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The framework of children’s well-being in Sweden including the children with a parent working as soldier or officer living in a so-called military family

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The aim in the chapter is to explore the meaning in use of well-being for children in Sweden and look into how the constructed framework of well-being of children in Sweden including children in military families. These families not usually identify themselves as ‘military’. Nor have they been identified by the Swedish Armed Forces (SAF) as the family of the soldiers and the officers until recently (Veteranutredningen, 2014). Children in military families have not been in focus in any research until PhD Ann-Margreth Olsson 2011 took the initiative to involve the children in the plans of new research about soldiers, veterans and their families in Sweden. The research is ongoing since the end of 2012. As we will come to in the chapter, to create a framework of well-being of children in military families in Sweden is similar, or the same, as to create a framework of the well-being of children in general in Sweden.

Language in use

The meaning in use of the concept ‘wellbeing’ is not only a question of translation between different languages, but also a journey in between different cultures and discourses. The meaning we use created in the unique interaction in the moment (Vygotsky, 1979) and co-created in the approach and the perspective in use:

203. Language is as a labyrinth of paths. You approach from *one* side and know your way about' you approach the same place from another side and know no longer you way about. (Wittgenstein, 2001 p. 97)

The dictionary gives a suggestion or an opportunity of meaning of a word, a direction in which the meaning could be used in the living language (Vygotsky, 1979). Words are given their meanings in use and are contextually associated influenced by the approach and perspective of different actors addressed and responding (Shotter, 2012). Thus, when we approach the term 'well-being' of children we will find different meanings in use.

We are here connected it to the Convention on the Rights of the Child, part I article 3:

1. In all actions concerning children, whether undertaken by public or private social welfare institutions, courts of law, administrative authorities or legislative bodies, the best interests of the child shall be a primary consideration.

The principle above expresses rights and justice. The next paragraph talks about to ensure children protection and care when needed:

2. States Parties undertake to ensure the child such protection and care as is necessary for his or her well-being, considering the rights and duties of his or her parents, legal guardians, or other individuals legally responsible for him or her, and, to this end, shall take all appropriate legislative and administrative measures.

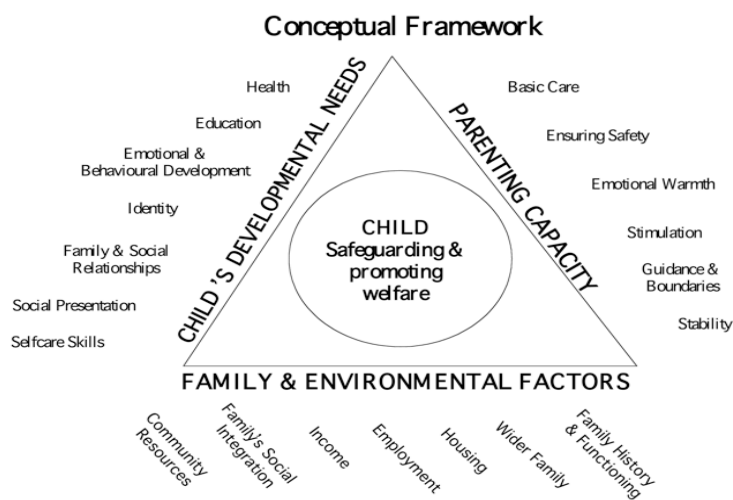
The importance of paragraph 2 lies in its relevance to a general principle, namely the ideal of 'well-being' of the child rather than the child's best interests. It confers a status on the child of being a subject rather than simply an object of rights. This connection adds a unique dimension to the concept of 'well-being', particularly when linked to the other general

principles of the CRC, namely non-discrimination (art. 2), the right to a harmonious development (art. 6) and the right to be heard (art. 12). (Zermatten, 2010)

Framework of children's needs

The paragraph 2 of CRC is also acknowledging the child as a member of her/his family and a member a community, ratifying the rights and duties of the child's parents, legal guardians and other responsible for looking after the child's interest and provide for the child's needs. In Sweden professionals working with children have a mandatory duty to report when they suspect that a child is in need to the social services and the public should do the same when they have suspicion of child maltreatment (2001). Without any delay the social workers shall start an investigation of the matters which have been brought to the social welfare service knowledge guarding the child's protection and promoting welfare. From an English framework for the assessment of children in need and their families and practice tool known as the *Integrated Children's System (ICS)*, built upon previous developments as the *Looking After Children* materials (Parker et al., 1995) and the *Assessment Framework* (Department of Health et al., 2000), the National Board of Health and Welfare of Sweden (NBHW) have adapted to the Swedish context (Socialstyrelsen, 2007).

