

“Why is it that all the Dangerous Children are Black From the Neighborhoods?”: Critical Phenomenology of the Concept of Risk Among Adults Educated at Therapeutic Boarding Schools

Alin Frantsman-Spector and Avihu Shoshana

Highlights

- Adults, labeled at-risk as children and educated in residential care-settings were interviewed.
- Interviews revealed critical phenomenological readings of the notion of risk.
- Research contributions include examining the social construction of the concept of risk.
- Long-term ramifications of typing children as at-risk are discussed.

© 2021 Society for Community Research and Action

Abstract This article is based on in-depth interviews with Israeli adults who had been labeled in their childhood as being at risk and removed from their home to residential care settings (RCS) by court order due to their families’ extreme poverty. In seeking their perspective, the present article addresses the pivotal question of how, as adults, they define, experience, and relate to the concept of “at-risk children.” The interviews revealed critical phenomenological readings of the notion of risk and the social institution of RCS. Analyzing the critical phenomenology of the interviewees offers research contributions concerning the study of the social construction of the concept of risk, its phenomenology, and the long-term ramifications of labeling children as being at risk and of educating them in RCS.

Keywords At-risk children · Residential care settings · Phenomenology · Risk · Care leavers

Introduction

The constructivist perspective in the social sciences (Gergen, 1985) posits fundamental questions that suggest we ponder how a new humankind category is born. How do new classifications and categories, such as “at-risk

children,” emerge, and how are they recognized and institutionalized? What are the interactions between social classifications and the people classified? These questions also match the basic queries in community psychology about people’s well-being within their specific contexts and social systems (Brodsky & Cattaneo, 2013; Levin et al., 2005). Moreover, alongside the understanding that emotional well-being, diagnoses, and agentic abilities are immersed in networks of power and social control, community psychology seeks to promote individual growth and enable those labeled “deviant” to live dignified and empowered lives. Both perspectives, constructivism (Ungar, 2004) and community psychology (Trickett, 2009), also use psychological knowledge to create a match between individuals and their environment while avoiding blaming or pathologizing the individual.

An examination of the research literature reveals a plethora of quantitative studies examining the causes and effects of being labeled as an “at-risk child” (Etzion & Romi, 2015), also designated as “risk-factor analysis” or “statistical profiles” (Foster & Spencer, 2011, p. 127). However, phenomenological studies concerning risk are scant (see Follesø, 2015; Foster & Spencer, 2011). This article proposes to address this research lacuna with a fundamental question: How do adult individuals who had been typed as “at-risk children” due to their families’ extreme poverty and subsequently removed from their home by court order and educated at residential care setting (RCS) schools for many years define, experience, and relate to the concept of “at-risk children”? This question was examined through in-depth interviews with Israeli graduates educated as children in an RCS.

✉ Avihu Shoshana
avihush@gmail.com

Graduates' perspectives of their "at-risk childhood" are critical in light of the common assumptions concerning "at-risk children" or the prevailing social construction of this category. The use of the at-risk classification is primarily "top-down" (Hacking, 2004); that is, the category is managed by state authorities and experts (e.g., social workers) regarding members of specific populations, presumably to improve or rehabilitate their quality of life. The "bottom-up" use of the category—that is, its phenomenology by those populating the category (the "at-risk children")—or the interaction of the top-down knowledge with the people classified has been only rarely studied (Foster & Spencer, 2011). Furthermore, the category of "at-risk children" comprises an array of conditions and characteristics such as academic failure, poverty, neglect, abuse, immigration from the global south, children of minoritized groups, and emotional disorders (Etzion & Romi, 2015). In this sense, "the 'at-risk' concept is highly elastic" (Lubeck & Garrett, 1990, p. 327). Moreover, "at-risk" is a kind of *bulldozer* concept (Illouz, 2008) that disperses internal variance and results in establishing and maintaining a sense of homogeneity. It also forms a category geared toward specific populations; that is to say, it is populated primarily by low socioeconomic status (SES) individuals and stigmatized ethnic and racial groups. In other words, the children of the elite social class seldom populate this category. For example, the vast majority of RCS students in Israel belong to stigmatized ethnic groups: *Mizrahim* (immigrant Jews from Arab countries) and Ethiopians. Moreover, an in-depth analysis of the risk literature reflects the dominance of the deficit model and the use of the medical language of pathologies (Schram, 2000). Adopting the deficit model implies that one would be hard-pressed to find studies of "at-risk children" and adolescents that address their strengths, such as courage, vitality, or optimism (Levin et al., 2005).

The interviews in this study reveal critical readings of the notion of risk and of the RCS. These perspectives can teach us about the social construction of risk as it relates to out-of-home placement. Moreover, these critical readings reveal the need for research engagement in the translation of top-down concepts into everyday self-understandings (Hacking, 2004) or the understanding of how classifications of people interact with the classified parties.

The Birth of New Categories and the Social Construction of "At-Risk Children"

Perspectives of the social construction of reality suggest that we dissociate from essentialist conceptions of social and personal life (for a broad description of social

construction perspectives, see Hacking, 1999). For example, instead of locating regular and ongoing essences in the humanities, similar to prevalent trends in the natural sciences, these perspectives suggest examining the processes of *becoming* subjects. Furthermore, rather than ascertaining whether a phenomenon or reality is 'real,' these perspectives ask how they become real (Young, 1995). Moreover, the transformation of reality into 'real,' 'objective,' 'natural,' and 'taken-for-granted' highlights perspectives central to constructivism. Thus, the process of constructing a reality comprises a political resource for establishing a specific social order, such as ethnic and racial hierarchies, diagnoses of normality and abnormality, classifications, categories, and distinctions.

Constructivist perspectives do not assume that new classifications or categories (such as "at-risk children") necessarily engender a material phenomenon that had not previously existed. Rather, it introduces a new epistemological and ontological reality. Taking up Arnold Davidson's analysis, Hacking (1986) described these processes in relation to the emergence of the social categories of "homosexual" and "heterosexual," which appeared at the end of the nineteenth century: "There has been plenty of same-sex activity in all ages, but not same-sex people and different-sex people" (Hacking, 1986, p. 225).

