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Parental Satisfaction With Child Welfare Services in Norway

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ABSTRACT

This study aims to examine parents' satisfaction with Norwegian child welfare services (CWS) and factors associated with parents' satisfaction. Different factors were included in the analysis, such as characteristics of the contact with CWS, and service aspects, as evaluated by parents (accessibility, information quality, workers' skills and user participation). Data were collected from 412 parents in 20 different municipalities. Over half of the participants (56%) reported that they overall received the needed help to a great or very great extent, while 60% were satisfied to a great extent or more. The majority of parents (76%) reported that their case manager was courteous and respectful, while nearly half of the parents (47%) stated that the help they received made it easier for them to provide care. Hierarchical regression analysis showed that workers' skills, user participation and information quality were associated with both satisfaction with outcomes of CWS and overall satisfaction, while duration of contact was also associated with satisfaction with outcomes of CWS. These results highlight the importance of achieving and maintaining high workers' skills, information quality and user participation in CWS.

1 | Introduction

Evaluating the quality of health and social services gives tools to decision makers for resources allocation and quality improvement, as it helps identify shortcomings and variations in quality (Norwegian Directorate of Health 2022). In child welfare services (CWS), social workers can improve their practice thanks to feedback on user satisfaction (Tilbury, Osmond, and Crawford 2010). Shulman (2008) underlines that evaluating users' satisfaction enables social workers to better adapt their strategies to service users. Higher parental satisfaction with CWS has also been associated with positive outcomes, such as greater service completion (Damashek et al. 2011).

Definitions of satisfaction vary including elements such as users' experience and appeal (Fraser and Wu 2016). User experience in

CWS is generally considered as a multidimensional construct, with subscales for evaluation of the outcomes of the CWS use, general satisfaction with the services, and evaluation of service characteristics and processes (Ayala-Nunes et al. 2018). Shulman (2008) distinguishes between satisfaction with processes of the social work (i.e., the client-worker relationship) and satisfaction with its outcomes (i.e., the development of coping strategies).

This paper focuses on parental satisfaction with the Norwegian CWS (in Norwegian: Barnevernet), which provide care and protection to children and parents experiencing family difficulties (Norwegian Directorate for Children, Youth and Family Affairs 2024). Services safeguarding children from neglect or abuse are usually referred to as CWS in Norwegian institutional materials in English (Norwegian Directorate for Children,

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Youth and Family Affairs 2024). However, in the research literature on Norwegian CWS, the terms ‘child welfare services’ and ‘child protection service’ are used interchangeably (see, e.g., Slettebø 2013; Studsrød, Willumsen, and Ellingsen 2014). One reason for this may be that in Norway, CWS can encompass both nonvoluntary measures (child protection) and voluntary measures. Thus, research on the Norwegian CWS may be relevant internationally, both for countries characterized by a child protection or a family service orientation (Gilbert, Parton, and Skivenes 2011).

Existing studies on parental satisfaction with CWS in Norway suggest that there is a wide array of experiences. One study reported that 75% of parents surveyed were confident about the services they received (Kojan 2011). In another study, 31% of parents reported exclusively negative experiences in an open-ended questionnaire on parents’ perceptions of contact of CWS (Studsrød, Willumsen, and Ellingsen 2014). However, these two studies did not measure parental satisfaction in detail with specific aspects of CWS, such as skills of the social workers, decision-making and so on.

1.1 | Determinants of Parental Satisfaction With Child Welfare Services: A Review of Previous Research

In a systematic scoping review based on 52 studies from 2000 to 2016, Tilbury and Ramsay (2018) identified three groups of factors important for parental satisfaction with child protection services. These were attitudes and skills of workers, the interventions provided, and aspects of the child protection system. Satisfaction is often framed as an overall positive experience with the services (Shulman 2008; Studsrød, Willumsen, and Ellingsen 2014; Tilbury and Ramsay 2018). Other studies have framed satisfaction as a positive experience of client–worker relationship (Bekaert et al. 2021), while other studies focused on the perceived effectiveness of the services rather than attitude of parents towards the CWS (Vaga and Kutsar 2022).

Based on the scoping review and other studies, we identified different groups of factors associated with parental satisfaction with CWS, namely, characteristics of contact, accessibility, information quality, workers’ skills and user participation.

Some of the studies examined the effect of characteristics of contact with CWS. This includes duration of contact and number of caseworkers involved. In a Norwegian study on parents in contact with CWS, parents newly using CWS were more positive about CWS than parents with higher duration of contact (Studsrød, Willumsen, and Ellingsen 2014). However, a Danish qualitative study of 17 parents in the process of a case assessment by the CWS suggested that it is rather a slow-moving assessment than a long duration of contact, which was associated with dissatisfaction (Petersen 2018). The specific effect of duration of contact on satisfaction is therefore unclear. On the other hand, a metasynthesis of the qualitative literature on family members’ experiences with CWS suggested that parents who regularly met the same social workers were more satisfied (Bekaert et al. 2021).

Accessibility in terms of both space and time, as well as information quality in CWS, also appear to be important aspects of parental satisfaction. Parents were more satisfied when they perceived healthcare workers as punctual and easy to reach out to and when the CWS were easy to understand and navigate (Bekaert et al. 2021). In a qualitative study on experiences of pregnant mothers with CWS, misinformation and lack of distribution of necessary documents were linked to dissatisfaction, while information on services available was linked to positive experiences (Trew et al. 2023). A study on parents’ perspectives on a CWS programme found that insufficient advertising and accessibility constituted one of the major barriers to engagement, thereby diminishing the quality of parents’ experience with CWS (Leckey et al. 2022).