Figure 1 The Integrated Children's System Framework



It offers a framework of children's developmental needs, and their parents' capacities to respond to these needs in the context of their families and communities" (Every Child Matters, 2007). In the latest version of the Swedish triangle the child's developmental needs are reduced to: Social relationships, Emotions and behaviour, Education and Health. The capacities of the parents are: Basic Care, Safety, Emotional Warmth, Stimulations and guidance. The family and environmental factors are: Background of the family, Present situation of the family, Housing, Work and economy, Social network and integration (Socialstyrelsen, 2007). All this variable is deconstructed into more specific matters.

The aim of the Social Act law is not only to find children needing protection, children who live in social environments that are harmful, but to prevent and provide measures before children have become exposed to maltreatment and becoming victims of harm. In the best interest for the children the aim is to reveal risks and deficiencies offering early support and preventive measures to families (Socialstyrelsen, 2013; cf. Eastmond and Ascher, 2011). A general welfare consensus combined with a broad, rights-based framing law means that social workers have the professional latitude to focus on non-statutory interventions to ensure that the child has 'good enough' living conditions (Khoo et al., 2002). When Sweden 1979 abolished all forms of corporal punishment by all caregivers, Sweden was the first country in the world to ban corporal punishment including humiliating treatment (Durrant, 2003). The overarching reason for the ban was the recognition that children are full human with inherent rights to physical integrity and dignity (Barnombudsmannen, 2005).

Children's rights in Sweden

The performance of the ideology for the child's best interest is regulated in Swedish law and regulations: the Social Service Act (Svensk Författningssamling, 2001:453), the Education Act (Svensk Författningssamling, 2010:800) and the Health and Medical Service Act (Svensk Författningssamling, 1982:763). Sweden ratified CRC 1990 (Utrikesdepartementet, 2003). In purpose to strengthen the rights of the children the Swedish Riksdag (Parliament) 2010 approved a new strategy (Regeringskansliet, 2011). The Discrimination Act (2008) protects everyone from discrimination in important areas of society, such as the healthcare, social services and the social insurance system, at school, university or college, and at shops. If

someone has been discriminated related to sex, transgender identity or expression, ethnicity, religion or other belief, disability, sexual orientation or age, this can be reported to the Equality Ombudsman (DO) (Diskrimineringsombudsmannen, 2015).

Child care and education

The childcare and education are regulated in the Swedish Education Act (2010). The Swedish child care system is obligated to provide child care (i.e., day care centres, day mothers and open preschools) for children (Utredningen om tillsynen inom socialtjänsten, 2007). In addition to care, the day care centre provides educational stimulation and has its own curriculum (Ibid). The municipalities have a responsibility to provide both the childcare and education. The amount of municipal subsidy for child care depends on the child's age and whether the parents work, study, are unemployed or on parental leave for other children, and all children are guaranteed a place in a one-year *förskoleklass* ('pre-school year') starting in the fall term of the year the child turns six until they start compulsory schooling at seven (Swedish Institute, 2015). Statistics from the Swedish National Agency for Education show that in 2014 75,7 percent of all 1– 5 years children, 77,4 percent of all 1–3 years old children, and 93,1 percent of all 4-5 years old children were enrolled in day pre-school (Skolverket [The Swedish National Agency for Education], 2014). Day care centres enhance children's cognitive development and, from a public health perspective, it can be argued that children at risk, and especially children from poor families, benefit from day care centres (The Swedish National Institute of Public Health, 2009). School for children aged 6 to 19 (preschool class through upper secondary school) is free of charge, with free lunches. The free education continues into university for students from the EU, but fees apply to students from outside the EU/EEA. (Swedish Institute, 2015).