It is critical to note that these descriptions do not only suggest that the power associated with creating classifications and categories is merely oppressive but also *productive* (Foucault, 2007). New categories and designations may also open up new existential alternatives and, subsequently, identities that had not existed previously (Shoshana, 2012). To emphasize the distinctiveness of these epistemological and ontological dynamics in the humanities, Hacking (1994) coined the term *looping effect*. Using this concept, Hacking distinguished between categories of "human kind" and "natural kinds." Unlike the natural kind, "human kinds can exert effects on themselves" (Brinkmann, 2005, p. 769). Furthermore, citing the looping effect, Hacking (2004) and other researchers following in his footsteps (e.g., Plotkin Amrami, 2018) emphasized how classifications of people interact with the people classified.

As our article will highlight, this connection between knowledge, experts, and the phenomenology of lay people is important to comprehensively understand the power of labeling (Sparti, 2001) and to be cognizant of the existence of categories and designations as practitioners' "products of achievement" (Young, 1995). At times, individuals and group members may reject certain categories and labels and seek to change them. For example, queer people struggled to abolish the classification of *homosexuals* as pathological in the American Psychiatric Association's DSM (Brinkmann, 2005). Other studies revealed individuals' conformity to categories, such as people with

schizophrenia in the United States, who, unlike Indians and Africans diagnosed with schizophrenia, express symptoms in line with those appearing in the DSM (Luhmann et al., 2015). Additional studies have described the mismatch of categories and labels from one culture to another and the disregard of local populations for the Western categories, typically acknowledged as universal categories, as in Cambodia (Kidron & Kirmayer, 2019).

Against this disparate background, constructivist scholars have encouraged research into the birth of new classifications, categories, and labels and their effects on people. Moreover, they have urged the study of people's interactions with these classifications. Insightful studies in this context have been proposed for many several clinical categories, such as trauma (Leys, 2000), post-trauma (Young, 1995), autism (Eyal et al., 2010), and educational categories such as gifted disadvantaged (Shoshana, 2016).

Phenomenology of Risk and “At-Risk Children”

The concept of “at-risk children,” prevalent in the 1990s, replaced other concepts that had been embraced in previous years: for example, “culturally deprived and deficient” (used widely in the 1960s and 1970s) and “disadvantaged” (used in the 1980s; Swadener, 2010, p. 8). The term “at-risk children and adolescents” has been defined differently by various organizations and researchers (Etzion & Romi, 2015). Some scholars and organizations (e.g., the OECD) have examined certain aspects of risk, such as academic functioning, whereas others suggested broader formulations of risk situations. For example, Dryfoos (1990) suggested that the term “at-risk” meant a likelihood that adolescents will become irresponsible adults. Resnick and Burt (1996) defined risk as behaviors and attitudes that deviate from the accepted norm. Other studies viewed risk through the lens of antisocial behavior, delinquency, and drug use (Cusick et al., 2012), unsafe sex, pregnancy at a young age, experiencing neglect, emotional, physical, or sexual abuse, suicidality, obesity and other chronic diseases, poverty, and difficulties in social relationships.

Studies examining “at-risk children and youth”—primarily quantitative—have described in detail their unique life characteristics and their psychological characteristics in comparison with children and youth who are not at risk. The researched “at-risk populations” were found to belong to largely low-SES families (reflected in parents' education, income, and place of residence) and stigmatized ethnic groups (Etzion & Romi, 2015). Upon examining personality traits of “at-risk youth,” the studies reported several trends: low levels of emotional and behavioral adjustment; low levels of emotional well-being; low self-esteem; low self-efficacy (Brooks, 1994); and insecure attachment styles

(Oshri et al., 2015). The studies further reported family relationships accompanied by many crises (e.g., immigration, incarceration, single-parent families, inconsistent punishment; Moore & Gleib, 1995). It was also found that whereas many “at-risk youth” identified with the value of belonging, they had not shown a commitment to educational institutions. School experiences were described by “at-risk youth” through a sense of alienation, disconnection, and a low level of involvement (Sulimani-Aidan, 2015).

Relatively few phenomenological studies have been conducted on RCS graduates. Most of these studies were carried out on graduates during the first years after their departure to independent living (Refaeli, 2017), with only few phenomenological studies focusing on adults many years after leaving their RCS. These studies largely addressed the antecedents of resilience (Refaeli, 2017; Stein, 2006). Stein (2006) studied young people who had completed their stay in an out-of-home placement institution and their transition to independent adult life. He proposed a model classifying out-of-home placement graduates into three main groups: the *moving on*, the *survivors*, and the *victims*. He contended that three main resilience characteristics differentiate these graduates. These include personal traits of the young person (e.g., intelligence, sense of humor, and self-awareness), relationship with family members (e.g., a good relationship with at least one parent), and the social environment (e.g., volunteer activities and a significant relationship with an adult mentor).

Moreover, it is noteworthy that very few studies have inquired directly about the labeling of “at-risk children.” A comprehensive analysis of the research literature led us to two studies that directly queried individuals who had been classified as at-risk about the category of “at-risk children” and “at-risk youth.” Foster and Spencer (2011) interviewed 45 recipients of social aid between the ages of 16 and 24 who lived in Ontario, Canada. Interviewees were asked: “Have you ever heard the term ‘at-risk youth’?” Whereas some interviewees had never heard of the concept of “at-risk youth,” others were cognizant about the concept having been attributed to them. Not only did they reject the concept, but they excluded themselves from the category. Interviewees who had heard of the concept reported seeing it appearing on posters or programs at various community centers. The authors concluded that “none of the people we spoke to internalized or accepted it [the at-risk classification] as an accurate or meaningful descriptor of their own situation” (Foster & Spencer, 2011, p. 132). The authors interpreted this phenomenology as a case of symbolic violence. Symbolic violence is ‘soft’ violence that is expressed by forcing perceptual categories upon dominated social agents. Moreover, symbolic violence obscures the dominant discourses, causing these discourses to be perceived

as self-evident (Foster & Spencer, 2011). The disparity between the experts' (i.e., researchers, social workers, community workers) use of the concept and its use by the classified individual is also worded in terms of symbolic violence by the classification's authors.

The second study, conducted in Norway, examined how professionals and young people between the ages of 15 and 25 described the collective term of "at-risk youth" (Follesø, 2015). The young people in the study agreed to talk about the difficulties in their lives but rejected being called "at-risk youth" due to the stigmas associated with it. These young people described 'risk' as something that involved others but not themselves. Follesø further found that whereas professionals spoke about risk behaviors, offering predictions of a failed future for those classified as being at risk, the young people described risk-related characteristics in terms of emotions and life experiences (e.g., experiencing failure, being an outsider, loneliness, and helplessness). The result is a lack of congruence between the category description by the professionals and those who bear the label.

