Article

"Vulnerability" and Its Unintended Consequences

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Abstract: "Vulnerability" is now a widely used term in different settings—from politics and academia to everyday life. In response, a growing body of research has emerged critiquing and challenging the use of the concept in the social sciences. In this paper, we explore the use of the term vulnerability in research on children in out-of-home care and discuss the possible negative consequences of this—for the people involved and for the knowledge produced. Showing some of the problems involved in classifying these children as "particularly vulnerable", we argue that there is a need for more nuanced understandings of children growing up in out-of-home care.

Keywords: vulnerability; out-of-home care; social sciences; foster care

1. Introduction

The terms "vulnerable" and "vulnerability" have gained prominence over the last two decades, being used in descriptions of human life, environmental changes, technology, etc. Vulnerability has been described by some as an important "paradigm" of our time (Dancus et al. 2021), by others as something of a conceptual "zeitgeist" (Brown 2015; Koivunen et al. 2018). In line with the 'spirit of the time', vulnerability has also become a key concept in several fields of research (Adger 2006). In this paper, we direct our attention towards research in the social sciences where individuals or groups of people are considered as vulnerable and discuss the possible consequences of this.

As researchers have pointed out (e.g., Mackenzie et al. 2014; Brown 2015; Carter 2009), the terms "vulnerable" and "vulnerability" derive from Latin word "vulnus" ("Wound"), the capacity to suffer or be harmed. The increased use of the term can be related to the larger societal, cultural, and historical changes taking place in many Western countries and the adoption of perspectives developed to capture these changes. These include, but are not reduced to, *individualism* and the promotion of the rights, responsibilities, and choices of the individual (for full definition see Webb 2006, p. 16), the merging of *risk society* (Beck 2009), and *globalisation* (Eriksen 2014), as well as the ascendancy of *therapeutic culture* and the emphasis on "emotional deficit" (Furedi 2004). According to Brown (2015, p. 15), preoccupations with vulnerability can be seen as an expression of broader long-running debates about "problematic", "marginalised", or "excluded" groups. A continuous emphasis on social problems and challenges (rather than possibilities) in some areas of social sciences such as sociology (see for example Aakvaag 2019) might also be relevant in this regard.

Literature reviews examining how vulnerability has been used and defined in the social sciences and humanities reflect different understandings of the concept (Virokannas et al. 2020; Brown et al. 2017; Mackenzie et al. 2014). From some perspectives, vulnerability is understood as something all people have in common (e.g., Butler 2004; Andvig 2010); it is a universal and constant characteristic shared by all human beings (Fineman 2008)—"an ontological condition of our humanity" (Mackenzie et al. 2014, p. 4). A different perspective is a categorical or group-based approach to vulnerability, meaning that some are viewed as more vulnerable than others. According to researchers such as Mackenzie and colleagues,

vulnerability is universal, but it is also *context specific*, being "caused or exacerbated by the personal, social, political, economic, or environmental situations of individuals or social groups" (Mackenzie et al. 2014, s. 8).

Following the increased use of the terms "vulnerable" and "vulnerability", a growing body of literature challenging the use of the concept in the areas of immigration (Jacobsen et al. 2022), social work (Brown 2015; Fawcett 2009), education (Ecclestone and Rawdin 2016), and disability (Wishart 2003) has emerged. This paper seeks to add to this critique using research concerning children in out-of-home care (OHC) as a case, with particular emphasis on foster care research. As we show, children who grow up in OHC—in institutions or foster care settings—are often emphasised as a "particularly vulnerable" group in sociopolitical contexts. This is, we argue, a persistent trend also in OHC research which can be found in most Western countries. While others have also pointed out this trend (e.g., Warming 2006), we cannot find any contributions exploring the consequences of this. Hence, in this paper we ask the following question: what are the consequences of approaching children in OHC as vulnerable in research—for children, youth, and young adults with experiences from OHC and for the knowledge produced?

To explore our research question, we draw on previous research in the area of OHC, including our own. The results presented from the authors own work has its origin in the research project Outcomes and experiences of foster care, where foster care has been the main focus for 25 years. Included in this paper are empirical examples from interviews with young adults who grew up in in foster care which have not previously been published.