Another group of factors identified was workers’ skills. Relational and communication skills of social workers are important aspects of the client–worker relationship, which in turn contributes to the perceived effectiveness of CWS by parents (Gockel, Russell, and Harris 2008). A distinction was made between the attitude, the skills and the actions of the social workers in the systematic scoping review (Tilbury and Ramsay 2018). These authors found that interpersonal skills of social workers, as well as their ability to show respect for parents, were especially important factors for parental satisfaction, as they were mentioned in 61% and 44% of studies they reviewed ($K=52$). Facilitator skills were identified as one of the important themes influencing parents’ experience with CWS in a study on a CWS programme (Leckey et al. 2022). Respectful interactions with social workers appeared as one of the important factors contributing to positive experiences of Mexican families with CWS in South California (Ayon and Aisenberg 2010).

Finally, user participation was the focus of several studies. User participation in health or social services has been described as part of an ‘empowerment strategy’, which invites parents to have a greater voice and to participate in the decision-making (Adams 2008; Slettebø 2013). In the literature review from Tilbury and Ramsay (2018), 62% of the studies reviewed reported a positive relation between the ability of social workers to work collaboratively with parents and positive experience with CWS. Vaga and Kutsar (2022) measured the effect of client agency on perceived effectiveness and found a positive association between the degree of client agency of parents and their assessment of CWS effectiveness. Involvement of parents as participants in CWS is referred to as ‘client agency’ by Vaga and Kutsar (2022).

Both the Norwegian and the international literature tend to use qualitative methods more often than quantitative methods. Indeed, one of the literature reviews identified focused solely on qualitative literature (Bekaert et al. 2021), while a second literature review found that most of the studies (64%) used only qualitative methods (Tilbury and Ramsay 2018). Some studies used both surveys and interviews; however, only the qualitative part of the research analysed factors associated with parental satisfaction (Leckey et al. 2022). Most studies analysed the effect of each factor separately, often without quantifying their effect. There is a lack of studies measuring the combined effect of different factors on parental satisfaction with CWS while controlling for demographic characteristics of the parents or other factors.

1.2 | Roles and Measures of the Norwegian Child Welfare Services

Norwegian CWS tends to be described as a family service-oriented system with a child-centric view, in other words as aiming to support families and generate positive changes while strongly considering children's rights (Gilbert, Parton, and Skivenes 2011). Additionally, aside from external actors raising concerns, Norwegian CWS can intervene at the request of families reaching out willingly, and some measures can be voluntary accessed by parents (Christiansen et al. 2019). Parents therefore have an important role in Norwegian CWS. The importance of parental involvement regarding the promotion of their children's rights and interest is also emphasized in the European Convention on Human Rights (Rainey, McCormick, and Ovey 2021). Other CWS in countries such as England and Finland have also been described as having a family-service orientation (Gilbert, Parton, and Skivenes 2011).

CWS are provided by municipalities in Norway. Municipalities are required to coordinate services for children and their families and to adopt a plan for preventive work (Child Welfare Act 2021, § 15–2). Measures were provided by CWS to a total of 42403 children aged 0–17 in 2021, which represents approximately 4% of the minors in Norway (Norwegian Directorate for Children, Youth and Family Affairs 2022a). Families mostly receive support from CWS in the form of help measures, and families can receive several help measures at the same time. Foster care is not included in the help measures. The most common help measure is counselling and advice (24402 measures), followed by interprofessional teams/collaborative team (15393 measures), week-end foster homes/relief measures (8724 measures), economic support (7817 measures) and 6647 other measures supporting development of the child (Norwegian Directorate for Children, Youth and Family Affairs 2022b). In 2021, only 35 help measures were mandated by CWS (Norwegian Directorate for Children, Youth and Family Affairs 2023c). Foster care was also provided to 9171 children, in the form of a foster home in 91% of cases (Norwegian Directorate for Children, Youth and Family Affairs 2023a, 2023b).

Ethnic minorities are overrepresented in children followed by CWS. Immigrant background is generally defined in Norway as being oneself an immigrant or having both parents born outside of Norway (Dzamarija 2019). Amongst children in contact with the CWS in Norway, 26% have an immigrant background, while 15% have one parent born outside of Norway (Statistics Norway 2022).

1.3 | Purpose of the Study

Analysis on parental satisfaction with CWS can provide information for service improvement and benefit families. Examining parental satisfaction with Norwegian CWS is of interest, as it gives insights into a family service-oriented CWS system, a type of CWS system seen in several countries and can give information to improve such services. Furthermore, parents can often choose to accept or to decline measures offered by Norwegian CWS and more satisfied parents may be more likely to engage with offered services.

There is a lack of information on parental satisfaction across different aspects of CWS, such as accessibility, information quality, workers' skills and user participation. This study will detail parental satisfaction with these different aspects of Norwegian CWS.

Existing research results suggest that different characteristics of contact with the CWS, as well as workers' skills, information quality and user participation contribute to parental satisfaction with CWS. Furthermore, there is a lack of quantitative studies analysing the combined effect of these factors on parental satisfaction with the services. Our study contributes to the field by giving information on the combined effect of these factors on parental satisfaction with CWS.

The aim of this article is therefore to examine how parents evaluate their experience with CWS in Norway and what factors are associated with their satisfaction. In a first part, parental satisfaction with accessibility, information quality, workers' skills and user participation will be examined. Additionally, these factors will be used to predict how parents evaluated the help they received from the CWS (outcomes of CWS) and to predict their overall satisfaction with the services.

