were useful to themselves (statement #7/-5). These adolescents would probably have perceived their current situations worse without the RT conferences (statement #9/+4). They also seemed to have a good understanding of the RT's composition (statement #34/+3), and believe that it would probably have been a bad idea to put an adolescent in the chairperson role (statement #33/-4).

Typically, the adolescents associated with Factor 4 did not seem to know many others in a situation like their own (statement #10/-4), and they probably disliked everyone at school knowing about their situation (statement 22/-2).

Discussion
Subjective views of collaboration and participation
In this article, we have presented some adolescent service users' subjective perspectives about collaboration in RTs. A commonality of two of the perspectives, Factor 1 and Factor 4 (cf. correlation between F1 and F4 was 0.46), is that the adolescents seem to trust the RT and perceive it as useful. Strikingly different from these are the perspectives represented by Factors 2 and 3, both of which reveal perceptions of RT as rather useless. These adolescents seem to distrust the RT, as well as feel disrespected and not listened to.

The description of these four factors is especially interesting in the RT context, because the findings show that adolescents' subjective views do not necessarily discriminate between collaboration and participation. Could this indicate that adolescents perceive RTs differently from the professionals? Professionals probably participate in RTs because they believe they may be able to contribute knowledge and services that will assist in improving the adolescent users' situations. On the other hand, the adolescents attend because they need help to handle complex difficulties in their personal lives. The findings in this study indicate that whether the adolescents evaluated RTs positively or negatively, they attend RT conferences because their personal lives and future are at issue. Hence, the RT conferences should be more important to the adolescents than to any other RT member, but although all the adolescents in this study attend the RT conferences, the degree to which they involve themselves or are allowed to be involved differs.

For example, the adolescents loading on Factor 4 in particular, but also on Factor 1, seem to find the subjects in the RT conferences to be of personal interest, and they personally appreciate the outcome of the RT's collaboration. The adolescents associated with both of these factors seem to feel heard and supported by professionals whom they trusted in the RT conferences. Referring to Reeves *et al*. (2010) and Green (2013), these positive perceptions may indicate that the RT succeeded in developing a *culture* that adolescents feel a part of and where their inputs are welcome. It is likely that the adolescents' participation constitutes an explicit value in these RTs' cultures. The perspectives represented by Factor 2 and Factor 3 seem based on experiences with RTs that have not succeeded in developing such an adolescent-friendly culture. The shift from working *for* children in need to *collaborating with* them (Ellingsen *et al*., 2014) might have been accomplished to a great extent in the RTs of the adolescents represented by Factors 1 and 4. Accordingly, Factor 2 and Factor 3 may indicate that such a shift was not successfully accomplished in these RTs.

The findings in this study demonstrate that the adolescents perceive their personal difficulties as complex, and that they need help to improve their personal situations. Although some adolescents might even feel that the professional 'help' has been

forced on them, they still seem willing to participate because the RT is concerned with their personal life and future.

Implications for interprofessional team arrangements

All four perspectives in this study (Factors 1, 2, 3 and 4) show that power, trust and respect highly affected the adolescent service users' perception of RTs. Accordingly, *power, trust* and *respect* constitute important relational factors that also affect professionals' perception of IPC (Reeves *et al*., 2010). In line with Reeves et al., the adolescent perspectives in this study show that these factors intertwine with many other relational factors in the perception of RTs.

Factor 4, which represents the most content and positive of the adolescents, gives the impression of their having had a relatively powerful position in their RTs and a trusting relationship with at least one professional RT member. Despite the likelihood that these adolescents had the hierarchically lowest status and were the least experienced members of the RTs, they seem to have been involved in decision making to some degree and they did not feel controlled by the RT. This may be an indication that they have been empowered by 'seniors' in their RT, even though *hierarchy,* which is a factor closely related to power, involves a risk of 'seniors' disempowering 'juniors' (Green, 2013; Reeves *et al*., 2010). Furthermore, hierarchy may also have positively affected the adolescents represented by Factor 1. They seem to trust and be unafraid of the professionals' power, though they may not perceive themselves as having had much influence in the RT yet. Factors 2 and 3 represent the adolescents who express themselves most negatively about RT. They perceive having had very little influence in the RT and their levels of trust seem very low.

Adolescents' perceptions of being recognized convey the presence of mutual respect, which is important for the development of trust (Reeves *et al*., 2010). This seems to have happened with Factor 4 and, to some degree, with Factor 1. In contrast, adolescents related to Factors 2 and 3 do not give any impression of feeling recognized by the RT. Rather, they seem to perceive a mutual disrespect.