Children in military families in Sweden

The population in Sweden was in 31 December 2014: 9 747 355 including 2 576 207 children (SCB Statistics Sweden, 2015). How many of the children in Sweden who has lived or lives with parent working or who have worked in the military are not easily identified. Historic no records or registrations have been made about the soldier's family and still is not. The soldier is asked to give the name of the two nearest members of the family in case of

emergency (Försvarmakten, 2015). When deployed abroad the soldier has the right to compensation for additional costs at home (3 000 SEK) and for children at home (4 000 SEK) per month. Since SAF introduced a new computer program PRIO (Engevall, 2013) in total 1 319 of 6 125 deployed soldiers have had the compensation including children (up to 18 or 20 years old when studying). Of this we can draw the conclusion, or at least use the hypothesis, that 21,5 % of the deployed soldiers had children. In the ongoing study a Swedish contingent to Afghanistan 2011-2012 was followed. Of the 682 persons registered in PRIO in the contingent 141 (20 %) had the higher compensation for children up to 18 (20) years old. When Ann-Margreth met 434 of the home-coming soldiers and asked them to answer a questionnaire about how many of them were parents 99 of them answered they were. That is 29 %. However here were included elder children. All together they had 211 children. That is an average slightly more than 2 children each which could be expected in a Swedish context. So, when 1 319 soldiers have got the higher compensation and even if some of them might have been deployed more than once, it is very likely approximately 2 500 children in recent years have the experience of a deployed parent. Sweden has participated in international military deployments in over 50 years (Swedish Armed Forces, 2015). Approximately 60-70 000 veterans have served in international missions and operations (Veteranutredningen, 2014). It is not likely that 20 % of the serving soldiers in the past had children during the years of deployments. Sweden had until 2010 compulsory military service and the deployed soldiers were younger and most likely more rarely having a family of their own. This development is also seen in other countries shifting from conscription to all-volunteer forces (cf. Andres et al., 2011; Burnam et al., 1992). However, also children born after the soldier has been deployed experience consequences of parents' deployments. So, all in all, during the years of Sweden participating in international military operations, a number of children in Sweden have come and are coming in contact with military life experiencing the consequences of deployed parents. To separate the framework of well-being of these children from the framework of well-being of children in general in Sweden, cannot be done. It is possible to come in contact with and follow individual cases, which Ann-Margreth is doing in the on-going research, however it is not possible to catch explicit the framework of the well-being of children in so called military families. Therefore, we here give account for the framework of wellbeing of all children in Sweden.

Children's living conditions

Since 1974 there are continuous statistic on the living conditions in general for Swedish children based on yearly interviews with 7 500 children and parents in Sweden (Statistics Sweden, 2005, Statistics Sweden, 2007, Statistics Sweden, 2009, Statistics Sweden, 2011).

Roughly one in four of all children under age 18 have parents that do not live together because the parents have separated (divorced) or never lived together (Statistics Sweden, 2015). Among those children who have parents who do not live together, it is most common to live with the mother (Statistics Sweden, 2011). However, more and more children live alternately about half of their time with their mothers and half with their fathers. Even if the child only lives with the one parent, it is common to have regular contact with the other parent also. For these children, the geographic distance can have great significance for the child's possibility to meet the parent he or she does not live with (Statistics Sweden, 2015). During the 2000s the percentage of children who live close to the other parent has increased for children with parents in the upper income classes, but has decreased for children with parents in the lower income classes (Statistics Sweden, 2015).

It may be that economic conditions have become a more important factor for the possibilities of separated parents to live close to each other. Children who live with a single parent often have poorer economic conditions compared with children who have parents living together (SCB Statistics Sweden, 2014). Disposable income is lower, and a larger part of income comes from different forms of family support such as child allowance, housing allowance, maintenance support and economic support. The average disposable income 2012 for a family with one adult and one child was about SEK 18 400 per month. Disposable income for a family with two adults and two children is SEK 43 000 per month (SCB Statistics Sweden, 2014). All children living in Sweden are entitled to child allowance/subsidy (1 050 SEK per month) (Försäkringskassan, 2013). It is paid from and including the month after the birth of the child, or later, if, for example, the child moves to Sweden. Child subsidy is tax-free and paid until the child attains the age of 16 whereupon a study subsidy follows.