Based on the previous results identified in the literature, we hypothesized that having a high number of case managers is associated with a lower parental satisfaction (Bekaert et al. 2021). For the duration of contact, we do not have specific expectations, considering the lack of clear conclusion in the literature (Petersen 2018). On the other hand, accessibility, workers' skills, user participation and information quality are hypothesized to be positively associated with satisfaction (Tilbury and Ramsay 2018; Trew et al. 2023).

2 | Methods

2.1 | Procedure

Data for the current study were collected as part of a larger study (the SKO study) in different Norwegian health and social services, including CWS, but also health centres for children 0–5, maternity services, open kindergartens and educational psychological counselling services (Kaiser, Lillevik, et al. 2022; Kaiser, Skjesol, et al. 2022; Sætrum et al. 2024). Parents, employees and leaders from 30 different municipalities participated.

Data collection for the CWS took place from 2015 and 2018 to examine the parents' perspectives on the CWS in 20 municipalities. Their geographical location ranged from Agder county in southern Norway to Troms and Finnmark in the North. The population size varied from below 6000 inhabitants to over 250000 in the largest municipality. The questionnaire distributed to parents in CWS comprised 53 questions. The questions were adapted from a survey developed by the National Knowledge Centre for the Health Service and with the Norwegian Association of Local and Regional Authorities (KS). The latter institution provides materials to municipalities for quality assessment and improvement, under the framework of a project called 'Better Municipality' (Arnesen 2020; Norwegian Association of Local and Regional Authorities 2012).

2.2 | Measures

2.2.1 | Characteristics of the Contact With the Child Welfare Services

Characteristics of the contact with the CWS included duration of contact [coded as less than 6 months (1), approximately 1 year (2), approximately 2 years (3), approximately 3 years (4), approximately 4 years (5) and more than 4 years (6)] and frequency of contact in the last 3 months [coded as once (1), 2–5 times (2), 6–12 times (3) and more than 12 times (4)]. Parents were asked who initiated the first contact with the CWS (mode of contact) with the response categories ‘the child welfare services made initial contact’ (1) or ‘I contacted the child welfare services’ (2). Parents were also asked the number of case managers they had, which measures they received (e.g., advice and counselling and weekend foster homes/relief measures), and whether they were in contact with other municipal services.

2.2.2 | User Scales

Parents answered questions about their perception of various aspects of their contact with CWS. These items used Likert scale going from 1 (*not at all*) to 5 (*to a great extent*) and are listed in Table 3.

Accessibility consisted of three items (e.g., ‘Easy to make an appointment with a caseworker’, Cronbach’s alpha was 0.98). Information quality consisted of five items (e.g., ‘The written information from the child welfare services is easy to understand’, Cronbach’s alpha was 0.88). Workers’ skills consisted of 11 items (e.g., ‘The staff at the child welfare services treat you with respect’, Cronbach’s alpha was 0.98). User participation consisted of three items (e.g., ‘Was allowed to be part of the decision-making process by the child welfare services’, Cronbach’s alpha was 0.95). In some cases, participants had only partly answered to the items constituting one of these five scales. In these cases, the average answer was calculated on the basis of questions answered. Out of all the participants included for the hierarchical regression models, six participants had answered to fewer than two items in the user scales consisting of three items (accessibility and user participation). However, all participants had answered to at least six items of user scales workers’ skills and three items of information quality.

2.2.3 | Satisfaction With Service Outcomes and Overall Satisfaction

Using the same Likert scale as for the user satisfaction scales, parents answered questions related to the outcomes of service use. Satisfaction with outcomes of CWS was created from four different items, such as ‘To what extent has the help from the child welfare services contributed to good development of your child’. Cronbach’s alpha was 0.95.

Overall satisfaction used a slightly different Likert scale, with five options ranging from *very dissatisfied* (1) to *very satisfied* (5) and consisted of one question ‘Overall, how satisfied or dissatisfied were you with the service from the child welfare services?’

2.3 | Participants

A total of 412 parents filled in the questionnaire online or on paper. Study participants received written and oral information about the study’s nature and that participation was voluntary. They could be at any phase of the contact with CWS and were recruited through social workers employed in the participating municipality, using convenience sampling. Inclusion criteria were being in contact with the CWS (for an evaluation or for services). Foster parents were excluded in the analyses. The average response rate was 33%. This response rate was calculated for all the municipalities for which data about the number of questionnaires distributed and answered were available (12 of 20). The survey was available in English and in Norwegian.

The demographic characteristics included gender [male (1) and female (2)], age [coded as 20–30 years (1), 31–40 years (2), 41–50 years (3), 51–60 years (4) and older than 60 years (5)], mother tongue [coded as Norwegian (1), not Norwegian (2)], relationship status [in a relationship (1), not in a relationship (2)] and educational level [less than high school (1), high school (2), university 1–3 years (3), and university 4 years or more (4)].