Factor 2 and Factor 3 may perceive powerlessness in the RT, but according to Bolin (2015) children are not powerless in IPC conferences. She suggests that children

exercise power in ways such as refusing to attend meetings if they do not get their way (Bolin, 2015). The indication of a 'fighting spirit' found in Factor 2 may be understood as being in line with adolescents' expression of agency as described by Bolin (2015). However, this kind of power is not based on recognition and respect from the other members, but instead indicates an exercise of power for resistance (Foucault, 1978). Most likely, such power will not foster positivity and perceptions of recognition, trust and respect.

The great differences in how adolescents perceive RTs may indicate that the *political will* to provide interprofessional collaborative service is not sufficient; guidance also needs to be provided, instead of leaving it up to each RT to find out how to involve the adolescent (Green, 2014; Reeves *et al*., 2010). Nonetheless, it is ultimately the individual RT member who has the power to decide whether the collaboration is going to happen. RTs may be established and RT conferences may be accomplished, but it is up to the individual RT member to engage or not. In other words, well-functioning RTs cannot be enforced from above. They must be rooted in the different professionals', as well as the adolescents', *willingness* to engage. According to Reeves and colleagues, professionals' resistance to IPC may be deeply anchored in their early professional socialization processes. This may be an argument for including both IPC and service user involvement early in the educational trajectory for all health and social professions.

The fact that several studies focus on professionals' evaluations of IPC, while adolescent service users' perceptions are hardly represented, raises the question of a definition of power. Who should be entitled to determine whether an IPC team has succeeded in contributing to improvement in an adolescent's situation or whether an RT has been successful or not? As we understand it, adolescent service users' views should be emphasized in such evaluations. Accordingly, they should be more involved in IPC research.

The findings in this study support Sæbjørnsen and Willumsen's (2015) contention that affording adolescents a high degree of participant power (Omre & Schjelderup, 2009) and trust seems to have the potential to strengthen their sense of engagement, positivity and perceptions of RTs' usefulness. Interestingly, adolescents in this study

seem to perceive RTs as useful when they are characterized by successful IPC and service user participation. In line with the aims of RTs, successful RTs seem to have the potential to improve adolescents' complex and difficult situations. In contrast, half-hearted efforts to develop trust and share power among RT members, as Factor 2 and Factor 3 illuminate, render the RT useless and just a waste of time. Therefore, we suggest that whole-heartedness in power sharing, as well as in the development of mutual trust and respect, should be pursued in RTs.

Limitations of the study

The limitations of this study are connected to the aim of Q, which is to explore patterns of subjectivity. In line with many other research methods, Q does not intend to develop general knowledge about a population. Therefore, that this study did not generate knowledge necessarily prevails regarding all adolescent service users of RTs. Rather, it brings clarity and adds new dimensions to issues that other methods may have difficulty uncovering (Donner, 2001).

As with all human undertakings and data interpretation, this study may involve biases caused by the authors' pre-conceptions (Lykkeslet & Gjengedal, 2007). Hoping to counteract such biases, we have thoroughly discussed the results several times and involved research colleagues in these discussions.

Although the adolescent participants in this Q study were only asked to relate to the statements produced by other adolescents, and not to contested concepts such as collaboration and culture, a conceptual discussion could have been an interesting addition in this study. It would also have been interesting to involve adolescent service users in such a discussion.

Concluding remarks

How adolescents subjectively view their experiences with RTs has been explored in this Q study, and the results have raised important questions about the significance of listening to young peoples' experiences with collaboration in interprofessional team arrangements. The purpose of RTs will always be to contribute good quality, coordinated services for children and young people in vulnerable positions. Within this landscape, the children or adolescents themselves are important co-actors.

Key findings in this study indicate that adolescents tend to find RTs useful in improving their situations if they feel welcome and if successful IPC, in addition to achieving a successful service user participation. The primary conditions for achieving these outcomes seem to be benevolence towards the adolescent, a balance of power and a mutual trust and respect among the RT members.

References

Bolin, A. (2014). Children's agency in interprofessional collaborative meetings in child welfare work. *Child & Family Social Work*. doi: 10.1111/cfs.12167.

Bolin, A. (2015). Children's agency in interprofessional collaboration. *Nordic Social Work Research*, *5*(1), 50-66.