Out-of-Home Placement in Israel

In most Western countries, the customary out-of-home placement framework is to foster family care; thus, the child is transferred from the custody of a biological parent to another family member (Kosher et al., 2018). In Israel, 74% of out-of-home placement of "at-risk children" is to large residential care settings (RCS). Thus, Israel's rate of placement to educational and welfare institutions, such as RCS, is among the highest in the world (Kosher et al., 2018). In Spain, where the rate of institutional out-of-home placement is high, relative to European Union countries, the rate is 40.2% (Kosher et al., 2018).

Israel's high rate of institutional out-of-home placements and the low rate of foster family placements has several explanations. First, many ultra-Orthodox Jewish families in Israel in the past, and even today, send their sons to *yeshivot*, boarding arrangements that are considered elite religious education. Yeshivot are structured comparably with educational boarding schools. The dominance of religious educational institutions has turned educational boarding schools into routine and familiar frameworks in Israel's public sphere.

A second explanation is linked to the historic ideology of the Jewish and Zionist movements. Young Zionist activists arrived during the early twentieth century without their parents to take part in the establishment of the State of Israel. These young people lived in boarding schools. After World War II, these institutions took in surviving Holocaust orphans. With the establishment of the State of Israel in 1948 by Jewish leaders, mostly of Eastern

European descent (*Ashkenazim*), the young state began to absorb large numbers of immigrant Jews from Arab countries (*Mizrahim*) for what the heads of state then called the demographic survival of a Jewish Israel in the region (Shoshana, 2016). A further essential explanation for the pervasive character of RCS is the refusal of biological families in Israel to serve as foster families for "at-risk children." Since the establishment of Israel, the state has pursued a pro-natalist policy and encouraged large biological families to cope with what has been defined as the "demographic threat" in the context of the Israeli Arab population and surrounding Arab countries.

Study Design

This study is part of a broader study of accounts of RCS graduates in Israel who were removed from their homes by court order for various reasons (e.g., extreme poverty, sexual abuse, parental emotional state, immigration from developing countries). For this article, we interviewed twenty-three adults who, in their childhood, were removed from their homes due only to their *extreme poverty*. Limiting interviewees to those removed from their homes due to their families' extreme poverty and not to other justifications was based on our desire to dissociate from the elasticity of the concept of "at-risk children" and from the uniform and extensive use of the term.

One of the initial questions we posed to the interviewees of the broader study addressed the reason for their removal from the home. The interviewees offered various justifications: poverty, neglect, sexual abuse, parental dysfunction (e.g., drug use, mental illness, chronic illness). Thus, for the current study, only the interviewees citing *poverty* as the reason for their being removed from their homes and emphasizing that, in their view, their parents functioned optimally were selected for the interviews. Furthermore, we then explicitly asked them if they thought they had experienced parental neglect, abuse, or other dysfunction on their parents' part. We interviewed only those who responded in the negative. As the interviewees may not have been aware in their childhood of the connection between poverty and other risk factors, we also asked their counselors and caregivers (i.e., social workers) about their recollection of the respondent's reason for being removed from the home as a child. Only interviewees whose response matched that of the school counselors and caregivers regarding the justification for their removal from their homes (i.e., extreme poverty) were included. Referrals to school counselors and caregivers were made following the RCS graduates' consent. We requested the graduates contact their RCS counselors and caregivers to participate in our broader research.

Participants were selected using purposeful sampling (Patton, 2002). The first criterion was “cause of risk” (i.e., poverty) and included selecting interviewees who were removed from their homes, subject to their interpretation and the interpretation of their RCS counselors and caregivers in their childhood regarding the cause of risk. The second criterion was gender. It was important for us to interview a comparable number of women and men to consider potential gender differences¹.

The third criterion called for selecting interviewees educated in RCS from the early 1990s when the “at-risk children” classification was prevalent among policymakers. This time-related criterion was designed to ascertain the respondents’ view of the concept of risk. We presumed that since this category had not been commonly used previously, the graduates’ cognizance of the concept would have been unlikely.

Of the 23 interviewees, 22 were removed from their homes to the RCSs between the ages of 6 and 12, and one participant was removed at a younger age. At the time of the interviews, all were in the 36–42 age range, with equal gender distribution (51% male, 49% women). Most of the interviewees worked in largely blue-collar jobs that did not require higher education. Most were *Mizrahim*, with two interviewees having emigrated to Israel from the Former Soviet Union countries, and two were Ethiopian Jews. Most respondents (65%) were married with children, 21% divorced, and 14% single. The interviewees determined the venue of the interviews (coffee shops and their own homes). The interviews lasted between 1.5–3 h. Interviewees did not receive compensation or other incentives for their participation.

The RCS graduates were recruited through contacts with several RCSs and invitations disseminated in various arenas, including social media, community centers, and municipalities’ welfare offices. Graduates fitting the criteria who agreed to participate in the study were interviewed. The research was described to them as a project calling for interviewing adults educated in various RCSs.

The individual interviews comprised seven sections. In the first section, the interviewees were asked to recount their life stories freely with no suggested structure. The second section included several follow-up questions

regarding elements of the participants’ life story, such as, “This was my most significant relationship” or “This was the greatest experience of my life.” The third section dealt with the interviewee’s self-concept; it comprised a single open question about how the interviewee defined their current identity. The fourth section included questions about the authorities’ decision to remove them from their home as a child. The fifth section included questions about life at the RCS (i.e., significant memories, daily schedules, friends, activities, crisis moments, and relationships with the family). The sixth section dealt with life after leaving the RCS (i.e., military service [mandatory in Israel], residence, employment, romantic relationships, and relationship with the parents). The seventh and final section included direct questions about the concept of risk, removing the child from home, and their view of the ramifications of having been an “at-risk child.”

