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Professional Knowledge on Violence in Close Relationship in Swedish Social Services

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ABSTRACT

Violence in close relationships (VCR) is a major social problem, and calculations indicate that every third woman globally has been subjected to VCR at some point in her life. Given the extent of the problem, it is likely that many social workers will meet victims of violence in their daily work. Their knowledge on VCR are therefore of great importance. The aim of this study was to examine the professional knowledge on VCR among social workers in the Swedish social services. The results are based on a survey answered by 153 social workers in three Swedish municipalities. The results revealed that in social workers' acquisition of knowledge, they value professional experience and education the most. Around 70 percent stated that they lack knowledge on several topics related to VCR, such as the special needs of targeted groups. In order for social workers to maintain a high professionalism in their work with VCR educational efforts are required, it is also necessary to provide time and conditions for supervision and critical reflection in ongoing work. An important area for future research is to examine how social work education addresses these issues, the conditions for continuing education and training in the social service.

KEYWORDS

Social workers; social services; knowledge; education; guidelines

Introduction

Every third woman globally has been subjected to violence at some point in her life (World Health Organization, 2014). Despite the extent of these abuses and the challenges this entails for the social work profession, we know little about the social workers' competence to work with victims of violence (Neff, Patterson, & Johnson, 2012; Payne, 2008). In Sweden, for many decades the needs and rights of women exposed to violence has been an area where authorities have relied primarily on efforts from non-governmental organizations and women's shelters (Ekström, 2018). This shift in responsibility from the welfare state to non-governmental organizations can to some extent explain why Swedish social workers lack professional knowledge and training within this field (Brottsförebyggande rådet, 2010; Inspektionen för vård och omsorg, 2014;

Ljungwald & Svensson, 2007). Differences in professional skills between municipalities' may also be depending on how social services work is organized and on how much discretion social workers are given (Ekström, 2018). Another conceivable contributing factor to the lack of competence might be that violence in close relationships (VCR¹) has been, and still is, an ignored field of knowledge in Swedish social worker education (Skr, 2016/17:10). However, the Swedish Government's ambitions to meet the needs of women subjected to violence has intensified since 2007, when an action plan against violence was adopted (Skr, 2007/08:39). In order to strengthen the social service's responsibility for this target group, new legislation was introduced in 2014 (SOSFS, 2014:4), and The Swedish National Board of Health and Welfare (National Board) has published working guidelines with

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the goal to meet the needs of women subjected to violence. The Swedish Government's efforts are largely in line with research showing that education and training in this field of practice are essential for social workers' understanding of risks and needs (Forgey, Allen, & Hansen, 2014), for improving professionals' attitudes (Keeling & van Wormer, 2012; Szilassy, Carpenter, Patsios, & Hackett, 2013), and in order to conduct good investigations and interventions (Crabtree-Nelson, Grossman, & Lundy, 2016; Heffernan, Blythe, & Nicolson, 2014). The importance of working guidelines is more doubtful. Research shows that self-study workbooks and various forms of policy appear to be of more subordinate importance for social workers' professional skills when it comes to VCR (Heffernan et al., 2014; Payne, 2008).

The Swedish Context

Despite Sweden's advanced position in terms of gender equality is violence against women considered to be the most acute and greatest obstacle to a gender-equal society (Regeringen, 2018). In line with the spirit in the action plan, in 2018 the Swedish government also strengthened the social work education by compulsory elements that take particular account for men's violence against women and violence in close relationships (Högskoleförordningen, 1993:100). According to Swedish regulations and general advices on VCR are social service workers required to have a Bachelor of Science in Social Work when working with cases concerning adults exposed to violence (SOSFS, 2014:4). In their daily work, social workers are also expected to take part of various publications published by the Swedish National Board of Health and Welfare (National Board), to raise their knowledge. The National Board, is a government agency under the Ministry of Social Affairs. Their assignments include a broad range of activities relating to social services and health and medical care, including for example developing statistics, rules, knowledge, regulations and general advice. Their mission to improve support and help for victims of violence and those closely related to victims of violence, as well as to support children who have witnessed violence (Socialstyrelsen, 2009a), is accomplished through various public