Brown, S. (1980). *Political subjectivity: applications of Q methodology in political science.* New Haven: Yale University Press.

Brown, S. (1991/1992). A Q methodological tutorial. Retrieved from http://facstaff.uww.edu/cottlec/QArchive/Primer1.html

Brown, K., & White, K. (2006). *Exploring the Evidence Base for Integrated Children's Services.* Scottish Executive Education Department, Edinburgh.

Child Welfare Act, 17. June 1992, no. 100 [Barnevernloven in Norwegian].

Cooper, H., & Spencer-Dawe, E. (2006). Involving service users in interprofessional education: Narrowing the gap between theory and practice. *Journal of Interprofessional Care*, *20*(6), 603-617.

Cooper, M., Evans, Y., & Pybis, J. (2016). Interagency collaboration in children and young people's mental health: A systematic review of outcomes, facilitating factors and inhibiting factors. *Child: Care, Health and Development*, doi: 10.1111/cch.12322.

Donner, J. C. (2001). Using Q-sorts in participatory processes: An introduction to the methodology. In R. A. Krueger, M. A. Casey, J. Donner, S. Kirsch, & J. N. Maack (Eds.), *Social analysis: Selected tools and techniques* (paper number 36). Washington D.C.: Social Development Department, The World Bank.

Ellingsen, I. T., Schjelderup, L., & Omre, C. (2014). Barn og unges medvirkning i barnevernet [Children and young people's participation in the child welfare]. In I. T. Ellingsen & R. Østerhaug (Eds.), *Barnevernets brennpunkt. Bestlutningsgrunnlag og beslutninger [The child welfare's fire point. Decision basis and decisions]* (pp. 115-136) .Oslo: Universitetsforlaget.

Ellingsen, I. T., Shemmings, D., & Størksen, I. (2011). The concept of 'family' among Norwegian adolescents in long-term foster care. *Child and Adolescent Social Work Journal*, *28*(4), 301-318.

Foucault, M. (1978). The history of sexuality [translated by Robert Hurley], Vol. I. New York: Pantheon.

Fylkesmannen I Sogn og Fjordane [County Administration in Sogn and Fjordane]. *Referat frå ansvarsgruppemøte.* [*Minutes of responsibility group meetings*]. Retrieved 11 December 2015 from: https://www.fylkesmannen.no/Sogn-og-Fjordane/Barn-og-foreldre/Barnevern/Referat-fra-ansvarsgruppemote/

Garstka, T. A., Lieberman, A., Biggs, J., Thompson, B., & Levy, M. M. (2014). Barriers to cross-systems collaboration in child welfare, education, and the courts: Supporting education well-being of youth in care through systems change. *Journal of Public Child Welfare*, *8*(2), 190-211. doi: 10.1080/15548732.2014.888697.

Green, C. (2013). Relative distancing: A grounded theory of how learners negotiate the interprofessional. *Journal of Interprofessional Care,* 27(1), 34-42.doi: 10.3109/13561820.2012.720313.

Green, C. (2014). The making of the interprofessional arena in the United Kingdom: A social and political history. *Journal of Interprofessional Care*, *28*(2): 116-122. doi: 10.3109/13561820.2013.867840.

Harris, A., & Allen, T. (2011). Young people's views of multi-agency working. *British Educational Research Journal,* 37(3), 405-419. doi: 10.1080/01411921003692876.

Hesjedal, E., Hetland, H., & Iversen, A. C. (2015). Interprofessional collaboration: Self-reported successful collaboration by teachers and social workers in multidisciplinary teams. *Child & Family Social Work*, *20*, 437–445. doi: 10.1111/cfs.12093.

Lykkeslet, E., & Gjengedal, E. (2007). Methodological problems associated with practice-close research. *Qualitative Health Research, 17* (5), 699-704.

McKeown, B., & Thomas, D. (1988). Q methodology. Iowa: Sage University Paper.

Munro, B. H. (1997). Statistical Methods for health care research – 3rd edition. New York: Lippincott.

Norwegian Ministry of Children and Equality (2009). *Det du gjør – gjør det helt. Bedre samordning av tjenester for utsatte barn og unge [What you do – do it wholly. Better coordination of services for vulnerable children and young people].* NOU 2009:22. Oslo: Barne og likestillingsdepartementet.

Oliver, C., Mooney, A., & Statham, J. (2010). *Integrated working: A review of the evidence.* London: Institute of Education.