All interviews were recorded and transcribed. The research epistemology that guided us relied on interpretive phenomenological analysis (IPA; Smith et al., 2009). IPA facilitates an analysis of the personal lived experience, focusing on how individuals grant meaning to their personal and social life spheres. Thus, IPA helps clarify how individuals understand their experiences in the world and taps their hermeneutic interpretations and the sources of these understandings. The data were analyzed using IPA principles in six stages. The first stage included the two authors reading the raw data, making notes about the content’s descriptive and linguistic aspects, and recording preliminary interpretive notes. The second stage included the initial conceptualization of the central themes that each of us identified, with each researcher analyzing the interviews independently. The third stage included reading the interviews in the contexts of the initially extracted themes. The fourth phase included free reading to identify themes not identified at the previous stage. The fifth stage included a focused reading of the interviews based on the themes suggested by the two authors. The final stage called for an additional reading of the interviews to identify themes that had not been revealed by the authors in the previous phases.

Upon analyzing the interview data, particularly in the fifth and sixth stages, we examined the respondents’ freely expressed attitudes toward the concept of risk and “at-risk children” rather than views offered in response to direct questions posed toward the end of the interview. Only afterward did we analyze the responses to our direct questions concerning the concepts. This process was related to our effort to distinguish between top-down knowledge (i.e., knowledge of experts, researchers, and individuals holding positions of power) and bottom-up knowledge (i.e., the knowledge of the people that the “experts” speak and write about).

¹ No gender differences were identified in our study. We did not examine other variables (e.g., ethnicity, family status, and level of education) as a criterion for sampling the interviewees because of the information we received concerning the demographics of children who were educated in the last few decades in Israel: The vast majority of the children in the boarding school are *Mizrahim* (Jews who originated from Arab countries), and live in families with low-SES parents (in terms of education, employment, and place of residence). These descriptors were derived from interviews with administrators of therapeutic boarding schools.

To confirm our interpretations, each of the authors conducted separate readings of the interview transcripts. The authors compared their readings and interpretations of the interviews and discussed them to develop shared understanding.

The data analysis yielded five key themes to be reviewed below. Notably, all five themes were identified by each author separately. Whereas the theme labels may have differed, the themes' contents were identical. After extracting the five major themes, the authors re-read the findings to identify additional themes or interviewee interpretations. Whereas this final reading yielded a discussion concerning two issues that appeared to be unique, further deliberation concluded that these issues offered no added value to the already identified themes.

Results

"I suddenly realized that I am a type of problem.":
"problematic child," "RCS kid," and "space for blacks only"

As a response to the query, "What do you remember from when you were transferred from your home to RCS?" interviewees stated, "I felt like a problem," and "I suddenly realized that I am a type of problem." These descriptions incorporated the interpretations that the "experts" or "the State," as many interviewees put it, ascribed to their situation: for example, "social workers and the State, who believe they are experts in poverty, turned me into a problematic child who needs to be diagnosed and treated as if he were a disease." (Nofar, age 38).

The participants emphasized that this interpretation differs completely from their interpretation, similar to youth labeled "at-risk" in Foster and Spencer's (2011) study. This is how Nofar (age 38) described it:

From the first moment at the RCS, I realized that the whole world sees me differently. On Tuesday afternoons, for example, we would go out for pizza at the neighborhood center. Then, the stares of the kids who didn't go to the RCS began—stares of 'here are the problem children studying at the RCS,' or 'here are those poor kids who study at the RCS and were forcibly removed from their home'... Sometimes their parents would say to them, right next to us, right in front of us, shamelessly, 'Stay away from them; those are disturbed children, problematic children.'...As if we were the black lepers, the barbaric *Mizrahim*, who lowered the level of the neighborhood for them.

Nofar emphasized her encounter with these stigmatized descriptions and labels as well as the personal reflexivity involved in that encounter. As the theory of symbolic interactionism stresses, social encounters extract from individuals a specific attitude toward themselves and thereby establish new self-concepts (Shoshana, 2016).

Many interviewees described the RCS as a space hosting specific ethnic qualities, which, in turn, engendered a problem-laden experience. Many interviewees recalled their surprise as children that all the RCS students were *Mizrahim* who grew up in disadvantaged neighborhoods. This is how Gadi (age 42) depicted it:

When I arrived at the RCS, I was shocked that there were only *Mizrahim* there. Suddenly, I realized that I am a type of problem, which I hadn't been aware of before. I didn't realize it at the time, but when I was growing up, I asked myself, 'Why is it that all the dangerous children are Black, from the neighborhoods?' Today, I know more.

When we asked Gadi what he knew more about today, he replied:

[The RCS] is a place for Blacks. You will not find *Ashkenazi* kids from rich families there. The state has put all the Blacks, the problem children, in one place in order to handle them. It's easier for [the state] ...especially, distancing us from our parents and permitting us home visits only once every three weeks.

The depiction of the RCS as a space for Blacks was also professed by Suzy (age 47):

The RCS is a place only for Blacks, but run by Whites, *Ashkenazim* [laughs] [How?] ...I started to feel like a problem. You are expected to dissociate from your culture. And more than that, [dissociate] from your family, and you don't want to. You also do not understand why, and this creates a sense of a problem, of racism and hate. ...that somebody hates us [the *Mizrahim*] in this White country ... And suddenly, you have the stigma of being a 'problematic kid.' ...You know they also called us *teunei tippuach* ["those in need of fostering"] I only discovered this in my thirties, and you know who invented these derogatory names? The government, the State, and its experts, of course ... the social workers ... arrogant people.

Suzy's descriptions can teach us how it feels to perceive oneself as a problem and the significance of being an "at-risk child" in an RSC. Suzy's perceptions alluded

to several critical phenomena: the government's creation of new social categories ("problem child"; "RCS kid"); the definition of spaces in terms of color, ethnicity, and race (Black space, White space), which, in turn, shape personal, social, and reflexive identities; well-intentioned governmental treatment, further marking the disadvantaged subject and exacerbating the social experiences of marginalization and alienation, an issue to be elaborated below.

Suzy's description reveals the interactions that an "at-risk child" has with the labels that the "experts" or "the State," in her words, created and utilized in a special living arena (the RCS). As constructivism emphasizes (Hacking, 1986), the interactions of the categorized individuals are critical for a fuller understanding of clinical-social categories and their phenomenology in everyday life.

At-risk and misery: "at-risk feels like they view you as miserable"

Notably, none of the interviewees described their experiences at the RCS in terms of risk. This finding challenged us, as all interviewees had been labeled as "at-risk children" or "at-risk youth." The interviewees' disregarding of the at-risk mark was challenging in terms of the constructivist exploration of categories and labels. The findings revealed a gap between their existence as categories and labels as a product of practitioners (Young, 1995) and the phenomenology of those bearing the categories and labels.