working guidelines, that social workers can find at the National Board's website in order to enhance their competence and knowledge in the area. Nine of these guidelines are in focus in this study, four of them have a general character, meaning that they can be applied in the work regardless of women's needs and life situation, such as their age and ethnicity (Socialstyrelsen, 2009b, 2011a, 2013 & 2014). Five guidelines are educational materials concerning the target groups of women that the government considers to be particularly vulnerable to violence, namely women who are disabled, those with substance abuse or addiction problems, elderly women, women with a foreign background, and those who have been subjected to honor-related violence and oppression (Socialstyrelsen, 2011b, 2011c, 2013a, 2013b, 2013c).

The increased responsibility that the new legislation from 2014 places on the social workers in Swedish social services requires advanced knowledge and professional skill. To understand how the professionalization of social work in this area is progressing is it important to investigate what knowledge gaps exists and how these knowledge needs are met. The overall aim of this article is to examine the professional knowledge on violence in close relationships among social workers in the Swedish social services. Three main questions are addressed: (1) What education do the social workers have on issues related to VCR, and what knowledge gaps exists? (2) How do the social workers enhance their professional knowledge within this field? (3) To what extent do the social workers use prescribed guidelines in their work with VCR?

Method

This study is part of a broader web-based survey examining social workers' professional experiences, knowledge, attitudes, and training needs related to VCR. The participants were social workers in the social services in three Swedish municipalities with different geographical locations and demographics.

Design of the Survey Questionnaire

An initial list of questions was formulated after a literature review and a careful reading of the

working guidelines published by the Swedish National Board (Socialstyrelsen, 2011a, 2011b, 2011c, 2013a, 2013b, 2013c). The questionnaire was divided into five main sections, and this study presents the results from two of these sections. The first section included demographic and professional background characteristics. In this part, respondents were asked about their age, gender, work settings, years spent at the social service, study program, and university degree. The second section asked question about respondents' education and training experiences and their knowledge about working guidelines. Regarding social workers' education, questions were asked about when they most recently participated in some kind of studies related to VCR and what kind of education they have participated in. We differentiated between professional and personal education. Professional education refers to participation in some sort of training within the framework of social work employment, and personal education is about knowledge acquired during non-working hours. To study the participant's independent search for knowledge, the social workers were asked to indicate whether they had used previously mentioned working guidelines. Another important question was to examine if participants considered internal factors, such as self-acquired knowledge, and external factors, meaning exchange with others, to be knowledge-raising factors in their work in supporting victims of VCR. Five factors were examined, including three internal factors: professional experience with victims of violence, education, and other awareness-raising factors such as the literature and the Internet. The two external factors were: exchange of experience with colleagues and exchange of experience with supervisors.

The second section also asked if the participants find that they lack knowledge in some topics related to VCR. The following topics were examined: The special needs of target groups, how to support men subjected to VCR, intervening with perpetrators of violence, how to support same sex victims of VCR, how to support children subjected to VCR, how to support women subjected to VCR, the magnitude of the violence, and theoretical perspectives on VCR. The participants were also able to add other topics where they experienced a lack of knowledge.

The questionnaire was pilot tested for content validity on social workers who did not participate in the study, the test did not give rise to any changes.

Participants and Procedure

As mentioned above, the participants in this study were social workers in social services in three Swedish municipalities with different geographical locations and demographics. The first municipality includes a city with a population of more than 200,000 inhabitants. The second municipality consists of a medium-sized town with 50,000–200,000 inhabitants and with 70 percent of the inhabitants living within an urban area. The last one is a rural municipality, with a population of fewer than 300,000 inhabitants. The municipalities have equivalent demographic structure, the average ages of the residents were 39 to 45 years and the distributions of women and men were even. However, the distribution of foreign-born residents differed and ranged between 10 and 30 percent. The large city had the largest share of foreign-born residents, and the rural municipality had the lowest share.