For the most part, children and youth have some form of personal economy (Statistics Sweden, 2005). The most common source consists of some form of weekly or monthly allowance from the parents or, a part or the whole of a child or student subsidy. However, some young people also work. From a material point of view, today's 10 to 18-year olds are well-off with their own television, computer and their own mobile telephone (Statistics Sweden, 2005).

96 percent of children asked said they meet friends in their leisure time every week. They visit friends in their homes or invite friends over or have the meeting somewhere else. Two thirds of children aged 10–18 say they are active in sports. More than half of the boys and a third of girls between ages 7 and 15 play some form of team sport. The sports centre that most children usually visit is the public swimming pool. (Statistics Sweden, 2009)

Nine out of ten children get along well with their mothers and their fathers. Roughly as many, more than nine out of ten, say that their mothers always or nearly always have time to talk or do something together. Eight out of ten girls and nearly nine out of ten boys report that their fathers always or nearly always have time to talk or do something together. When children are distressed or troubled, seven out of ten usually talk with their mothers. Older children talk with their parents to a lesser extent than younger children when they are troubled or worried. When children are troubled or worried, about half of them talk with a friend. Older children talk with a friend to a greater extent than younger ones, and more girls than boys usually talk with a friend. (Statistics Sweden, 2011)

Girls have psychosomatic disorders considerably more often than boys. Psychosomatic disorders include headaches, stomach aches, sleeping disorders or feelings of stress. Some of these disorders are twice as common for girls than for boys. By and large, 10–18-year olds have a positive attitude about themselves. Few children completely identify themselves with the statement about a lack of mental well-being. (Statistics Sweden, 2007)

Children's well-being in comparison studies with other countries

Sweden has participated in a comparison study of OECD (OECD - Organisation for Economic Co-operation and Development, 2009). It compares policy-focussed measures of child well-being in six dimensions, chosen to cover the major aspects of children’s lives: material well-being; housing and environment; education; health and safety; risk behaviours; and quality of school life. The results were ranked: 1 ranked the best performing country of the 30 OECD countries participating. Using standardised figures each country with half a standard deviation higher than the OECD average became coloured blue on that dimension, whilst countries in dark grey are at least a half standard deviation lower. Iceland and Sweden were the strongest performers with each having five blues and one white. Sweden became ranked in as follows:

Table 1

Material well-being	Housing and environment	Educational wellbeing	Health and safety	Risk behaviours	Quality of school life
6	3	9	3	1	5

UNICEF has also conducted international comparisons and country studies about children’s well-being. UNICEF takes a multi-dimensional dimension-based indicator approach. Each county’s overall rank is based on average ranking for the five dimensions of child well-being considered in the review (UNICEF Office of Research, 2013). The Netherlands retains its position as the clear leader and is the only country ranked among the top five countries in all dimensions of child well-being. Four Nordic countries – Norway, Iceland, Finland, and Sweden – sit just below the Netherlands at the top of the child well-being table.

Below is an extract of the top of the table “A league table of child well-being” (UNICEF Office of Research, 2013 p.2):

Table 2

	Overall well-being	Dimension 1	Dimension 2	Dimension 3	Dimension 4	Dimension 5
	Average rank (all 5 dimensions)	Material well-being (rank)	Health and Safety (rank)	Education (rank)	Behaviours and risks (rank)	Housing and environment

							(rank)
1	Netherlands	2,4	1	5	1	1	4
2	Norway	4,6	3	7	6	4	3
3	Iceland	5	4	1	10	3	7
4	Finland	5,4	2	3	4	12	6
5	Sweden	6,2	5	2	11	5	8

Sweden participates since 1985/86 also in the Health Behaviour of School-aged Children study (HBSC). Although most children in Sweden rate their health as good, the Swedish findings from the WHO collaborative cross-national Health Behaviour in School-aged Children study 2013/14 show some disturbing results regarding mental health. The majority of the students rate their health as good. In Sweden, nearly 8,000 students answered the questionnaire, which equals a response rate of 69 per cent. However, the level of poor self-rated health, somatic and mental problems and low general well-being increased with age. (Folkhälsomyndigheten [Public Health Agency of Sweden])