Given the interviewees' not using the risk-related terms, we asked them, toward the conclusion of the interviews, whether they recall having heard the term "at-risk children," what they thought of it, and how they understand the concept of risk. The vast majority of interviewees stated that during their stay at the RCS, they did not hear the term "at-risk children"; they learned of it only when they became adults. When we asked, "What is 'risk' from your perspective?" the concept of *misery* proved a common response. In contrast to the English language, the words 'risk' (*sikun*) and 'misery' (or 'forlorn'; *misken*) in Hebrew are linguistically linked by the same root.

Most interviewees described in detail how, from the moment they reached the RCS, they began to realize that they were seen as "miserable" in light of the explicit statements made by the educational-therapeutic staff and the statements and gazes of the surrounding society. This is how Doron (age 37) described it:

I wasn't familiar with the term "at-risk child." I didn't hear it at all when I was a kid. I only heard it when I grew up and realized that this is the language social

workers use to define us, and so for me, risk means misery. It is also no coincidence that these words are similar [in Hebrew]. . . What is most annoying is that they thought I needed to be treated. Treat me? Why? What did I do? What, am I sick? I'm not sick; I was born into a poor family. It is not a sin. It's not a crime.

It is noteworthy that Doron associated risk with misery and, moreover, rejected the linkage between the medical discourse and the risk discourse. In this sense, Doron's description resonates with the descriptions of many scholars who have stressed how medical discourse is offered as a principal solution for dealing with "at-risk children" (Lubeck & Garret, 1990). Doron's description also demonstrates that the invention of categories and labels does not guarantee that the categorized individuals will interpret them as they intended (see similar findings in Foster & Spencer, 2011).

Moreover, several researchers have addressed the problematics presented by categorizing and labeling, in the spirit of constructivism (e.g., te Riele, 2006). They challenged experts and inventors of new categories and labels to attend to the phenomenology of those to which they are applied (Plotkin Amrami, 2018). Doron's description, common to most interviewees, indicates the lack of "translation"² on the part of the experts in the category of "at-risk child." Such translation may help the "at-risk child" understand the perspective of the experts.

When Doreen (age 44) made the connection between risk and misery, we asked her to describe the experience of "being miserable," an expression she used throughout the interview:

I have no idea what 'at-risk child' means. I never heard of it. What I know is that I was treated like a miserable girl . . . miserable is when someone thinks you are miserable [Who?] . . . Everybody. The social workers, the [school] counselors, the children in the town [where the RCS was located], their parents, and the police investigators, because sometimes, they harassed us just because we were sitting in the shopping centers and eating pizza.

It is noteworthy that Doreen described the face-to-face responses on the part of various social actors and the social gaze that accompanies populating a stigmatized category. In other words, Doreen described her discomfort with the public visibility associated with labels and categories of

² By the word translation we mean the efforts required of the professionals (social workers and a boarding school educator) to usher the students into the new meaning frames. In other words, the invention of a new social category, like learning a new language, requires interpretation work, accompaniment, and guidance of students by professionals.

social deviation. Doreen also described the process she endured until she formulated her attitude to the wretchedness attributed to the category of "at-risk child":

And it is important for me that you understand that I did not feel miserable at first; only they thought I was miserable. . . . After about two years, I started thinking maybe I really was miserable [starting to cry]. You see, they played with my mind. Today, as an adult woman with three children, I know I was never miserable. I was a girl growing up in a poor family. This is not misery. This is life. I feel ashamed that they made me feel miserable. So, no risk, I was not at risk, nor was I miserable. All of it was their invention. It was only in their minds [i.e., social workers and educators] so that they could have a way to earn a livelihood.

Doreen's description indicates how she acquired and internalized her sense of "misery." Doreen, like other interviewees, reported that she did not feel miserable (or forlorn) before entering the boarding school. The feeling of misery developed, in her view, during and as a result of her time in the boarding school, especially her interactions with the educational and therapeutic staff. Moreover, it is noteworthy that Doreen alluded to the educational-therapeutic staff's active role in her internalizing the sense of misery. She accused the staff of manipulation ("they played with my head") and invention ("it was all their invention") of the linkage between poverty, misery, and risk. The implication of Doreen's report, retroactively, is her acknowledgment of her lack of a sense of agency in this process and the socialization she experienced in the boarding school. This connection between poverty, misery, and risk, as Doreen and other interviewees reported, can teach us about the unexpected consequences of using stigmatized categories such as "at-risk child." Indeed, Doreen created new content in the social category of "at-risk children" that its inventors did not intend (Brinkmann, 2005; Hacking, 2004). Furthermore, Doreen's account reveals the importance of translating the category of "at-risk children" to those labeled (i.e., engaging in explicit talk with at-risk children about the category's meanings and its accompanying interpretations). Without this translation and interpretation on the part of the educational-therapeutic staff, at-risk children may, as Doreen and other interviewees did, were left free to interpret the government-therapeutic intervention in their lives in ways that damage their self-image, their sense of agency, and their resilience as adults.

Risk and pity

As noted, most interviewees were unfamiliar with the category of at-risk children during their stay in the RCS but

were exposed to the terminology in adulthood. When we asked them what this category was for them, many replied immediately: "Pity." Many interviewees emphasized how they saw the look of pity in the eyes of the educational-therapeutic team, which, in turn, made them feel inferior, and they even began to realize that "something bad was happening in my life" (Yossi, age 47). At the same time, the vast majority of graduates repeatedly emphasized throughout the interviews that pity is not a solution; rather, it only exacerbates the experiences of marginalization and social alienation. This is how Ami (age 47) described it:

What's it like to be an at-risk kid, you ask? So, clear and simple: pity. I saw those pitying looks in the eyes and faces of the social workers, teachers, and mentors. Those looks of, 'Here's that poor kid who got removed from his home, here's the kid I feel sorry for and want to help.' It used to kill me on the inside. I said several times to the social worker: 'I don't need you to take pity on me; that's not what helps me; it just makes my situation worse. I want you to help me to get back home, to my mom and dad' . . . And you know what the funny thing is? That after I said it, they pitied me even more, 'This poor boy doesn't even know that he is being abused at home. He's denying his situation.' And it didn't matter how many times I told her, 'No one is abusing me, my parents are poor; that's their only crime.' . . . Pity only turns you into a problem; it does not create a solution; it makes you realize that you are in a new reality that you did not create for yourself and [it] is beyond your control.