Letters were sent to the official mailing addresses of the social services at each municipality to get access to employees within the social service. After responses from contact persons within the municipalities, a mailing list was developed containing street-level social workers. Before the study was launched, social workers and their supervisors were informed about the study. An invitation and a link to the web survey were sent to a total of 504 participants in April 2016. Of these, 159 participants were located in the large city, 201 in the medium-sized town, and 145 in the rural municipality. The survey was open for 18 days, and a reminder was sent out approximately one week after distribution, and on the last answering day. The response rate was 30.4 percent, and the proportion of responses was distributed as follows: the medium-sized town 39 percent ($n=79$), the large city 25 percent ($n=40$), and the rural municipality 23 percent ($n=34$). The response rate might seem low but should be seen in relation to social workers' strained working conditions during the time of the study (Astvik, Welander, & Isaksson, 2017).

The pressure on the Swedish social services was at that time much affected by the increasing number of asylum seekers (Socialstyrelsen, 2016). Those who worked with children and adolescents did not have enough time to perform their duties, and many social workers were on sick leave due to stress (Grefve, 2017). These circumstances indicate a random dropout in relation to the researched aim, i.e., it is not likely that they did not respond because of their educational background, their choice of knowledge enhancement, or their use of guidelines.

An important ethical aspect is that data were gathered with so-called informed consent. That means that the respondents were informed of the main purpose of the study and that participation was voluntary. The respondents were also informed of how the results will be used, their confidentiality, and their right to withdraw their participation. After study participation, participant's names were protected and made available only to the researcher in order to maintain confidentiality. To minimize the risk of revealing the municipalities participating in the study, the data are reported at an aggregated level. Approval for the study was obtained from the Regional Ethical Review Board in Umeå (ref. 2015/223-31Ö).

Data Analyses

Data were imported into IBM SPSS (Version No. 25.0) for analysis and were double checked for invalid responses and missing data. Descriptive statistics were used to calculate the frequencies and percentages of participants' responses to the survey questions. Pearson's chi-squared or Fisher's exact tests were used to assess differences in non-parametric variables. The significance level used was $p < 0.05$. Adjusted odds ratios with 95% confidence intervals were applied to assess possible associations between background variables such as participants' demographics and different outcomes regarding reading guidelines and to include potential confounders in the analyses when there was theoretical and/or empirical support to do so. As little is previously known of Swedish social workers' knowledge on VCR, our study is mainly exploratory and descriptive aspects are therefore in the foreground of the presentation of the result.

Table 1. Characteristics of survey participants.

Characteristics	N = 153	
	n	(%)
Gender		
Female	141	(92.2)
Male	5	(3.3)
Other	7	(4.6)
Age		
<30	27	17.7
30-39	33	21.6
40-49	40	26.1
50 and over	47	30.7
Missing	6	3.9
Municipality		
Large city	40	(26.1)
Medium-sized town	79	(51.6)
Rural municipality	34	(22.2)
Professional field		
Individual and family care	113	(73.9)
Elderly	21	(13.7)
Disabled	12	(7.8)
Other	7	(4.6)
Year worked in social service		
<1 year	24	(15.7)
1-5 years	41	(26.8)
6-10 years	18	(11.8)
>10 years	70	(45.8)
Study program		
High school	7	(4.6)
Vocational school	3	(2.0)
University	143	(93.5)
University degree		
Degree of Bachelor of Science in Social Work	114	(79.7)
Other	29	(20.3)

Result

One hundred fifty-three individuals completed the survey. Among the participants, 141 (92.2%) were female, five (3.3%) were male, and seven (4.6%) described their gender as "other". Participants ranged in age from 23 to 65 years. Table 1 shows that over 90 percent of the respondents had a university degree and that the majority had a Bachelor of Science in Social Work (74.5%). Of those with some other kind of degree, most indicated a degree related to social sciences or health care. Most respondents had worked in different fields of practice in the social services for more than 10 years, and a majority (73.9%) responded that they work within the area of individual and family care.