O'Reilly, M., Vostanis, P., Taylor, H., Day, C., Street, C., & Wolpert, M. (2013). Service user perspectives of multiagency working: A qualitative study with children with educational and mental health difficulties and their parents. *Child and Adolescent Mental Health, 18*, 202-209. doi:10.1111/j.1475-3588.2012.00674.x.

Reeves, S., Lewin, S., Espin, S., & Zwarenstein, M. (2010). *Interprofessional teamwork for health and social care.* Oxford: Blackwell Publishing Ltd and CAIPE.

Schmolck, P. (2002). *PQMethod*. Retrieved 26 March 2012 from www.lrz.de/-schmolck/qmethod/

Shaw, S. (2008). More than a dollop of cortex: Patients' experiences of interprofessional care at an urban family health centre. *Journal of Interprofessional Care, 22*(3), 229-237.

Shemmings, D. (2006). Quantifying qualitative data: An illustrative example of the use of Q methodology in psychological research. *Qualitative Research inPsychology, 3,* 147-165.

Sitzia, J., Cotterell, P., & Richardson, A. (2006). Interprofessional collaboration with service users in the development of cancer services: The cancer partnership project. *Journal of   Interprofessional Care, 20*(1), 60-74.

Skivenes, M., & Willumsen, E. (2005). Brukermedvirkning i barnevernets ansvarsgrupper [Service user involvement in the child welfare's responsibility groups]. In E. Willumsen (Ed.), *Brukernes Medvirkning! [The service users' involvement!]* (pp. 94 –111). Oslo: Universitetsforlaget.

Stainton Rogers, R. (1995). 'Q methodology', in J. A. Smith, R. Harré, & L. Van Langenhove (Eds.), *Rethinking methods in psychology* (pp. 178-192). London: Sage.

Stephenson, W. (1936). The inverted factor technique. *British Journal of Psychology, 26* (4), 344-61.

Stephenson, W. (1961). Scientific creed – 1961, *The Psychological Record, 11*, 1-25.
Sæbjørnsen, S. E. N., & Willumsen, E. (2015). Service user participation in interprofessional teams in child welfare in Norway: Vulnerable adolescents' perceptions. *Child & Family Social Work.* doi: 10.1111/cfs.12242.

Sæbjørnsen, S. E. N, Ellingsen, I. T., Good, J. M. M., & Ødegård, A. (2016). Combining a naturalistic and theoretical Q sample approach: An empirical research illustration. (Manuscript submitted for publication).

van Exel, J., & de Graaf, G. (2005). Q Methodology: *A sneak preview.* Retrieved from http://www.qmethod.org.

Watts, S., & Stenner, P. (2012). *Doing Q methodological research. Theory, method and interpretation.* London: Sage Publications Ltd.

Widmark, C., Sandahl, C., Piuva, K., & Bergman, D. (2013). Parents' experiences of collaboration between welfare professionals regarding children with anxiety or depression – an explorative study. *International Journal of Integrated Care, 13*, 1-11.

Willumsen, E., Sirnes, T., & Ødegård, A. (2014) Tverrprofesjonelt samarbeid – en fortsettelse [Interprofessional collaboration – a continuation]. In E. Willumsen & A. Ødegård (Eds.), *Tverrprofesjonelt samarbeid – et samfunnsoppdrag [Interprofessional collaboration – A social assignment]* (pp. 19-29). Oslo: Universitetsforlaget.

Wolf, A. (2004). Research strategies for policy relevance. *Social Policy Journal of New Zealand*, 23, 65-85.

World Health Organization (2010). Framework for action on interprofessional education and collaborative practice (ref. number WHO/HRH/HPN/10.3). Retrieved July 4, 2016 at http://www.who.int/hrh/resources/framework_action/en/

Ødegård, A. (2007). Exploring perceptions of interprofessional collaboration in child mental health care. *International Journal of Integrated Care*, 7(1-13). Retrieved at: http://www.ijic.org/

Ødegård, A., & Strype, J. (2009). Perceptions of interprofessional collaboration in child mental health care in Norway. *Journal of Interprofessional Care*, May 23 (*3*), 286-296.