Several elements can be identified in Ami's description: the link he sensed between risk and pity; identifying pitying gazes among the caregivers; the pain the pity emotion aroused within him ("It killed me on the inside"); defining the at-risk child's resistance to the therapist's pitying gaze as a psychological problem ("denial"); the perception reiterated among all interviewees that extreme family poverty does not constitute a risk situation. It is also interesting to note the connection that Ami noted between emotions and populating the category of "at-risk child." As a result of the label "at-risk child," experiencing pity made Ami realize that a new reality had been created for him. In doing so, Ami's description resonates with one of the basic claims of the constructivist approach to risk (Hacking, 1999).

When Tikki (age 48) addressed the connection between risk and pity, along with a phenomenological experience that this connection does not enhance the situation, we asked her to give an example of the moments when she felt she was being pitied:

[I felt pitied] especially during donor visits or when we went on a fundraising trip outside of Israel. Then, we were explicitly introduced as at-risk children, as far as I remember, even though we didn't understand what that meant, and then, I really felt the pity of the donors. Evidently, pity brings in money. They took us to the donors or brought them to the RCS and told them [the donors] how miserable we were, and I saw the pity in their eyes. I even remember a time when I told one of the donors that everything was good for me at home and that I didn't understand why I was here [in RCS], and that I am suffering at RCS. The counselor took me aside and scolded me ... She told me that I was ungrateful and that I could have 'at least waited a bit until after the donors' visit'... What she didn't realize was that pity diminishes the person. Pity that makes you feel miserable doesn't help anyone.

Tikki's description of the phenomenological qualities of pity has also been suggested by various scholars describing how pity implies a hierarchical relationship since the pitying person is always the one possessing power or authority. Pity can establish a relationship of dependency and commitment. In other words, the pity emotion is not based on equality; rather, it perpetuates inequality, ascribing inferior status to those in need of pity. Thus, this emotion confers a superior status on the pitying person (Cottingham, 2019). The phenomenological preoccupation with pity can be merged with the interviewees' preoccupation with misery, thus, casting new content into the category of at-risk children that deviates from what experts attribute to it. The stress on pity echoes the claims of critical researchers about the concept of at-risk children (te Riele, 2006; Swadener, 2010). These researchers proposed conducting a deconstruction of the category by frequently examining it, its effects on the labeled people, and its users' political interests. Researchers have also highlighted the category's long-term implications by acknowledging the labeled person's ongoing encounter with the category and their evolving, unforeseen interpretations of the classification (Plotkin Amrami, 2018).

"It's in your best interest": cruel benevolence

When we asked Motti (age 39) to share his RCS memories, he cited the phrase he often heard—"It's in your best interest"—and listed several reasons for his difficulty with this argument. We will number this litany for emphasis:

The sentence, 'It's in your best interest.' I couldn't stand to hear that sentence. [Why?] For several reasons: one [1], *you* decided it was in my best interest, not *me*; two [2], what kind of dumb world do you live in that

you think that taking a child away from his mother and father just because they are poor is in my best interest; [3] and how is it in my best interest if you 'admit' me [laughing] to the RCS as if you are hospitalizing a mental patient in a closed ward; [4] and lastly, it's not in my best interest because I didn't feel it was in my best interest. I missed them, and it hurt me that they took their child away by force; [5] and another thing, do me a favor, it's in *their* [the social workers'] best interest; they make a living by taking poor children out of their homes. It is in *their* best interest to have work. How can cruelty be in *my* best interest?

When the word "cruelty" surfaced again with Sigal (age 51), we asked her to elaborate:

Never mind that they removed me by court order, forcibly, from my parents just because they were poor. That's cruel in itself. But the fact that they kept telling me that it was 'in my best interest' is doubly cruel and even more severe. How is that in my best interest? I suffered every moment there. I didn't want to be there at all. Who asked them to cut me off from my family? Whenever I got angry and complained, they told me, 'It is in your best interest; you will learn to value and appreciate it. When you grow up, you will see that it is a gift from the state.'... I grew up, and I don't see it as a gift. It's not a gift; it's a crime. There is no such thing as a cruel gift. A gift is supposed to do good to a person.

These descriptions of cruelty, institutional gifts, and RCS graduates' resistance to the state's agents' view of out-of-home placement (and education in a therapeutic boarding school) as a benevolent gesture alludes to the term "benevolent discrimination" (Romani et al., 2019). Concepts such as *cruel benevolence* show that disadvantaged individuals, the "gift recipients," do not always see institutional generosity in terms of salvation and empowerment but, rather, as practices that entail subordination, obedience, and indebtedness. Indeed, the benefactors' genuine intentions do not translate into a sense of gratitude on the part of the beneficiaries. Rather, these practices create a sense of inferiority and transform the beneficiary into a "problem" (at-risk child), "needy" (requiring rehabilitation and compensation), and "deficient" (adequate education and functioning at optimum normalcy). In summary, the individual is likely to experience "othering" processes (Kelly, 2000).

In our interpretation, these experiences of institutionalized "cruelty" are a product of the lack of "translation" for new categories by experts for those expected to live the category (as noted by constructivist researchers

concerning children labeled “at risk”; Swadener & Lubeck, 1995). The lack of translation of the category and the label used for the children is also manifested in this study by the participants’ frequent preoccupation during their childhood with the justification for their RCS placement. These speculations have been described as cruel, isolating, and as a cognitive-emotional act that exacerbated their distress. Consequently, many described how they began to independently compile explanations and categories about their status, such as: “problematic child,” “a child growing up in a problematic family,” “an RCS kid,” “a child who needs better living conditions than his parents can provide,” and “a child who enters an RCS that affords him a better life.” The interviewees described how entering the risk category, whose tangible manifestation was being removed from their home and educated in an RCS, created a new hermeneutical attitude toward themselves.

After hearing an array of critical accounts in numerous interviews, we concluded the interviews with the following question: “Do you have anything to say today as an adult to the administrators and therapists of RCS?” Alternatively, “What would you like to say to authorities that employ the phrase ‘at-risk children’?”