Education

This study examined the extent to which social workers have participated in education related to VCR. Of those who answered the question of when they most recently participated in education related to VCR, 62.2 percent reported that they studied these issues between the years 2011

Table 2. Social workers' knowledge gaps related to violence in close relationships (VCR) (N = 153).

	Large city		Medium-sized town		Rural municipality		Total responses		p
	n	%	n	%	n	%	n	%	
The special needs of target groups	27	(24.1)	60	(53.6)	25	(22.3)	112	(73.2)	0.65
How to support men subjected to VCR	23	(21.7)	61	(57.5)	22	(20.8)	106	(69.3)	0.06
Intervening with perpetrators of violence	25	(23.6)	57	(53.8)	24	(22.6)	106	(69.3)	0.40
How to support same sex victims of VCR	25	(23.6)	58	(54.7)	23	(21.7)	106	(69.3)	0.25
How to support children subjected to VCR	22	(22.7)	57	(58.8)	18	(18.5)	97	(63.4)	0.07
How to support women subjected to VCR	17	(19.5)	55	(63.2)	15	(17.3)	87	(56.9)	0.007
The magnitude of violence	16	(19.5)	48	(58.5)	18	(22.0)	82	(53.6)	0.08
Theoretical perspectives on VCR	18	(22.8)	46	(58.2)	15	(19.0)	79	(51.6)	0.20
Consequences of violence	13	(17.3)	48	(64.0)	14	(18.7)	75	(49.0)	0.006
Other areas	1	(12.5)	6	(75.0)	1	(12.5)	8	(5.2)	0.20

and 2015, 12.6 percent participated in such education before 2010, and 11.7 percent participated in such education in the first quarter in 2016. The study also examined in what form the teaching was held (i.e., the organizer of the teaching) within the framework of the work as well outside working hours. There were many more social workers who had been educated during working hours (65.4%) compared to those who had participated in teaching in their spare time (26.8%). Of those who had studied during working hours, almost 53 percent had participated in teaching organized by an authority, while 17 percent had taken part in a university course and 14.4 percent within an adult education association. A few (3.3%) had attended education arranged by a nonprofit association. The most common education in one's spare time was education arranged by a nonprofit association (16.3%) followed by academic studies (11.8%). Fewer than four percent stated that they had participated in teaching arranged by an adult education association (3.3%) and authorities (2.6%). The study also revealed that 27 percent of the respondents lacked training, i.e., had not participated in training within the framework of the social work employment neither in education during non-working hours.

Needed Knowledge

A central issue in this study was to determine in which topics related to VCR social workers need to expand their knowledge. The participants perceived that they lack knowledge in all examined topics, which are shown in descending order in Table 2. The greatest knowledge gaps were with regard to the specific needs of various target groups (73.2%), how to support men subjected

to VCR (69.3%), how to support same sex victims of VCR (69.3%), and intervening with perpetrators of violence (69.3%). Generally, the type of municipality did not affect the social workers' perceived needs for training. In the large city, 52 percent answered that they have a need of more knowledge related to VCR, in the medium-sized town 68 percent, and in the rural municipality, was the corresponding figure 56 percent. Specifically, the results showed differences between the topics in which the social workers perceive knowledge gaps. There were significant differences on two topics; how to support women subjected to violence, and the consequences of violence.

Factors Enhancing Professional Knowledge Related to VCR

Participants were asked to indicate how they enhanced their professional knowledge related to VCR. In the questionnaire, we distinguished, as previously mentioned, between internal and external factors. Internal factors included self-acquired knowledge, while external factors included exchange of experience between colleagues and with supervisors. We found that a majority of the respondents perceived all internal factors to be knowledge enhancing. The most valued were professional experience with victims of violence (80.4%) and education (76.5%). Almost three quarters (68.0%) also found the scientific literature and information on the Internet to be knowledge-raising factors. The participants were able to add other sources of knowledge, and they mentioned personal experience of violence, experiences of violence among people in their personal network, supervision of cases, projects within the workplace, assessment methods, and access to organizations working with specific target groups of victims. Of the external

Table 3. Internal and external factors influencing social workers' knowledge related to violence in close relationships (VCR) (N = 153).