Many girls reported having psychosomatic symptoms, and almost every fifth girl has tried to lose weight. Schoolchildren's health habits in Sweden 2013/14 shows improvements in several areas of child and adolescent health; the proportion of young people who have been drunk is the lowest in 30 years, fewer smoke or take snuff, more eat vegetables daily, and the proportion of adolescents who eat candy or drink soda every day has decreased. Nevertheless, the study also shows some disturbing results: The proportion of 15-year-old girls who experience at least two mental and / or physical symptoms such as stomach pains or trouble sleeping more than once a week continues to increase, and is now 57 % the highest since the study began. Young women's body image has also deteriorated. Half of the 13- and 15-year-old girls think they are too fat. Almost one in five 13-year-old girls, (18 %) say they have tried to lose weight, an increase over the previous poll – this is of concern as a strong negative body image is associated with an increased risk of mental health problems later in life. (HBSC - Health Behaviour in school-aged children - world health organization collaborative cross-national survey, 2015).

Young girls' mental health is deteriorating and one explanation could be the pressure of schoolwork (Folkhälsomyndigheten [Public Health Agency of Sweden]). The rapid development of technology has changed the children's and young people's living in many ways, which may be important for their mental health (Ibid). Symptoms of impaired mental wellbeing (sadness, insomnia, headaches, etc.) is common among Swedish 15-year olds and suicides are not declining among young people, as they do for other age groups (Socialstyrelsen [the National Board of Health and Welfare - NBHW], 2013).

In the whole health and social conditions of children and adolescents in Sweden are good particularly for infants and school children. For example, infant mortality is among the very lowest in the world and it continues to decrease. Children and young people's physical environment are good from an international perspective, with low incidence of environmentally related illness, such as caused by air pollution. The death rate from accidents has also been unchanged, but decreased the last few years. Drug use is less common among Swedish young people, while alcohol consumption is on an average European level. Sweden, together with the other Scandinavian countries and the Netherlands – are among the countries where economic vulnerability among families with children is the least comprehensive. It is also very rare that Swedish children lack basic necessities such as clothes, suitable shoes, three meals a day, books or toys, and more. Some explanations for this are that Swedish families with children often have two breadwinners, to single parents working to a greater extent and on transfer payments to support families with children. Of importance is also that many welfare services are free of charge for children, such as health care, dental care, school and school lunches. (Socialstyrelsen [the National Board of Health and Welfare - NBHW], 2013).

Conclusion

As already said in the introduction, to create a framework of the well-being of children in military families in Sweden is the same as to create a framework of the well-being of children in general in Sweden. One of the reasons is that children in military families in Sweden, as well as all the family members, live and participate in the local communities and in the society as everybody else of the citizens. Another is, there are no registrations or records

where children in military families can be identified. Thus, it is not possible to discern the children of military families neither from other children nor in statistic or reports.

In purpose to create a framework of children's well-being in Sweden we have given glimpses from a legal and justice perspective as well as from a care and a social perspective on the concept of children's well-being. Finally, the Swedish results in comparison studies of OECD and UNICEF about children's well-being have been accounted for. In the whole health and social conditions of children in Sweden are good.

References

2001. Socialtjänstlagen [The Social Service act]. *SFS 2001:453*. Sweden.
2008. Diskrimineringslagen [the Discrimination Act]. *SFS 2008:567*. Sweden.
2010. Skollag [The Education Act]. *SFS 2010:800*. Sweden.
- ANDRES, M., MOELKER, R. & SOETERS, J. 2011. Behind the Family Lines. A Longitudinal Study of Dutch Families' Adaptions to Family-Induced Separations. *Res Militaries*, 2.
- BARNOMBUDSMANNEN, T. C. S. O. 2005. *The Swedish Corporal Punishment Ban* [Online]. Stockholm: Barnombudsmannen. [Accessed 0806 2008].
- BURNAM, M. A., MEREDITH, L. S., SHERBOURNE, C. D., VALDEZ, R. B. & VERNEZ, G. 1992. Army Families and Soldier Readiness. *RAND*, R-3884-A.
- DEPARTMENT OF HEALTH, DEPARTMENT FOR EDUCATION AND EMPLOYMENT & HOME OFFICE 2000. *Framework for the Assessment of Children in Need and their Families*, London, The Controller of her Majesty's Stationery Office.
- DISKRIMINERINGSOMBUDSMANNEN 2015. Diskrimineringsombudsmannen.
- DURRANT, J. E. 2003. Legal reform and attitudes toward physical punishment in Sweden *The International Journal of Children's Rights*, 11, 147-173.
- EASTMOND, M. & ASCHER, H. 2011. In the Best interest of the Child? The Politics of Vulnerability and Negotiations for Asylum in Sweden. *Journal of Ethnic and Migration Studies*, 37, 1185-1200.