Table 1 presents the descriptive statistics for the sample. Out of the 412 participants, 118 (29%) were males and 290 females (71%). Most of them were either in the 31–40 ($n = 166$; 40%) or in the 41–50 ($n = 120$; 29%) age group. Just over a third of the sample had received at least 1–3 years of college education ($n = 139$; 34%), and 44% were not employed ($n = 180$). Most users had Norwegian as a mother tongue ($n = 344$; 83%). The duration of contact with the CWS varied to a great extent, as the groups with the shortest (less than 6 months) and longest (more than 4 years) contact were the largest, representing respectively 29% ($n = 117$) and 25% ($n = 99$) of the sample. Most parents had been in contact with the CWS 2 to 5 times in the last 3 months ($n = 220$; 55%). Most parents had not initiated the first contact with the CWS themselves ($n = 278$; 70%). The demographic characteristics of the sample vary to some extent from the characteristics of the population in contact with CWS, as only 17% of our participants have another mother tongue than Norwegian, while 26% of the children receiving measures from CWS have an immigrant background.

2.4 | Statistical Analyses

The statistical analyses were conducted using STATA 16 and consisted of descriptive statistics (presentation of frequency distributions and bivariate correlations) and hierarchical regression analyses. Bivariate correlations between the different variables were calculated using Pearson’s correlation coefficients.

Different factors were included in a hierarchical regression analysis to predict parents’ satisfaction with outcomes of CWS and overall satisfaction, while adjusting for demographic characteristics, frequency of care and for mode of contact with CWS. In a first step, demographic variables were entered in the model (i.e., age, mother tongue, gender, relationship status and education level). In a second step, characteristics of the contact with CWS were added (i.e., duration and frequency of care, mode of contact and number of different case managers). In the last step, user scales were included (accessibility, information quality, user

TABLE 1 | Demographic characteristics of the sample and of the contact with CWS ($N=412$).

	<i>n</i>	%
Demographic characteristics of the parents		
Gender		
Male	118	28.9
Female	290	71.1
Age of caregiver		
20–30 years	83	20.2
31–40 years	166	40.5
41–50 years	120	29.3
51–60 years	35	8.5
≥61 years	6	1.5
Highest completed level of education		
Primary/lower secondary school	65	16.0
Upper secondary school	202	49.7
College/university (1–3 years)	80	19.7
College/university (≥4 years)	59	14.5
Employment status		
Employed (including leave)	225	55.6
Not employed	180	44.4
Mother tongue		
Norwegian	344	83.5
Other than Norwegian	68	16.5
Relationship status		
Partnered	206	50.9
Single	199	49.1
Characteristics of contact with CWS level		
Duration of contact		
Less than 6 months	117	29.5
Approx. 1 year	71	17.9
Approx. 2 years	45	11.4
3 years	38	9.6
4 years	26	6.6
More than 4 years	99	25.0
Frequency of contact with CWS		
Only once	62	15.4
2–5 times	220	54.6
6–12 times	89	22.1
More than 12 times	32	7.9
Mode of contact		
Contacted the CWS	121	30.3
The CWS made contact	278	69.7
Number of different case managers ^a		
1 or 2 case managers	196	50.5
3 to 6 case managers	156	40.2
7 or more case managers	36	9.3

^aParents could write how many different case managers they had been in contact with, up to the option of '10 or more'.

participation and workers' skills). Cronbach's alphas were calculated for the scales included, and values >0.70 were considered satisfactory (EFPA 2013). For all statistical tests, a significance level of 0.05 was adopted.

The choice of hierarchical regression models was made to assess the effect of the variables of interest while adjusting for other factors. Most predictors in both hierarchical regression analyses have a variance inflation factor (VIF) below 5, while two predictors have a VIF above 5: user participation (5.4) and workers' skills (6.7).

There is an important level of correlation between the user scales and satisfaction: accessibility, information quality, workers' skills and user participation. Multicollinearity can lead to underestimation of the statistical significance of individual coefficients (Allen 1997). However, it is generally considered that a VIF value under 5 is acceptable, while a VIF above 10 indicates problematic high multicollinearity (James et al. 2013). Several authors argue that a VIF between 5 and 10 indicates more moderate multicollinearity but that such predictors still bring meaning to the model and should be included (Vittinghoff et al. 2006).

Missing values were handled using listwise deletion. Out of the 412 participants, some parents were therefore excluded from the analysis because they had not answered all variables related to demographic characteristics and characteristics of contact with CWS or had not answered enough questions for calculation of all four user scales. Satisfaction with outcomes of CWS is predicted based on 338 participants and overall satisfaction on 342 participants.

3 | Results

3.1 | Measures Received by Parents and Use of Other Municipal Services

Table 2 shows that 289 participants reported receiving some form of support from the CWS (70% of the sample). Most participants received help in the form of advice and counselling ($n=199$; 69%). Other common types of help were support with childcare, such as weekend foster homes/relief measures ($n=57$; 20%), or care assistants ($n=33$; 11%), as well as support groups ($n=38$; 13%). Among children receiving intervention from CWS, most lived with their parents, while 15% were under foster care ($n=43$).

For most parents, contact with CWS was combined with use of other municipal services ($n=297$; 72%), such as the Educational and Psychological Counselling Service (PPT; $n=121$; 41%), the Child Healthcare Clinic ($n=130$; 43.8%) and the Labour and Welfare Service (NAV; $n=127$; 43%), which were used by over 40% of these parents.

3.2 | Parental Satisfaction

Table 3 presents the different questions constituting the four user scales and gives information about the satisfaction of participants with different aspects of the CWS. Over half of the participants declared being either very satisfied or quite satisfied with the CWS ($n=250$; 60%). Across most items, participants

TABLE 2 | Measures received by parents using CWS ($N=289$).