	Internal factors						External factors			
	Professional experience with victims of violence		Education		Other awareness-raising factors such as literature, the Internet, etc.		Exchange of experience between colleagues		Exchange of experience with supervisors	
	n	%	n	%	n	%	n	%	n	%
Municipality										
Large city (n = 40)	35	(28.4)	34	(29.1)	29	(27.9)	38	(28.8)	12	(18.2)
Medium-sized town (n = 79)	60	(48.8)	54	(46.1)	52	(50.0)	65	(49.2)	38	(57.6)
Rural municipality (n = 34)	28	(22.8)	29	(24.8)	23	(22.1)	29	(22.0)	16	(24.2)
Sign	0.26		0.06		0.56		0.04		0.18	
Total responses	123	(80.4)	117	(76.5)	104	(68.0)	132	(86.3)	66	(43.1)
Years in social service										
<1 (n = 24)	11	(8.9)	10	(8.5)	13	(12.5)	16	(15.7)	5	(7.6)
1–5 (n = 41)	36	(29.3)	37	(31.6)	29	(27.9)	39	(38.2)	19	(28.8)
6–10 (n = 18)	15	(12.2)	14	(12.0)	13	(12.5)	15	(14.7)	9	(13.6)
>10 (n = 70)	61	(49.6)	56	(47.9)	49	(47.1)	62	(60.8)	33	(50.0)
Sign	0.000		0.000		0.33		0.03		0.13	
Total responses	123	(80.4)	117	(76.5)	104	(68.0)	132	(86.3)	66	(43.1)

factors, the exchange of experiences between colleagues was indicated by most respondents (86.3%), while exchange of experiences with immediate supervisors was indicated by the fewest participants (43.1%). The sources of knowledge that social workers consider as increasing their knowledge were broadly the same regardless of municipality, with one exception that applies to the exchange of experience. Almost 100 percent of the social workers in the large city reported exchange of experience between colleagues as influencing their knowledge, while in the medium-sized town and in the rural municipality only around 80 percent stated the same.

This study also examined if years in service correlate to each knowledge-raising factor (Table 3). We found that there were statistically significant differences between working years and the factors that increase social workers' knowledge. Professional experiences, exchange of experiences between colleagues, and education relate to social workers' length of service. For instance, 61 percent of social workers who had been employed in the social services for more than 10 years indicated professional experience with victims of violence as a knowledge-raising factor compared to 15 percent of those working 6–10 years. This pattern was broadly the same for all factors.

Working Guidelines Used by Social Workers in Social Services

This study asked questions about whether participants had used a sample of working guidelines

related to VCR published by the National Board. The results are ranked in order from the most-used guideline to the least-used guideline in Table 4. The analysis revealed that none of the guidelines were read by more than 50 percent of the participants. The most read guidelines included a handbook on the work with VCR that was read by 48.3 percent, a training material for social workers on violence against women that was read by 28.1 percent, and guidance to increase the conditions for detecting violence that was read by 20.9 percent. These included guidelines had a “general character”, which means that they can be applied in all cases involving violence against women. The study guidelines directed to target groups of women were read by 5.5–11.7 percent of the participants. A guide to sheltered housing was read to the least extent. There were no significant differences between type of municipality concerning the use of any guideline ($\chi^2 = 0.055$; $df = 2$; $p = 0.973$). However, three guidelines were significantly less used, including a study guide dealing with honor-related violence and oppression (*Don't Turn Them Away*), violence against women with a foreign background (*Alone and Vulnerable*), and violence against women with substance abuse or addiction problems (*Their Own Fault?*). These results is applied to all municipalities.

The participants' use of working guidelines was also compared to their period of employment within the social services, as shown in Table 4. Those with a length of employment exceeding

Table 4. Social workers' use of public working guidelines in relation to years in service (N = 153).