This paper is written within the frames of interpretive social constructionism, where a fundamental premise is that meaning is not inherent (Blumer 1969; Harris 2008)—there is always more than one way to define something. A central concern of constructionist inquiry is to study what people "know" and what they do with what they know (Berger and Luckmann 1966; Harris 2006; Holstein et al. 2013; Blumer 1969). In line with this tradition, we do not start from one particular definition of vulnerability. Rather, our focus is directed towards how vulnerability is applied in the research on children in OHC and the meaning researchers impose on the groups that they study. We show that, when researchers explain why they classify children in OHC as vulnerable, they often point to previous quantitative research evaluating the outcomes (e.g., health, education, etc.) of this group. In this way, vulnerability is constructed as "factual accounts" (Smith 1974). By shedding light on some of the problems related to applying vulnerability in this way, the major aim of this paper is to make the link between children in OHC and "vulnerability" more uncertain and less evident.

2. Children in Out-of-Home Care: A "Particularly Vulnerable Group"

Urgent call to help care for state's most vulnerable children. (NSW Government Australia 2023)

Children in care deserve the same love and stability as everyone else. (...) more needs to be done to protect our most vulnerable children.
(Minister for Children, Families and Wellbeing, UK Government 2023)

Common to all foster parents is that they take care of vulnerable children (...)
(Norwegian Ministry of Children and Families 2023)

In line with the United Nations Convention on the Rights of the Child (UNCRC) of 1989, all children have the right to protection from all types of maltreatment, and states are responsible to establish a system to protect children "while in the care of parent(s), legal guardian(s) or any other person who has the care of the child" (Article 19). Such systems are commonly referred to (in English) as child welfare systems (CWSs) or child protective systems. When parents are unable to secure a safe upbringing, placement in OHC (foster care or institutional/residential care) are common solutions for CWSs in Western countries (Berrick et al. 2023). Despite political, social, and economic variation between countries, it has previously been found that the number of children placed in OHC in Western societies

converged at around five per thousand (Munro and Manful 2012). In Norway, which is the context for our research, the most common forms of maltreatment before a foster care placement has been found to be serious neglect, parents' drug/alcohol abuse, parents' mental disorder, and violence exposure (Backe-Hansen et al. 2014; Lehmann et al. 2013). Foster care (rather than institutional care) is the preferred option of OHC in most western countries when children cannot live with their parents.

In many countries today, governments recognise children in OHC as a vulnerable group, and are often emphasised as being "particularly vulnerable". But what does it mean when children in OHC are particularly vulnerable? The meaning ascribed in social political contexts are less evident because vulnerability is rarely defined or explained. Like Fawcett (2009), we could say that "the concept tends to be presented as objective, uncontroversial and as having a fixed meaning with universal validity and applicability" (p. 473).

3. Pre-Described Vulnerability on a Heterogenous Population

Young people transitioning from out-of-home care are arguably one of the most vulnerable and disadvantaged groups in society. (Johnson and Mendes 2014)

Young adults ageing out of care are among the most vulnerable and socially excluded groups in society. (Paulsen et al. 2022, p. 412)

In this article we seek to contribute to such an approach by studying practices of care in social work with vulnerable children and families (. . .). (Engen et al. 2021, p. 35)

Our findings indicate a need for greater support of this vulnerable group of children. (Ford et al. 2007, p. 319)

(. . .) improve the lives of some of our most vulnerable children. (Rubin et al. 2004, p. 343)

However, compared to research on other vulnerable child populations, little is known (. . .) (Brännström et al. 2017, p. 206)

In the OHC literature, we can find a large range of examples where vulnerability is presented much in the same way as in political contexts—as a "stand-alone term" (Brown 2015, p. 3) which does not need further explanation or definition. The quotes above are just some examples of this. This is not unique for OHC research. A literature review on how vulnerability has been used and defined in the social sciences since the year 2000 show that most use the concept without defining it (Virokannas et al. 2020). Many also use it in, what Brown (2015) calls, a "a relational sense"—meaning that vulnerability is related to something specific. The following quotes are some examples of this:

Children in foster care are a uniquely vulnerable population with increased mental health needs due to very high rates of complex trauma that arises from adverse childhood experiences both prior to and during foster care. (Keefe et al. 2022)

From previous research we know that this youth are vulnerable in many ways, and at extra risk of continued or later marginalization. (Bakketeig and Backe-Hansen 2008, p. 18 (our translation))

Children and young people placed in foster care are a particularly vulnerable group who have usually experienced abuse and neglect and have a high prevalence of mental disorders. (Lehmann et al. 2020)