- ENGEVALL, T. 2013. PRIO-information februari 2013, [PRIO-information February 2013].
Stockholm: Forscarsmakten, Högkvarteret, Ledningsstabens PRIO-avdelning.
- EVERY CHILD MATTERS 2007. Integrated Children's System. London: Government, UK.
- FOLKHÄLSOMYNDIGHETEN [PUBLIC HEALTH AGENCY OF SWEDEN] *Skolbarns hälsovanor i Sverige 2013/14. Grundrapport [Health Behaviour in School-aged Children (HBSC), results from Sweden of the 2013/14 WHO study]*, Stockholm, Folkhälsomyndigheten [Public Health Agency of Sweden].
- FÖRSÄKRINGSKASSAN 2013. Child allowance [Barnbidrag] and large family supplement [flerbarnstillägg] In: FÖRSÄKRINGSKASSAN (ed.)
https://www.forsakringskassan.se/wps/wcm/connect/07a63f80-05f7-4254-b294-71e9568f0999/4058_barnbidrag_flerbarnstillagg_eng.pdf?MOD=AJPERES.
Försäkringskassan
- FÖRSVARMAKTEN, S. A. F. 2015. Försvarmaktens guide för ANHÖRIG, [The Swedish Armed Forces' guide for military families]. In: FÖRSVARMAKTEN, S. A. F. (ed.)
<http://jobb.forsvarsmakten.se/siteassets/media/pdf-och-worddokument/informations--och-rekryteringsbroschyror/anhorigbroschyr.pdf>. Stockholm: örsvarmakten, [Swedish Armed Forces]
- HBSC - HEALTH BEHAVIOUR IN SCHOOL-AGED CHILDREN - WORLD HEALTH ORGANIZATION COLLABORATIVE CROSS-NATIONAL SURVEY 2015.
HSBC Sweden Report: School children's health habits 2013/14. 01-01-2015 ed.:
HBSC - Health Behaviour in school-aged children - world health organization collaborative cross-national survey.
- KHOO, E. G., HYVÖNEN, U. & NYGREN, L. 2002. Child Welfare or Child Protection. Uncovering Swedish and Canadian orientation to Social Intervention in Children Maltreatment. *Qualitative Social Work*, 1, 451 - 471.
- OECD - ORGANISATION FOR ECONOMIC CO-OPERATION AND DEVELOPMENT 2009. *Doing Better for Children: Comparative Child Well-being across the OECD*, Secretary-General of the OECD.
- PARKER, R., WARD, H., JACKSON, S., ALDGATE, J. & WEDGE, P. 1995. *Looking After Children: Assessing Outcomes in Child Care. The Report of an Independent Working Party established by The Department of Health*, London, HMSO.