	<1 year		1–5 years		6–10 years		>10 years		p ¹
	n = 24		n = 41		n = 18		n = 70		
	n	%	n	%	n	%	n	%	
Violence – Handbook on the work with violence in close relationships within the social services and health services	4	(16.7)	20	(50.0)	8	(44.4)	42	(62.7)	0.002
Abused women - A training material for social services workers	6	(25.0)	10	(25.6)	6	(33.3)	21	(32.8)	0.81
To see, want to know and dare to ask – guidance to increase the conditions for detecting violence	1	(4.2)	8	(20.5)	3	(17.6)	20	(31.3)	0.05
Looking the Other Way: A Study Guide to Violence Against Women with Disabilities	2	(8.3)	6	(15.8)	2	(11.1)	8	(13.1)	0.85
Don't Turn Your Back to Them: A Study Guide to Honour-Related Violence and Oppression	1	(4.2)	6	(15.4)	2	(11.1)	9	(14.1)	0.57
Alone and Vulnerable: A Study Guide to Violence Against Women With a Foreign Background	2	(8.3)	4	(10.5)	2	(11.1)	7	(11.1)	0.98
Bruises and Silver Hair: A Study Guide to Violence Against Older Women	1	(4.3)	3	(7.7)	1	(6.3)	4	(6.3)	0.96
Their Own Fault? A Study Guide to Violence Against Women with Substance Abuse or Addiction Problems	0	(0.0)	4	(10.3)	0	(0.0)	4	(6.3)	0.25
Haven from violence - a guide to sheltered housing	0	(0.0)	3	(7.7)	0	(0.0)	2	(3.2)	0.31
Total responses									
							n	%	
							74	(48.3)	
							43	(28.1)	
							32	(20.9)	
							18	(11.7)	
							18	(11.7)	
							15	(9.8)	
							9	(5.9)	
							8	(5.5)	

10 years used the working guidelines to a greater extent than those who had been working in social services 6–10 years. For example, the handbook was read by more than 60 percent of those who had been working for more than 10 years compared to 44 percent of those with a period of employment of 6–10 years. The patterns were the same irrespective of working guidelines. Years of service seem to relate to having read the guidelines. Having read any of the guidelines was significantly more likely among those with more years of work experience compared to those with less experience ($\chi^2 = 8.7$; $df = 3$; $p = 0.034$). When using type of, years worked in social services, and study program to predict if participants had read any guideline or not, only working years produce a higher odds ratio (>10 years; OR = 3.7 (1.4–10)). Considering both the type of area served and education, having worked longer within social services (>10 years compared to fewer years) gave a higher OR of having read any guideline. Thirty-five percent had not used a single one of the working guidelines and 13 percent had not used any working guideline or participated in any training.

Discussion

In Sweden, violence and abuse against women are considered by the government to be the biggest threat to a gender-equal society, and the work to combat violence has intensified in recent years. Part of this work includes raising social workers' knowledge and competence on VCR. However, we still know little about social workers' capability to work with victims of violence. The overall aim of this study was therefore to examine the professional knowledge on violence in close relationships among social workers in the Swedish social services. To address this issue, three research questions were posed.

The first question addressed aimed to explore what education the social workers had on issues related to VCR and what knowledge gaps exists. The study shows that the participants' overall level of education were high, (cf. Neff et al., 2012), and that the majority had a Bachelor of Science in Social Work or a degree related to social sciences and health care. However, to be