	<i>n</i>	%
Counselling/guidance		
Advice and counselling	199	68.9
Supervision	30	10.4
Support with childcare		
Care assistant	33	11.4
Weekend foster home/relief measures	57	19.7
Home consultant/relief at home	16	5.5
Centre for parents and children (incl. Home for mothers)	19	6.6
Daycare and activities for children		
Kindergarten	25	8.7
Leisure activities	30	10.4
After-school activities	21	7.3
Summer camp	1	0.3
Material or financial support		
Financial assistance	28	9.7
Own housing	3	1.0
Group talks, programmes on parenting skills		
Participation in support group	38	13.1
Circle of Security (COS) – parental counselling course	6	2.1
PMTO (Parent Management Training)	24	8.3
Foster care		
Foster family	28	9.7
Child welfare institution	15	5.2
Therapy		
MST – multi-systemic therapy	8	2.8
Other	16	5.5

Note: More than one response option was possible as families could receive more than one measure.

were generally satisfied to a great or very great extent. The lowest levels of satisfaction concerned finding information about measures offered by the CWS, where only 40% ($n=157$) of participants answered being satisfied or very satisfied. Likewise, less than half of the parents declared that receiving help made it easier to provide care ($n=181$; 47%). Slightly more than half stated that they had received the help they needed to a great or very great extent ($n=224$; 56%).

On the other hand, parents were mostly happy with the attitude of their case manager. The majority found their case manager courteous and respectful to a great or very great extent ($n=314$; 75.8%). More parents were satisfied with the consideration shown to their child than with the consideration shown towards them, respectively, 72% ($n=295$) compared with 64% ($n=263$).

Table 4 presents the correlations between demographic characteristics, user scales and parental satisfaction. None of the demographic characteristics had a statistically significant association with the outcome variables. On the other hand, all user scales

were correlated with both outcome variables, and the strongest correlation was found between overall satisfaction and workers' skills ($r=0.87$; $p<0.05$). Duration of contact and number of different case managers had a negative correlation with overall satisfaction and with all user scales. The variable number of different case managers also had a negative correlation with satisfaction with outcomes of CWS.

3.3 | Predicting Parental Satisfaction With Child Welfare Services

Table 5 presents the results of the hierarchical regression analysis for satisfaction with outcomes of CWS.

Model 1, which included demographic characteristics, was not significant. In model 2, characteristics of contact variables were added and explained an additional proportion of the variance ($\Delta R^2=0.18$) in the dependent variable. Among individual predictors, the duration of contact with CWS was positively associated with the dependent variable ($\beta=0.19$; $p<0.01$). In addition, there was a negative association between number of different case managers and satisfaction with outcomes of CWS ($\beta=-0.50$; $p<0.01$). In model 3, the four user scales were added and explained a significant increase in explained variance ($\Delta R^2=0.57$). Three of them are statistically significant: workers' skills ($\beta=0.41$; $p<0.01$), information quality ($\beta=0.13$; $p<0.05$) and user participation ($\beta=0.35$; $p<0.01$). The number of different case managers is no longer statistically significant in model 3, but duration of contact is still significant ($\beta=0.14$; $p<0.01$).

Table 6 shows the result of the hierarchical regression analysis for overall satisfaction using the same variables and steps as described above. Model 1 is also not statistically significant, although models 2 and 3 are statistically significant. In model 2, variable number of different case managers is statistically significant ($\beta=-0.49$, $p<0.01$). The same user scales are statistically significant in model 3 as for satisfaction with outcomes of CWS: workers' skills ($\beta=0.51$, $p<0.01$), information quality ($\beta=0.11$, $p<0.01$) and user participation ($\beta=0.24$, $p<0.01$).

4 | Discussion

Parents reported a fair level of overall satisfaction with the CWS. Also, slightly over half of them answered having received the help they needed. The findings show that workers' skills, user participation and information quality seem to be especially important predictors of parental satisfaction.

Parents were mostly satisfied with the ability of CWS to maintain confidentiality, and most of them found that they were met with friendliness, courtesy and respect by the staff. However, only 40% ($n=157$) of parents were satisfied with finding information about measures offered by the CWS.

The levels of satisfaction found in this study share similarities with previous research on Norwegian CWS. Also, Studsrød, Willumsen, and Ellingsen (2014) pointed towards mixed experiences of parents. Both the present study and the study from

TABLE 3 | Evaluation of information quality, accessibility, user participation and workers' skills.