- REGERINGSKANSLIET 2011. Strategy to strengthen the rights of the child in Sweden. *In: SOCIALDEPARTEMENTET* (ed.). Stockholm: The Ministry of Health and Social Affairs.
- SCB STATISTICS SWEDEN 2014. Children and their Families: 52 000 children experienced a separation in 2013. 2014-10-06 ed.: SCB Statistics Sweden,.
- SCB STATISTICS SWEDEN 2015. Number of persons by type of household status and sex 31 December 2014.
- SHOTTER, J. 2012. *Wittgenstein in Practice: His Philosophy of Beginnings and Beginnings, and Beginnings*, Chagrin Falls, Ohio, USA, Taos Institute publications/WorldShare Books
- SKOLVERKET [THE SWEDISH NATIONAL AGENCY FOR EDUCATION] 2014. Barn och grupper i förskola 15 oktober 2014. 2015.04.23 ed.: Skolverket [The Swedish National Agency for Education].
- SOCIALSTYRELSEN 2007. *Social barnavård i förändring. Slutrapport från BBIC-projektet*, Stockholm, Socialstyrelsen.
- SOCIALSTYRELSEN 2013. *Samverka för barns bästa – en vägledning om barns behov av insatser från flera aktörer*, Stockholm, Socialstyrelsen.
- SOCIALSTYRELSEN [THE NATIONAL BOARD OF HEALTH AND WELFARE - NBHW] 2013. *Barns och ungas hälsa, vård och omsorg [Child and adolescent health and health care in 2013]*, Stockholm socialstyrelsen [the National Board of Health and Welfare - NBHW].
- STATISTICS SWEDEN 2005. *Levnadsförhållanden, rapport 110, Barns villkor*. [Living Conditions, Report 110, Children's conditions]. *Living conditions*. Stockholm: Statistics Sweden,.
- STATISTICS SWEDEN 2007. *Levnadsförhållanden, rapport 115, Barns Hälsa*. [Living Conditions. Report no 115: Children's health]. *Living Conditions* Stockholm: Statistics Sweden.
- STATISTICS SWEDEN 2009. *Levnadsförhållanden, rapport 116, Barns Fritid*. [Living conditions, report 116, Children's Leisure Time]. *Living Conditions* Stockholm: Statistics Sweden,.

- STATISTICS SWEDEN 2011. Levnadsförhållande, rapport 119, Barns sociala relationer. [Living Conditions, report 119, Children's social relationships]. In: STATISTICS SWEDEN (ed.) *Living Conditions*. Stockholm Statistics Sweden,.
- STATISTICS SWEDEN 2015. *Bo nära eller långt bort? avstånd mellan barn och föräldrar efter en separation 1975-2013* [Living close by or far away? Distance between children and parents after separation 1975-2013], Stockholm, Statistics Sweden.
- SWEDISH ARMED FORCES, S. 2015. *Historiska Internationella Insatser, [Historical International Deployments]* [Online]. Stockholm: Försvarsmakten (SAF). Available: <http://www.forsvarsmakten.se/sv/information-och-fakta/var-historia/internationella-insatser/> [Accessed March 25th 2015].
- SWEDISH INSTITUTE 2015. Equal access to free education In: (SI), S. I. (ed.). Stockholm: Swedish Institute.
- THE SWEDISH NATIONAL INSTITUTE OF PUBLIC HEALTH 2009. *Child day care center of home care for children 12-40 months of age – what is best for the child? A systematic literature review*, Östersund, The Swedish National Institute of Public Health.
- UNICEF OFFICE OF RESEARCH 2013. *Child Well-being in Rich Countries: A comparative overview*, Florence, The UNICEF Office of Research.
- UTREDNINGEN OM TILLSYNEN INOM SOCIALTJÄNSTEN 2007. Samordnad och tydlig tillsyn av socialtjänsten. Slutbetänkande av Utredningen om tillsynen av socialtjänsten (SOU 2007:82). In: SOCIALDEPARTEMENTET (ed.) *SOU*. Stockholm: Regeringskansliet.
- UTRIKESDEPARTEMENTET, R. 2003. *Mänskliga rättigheter - Konventionen om barnets rättigheter*, Stockholm, Utrikesdepartementet.
- VETERANUTREDNINGEN, T. V. I. 2014. *Svensk veteranpolitik. Ett ansvar för hela samhället. Slutbetänkande av Veteranutredningen, [The Swedish veterans policy. A responsibility for the whole society. Final report of the Veterans Investigation]*, Stockholm, Statens Offentliga Utredningar.
- VYGOTSKY, L. S. 1979. *Thought and Language*, The Massachusetts Institute of Technology.
- WITTGENSTEIN, L. 2001. *Philosophical Investigations*, Oxford, Blackwell Publishers.

ZERMATTEN, J. 2010. The Best Interests of the Child Principle: Literal Analysis and function. *International Journal of Children's Right*, 18, 483-499.