professional in vocational training, social workers need basic education as well as continuing training in an ongoing process (Flora & Argyroudi, 2016; McLaughlin, Robbins, Bellamy, Banks, & Thackray, 2018). In this study the majority of the participants had participated in continuing education to a greater extent than found in similar studies (Danis, 2004; Dolunay-Cug, Toplu-Demirtaş, & Murray, 2017; Heffernan et al., 2014). Furthermore, the study showed that most of the participants had attended continuing education within the framework of their employment. Government officials and universities organized most of the training, and the education was held relatively recently. More than 65 percent of the participants state that they have been taught topics related to VCR during working hours, and the educational efforts have increased in recent years. In sum, that means that the ambition to educate social workers on these topics has increased in the Swedish municipalities. Though, most of participants indicate that they still lack knowledge on several topics. Nearly 70 percent reported that they have knowledge gaps particularly in relation to the special needs of the targeted groups, knowledge about how to support men subjected to violence, knowledge about abusers, and how to support victims of same sex violence. There were no major discrepancies in perceived lack of knowledge between the municipalities, but there were generational differences. Social workers who have worked in the profession for more than 10 years have a larger need for knowledge on VCR compared to less experienced colleagues, and they also use the guidelines to a greater extent. These differences can have different explanations. For example, the social workers with a long work experience may lack knowledge as a consequence of previous shortcomings in the social work education. Alternatively, long work experience mean a greater awareness of knowledge gaps. When taking these findings into consideration, the study shows that there are still important educational efforts that need to be made.

Second, we addressed the question: How do social workers enhance their professional knowledge within this field? In the analysis, we distinguished between internal factors, including

self-acquired knowledge, and external factors, including knowledge exchange between colleagues in the workplace. Two internal factors, professional experience and education, and one external factor, the exchange of experience between colleagues, were reported to be the most valued sources to raise social workers' knowledge related to VCR. These results are in line with result in a similar study among Swedish social workers (Ekström, 2018). Other sources such as literature and information on internet were also indicated as knowledge raising factors, while experience sharing with immediate supervisor, was rated low. This is somewhat surprising, as previous studies have shown that social workers perceive supervision as an important source of knowledge (Flora & Argyroudi, 2016). There can be several reasons why social workers do not discuss cases involving VCR with their supervisor. For example, the supervisor is not knowledgeable enough, there is no temporal space, or as shown in Renner's study (2011) it is about prior knowledge. The more knowledge the social workers have, the greater exchange with the supervisor. Type of municipality did not seem to affect how social workers value knowledge-raising factors, and the sources of knowledge were broadly the same with one exception. However, it seems like social workers' length of service affects how they value knowledge-raising factors. Social workers with a period of employment exceeding 10 years valued professional experiences, exchange of experiences, and education more than those with a shorter period of employment.

The third question asked: To what extent social workers use prescribed guidelines related to VCR in their work? Although many respondents indicated that they value the literature as a source of knowledge, we found that the participants only use knowledge-enhancing guidelines to a limited extent. More than 30 percent of the social workers had not used any of the working guidelines. Social workers with a period of employment exceeding ten years used the working guidelines to a greater extent than those with shorter time in the social services. The patterns were the same irrespective of working guideline. The three most read guidelines are of a general character and were read by 20–50 percent of the

social workers, and these guidelines can be applied in the work related to VCR regardless of women's individual needs or situations. The guidelines concerning target groups of women were only used by 6–12 percent of the participants. The least used guideline, a guide to sheltered housing, did not reach 4 percent. Three guidelines were significantly less used and they concern violence against women with foreign origin, women with substance abuse or addiction problems, and honor-related violence, and this applied to all three municipalities. The result can be interpreted in various ways. The findings can indicate that publications that include all victims, regardless of individual circumstances, are perceived as more valuable than those targeting specific groups, such as violence against elderly women, or women with a foreign background. However, this explanation seems more unlikely given the fact that the majority stated that they lack knowledge on the special needs of target groups of victims of VCR. Rather, it is likely to be a general disinterest in public guidelines. Heffernan et al. (2014) study revealed that even when social workers are aware of organizational policies and guidelines on domestic violence, do not many use them. In Sweden a national coordinator against violence concludes that policy document published by the National Board, have not received the dissemination and impact that was intended (SOU, 2014:49). Another reason might be a lack of awareness of the guidelines, or lack of time. The volume and location of information on the National Boards homepage on internet can be overwhelming and it have been found that seeking knowledge not always is perceived as a legitimate professional activity by workplace colleagues (Gordon & Cooper, 2010). There were no significant differences between the municipalities. Finally, we found that 13 percent of the participants had not increased their knowledge either through education or by making use of public guidelines

The results of this research raise some implications for social work practice and education. We found that social workers generally have a high level of formal education in social work and that the municipal educational ambitions related to VCR have been strengthened in recent years.