	<i>M</i>	<i>SD</i>	Not at all/ to a minor extent, <i>n</i> (%)	To some extent, <i>n</i> (%)	To a great extent/to a very great extent, <i>n</i> (%)
Information quality (<i>N</i> = 391–409)					
Staff provide information that is easy to understand	3.8	1.1	51 (12.5)	66 (16.1)	294 (71.4)
Staff provide information that is of benefit to you and your child	3.6	1.2	72 (17.7)	76 (18.6)	260 (63.7)
The written information from the child welfare services is easy to understand	3.7	1.1	50 (12.2)	95 (23.3)	263 (64.5)
Receiving information about support and help measures for you and your child	3.4	1.2	91 (22.4)	110 (27.1)	205 (60.5)
Finding information about measures offered by the child welfare services (on the internet, in information brochures and so on)	3.3	1.0	87 (22.3)	147 (37.6)	157 (40.1)
Accessibility (<i>N</i> = 399–404)					
Easy to contact caseworker by phone or e-mail	3.6	1.2	61 (15.2)	91 (22.6)	250 (62.2)
Easy to make an appointment with a caseworker	3.7	1.1	54 (13.5)	79 (19.8)	266 (66.7)
Good physical access to the child welfare service (e.g., stairs, lift, car parking and location)	4.1	0.9	26 (6.4)	61 (15.1)	317 (78.5)
Workers' skills (<i>N</i> = 406–410)					
The staff at the child welfare services treat you with respect	3.8	1.3	70 (17.2)	50 (12.2)	288 (70.6)
The staff at the child welfare services are friendly	4.0	1.2	58 (14.2)	48 (11.8)	302 (74.0)
The staff at the child welfare services takes you seriously	3.8	1.3	76 (18.7)	60 (14.8)	270 (66.5)
The staff at the child welfare services maintains confidentiality	4.2	1.0	26 (6.4)	43 (10.6)	337 (83.0)
The staff at the child welfare services follows up on what you have agreed	3.6	1.1	55 (13.5)	59 (14.5)	293 (72.0)
Trusting the advice and guidance you receive from the staff	3.6	1.1	67 (16.4)	87 (21.3)	255 (62.3)
Case manager shows consideration towards you	3.7	1.2	74 (18.1)	73 (17.9)	263 (64.0)
Case manager understands your situation as a parent/guardian	3.7	1.3	81 (19.8)	71 (17.3)	258 (62.9)
Case manager cares and shows consideration towards your child	3.9	1.2	60 (14.7)	53 (13.0)	295 (72.3)
Being met with courtesy and respect by the caseworker	4.0	1.2	59 (14.4)	41 (10.0)	310 (75.6)
Case manager cooperates well with you	3.9	1.2	63 (15.4)	61 (14.9)	285 (69.7)
User participation (<i>N</i> = 402–407)					
Feeling that their needs and wishes were taken into consideration by the child welfare services	3.5	1.2	80 (19.7)	83 (20.4)	244 (59.9)
Was allowed to be part of the decision-making process by the child welfare services	3.6	1.2	79 (19.5)	73 (18.0)	253 (62.5)
Has received the opportunity to influence measures received from the child welfare services	3.4	1.3	83 (20.7)	87 (21.6)	232 (57.7)
Outcomes of child welfare services (<i>N</i> = 380–394)					
Satisfaction with measures received	3.5	1.2	79 (20.6)	92 (24.0)	213 (55.4)
Has received help from the child welfare service that made it easier to provide care	3.3	1.3	111 (28.6)	96 (24.7)	181 (46.7)
Has received help that contributed to a good development of child	3.2	1.3	107 (28.2)	112 (29.5)	161 (42.4)
Has overall received the needed help for the child	3.4	1.3	96 (24.4)	78 (19.8)	220 (55.8)

(Continues)

TABLE 3 | (Continued)

	<i>M</i>	<i>SD</i>	Not at all/ to a minor extent, <i>n</i> (%)	To some extent, <i>n</i> (%)	To a great extent/to a very great extent, <i>n</i> (%)
Overall satisfaction with child welfare services (<i>N</i> = 408) ^a					
Overall, how satisfied or dissatisfied you were with the child welfare services	3.6	1.3	76 (18.6)	86 (21.1)	246 (60.3) ^a

Note: Questions were answered on a five-point scale going from *not at all* (1) to *a very high extent* (5).

^aFor overall satisfaction, the response scale was from *very dissatisfied* (1) to *very satisfied* (5).

Studsrod, Willumsen, and Ellingsen (2014) suggest that while most parents experience at least some positive experience with CWS, a significant number of parents have negative experiences with the CWS.

Satisfaction rates are lower for CWS than for other services with a more universal scope studied in the SKO study (Kaiser, Lillevik, et al. 2022; Kaiser, Skjesol, et al. 2022). For the health centres for children 0–5 years old, 95% of the parents reported overall satisfaction with the services to a great or very great extent (Kaiser, Lillevik, et al. 2022). Satisfaction rates with open kindergartens were also very high, as 96% of parents responded that they were satisfied, and 86% that the service was to a great or very great extent beneficial to their child (Kaiser, Skjesol, et al. 2022).

Different reasons could contribute to lower satisfaction with CWS than with other services. One reason could be that some families using CWS do not receive all the help they need. Many parents received services from CWS in terms of counselling or guidance; however, counselling/guidance alone might not be sufficient to fulfil parents' needs. Families with cumulative challenges are indeed more likely to be screened in by the CWS, compared with families with single issues (Vis, Lauritzen, and Fluke 2021). In addition, families might need help from other municipal services but have difficulties accessing them. Among the general population, only 8% of school students are followed by PPT, against 40% of participants in this study (Norwegian Directorate for Education and Training 2023). Families of children in CWS also seem to experience more economic difficulties, such as unemployment. Slightly over half of the participants in our sample declared being employed, compared with around 80% of the general population aged 20–64 (Ministry of Labour and Social Inclusion 2021). A Norwegian qualitative study identified that although collaboration between Norwegian Labour and Welfare Administration (NAV) and CWS is needed for local social work, frequent obstacles are met by social workers (Ask and Sagatun 2020).

Parents using CWS were also not able to choose access to CWS to the same extent as parents using universal services. There are also some CWS measures that parents cannot refuse, such as custodial interventions. Dissatisfied parents with universal services might therefore opt out from the service, while dissatisfied parents cannot do the same in CWS.