Ødegård, A. Iversen, H. P., & Willumsen, E. (2014). Samhandlingsreformen – hvilken betydning vil den få for utsatte barn og unge? [The collaboration reform – What significance will it have for children and young people?]. In I. T. Ellingsen, & R. Østerhaug (Eds.), *Barnevernets brennpunkt. Bestlutningsgrunnlag og beslutninger [The Childwelfare's fire point. Decision basis and decisions]* (pp.181-196). Oslo: Universitetsforlaget

Appendix

Appendix I

Norsk samfunnsvitenskapelig datatjeneste AS
NORWEGIAN SOCIAL SCIENCE DATA SERVICES

Siv Elin Nord Sæbjørnsen
Avdeling for helse- og sosialfag
Høgskolen i Molde
Postboks 2110
6402 MOLDE

Vår dato: 28.03.2012   Vår ref:30256 / 3 / PB   Deres dato: Deres ref:

TILBAKEMELDING PÅ MELDING OM BEHANDLING AV PERSONOPPLYSNINGER

Vi viser til melding om behandling av personopplysninger, mottatt 24.03.2012. Meldingen gjelder prosjektet:

30256	*Adolescents at Risk - Exploring Adolescents' Perceptions of Interprofessional Collaboration and Service User Involvement*
Behandlingsansvarlig	*Høgskolen i Molde, ved institusjonens øverste leder*
Daglig ansvarlig	*Siv Elin Nord Sæbjørnsen*

Personvernombudet har vurdert prosjektet, og finner at behandlingen av personopplysninger vil være regulert av § 7-27 i personopplysningsforskriften. Personvernombudet tilrår at prosjektet gjennomføres.

Personvernombudets tilråding forutsetter at prosjektet gjennomføres i tråd med opplysningene gitt i meldeskjemaet, korrespondanse med ombudet, eventuelle kommentarer samt personopplysningsloven og helseregisterloven med forskrifter. Behandlingen av personopplysninger kan settes i gang.

Det gjøres oppmerksom på at det skal gis ny melding dersom behandlingen endres i forhold til de opplysninger som ligger til grunn for personvernombudets vurdering. Endringsmeldinger gis via et eget skjema, http://www.nsd.uib.no/personvern/forsk_stud/skjema.html. Det skal også gis melding etter tre år dersom prosjektet fortsatt pågår. Meldinger skal skje skriftlig til ombudet.

Personvernombudet har lagt ut opplysninger om prosjektet i en offentlig database, http://www.nsd.uib.no/personvern/prosjektoversikt.jsp.

Personvernombudet vil ved prosjektets avslutning, 31.12.2015, rette en henvendelse angående status for behandlingen av personopplysninger.

Vennlig hilsen
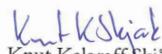
Knut Kalgraff Skjåk

Pernilla Bollman

Kontaktperson: Pernilla Bollman tlf: 55 58 24 10
Vedlegg: Prosjektvurdering

Appendix I

Personvernombudet for forskning

Prosjektvurdering - Kommentar

FORMÅL
Prosjektets overordnede målsetning er å bidra til økt kvalitet på tjenester for utsatte barn og unge med omfattende hjelpebehov. Dette ved å:
- Utforske ungdommers opplevelse av fenomenene tverrprofesjonelt samarbeid og brukermedvirkning, basert på deres erfaringer med ansvarsgruppe/tverrprofesjonelt team.

- Sammenligne ungdommers opplevelse med oppfatninger profesjonelle samarbeidspartnere har om hvordan ungdommer opplever tverrprofesjonelt samarbeid og brukermedvirkning.

- Prøve ut og tilpasse forskningsmetodologi for bedre utforskning av ungdommers opplevelse av fenomenene samarbeid og brukermedvirkning.

- Bidra til økt kunnskap for videre utvikling av relevante og praktiske verktøy for bedre samarbeid om brukergruppen.

UTVALG
Utvalget består av:
A) Ungdommer 13-18 år med omfattende hjelpebehov, som har en ansvarsguppe eller et tverrprofesjonelt team rundt seg, hvor minimum representanter for barnevern og BUP/psykiske helsetjenester deltar.
B) Profesjonelle ansvarsgruppemedlemmer/medlemmer av tverrprofesjonelt team for ungdommer som deltar i dette prosjektet

Utvalget vil omfatte 32 ungdommer fra 13-18 år (hvorav 4 ungdommer til Fase 1 og 28 ungdommer i Fase 2A) samt
10 profesjonelle medlemmer i ansvarsgrupper eller tverrprofesjonelle team tilhørende ungdommer som deltar i dette forskningsprosjektet. Totalt antall deltakere vil være 42.