Alternative suggestions as counterstories

When we asked Tomer (age 38) of his suggestions for educational-therapeutic policymakers, he offered two recommendations that were echoed among several interviewees: “One, to close, once and for all, these cruel RCS that fail to achieve their goals and force poor children out of their homes; two, why not bring the RCS to the neighborhood?” Asked to elaborate on the second proposal, Tomer replied:

Recently, there was a report on television about the removal of children from their homes. Do you know what they said there? That every such child in an RCS costs the state NIS 10,000 [per month]. Do you understand? I ask why not give the parents this money? After all, poor parents need money, and that’s a lot of money. Poor people do not need the state to treat them as if they are suffering from a poverty disease. The poor need money to live in dignity. Take me; we are four siblings who were removed by court order to RCSs. If they gave my parents all that money, NIS 40,000 monthly, do you hear this sum? Then they wouldn’t have had to work 200 jobs to survive, and they would have had time to raise us. After all, the social workers claimed that our parents neglected us. . . So, it’s important for me to inform all the welfare experts that my family does not have a psychological or psychiatric problem. The problem is that we grew up in poverty

conditions, and it is not a matter of personal responsibility. No one chooses where to be born.

Tomer offered an alternative solution to RCSs as government institutions, suggesting a *counterstory* (Delgado, 1989) for the state’s treatment (or its stock story; see Delgado, 1989) of its disadvantaged citizens. As Delgado described, counterstories are understandings of reality from the perspective of marginalized groups (the out-groups). These stories challenge the hegemonic stories (*stock stories*, in Delgado’s terms) and offer a basis for transformative change. Delgado noted that enabling counterstories and even actively encouraging them is useful for individuals who experience social marginality. Counterstories are also valuable for individuals (members of the in-group) and functionaries (such as government officials, educators, and social workers) who are accustomed to telling stock stories. The stock story undergoes normalization processes and becomes “natural” or self-evident to achieve the status of supreme knowledge or “truth.” Listening to counterstories may help suspend judgments, consider alternatives, and creatively locate other culturally sensitive types of knowledge those who are in minoritized groups.

Tomer challenged the medicalization and pathologization of the poor as a path to resolve their situation. Furthermore, he questioned the neoliberal discourse that views the poor as responsible for their situation (Schram, 2000). In Tomer’s accounts, we can also identify his rejection of the psychologization of inequality. Tomer suggested focusing on the structural conditions that make the individual poor and their life burdensome.

This rejection of the medical discourse of poverty and of the concept of at-risk children was also reflected in Smadar’s (age 51) perspective, who likewise suggested “bringing the RCS to the neighborhoods”:

What does it mean to bring the RCS to the neighborhoods, you ask? So, I will explain it to you. I’ve thought about this a lot in my adult life, especially when I became a mother myself and realized how cruel it was to take a mother’s children away. After all, what did they [RCS administrators and therapists] tell us? That our parents neglected us, that the conditions in the family would ruin our lives, and especially that our parents cannot give us what the boarding school can. They called it ‘educational and cultural wealth,’ I think. So come on, I have a proposal, and you don’t have to be a genius to think of it [laughs]. Why doesn’t the state bring the RCS to the neighborhood? So that all this cultural wealth be accessible to the neighborhood school. However, the state has no interest in doing that because [they claim that] we only have negative qualities. They did not see our good qualities.

Smadar proposed a counterstory (Delgado, 1989) that manifests itself primarily in discontinuing embracing the deficit perspective concerning poor and “at-risk children.” Furthermore, Smadar recommended that the therapeutic and welfare authorities should rather consider the strengths of disadvantaged populations. Smadar’s critical accounts echo contemporary contentions in community psychology about the centrality of strengths in improving our emotional well-being and existential experiences (Levin et al., 2005).

We see these alternatives as a desire for a subjectivity different from the medical-pathological subjectivity offered to at-risk children or as a desire for “not being governed quite so much” (Foucault, 2007, p. 45) by the state authorities. These critical alternatives are particularly important in light of the urgent need for deconstructing the at-risk children category (Swadener & Lubeck, 1995). They should also be addressed in studies concerning the phenomenological differences and various accounts of at-risk children, youth, and adults, based on a variety of risk factors.

Concluding Remarks

This article argued that the construction and use of new categories and labels—such as “at-risk children”—should not be limited to identifying risk factors and outcomes or understanding of the knowledge held by experts, but to incorporate phenomenological examinations of those who wear the categories and labels. However, few studies have examined how children, adolescents, and adults interpret the label assigned to them as at-risk individuals. This research lacuna reveals a substantial shortcoming given the constructivist literature’s descriptions regarding the birth and activation of new categories and labels (Hacking, 2004). This literature highlights the importance of tracking the interactions between people’s classifications and those classified. In other words, this literature emphasizes that individuals’ responses to classifications may suggest acquiescence but also may reflect resistance and creativity. Thus, new content may be cast into classifications and should encourage discussion regarding the unintended outcomes of new categories and labels (Foster & Spencer, 2011).

This study’s findings highlight the critical and (de)constructivist phenomenology of adults in Israel who were classified as at-risk children and educated in RCSs. These RCS graduates articulated how they experienced the at-risk category, reflections that are typically not considered by experts and policymakers. The RCS graduates recalled that once placed in the RCS, they entered the problematics of the at-risk category: They drew the linkage between

misery, pity, and being an at-risk child; they indicated the unintended consequences of the category through what we termed “cruel benevolence” (distancing from parents and the neighborhood due to the family’s poverty); and articulated a phenomenological pursuit of alternatives to removing at-risk children from their homes (e.g., redirecting government funds to their poverty-stricken parents and developing care institutions in the community). We interpret this critical phenomenology of the RCS graduates in our research as counterstories (Delgado, 1989). The graduates’ rejection of the at-risk category can be seen as a desire for alternative subjectivity to replace the category determined “from above” by experts and policymakers (as representatives of the “stock story”; Delgado, 1989, p. 2418). Furthermore, following Delgado, we propose to view these counterstories as challenging and subverting the hegemonic stories as interpretations that “can open new windows into reality, showing us that there are possibilities for life other than the ones we live. They enrich imagination and teach that by combining elements from the story and elements from reality, we may construct a new world richer than either alone” (Delgado, 1989, pp. 2414–2415).