4.1 | Predictors of Parental Satisfaction

The correlations indicated that demographic variables were unrelated to the two outcome variables, whereas both duration

of contact and the number of different case managers were negatively related to overall satisfaction. Similarly, Studsrød, Willumsen, and Ellingsen (2014) found that parents newly using CWS were more positive. One possible explanation may be that as time passes, the likelihood of experiencing more challenges and negative interactions with the CWS increases. Also, having to adapt to new case workers may be strenuous and negatively impact satisfaction. On the other hand, all the user scales were highly correlated with the outcome variables.

The hierarchical regression analyses show that neither age, gender, nor language contributed to overall satisfaction or satisfaction with outcomes of CWS. Findings also unexpectedly suggested that longer time spent in the system might increase satisfaction with outcomes of care when adjusting for number of case workers and demographic variables. Parents might be better able to handle long duration of contact when they keep the same caseworkers.

Information quality, workers' skills and user participation were all statistically significant predictors of parental satisfaction. This means that perceiving the quality of the information as good, the skills of the social workers as high, and feeling included in the decision-making process were related to increased parental satisfaction.

Information quality is often seen as an important element for parental satisfaction in CWS, as informed parents learn about services available (Leckey et al. 2022) or learn what to expect from CWS (Trew et al. 2023).

The helping relationship between social workers and families is often considered as at the centre of child welfare social work, especially in family service-oriented systems (Lietz and Geiger 2017). Norwegian CWS have been described as a family service-oriented system (Gilbert, Parton, and Skivenes 2011). This may explain the importance of workers' skills identified in this study.

The importance of user participation could be explained by the fact that CWS are mostly accessed upon referral from external actors, rather than by parents themselves. Participation in CWS may give parents a sense of agency and limit their feeling of being subjected to outside decisions. In a qualitative study on partnership between social workers, foster parents and parents of children in care, user participation was perceived by parents as easing their hopelessness while increasing their understanding of the reasons behind decisions taken by CWS (Slettebø 2013).

TABLE 4 | Bivariate correlation matrix between variables in the study ($N=388-412$).

	<i>M</i>	<i>SD</i>	1	2	3	4	5	6	7	8	9	10	11	12	13	14
Demographic characteristics of the parents ($N=405-412$)																
1. Gender ^a																
2. Age	3.30	0.94	-0.14*													
3. Relationship ^b status	0.16*		-0.07													
4. Educational level	2.32	0.91	-0.06	0.34*	-0.08											
5. Language ^c	0.04		-0.02	0.07	<0.01											
Characteristics of contact with CWS ($N=388-403$)																
6. Duration	3.21	1.99	0.18*	0.04	0.09	-0.20*	-0.06									
7. Frequency	2.23	0.80	0.07	-0.12*	0.05	0.10	0.03	-0.15*								
8. Mode of contact ^d	0.03		0.03	0.07	0.00	-0.10	-0.11*	0.22	0.10							
9. Number of different case managers	1.59	0.65	0.07	0.02	0.08	-0.10*	-0.08	0.54*	-0.01	0.13*						
User scales ($N=408-411$)																
10. Accessibility	3.81	0.87	0.03	-0.02	0.08	0.02	0.12*	-0.21*	0.07	-0.10*	-0.40*					
11. Information quality ^{e,f}	3.50	0.92	0.02	-0.02	0.00	0.04	0.05	-0.20*	0.02	-0.02	-0.43*	0.72*				
12. User participation ^{e,f}	3.60	1.18	0.04	0.00	0.02	0.05	0.04	-0.21*	0.00	-0.01	-0.45*	0.69*	0.82*			
13. Workers' skills	3.84	1.13	0.00	0.02	0.01	0.07	0.05	-0.20*	-0.01	-0.01	-0.46*	0.74*	0.86*	0.89*		
Outcome variable ($N=399-408$)																
14. Overall satisfaction	3.60	1.32	0.02	0.07	0.06	0.08	0.06	-0.19*	-0.01	-0.01	-0.44*	0.68*	0.77*	0.84*	0.87*	
15. Satisfaction with outcomes of CWS	3.40	1.20	0.02	-0.04	0.02	-0.03	0.10	-0.08	-0.01	-0.01	-0.38*	0.65*	0.77*	0.83*	0.84*	0.81*

^aGender: male (1), female (2).

^bRelationship status: in a relationship (1) single (2).

^cLanguage: Norwegian (1), not Norwegian (2).

^dMode of contact: external referral (1), contacted CWS self (2).

^eStatistically significantly lower mean than workers' skills ($n=408$, $p < 0.01$).

^fStatistically significantly lower mean than accessibility ($n=406$, $p < 0.001$).

* $p < 0.05$ (two-tailed test).

TABLE 5 | Hierarchical regression models predicting satisfaction with outcomes of CWS ($N=338$).

Variable	Model 1	Model 2	Model 3
	β	β	β
Demographic characteristics of the parents			
Gender ^a	0.02	0.01	0.00
Age of parent	-0.04	-0.01	-0.02
Relationship status ^b	0.01	0.04	-0.02
Language ^c	0.10	0.09	0.07**
Educational level	0.01	-0.02	-0.06*
Characteristics of contact with CWS			
Duration of contact with CWS		0.19**	0.14***
Frequency of contact in the last 3 months		0.04	0.04
Mode of contact ^d		0.04	-0.01
Number of different case managers		-0.50***	-0.05
User scales			
Workers' skills			0.41***
Information quality			0.13*
Participation			0.35***
Accessibility			0.02
R^2	0.01	0.19	0.77
ΔR^2		0.18***	0.57***

^aGender: male (1), female (2).

^bRelationship status: in a relationship (1) single (2).

^cLanguage: Norwegian (1), not Norwegian (2).