REKRUTTERING OG FØRSTEGANGSKONTAKT
Barneverntjenester og Bufetat vil bli bedt om å invitere aktuelle kandidater for deltakelse i forskningsprosjektet og vil opprette førstegangskontakten med eventuelle deltakere.

Fase 1:
Ungdom og foreldre/foresatte når ungdommene er under 16 år, får presentert prosjektet muntlig og skriftlig i formelt skriv med tilhørende samtykkeerklæring fra deltaker og ev. foreldre/foresatte.

Fase 2:
A) Ungdom og eventuelt foreldre/foresatte får muntlig informasjon om prosjektet, samt formelt informasjonsskriv og samtykkeerklæring. I tillegg skal de få en enkel og lettfattelig brosjyre om prosjektet. Brosjyren skal også inneholde fotografi av forskeren og informasjon om hvordan denne kan kontaktes. Brosjyren vektlegger at eventuell deltakelse er frivillig og beskjed om at de når som helst, uten å oppgi grunn, kan trekke seg fra prosjektet. De som inviteres skal få god tid til å vurdere om de ønsker å delta.

Appendix I

B) Profesjonelle som er medlemmer av ansvarsgrupper/tverrprofesjonelle team vil motta både muntlig informasjon, et formelt informasjonsskriv og samtykkeerklæring. De vil også motta en enkel informasjonsbrosjyre som beskrevet ovenfor, som er tilpasset denne deltakergruppen.

DATAINNSAMLING OG REGISTRERING
Datainnsamlingen vil foregå ved hjelp av personlige intervjuer og Q-metodologi.

Fase 1:
Fire deltakere (ungdommer) ønskes til intervju om deres opplevelse av hvordan det samarbeides tverrprofesjonelt rundt dem og om deres opplevelse av brukermedvirkning. På bakgrunn av disse intervjuene utarbeides "utsagnskort".

Fase 2:
A) 28 ungdommer blir bedt om å sortere utsagnskortene på et brett, i forhold til hvor enig eller uenige de er i det aktuelle utsagnet. Denne sorteringen kalles Q-sortering.
B) 10 profesjonelle medlemmer i ulike ansvarsgrupper tilhørende ungdommer som deltar i prosjektet, blir bedt om å foreta Q-sortering basert på de samme utsagnene fra intervjuene med ungdommer, men tilpasset slik at de skal sortere ut fra hva de tenker at ungdommen mener.

Det er "ungdoms-deltakernes" subjektive opplevelser og tanker om tverrprofesjonelt samarbeid og brukermedvirkning som vil utgjøre hovedvekten av datamaterialet. I tillegg etterspørres profesjonelle medlemmer av ansvarsgrupper eller tverrprofesjonelt team sine oppfatninger av hvordan de tror ungdommer opplever det tverrprofesjonelle samarbeidet og brukermedvirkning. I tillegg samles inn følgende opplysninger om "ungdoms-deltakerne": Kjønn, alder, bostedskommune, boform samt hvilke instanser som deltar i deltakers ansvarsgruppe/tverrprofesjonelle team.

Data registreres på pc i nettverkssystem tilhørende virksomheten (beskyttet av brukernavn og passord og står i låsbart rom) samt på ekstern harddisk som kan krypteres.

Direkte personidentifiserbare opplysninger (fornavn og telefonnummer) oppbevares atskilt fra datamaterialet, men kan kobles til dette via koblingsnøkkel. Kjønn, alder, bostedskommune, boform, hvilke instanser som deltar i ansvarsgruppen/det tverrprofesjonelle teamet vil utgjøre indirekte identifiserbare opplysninger i materialet. I forbindelse med prosjektet tas det høyde for at det indirekte kan bli registrert sensitive personopplysninger om helseforhold, jf. personopplysningsloven § 2 pkt. 8 c.

Alle opplysninger som indirekte kan identifisere deltakere samt koblingsnøkkel makuleres ved prosjektslutt 31.12.2015.

INFORMASJON OG SAMTYKKE
Behandlingen av personopplysninger foretas på bakgrunn av et aktivt gyldig samtykke fra deltakerne, og fra foresatte for ungdom under 16 år, jf. personopplysningsloven §§ 8 første ledd (samtykke), 9 a. Personvernombudet finner at den skriftlige informasjonen til deltakerne/foresatte er tilfredsstillende mht. innhenting av et gyldig samtykke.

SEARCH 01.02.2016

The table shows search words (and combination of search words) and the number of hits.

