



Children as next of kin – legislation and organization in Sweden

Children as Next of kin

More recently in Sweden the needs of children who are “next of kin” has begun to receive serious attention. This concept is not commonly known, but is becoming used more and more. The term “young carers” is not established at all. There are, however, children with excessive burdens of responsibility and care in their families. According to a survey, about seven percent of 15-year-olds have such a responsibility.

The law provides strong support for children

The Social Services Act places strong responsibility on the 290 Swedish municipalities to provide protection and support, and to ensure that children are able to grow up in healthy and safe environments. Due to this act the municipal social services have a clear responsibility to support children in difficult living situations. Authorities and professionals are also obligated to notify social services if they suspect that a child can be at risk. Parents and children over 15 can also request assistance from social services. This assistance could, for example, be having a contact person or a contact family as support mechanism. Individuals and families can also receive financial support when they have insufficient income. It is often in special units within the social services that the children’s needs are assessed and the appropriate interventions proposed.

There is also a special law stating the right to support from municipalities for persons with certain disabilities, namely, the Act Concerning Support and Service for Persons with Certain Functional Impairments, LSS.

The Social Services Act also requires municipalities to provide support for daily living to inhabitants who are unable to secure this through other means. For instance, there is a provision of support to those who care for a family member.

Swedish legislation is clear that the parents have a responsibility to care for their children until they reach the age of 18. Therefore the reverse idea, where children should have the responsibility for the care of their parents or for another family member, is strange. Legislation requires that such support be provided by the society and should not fall on minors.

Clear responsibility in health and medical care

Health and medical care are primarily the responsibility of the 21 counties and regions. In 2010 there was a provision of the health care act, obligating officials to take into account the children’s needs for information, advice and support when a parent or another person with whom the child lives, is under care for addiction, psychiatric problems or serious illness, or when unexpected death occurs. The provision is unique in Swedish legislation, because the responsibility for the children’s needs is placed on the staff that treats adult patients.

It takes time before care services have the routines and competence to be able to take on this responsibility fully. The Swedish National Board of Health and Welfare is working together with The Swedish Family Care Competence Centre (Nka) in collaboration with those responsible for health and medical care in the various regions so that this provision is known and applied. One such measure is an online course to further staff competence development. See www.anhoriga.se

Comprehensive development work

The Swedish National Board of Health and Welfare was given a comprehensive task by the government in 2011. Since then they have initiated a range of register studies, state of the art reviews, evaluations and surveys within the field. As a result, the Swedish Family Care Competence Centre (Nka) has published roughly 20 reports that provide new knowledge about children as next of kin and as young carers. This knowledge can be used as the basis for continued work toward developing and strengthening support. www.anhoriga.se/barnsomanhoriga.

The development work is geared toward managers and staff within social services, health and medical care, and preschool and school. There is also a network of researchers in the field. We also collaborate with non-profit organisations. These complement the official assistance and are often pioneers in detecting problems or needs, and in creating new support interventions. Sometimes they also perform tasks on behalf of the public sector.

Family perspective needed

The development within public health and social care has gone towards increased individualisation and specialisation. This requires an active effort to create and maintain collaboration between units and facilities in order to ensure a holistic, and family, perspective. Here we try to promote this development.

Various forms of support

Support to children can be provided through the support to the parents, the family and directly to the children. Support to the parents can be support in parenting and support in ensuring the children's needs. One way to give support to children is that they get adequate information about the addiction or the disease. Children may need support in preschool and school in order to be able to take part in schooling and succeed in their schoolwork. It is also common for support to be in the form of so-called psycho-educative group activities for children, more often in combination with concurrent groups for parents. The purpose is to relieve guilt and shame, share experiences with others in similar situations and gain more knowledge. Although many municipalities and non-profit organizations can offer such group activities, it is sometimes difficult to motivate children and parents to participate. There is also online support for different groups of children as next of kin.

Development areas

One important development area is addressing the young carers who take on an unreasonable responsibility and risk getting poorer school results, and how society can relieve them through support to the parents and the family in everyday life.

Support to very young children as next of kin needs to be developed, since the existing systems have not focused enough on this group of children and often lack specific expertise in this area.

Paying attention to children in the situations where a parent or another close relative suffers from a serious and life-threatening condition is something that we are currently conducting intensive development work on.

Children of parents with neuro-psychiatric conditions also need to be recognized. There is ongoing work with designing special support in parenting for these parents.

Children as next of kin and young carers with immigration background is another group that needs special attention because inequality exists among different groups regarding their health as well as in their use of care services.