Children in foster care are a vulnerable population (. . .). Traumatic experiences and an increased susceptibility for further wounds from unstable environments created in foster care continue to increase the vulnerability of this already fragile population. (Bruskas 2008, p. 70)

In the quotes above, vulnerability can be said to be related to claims about children's living conditions and experiences before, during, and after OHC. In many ways, it could be

argued that the connection between children in care and vulnerability is not unreasonable. As Gypen et al. (2017) conclude in their literature review of adult outcomes among children who grew up in foster care:

> "The results are clear as well as troubling (. . .) children who leave care continue to struggle on all areas (education, employment, income, housing, health, substance abuse and criminal involvement) compared to their peers from the general population." (Gypen et al. 2017)

While this conclusion might provide insight into challenges shared by many with experiences from OHC, it fails to emphasise that many children in care also do well—in childhood and in adult life. For example, in a Norwegian study of mental disorders of children living in foster care, 49% of the children did not have any mental/psychiatric problems (Lehmann et al. 2013). Moreover, two out of three young people with a child protection background in Norway who finished the tenth grade in 2008 were employed or in education in 2015 (Statistic's Norway).[1] Longitudinal research exploring the outcomes of children over time, based on normative criteria (employment, education, etc.), also show that, as a group, children in care fare better with time (Backe-Hansen et al. 2014, p. 80). This can mean that, as a group, children in OHC become more established later in adulthood as compared to their peers. More "favourable" outcomes have also been emphasised in other studies from other countries with less extensive welfare states, such as the US (e.g., Shpiegel et al. 2022; Healey and Fisher 2011). Such findings reflect what we already know, which is namely that children in OHC are a heterogeneous population—growing up in different settings, for different reasons, with different resources available—thus cannot be approached automatically as vulnerable in a relational sense. This point is strengthened by foster care research where the perspectives of children, youth, and young adults have been included. For example, in one of our studies, we found that young adults who grew up in foster care in Norway reported a life satisfaction rate similar to those measured in the general population (Mabille et al. 2022).

When researchers insist upon approaching children in OHC as vulnerable independently of their life situations and/or outcomes, it can be argued to be reductionistic as well as deterministic. Moreover, it can also be argued to be paternalistic and potentially damaging for those who are labelled as vulnerable (Gilson 2016)—particularly when used to classify specific people or groups as "vulnerable populations", it becomes associated with victimhood and dependency (Fineman 2008, p. 8). This final point is elaborated further in the discussion.

3.1. Refusal of Normality

The pre-described vulnerability visible in foster care research reflects a problem-oriented perspective which has a long tradition in OHC research, but which has been criticised for reproducing stereotypes and undermining the role that children play in determining their own futures (Bakketeig and Backe-Hansen 2008). In response, a more "positive perspective" focusing on the resilience and resourcefulness of "vulnerable" children, youth, and young adults in and after care has come into focus (Chase et al. 2006). Examples include studies focusing explicitly on young adults who are "doing well" (e.g., Bakketeig and Backe-Hansen 2018) and studies placing emphasis on positive accounts provided by young people through interviews (e.g., Bengtsson et al. 2018). While such a positive perspective has been important to challenge negative notions about children in care, we can ask to what degree it really challenges the contemporary understandings related to this group. When a group is understood as "particularly vulnerable" and therefore in need, the ordinary, regular, and normal is easily overshadowed. Instead, positive results are presented as a sign of "resilience", "against all odds" and/or "in spite of" the expected. One problem is that, for many children, youth, and young adults with care experiences, such interpretations would not resonate with their own understandings. From our research concerning foster care, where children, youth, and young adults were interviewed, we have examples of interviewees who did not identify as "foster children", nor the cultural

understandings attached to this status, including images of themselves as vulnerable (e.g., Skoglund et al. 2018; Thørnblad and Holtan 2011). One young man told the interviewer that he was hesitant to be interviewed in a research project on foster care. He explained that his childhood had been ordinary, and he was afraid that the interviewee expected either "sunshine" or "dreadful" stories about growing up in foster care (Skoglund et al. 2018, p. 226). Some interviewees also emphasised that it was not them who had a difficult life, but their parents. Such stories are often referred to as counter-narratives as they offer resistance to the dominant cultural narratives (Bamberg and Andrews 2004). Not only do they challenge the expected, they also make visible the common sense—often referred to as doxa (e.g., Grenfell 2014, p. 58).