	SEARCH WORDS and COMBINATIONS	Limiters/Expanders	Databases (Ebsco host)	Results
1	TI (Title) integr* OR multiagen* OR multiprofession* OR interprofession* OR inter-profession* OR partnership OR joint working OR cooperative OR co-operative OR multidisciplin* OR multi-disciplin* OR transcisiplin* OR trans-disciplin* OR agency cooperation OR collaborat* OR interfac*	Scholarly (peer reeviewed) journals, published 01.01.2006-01.02.2016, articles in English	MEDLINE; Academic Search Premier; SocINDEX with Full Text	147,989
2	TI adolescent OR young people OR teen* OR youth* OR youngster* OR young person*	Scholarly (peer reeviewed) journals, published 01.01.2006-01.02.2016, articles in English	MEDLINE; Academic Search Premier; SocINDEX with Full Text	73,717
3	1 AND 2		MEDLINE; Academic Search Premier; SocINDEX with Full Text	809
4	SU (subject) child welfare OR child protection OR "child* service*" OR "youth service*"	Scholarly (peer reeviewed) journals, published 01.01.2006-01.02.2016, articles in English	MEDLINE; Academic Search Premier; SocINDEX with Full Text	31,474
5	SU child mental health OR mental health OR child psych* or psych* OR couns*		MEDLINE; Academic Search Premier; SocINDEX with Full Text	2,500,583
6	3 AND 4		MEDLINE; Academic Search Premier; SocINDEX with Full Text	86
7	3 AND 5		MEDLINE; Academic Search Premier; SocINDEX with Full Text	327
8	3 AND 4 AND 5		MEDLINE; Academic Search Premier; SocINDEX with Full Text	39
9	AB (abstract) service user* OR participate*		MEDLINE; Academic Search Premier; SocINDEX with Full Text	467,102
10	6 AND 9		MEDLINE; Academic Search Premier; SocINDEX with Full Text	4
11	7 AND 9		MEDLINE; Academic Search Premier; SocINDEX with Full Text	21

Appendix III

(Noen av spørsmålene nedenfor har et språk som kan være vanskelige å oppfatte for noen av deltakerne. Muntlig utforming av spørsmålene må tilpasses hver enkelt deltaker underveis.)

Navn/erstattes med nr.:_____

Alder:_____

Kjønn:_____

Bostedskommune:_____

Boform:_____

Instanser representert i
ansvarsgruppen:_____

Innledende spørsmål:

Hva tenker du på når du hører ordet «ansvarsgruppe» (Ev. annen betegnelse som ungdommen er vant til på tverrprofesjonelt team)?

Hovedspørsmål:

Kan du fortelle litt om hvordan du har opplevd samarbeid i ansvarsgruppen din?

Deltar du selv i ansvarsgruppen? Hvorfor/hvorfor ikke? Eventuelt, hvordan deltar du?

Hvem (dvs. hvilke instanser) synes du bør være med i ansvarsgruppen? Hvem (dvs. hvilke instanser) synes du ikke bør være med i ansvarsgruppen?
Hva syns du om sammensetningen av din ansvarsgruppe?

Hvordan synes du at ansvarsgrupper skal ledes? Hvorfor? Hvordan opplever du at din ansvarsgruppe ledes?

I ansvarsgrupper møter ulike fagpersoner for å samarbeide for å gi best mulig hjelp til for eksempel en ungdom. Hva tenker du er viktig for at de som deltar skal samarbeide på en god måte? Hvordan har du opplevd dette samarbeidet i din ansvarsgruppe?

Hvordan kan du bruke ansvarsgruppen din?

Hvilke saker synes du det er naturlig å ta opp i en ansvarsgruppe?

I hvilken grad opplever du at ansvarsgruppen er interessert i hva du mener?

Hva tenker du om hvordan saker har blitt løst/bestemmelser har blitt tatt i ansvarsgruppen?

I hvilken grad opplever du at du får være med å ta avgjørelse i ansvarsgruppen? Hvordan?

I hvilken grad kan du si at ansvarsgruppen har ført til endringer for deg? Hvordan?

I hvilken grad kan du si at ansvarsgruppen har hjulpet deg/oppnådd resultater?

Hvis du fikk bestemme, hvordan ville da samarbeidet mellom barnevern og BUP (ev. annen instans) foregå? Hvorfor?

