CHILDHOOD SOCIAL EXCLUSION IN NORWAY

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1. Norway has a relatively long tradition of homogeneity and small-scale conflicts when referring to social and functional deviations of various kinds and degrees. The history of social exclusion has more or less been understood and explained as the history of necessary efforts to give the best possible and available support and help to different groups in socially at risk situations.

2. Especially children with different handicaps or emotional and social disturbances and problems have been defined as clients, and for shorter or longer periods placed in special kindergartens, schools or eventually homes to be given some kind of treatment and training.

3. In this perspective the society has focused on normalisation in the meaning of giving the individual child a program within a more or less clear-cut group of children with (the same) problem, with the object of developing normal functionality, or as close to it as possible, within the available economical and educational frames;

4. The tradition described has been questioned and analysed during the post-war period, and in the mid-seventies the policy was changed. That new framework would then be defined as the strategy of full inclusion in the normal schools, etc; The base of the change was probably of, at least, two different kinds:

1) Economically the former strategy proved very expensive and also the cost-benefit analysis gave reasons to ask whether the society could get more effect for the money, if used within a new educational framework.

2) The ideology of the specialist-treatment and the exclusive training approach resulted in a social exclusion and a patient-status to the children; The paradigm of diagnostics did create labels that in its time stuck to the singular child as a stigma. The process of identifying and eventually avoid and/or solve this problem was especially the concern of special educators working in the field of socially disturbed or at risk children. One important perspective in this critical tradition is to turn the process of normalisation to include also an adjustment of the social expectations and tolerance in the so called normal population.
5. Which groups, as long as we talk about groups and not individuals, are the most exposed and potentially the most vulnerable, with respect to social exclusion, in Norway today? The following (ranking list) would probably gather a relatively wide agreement:

- Children of immigrants from the poorest and most war-damaged parts of the world, Pakistan, Iraq, Iran, Viet Nam, many African countries, Balkan, South America, etc.

- Children of very disadvantaged families eg. families with economic problems, alcoholism, criminality, drug abuse, and often as consequences of the former violent upbringing methods and generally violent behaviour.

- Mentally retarded children.

- Children with emotional disturbances, both those acting out and those withdrawing to (invisibility).

6. To be different in appearance from the dominant white Caucasian population has gradually become normal in big cities, but not unlike the situation in many other countries, the immigrants from the culturally and linguistically most foreign populations tend to live in more or less secluded ghettos. This is often preferred by the local Norwegian inhabitants.

7. The according difficulties will mostly consist in cultural and communicative shortcomings, which are educationally demanding, but in principle not very difficult to overcome within the ordinary system of educational institutions, if the society invests resources and professional support.

8. Hostility against and fear of strangers will also be a part of the cultural confrontations, but do no in it self represent social exclusion for each and every member. But one consequence can be the upcoming of different ethnic clubs and even gangs, etc. A policy and strategy to develop a multi-cultural society has been launched during the last few years.

9. Children with emotional and social behaviour problems are of course also educationally challenging in many manners. Often they need more held and expertise than the single school or kindergarten can give or afford. The Norwegian state has during the last ten years established a few regional centres, meant to support the regional schools and kindergartens with competent specialist. The need has hitherto been far beyond the available support, and the problem is supposed to be growing. Parallel to such centres each country or commune has a Psychological and Educational Service Centre, where the staff are more generalists than specialists, but supposed to be competent to assess and give advice to schools etc., and to test and prepare for further treatment or training at specialists. In addition come a lot of individual, both public and private systems of support and help like day-centres, clubs, organisations for interest groups and for youth etc.

10. The mentally retarded children are probably the most vulnerable group in this context. Norway has a close to 15 years of experience with a policy of integration of mentally retarded children in the ordinary educational institutions, that is the local school, the local kindergarten. Excepted are the relatively few with the deepest retardation and functional problems. Although successful seen form an administrative perspective, we now are forced to evaluate this policy in a very critical light. Reports, especially form schools, tells that the (included) pupils very often are socially excluded and lonesome. The possibility to take part in discussions, play, games etc. seems to be less during their growth, and their fellow-pupils become less patient and supportive. The barriers of communication seem to be not only of expressive or linguistic nature, but also made of differences in cognitive processes of making unwritten
laws, game rules, humour and fun etc; Understanding as a mutual process seems to very difficult, if not impossible in most instances.

11. Apart from the points presented above, the Norwegian school-system has worked intensively with the problem of “mobbing” (bullying). Mobbing is then understood as a group process of harassing and eventually physically attacking a person; one of many strategies of mobbing has been to “freeze out” through neglecting, mockery and ridiculing among other things. The impact on the individual can be very damaging and result in withdrawal and isolation, even when the mobbers do not have any clear intention for this.

12. Preferred strategies against mobbing have been to increase the awareness of the problem among the fellow-pupils and of the teachers, to keep short “conferences” in the class where every pupil shall talk about things bothering them, and where pupils can experience the differences between different strategies in trying to solve or avoid a problem, before it grows (over their heads). Mobbing is often a theme for discussion, and the pupils are invited to dramatise situations and to suggest activities to make mobbing less likely to happen. They are also invited to be consultants for conflict mediators in cooperation with the teacher(s) within their class; Such mediators are often elected by their fellow-pupils.