3.2. Vagueness and Power

In the literature critiquing the concept of vulnerability in the social sciences, researchers have emphasised its vagueness and malleability. As emphasised by Katz et al. (2020), the reader is often left to imagine what vulnerability means, what the group is vulnerable to, and why they are vulnerable in the first place. But also, when the term is related to particular situations, the use of the term can provide a lack of analytic clarity (Brown et al. 2017, p. 498). Research can become imprecise and confusing, and vulnerability might obscure information which may be important to understanding one's research object. In OHC research, such information can include the child's gender, type of placement, time in care, etc.

One example of how information can be obscured can be found in the research literature regarding the transition to adulthood among youth and young adults who grew up in foster care. A common way of describing this group and their "vulnerability" can be found in the abstract of a much-cited paper:

> Youth in transition from out-of-home care to adulthood are a vulnerable sub-population of the foster care system. In addition to the trauma of maltreatment, and challenges associated with out-of-home care, these youth face the premature and abrupt responsibility of self-sufficiency as they leave care for independent living. (Daining and DePanfilis 2007)

Vulnerability give rise to moral obligations (Mackenzie 2014). Much of the focus in this research has evolved around the importance of continued support for this group, also known as *after care*—the services provided by CWS to young adults aged 18 years or older. In Norway, with its comprehensive welfare state, different measures are available, with an age limit of 25 years.[2]

While this literature has increased rapidly over the past two decades, we cannot find any paper exploring how after care is used. In one of our studies, several interviewees told us that they received financial help as a form of after care—not because they needed it per se, but because it was an opportunity they "had to" say yes to. One told us that he had moved out of his foster parent's home earlier than first planned because after care allowed him to live in his own apartment. Another interviewee told us that his foster parents were planning to adopt him, but they had decided to wait until he was "done" with after care—in other words, to wait until the financial help was "maxed out". One young woman also told us that she received financial after care, but it was her foster parents who helped her administer the payments because she could not handle money. Two aspects of these examples can be argued to be obscured in today's research. First, and perhaps most evident, is economic rationality among youth and young adults. It is particularly interesting that this issue has not been touched upon through previous research in Norway, where financial support is by far the most used after care measure.[3] We come back to the issue of rational action below. The second theme regards the youth and young adults' network and family relations. In the OHC research literature today, relationships, such as those to foster parents, siblings, parents, friends, or other significant people—relationships that most young adults have in their lives—are rarely thematised. Such relationships are important in the transition to independence for all young people, including young adults

who grew up in OHC. When such relations are not included, an image is constructed of the young adult as alone with no support after the age of 18. The understanding of these young adults as vulnerable is of course not the only reason social relations are more or less absent in research, but an important one as the images related to "vulnerable young adults" obscure alternative images.

The two examples illustrate how the term vulnerability brings into view some images, while simultaneously distracting our attention from others. It also illustrates that language is power. According to Katz et al. (2020), researchers often use the word 'vulnerable' strategically to attract resources, policy interest, and public concern. We know that OHC research is often highly dependent on public funding, and, in many countries, OHC research is initiated largely by public bodies such as ministries. Given these funding structures, the use of the term "vulnerable" might be experienced as necessary among researchers. The problem, however, is that the knowledge production related to children in OCH primarily springs out from the authority's knowledge needs relating to the current political agenda. Tuck (2009) reminds us that, while frameworks of deviance can be tempting to use, researchers must refuse such frameworks in order to challenge contemporary understandings. The following example can be read as a suggestion to how this can be achieved.

3.3. Vulnerability as an Available Resource and Prophecy

As an alternative approach to viewing vulnerability as something people *are*, we can ask what children, youth, and young adults with experiences from OHC *do* with the vulnerability they are ascribed. From the perspective of interpretive social constructionism, we can ask how children in OHC understand and relate to ideas about vulnerability and how they create, apply, contest, and/or act upon such ideas (Harris 2008). As we mentioned above, some of the interviewees who participated in our research emphasised that they did not portray themselves as vulnerable. However, we also find examples of the opposite in our material. Because vulnerability has primarily been applied to children by researchers, we know little about how common it is for children in OHC to identify as vulnerable. One exception is a study from Belgium, where the researchers estimated that one third of the respondents identified as vulnerable (Van Audenhove and Vander Laenen 2017). To illustrate what identifying as vulnerable can look like, we present here an excerpt from the interview with Johan—a 25-year-old young man who grew up in foster care because of his birth parents' drug abuse:

> I had quite a difficult childhood. I was bullied from age four to ten, and . . .
> well, I feel very vulnerable at times . . . But they called me a 'dandelion child',
> because despite all kinds of adversity I always got through it. Just like a dandelion
> squeezing through the paving stones in the spring.