^dMode of contact: external referral (1), contacted CWS themselves (2).

* $p < 0.05$, ** $p < 0.01$, and *** $p < 0.001$.

The results showing the positive effect of information quality, workers' skills and user participation on parental satisfaction are consistent with previous results (Bekaert et al. 2021; Tilbury and Ramsay 2018). Previous literature was however mostly qualitative or looking one by one each determinant of satisfaction.

4.2 | Implications for Policy and Practice

Information quality seems to be an area with improvement potential in CWS, as satisfaction with information was lower than with other aspects evaluated. Future practice could improve the quality of publicly available information on measures offered by the CWS, because under half of the parents are able to access such information to a great extent on the internet or in brochures. Visibility could be improved by a more detailed online information. In a Norwegian Official Report (*Norges offentlige utredninger*, NOU), a child welfare committee described about 120 measures for service improvement in CWS and reflected upon the decisions of the European Court of Human Rights concerning Norwegian CWS (NOU 2023:7 2023). These suggestions include establishing a common child protection portal collating information materials, statistics and overviews. This could contribute to better practice, considering that many parents in the present study reported being unsatisfied with access to information about measures offered by the CWS. Case workers

could also more routinely give information on existing services to parents.

The findings also suggest the importance of achieving and maintaining skills of workers within the CWS, and for social workers to consider the inclusion of parents as partners in the decision-making process.

4.3 | Further Research

Parents reported receiving various measures from CWS. Further research could detail what different measures entail and examine their specific efficacy, considering that less than half of parents declared that the help received had made it easier to provide care or had contributed to a good development of the child.

As most parents are in contact with other municipal services, further research could investigate how the quality of collaboration between services influences satisfaction with CWS.

4.4 | Limitations

There are several limitations to consider when interpreting the findings. There is a risk of a selection bias and of an overestimation of satisfaction. Ideally, we should have run a

TABLE 6 | Hierarchical regression models predicting overall satisfaction with CWS ($N = 342$).

Variable	Model 1	Model 2	Model 3
	β	β	β
Demographic characteristics of the parents			
Gender ^a	-0.02	0.00	-0.01
Age of parent	0.02	0.06	0.05
Relationship status ^b	0.09	0.12*	0.07*
Language ^c	0.02	< 0.01	-0.02
Educational level	0.09	0.05	0.01
Characteristics of contact with CWS			
Duration of contact with CWS		0.06	0.01
Frequency of contact in the last 3 months		0.00	0.00
Mode of contact ^d		0.07	0.03
Number of different case managers		-0.49***	-0.04
Scales			
Workers' skills			0.51***
Information quality			0.11*
Participation			0.24***
Accessibility			0.05
R^2	0.02	0.23	0.79
ΔR^2		0.21***	0.56***

^aGender: male (1), female (2).

^bRelationship status: in a relationship (1) single (2).

^cLanguage: Norwegian (1), not Norwegian (2).

^dMode of contact: external referral (1), contacted CWS themselves (2).

* $p < 0.05$, ** $p < 0.01$, and *** $p < 0.001$.

mixed model analysis with municipality as the grouping variable ($ICC = 0.12$), but it was not possible due to small samples size in the different clusters/municipalities. The variance of the level two variable 'municipality' in an attempted random intercept model remained of zero, even if convergence criteria had been achieved.

Average response rate to the survey was 33%. Previous studies indicate that the least satisfied parents are less likely to participate in studies evaluating their satisfaction (Barron et al. 2014; Perneger, Peytremann-Bridevaux, and Combescure 2020). Selection bias might therefore have led to an overestimation of parental satisfaction, as parents who refuse to participate in SKO study might have higher dissatisfaction rates. This risk might be increased for parents who have another mother tongue than Norwegian. We notice in our sample that only about 17% of parents declared another mother tongue than Norwegian, while 41% of child receiving measure from CWS have an immigrant background themselves or one parent born outside or Norway. A systematic review of randomized control trials found that parents with a foreign background referred to child mental health programmes by CWS had lower rates of engagement and participation in the programmes (Ingoldsby 2010). A Norwegian qualitative study on parenting experiences of Ugandan immigrants underlines that parents in contact with the CWS feel that they do not meet expectations from the CWS (Kabatanya and Vagli 2021). However, in our results, parents with another language than Norwegian

actually have a slightly higher satisfaction with outcomes of CWS. It is important to consider that the least satisfied parents with a foreign background might have been particularly less likely to participate in our study.

The present study is observational and uses data on how parents perceive the CWS. It can therefore not be understood as proving a causality, rather as suggesting factors associated with satisfaction with CWS.

5 | Conclusion

Parents have an important role in several CWS such as in Norwegian CWS, described as a family service-oriented system. There is a fair level of satisfaction with CWS, but much lower than in other municipal services. New insights are provided on the effect of duration of contact on parental satisfaction, as well as on the combined effect of parents' perception of workers' skills, user participation, and information quality.

These findings underline the importance of social workers' skills, of giving parents opportunities to participate in decision-making and of providing good information on the services. Findings can motivate further research examining how satisfaction with CWS is influenced by collaboration of CWS with other services, while further documenting outcomes of the different measures offered.

Ethics Statement

The SKO study was approved by the Norwegian Centre for Research Data (NSD, project number 39022).

Consent

Participants have received oral and written information on the study and their rights and have agreed to participate.

Conflicts of Interest

The authors declare no conflicts of interest.

Data Availability Statement

Research data are not shared.

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