Hva tenker du kan bidra til enda bedre samarbeid i ansvarsgrupper, slik at flere barn og unge får den hjelpen de trenger når de trenger det? Hva tror du kan vanskeliggjøre samarbeid i ansvarsgrupper for barn og unge?

Hva mener du er de viktigste faktorene for at samarbeidet i ansvarsgrupper for barn og unge blir bedre? Grader fra 1-3.

Til slutt: Er det noe du vil tilføye eller understreke i forhold til dette med samarbeid i ansvarsgrupper og/eller ungdoms egen deltakelse i ansvarsgrupper?

Appendix IV

The Q-set used in this PhD study.

1	12	23	33
Det at jeg deltar med min mening i møtene er viktigere enn at de andre deltar med sine meninger	Jeg liker å være med på møtene.	Jeg bestemmer selv om jeg vil være med på møtene.	Jeg tror møtene ville blitt bedre dersom jeg selv var møteleder.
2	**13**	**24**	**34**
Jeg får være med å bestemme hvem som skal være med i samarbeidsgruppen	Jeg tror mine foreldre liker å være med på møtene.	Jeg synes lederen i møtene gjør en god jobb.	Jeg er klar over hvorfor de forskjellige personene er med på møtene.
3	**14**	**25**	**35**
Jeg ville heller at møtene skulle vært holdt på et annet sted.	Jeg synes vi har møtene veldig ofte.	Jeg synes tidspunktet vi har møtene på passer fint.	Jeg synes at møtene varer for lenge
4	**15**	**26**	**36**
Jeg vet at jeg får være med å bestemme mye hvis jeg selv vil.	Det er vanskelig å snakke i møtene fordi det er så mange mennesker der.	Før et møte pleier jeg å snakke med en profesjonell som jeg har tillit til om hvordan jeg har det, hva vi skal snakke om på møtet o.l.	Jeg tror at alle i møtene er virkelig interessert i min mening.

Appendix IV

5	16	27	37
Jeg føler meg sikker på at alle i møtene er innstilt på å jobbe for at jeg skal få det best mulig.	Jeg har en eller flere profesjonelle som er «på min side» og passer på å få fram det jeg vil i møtene.	Det hender at enkelte av de som er med på møtene forteller videre ting fra møtene som de skulle tie stille om.	Jeg synes det virker som at alle de voksne i møtene liker hverandre.
6	**17**	**28**	**38**
Det hender ofte at det blir bestemt ting på møtene som jeg er uenig i.	Jeg synes det er bra at det vi snakker om blir skrevet ned.	Jeg synes det er god stemning i møtene.	I møtene snakker vi om ting som jeg synes er viktige for at jeg skal få det bedre.
7	**18**	**29**	**39**
Det kommer egentlig ikke noe ut av møtene for min del.	Jeg får ofte min vilje gjennom når jeg sier hva jeg mener.	Når noe har blitt bestemt i møtene retter jeg meg alltid etter det.	Jeg har ofte kommet med forslag i møtene, som har gjort at ting har blitt bedre.
8	**19**	**30**	**40**
Hvis man kommer i kontakt med barnevernet så er de «på» deg for alltid.	Jeg er redd for at barnevernet skal bestemme ting jeg ikke er enig i, f.eks. at jeg må flytte og sånn.	På skolen får jeg samme behandling som de elevene som ikke har noe med barnevernet å gjøre.	For å få gode resultater tror jeg det er viktigere at jeg liker personligheten til dem som er med enn at de er dyktige fagpersoner.

9	20	31	41
Uten disse møtene ville jeg hatt det dårligere enn i dag.	Møtene har vært en god måte å løse problemer på.	Jeg opplever at måten møtene ledes på har mye å si for hva vi kommer fram til i møtene.	Jeg tror det betyr mye at vi i møtegruppen er vant til å jobbe sammen hvis vi skal komme fram til gode løsninger
10	**21**	**32**	**42**
Jeg kjenner mange andre barn og unge som også har slike møter som jeg.	Jeg gleder meg til jeg blir 18 år for da kan jeg bestemme selv, for eksempel om jeg vil flytte for meg selv.	Jeg tror møtene vil ha en betydning for mine framtidsvalg, som for eksempel det å ta utdannelse.	Jeg vil oppleve det vanskelig hvis saksbehandleren min slutter.
11	**22**		
Jeg tror at mine erfaringer er veldig nyttige for dem som legger opp hjelpetilbud for barn og unge.	Jeg synes det er helt greit om de andre elevene vet at jeg har slike møter.		