Psykiatriseringen av skolkaren

BUP och det institutionella omhändertagandet av ungdomar som inte går till skolan

Hans Ek

Akademisk avhandling

som med vederbörligt tillstånd av Rektor vid Umeå universitet för avläggande av filosofie doktorsexamen framläggs till offentligt försvar i Hörsal B, Samhällsvetarhuset, fredagen den 28 september, kl. 10.00.
Avhandlingen kommer att försvaras på svenska.

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Abstract
The main aim of the thesis was to investigate the nature of as well as critically review the institutional care of young people who do not go to school.

The thesis consists of four studies. The first three studies are based on different empirical materials such as electronic journals and administrative patient databases, qualitative interviews with social workers at Child and Adolescent Psychiatry (CAP), and with managerial representatives in School, social services and CAP. The fourth study is mainly theoretical and problematizes the results from the first three studies.

The results show several problematic aspects in the institutional care of young truants. When young truants enters CAP, a quick, and sometimes without psychological investigation, categorization is made with psychiatric terminology in the form of a diagnosis, and medicines are prescribed as treatment. Further, social workers, who shall have a systemic approach on family and relationships, seem to embrace a psychiatric diagnostic understanding of the problems. At the same time, it appears that school only has extra resources to help the truants if they have a psychiatric diagnosis. Although the idea of collaboration between different professionals is that several different perspectives should be used, the results show that CAP’s psychiatric perspective dominates.

The results of what happens to young people who do not go to school is discussed as an example of a special form of medicalization, in which social difficulties and existential problems are referred to psychiatry. It appears that help for them is completely individualised, by focusing on symptoms and diagnosis. What is not visible in this unilateral individualisation, for example, are organisational and educational problems in school, system problems in the family or among friends or lack of social contacts outside the family. By referring the truant to CAP can therefore miss further social circumstances in their life situation, which can have great importance in whether they attend school or not. Therefore, it is important to problematize this process of referring everything to psychiatry and to ask questions about what situations and events have contributed to this cultural pattern, which means that people’s difficulties in life are increasingly being solved with diagnosis and medications.

Keywords
Truancy, young people who do not go to school, institutional care, child and adolescent psychiatry, social services, school, collaboration, exclusion, psychiatrization