In the interview with Johan, the difficulties of his childhood and how he had overcome these challenges were key themes. The reason we shed light on the interview with Johan is because of a story he told us about entering an admissions competition. In his letter, he had written about his difficult childhood, about his parents, and about his "wonderful foster parents" who had helped him. In other words, we can say that he used his socially ascribed vulnerability rationally in order to stand out from the other competitors and thus to gain an advantage in a competition. As emphasised by Riessman, telling stories is not only about meaning making, but about performance—"we create our realities and ourselves through the strategic choices we make in social interaction" (Riessman 1990, p. 1199). To use one's socially ascribed vulnerability strategically like Johan did is little discussed in the OHC literature, perhaps because it puts those considered vulnerable in a "less attractive" light. Yet, we should not ignore such stories. Those who present themselves as vulnerable might gain something then and there; however, we also know that deviance can restrict one's chances to present oneself differently over time. From a sociological perspective, we can say that the example raises questions related to deviance and stigma (Goffman 2002,

2009). A central question is what role OHC research has played in the construction and reconstruction of deviance related to children in OHC.

4. Concluding Discussion

One of the primary aims in OHC research is to improve the living conditions and life opportunities for children who, for different reasons, cannot live with their parents. It has not been our intention to downplay the well-documented problems and difficulties many children in OHC experience. It is the one-sided approach of these children as, per se, "particularly vulnerable" that we have criticised.

Much of our critique can be related to what some researchers have previously pointed out, namely that OHC research rarely make explicit its theoretical assumptions and underpinnings (Ulvik 2009; Bakketeig and Backe-Hansen 2008; Stein 2006). The use of "vulnerability" in research is being used in similar ways as by organisations and government representatives—as something that these children are. By constructing vulnerability as a statement of facts, it seems evident that children in OHC should be understood this way. How we understand and approach children in OHC not only shapes, but also limits what questions researchers ask and do not ask, how data is interpreted, what theory and literature become relevant, how findings are framed, etc. (e.g., Alvesson and Sköldberg 2017). In this paper, we have shown examples illustrating this point.

To ensure a higher degree of reflexivity, one solution could be a more explicit use of theory. As shown, there is now a well-established selection of theoretical perspectives related to vulnerability (Mackenzie et al. 2014; Fineman 2008; Butler 2004). These provide opportunities for understandings of vulnerability which take variation in life situations, as well as children and youths' own understandings of their situations into account. Another solution could be to deploy understandings from other related fields, such as indigenous studies. Here, a "desire framework" has been proposed (Tuck 2009)—a framework that seeks to construct a fuller representation of views represented in one group, and one which is open to complexity and contradictions. This could perhaps also be fruitful for future research on children in OHC.

While a more solid theoretical grounding could solve some of the challenges, in this paper, we have pointed out that it is reasonable to argue like others before, namely that "'vulnerability' is a concept that should be handled with more care." (Brown 2011). Because vulnerability is part of the "everyday language"—the common sense—it is loaded with meaning which is difficult to break free from (Bourdieu and Wacquant 1992). Our main message is therefore that there is a need for new and more nuanced understandings of children in OHC.

Notes

[1]   The numbers were published in a interview with child welfare researcher Elisabeth Backe-Hansen on the Norwegian research site www.forskning.no: https://forskning.no/barn-og-ungdom-velferdsstat/noen-barnevernsbarn-lykkes-mot-alle-odds-hva-skiller-dem-fra-de-det-ikke-gar-sa-bra-med/288048 (Accessed on 10 March 2024).

[2]   In Norway, the age limit for receiving after care was recently extended from 23 to 25 years of age. Examples of measures are advice and guidance, help to complete studies, financial support, extension of existing measures; for example, continuing to live in foster care.

[3]   At the end of 2022, 5647 young people between the ages 18 and 24 received one or more after care measure from CWS in Norway, most often economic support. Of the 7964 measures that were given, 3627—45.5%—were registered in the two categories "Financial assistance in general" (*Økonomisk hjelp for øvrig*) and "Financial help for your own home/dormitory" (*Økonomisk hjelp til egen bolig/hybel*) (Bufdir.no) (Accessed 10 March 2024).

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