Despite this, most social workers experience a lack of professional knowledge on these issues, especially when it comes to knowledge of different groups exposed to violence. The fact that less-experienced colleagues to a lesser extent make use of guidelines can either indicate that the need for knowledge is neglected or that social work education in recent years has improved and are experienced as adequate. Another reason why guidelines were not used can be explained by the fact that they are perceived as inadequate or that there is no time allocated for knowledge deepening.

This study also shows that social workers prefer to ask colleagues for consultation in difficult cases. Collegial cooperation or mentoring that enables knowledge exchange and professional reflection in daily work seems therefore to be of great importance. However, there are a risk that this kind of easily available and applicable support from colleagues, camouflages the individual social worker's own lack of in-depth knowledge on VCR issues (e.g., Avby, Nilsen, & Ellström, 2017) and/or permanent obsolete attitudes and interpretations of violence within a team or a working place (e.g., Collins, 2016). In order for social workers in the social service to maintain a high professionalism in their work with violence in close relationships, educational efforts are required, but above all is it necessary to provide time and conditions for supervision and critical reflection in ongoing work.

Limitations of Study and Recommendations for Future Research

The results of this study should be viewed in the light of some methodological limitations. Although an effort was made to recruit a diverse and representative sample of respondents from all across the social services (i.e., different occupational roles within each municipality), the sample does not represent all social workers to the same degree. Participant's gender, practice setting, and university degree were poorly distributed, and it cannot be ruled out that the municipalities did not included all requested workers in their lists. In terms of gender distribution, this reflects the distribution within the social services in Sweden (Statistiska Centralbyrån,

2019). It was not either an equal number of participants within each municipality. There can be several reasons for why the large city and rural municipality had lower response rates than the medium-sized town, for example, different workloads and differing interest in the research questions. However, the response rates reflect the distributions of participants in the sample, and the overall results give an accumulated awareness on social workers' training and knowledge related to VCR.

Despite these limitations, the study contributes with results that highlight that social workers in Swedish social services lack professional knowledge on VCR and that they do not use prescribed guidelines to the extent expected. From this perspective, the present study provides important facts that call for action from responsible managers in social services, and lectures and researchers within the social work educations. The fact that around 90 percent of the respondents state that they experience lack of knowledge on VCR, despite that three out of four have a Bachelor of Science in Social Work, must be interpreted as flaws in social work education programs on these issues. An important area for future research is therefore to examine how the social work education programs address VCR in courses, but also when it comes to opportunities for continuing education and training within the framework of employment in the social services.

Conclusion

In summary, the results of this study suggest that there is a knowledge gap regarding VCR in the Swedish social services. Explanations for this might be that social worker education has shortcomings in this area and that continuing education and training in social services is insufficient. To work professionally with VCR requires, in addition to a solid basic education in social work, that continuous knowledge deepening, training, and professional reflexive work be legitimized as a professional activity at the workplace (e.g., Gordon & Cooper, 2010). Notably, this requires a commitment from politicians, officials, and supervisors. Without knowledge on different aspects of domestic violence, social workers will

be ill equipped to prevent, pay attention to, and deal with VCR. Future studies are encouraged to address a broader range of questions about education, training, and research implementation in social work practice on issues related to VCR, including how education in social work addresses these problems, how competence development is arranged, and what barriers prevent social workers from deepening their knowledge in this area.

Note

1. The term violence in close relationships (VCR) in a Swedish context includes women, men, and children as victims and various perpetrators (Hoppstadius, 2018). Swedish legislation embrace all victims of VCR regardless of gender, but states that the Social Welfare Committee shall pay special attention to women and children (SFS, 2001:453 5:11).

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