This study’s findings underscore the lack of interaction between top-down knowledge (knowledge emerging from category producers and experts) and bottom-up knowledge (knowledge originating in the self-understandings of those who live the categories). Indeed, the findings highlight a flagrant disregard of the phenomenology of those who live the category and the label. As Foster and Spencer (2011) noted, “As a label, it fails to encapsulate people’s experiences early in life, and how they see themselves” (p. 132). Thus, this gap between the formulation and use of the at-risk children label by professionals and the phenomenology of those who bear this label requires the “translation” of new categories and labels for those expected to live them. Unlike other researchers, who propose to replace the “at-risk children” label with less stigmatized labels (Swadener & Lubeck, 1995), we suggest, in the spirit of constructivism, to monitor the birth and use of new categories (Sparti, 2001) through their interaction with the everyday reflexivity of individuals who live these categories.

Furthermore, professionals and policymakers need to address many questions as they consider the at-risk children population: Why have at-risk children not heard of the concept? Why not “translate” it for them? Why not clarify the unique content cast by the at-risk children? Why were the children not offered ways to cope and intervene with the unintended adverse consequences of new categories (such as feeling stigmatized and wanting to detach themselves from that category)? Why are the interactions between individuals’ classifications and the classified individuals

themselves not at the core of the proposed intervention programs in RCSs (Follesø, 2015)? Why have the clinical and educational experts in our studies, as in other RCSs (Foster & Spencer, 2011), not attended to the socio-therapeutic alternatives (or counterstories; see Maxwell & Sonn, 2020) offered by the at-risk children?

Addressing these questions, along with the constructivist legacy's link to community psychology, concerning uses of new diagnoses, categories, and labels can facilitate deepening our understanding of several issues underlying community psychology (Kidd et al., 2018; Levin et al., 2005; Trickett, 2009). These issues include improving individuals' well-being by shifting attention to the cultural context in which they live and identifying the interactions between environments and people. Furthermore, we need to address the relationships between diagnoses and labels, which are produced in political contexts of power, to agentic responses and objections of the people living these diagnoses and the labels. We need to understand the unintended, often adverse, consequences of labeling and develop tools and tutorials for therapists and educators to deal with the counterstories offered by marginalized individuals who challenge the stock stories (Delgado, 1989) or the hegemonic narratives.

Conflict of Interest

The authors have no conflicts of interests to declare.

References

- Brinkmann, S. (2005) Human kinds and looping effects in psychology. Foucauldian and hermeneutic perspectives. *Theory & Psychology, 15*(6), 769–791. <https://doi.org/10.1177/0959354305059332>
- Brodsky, A. & Cattaneo, L. (2013) A transconceptual model of empowerment and resilience: Divergence, convergence and interactions in kindred community concepts. *American Journal of Community Psychology, 52*, 333–346. <https://doi.org/10.1007/s10464-013-9599-x>.
- Brooks, R. (1994) Children at risk: Fostering resilience and hope. *American Journal of Orthopsychiatry, 64*(4), 545–553. <https://doi.org/10.1037/h0079565>.
- Cottingham, J. (2019) Loving-kindness and mercy: Their human and cosmic significance. *Philosophy, 94*(1), 27–42. <https://doi.org/10.1017/S0031819118000487>
- Cusick, G.R., Havlicek, J. & Courtney, M.E. (2012) Risk for arrest: The role of social bonds in protecting foster youth making the transition to adulthood. *American Journal of Orthopsychiatry, 82*(1), 19–31. <https://doi.org/10.1111/j.1939-0025.2011.01136.x>
- Delgado, R. (1989) Storytelling for oppositionists and others: A plea for narrative. *Michigan Law Review, 87*, 2411–2441. <https://doi.org/10.2307/1289308>
- Dryfoos, J.G. (1990) *Adolescents at risk: Prevalence and prevention*. New York: Oxford University Press.
- Etzion, D. & Romi, S. (2015) Typology of youth at risk. *Children and Youth Services Review, 59*, 184–195. <https://doi.org/10.1016/j.chidyouth.2015.10.017>
- Eyal, G., Hart, B., Oncular, E., Oren, N. & Rossi, N. (2010) *The autism matrix: The social origins of the autism epidemic*. Cambridge: Polity Press.
- Follesø, R. (2015) Youth at risk or terms at risk? *Young, 23*(3), 240–253. <https://doi.org/10.1177/1103308815584877>.
- Foster, K. & Spencer, D. (2011) At risk of what? Possibilities over probabilities in the study of young lives. *Journal of Youth Studies, 14*(1), 125–143. <https://doi.org/10.1080/13676261.2010.506527>
- Foucault, M. (2007) *Security, territory, population*. London: Palgrave Macmillan.
- Gergen, K. (1985) The social constructionist movement in modern psychology. *American Psychologist, 40*, 266–275. <https://doi.org/10.1037/0003-066x.40.3.266>
- Hacking, I. (1986) Making up people. In: Heller, T.C., Sosna, M. and Wellbery, D. (Eds.) *Reconstructing individualism*. Stanford, CA: Stanford University Press, pp. 222–236.
- Hacking, I. (1999) *The social construction of what?*. Cambridge: Harvard University Press.
- Hacking, I. (2004) Between Michel Foucault and Erving Goffman: Between discourse in the abstract and face-to-face interaction. *Economy and Society, 33*(3), 277–302. <https://doi.org/10.1080/0308514042000225671>
- Illouz, E. (2008) *Saving the modern soul: Therapy, emotions, and the culture of self-help*. Berkeley: University of California Press.
- Kelly, P. (2000) The dangerousness of youth-at-risk: The possibilities of surveillance and intervention in uncertain times. *Journal of Adolescence, 23*, 463–476. <https://doi.org/10.1006/jado.2000.0331>
- Kidd, S., Davidson, L., Frederick, T. & Kral, M.J. (2018) Reflecting on participatory, action-oriented research methods in community psychology: Progress, problems, and paths forward. *American Journal of Community Psychology, 61*, 76–87. <https://doi.org/10.1002/ajcp.12214>
- Kidron, C.A. & Kirmayer, L.J. (2019) Global mental health and idioms of distress: The paradox of culture-sensitive pathologization of distress in Cambodia. *Culture, Medicine and Psychiatry, 43*(2), 211–235. <https://doi.org/10.1007/s11013-018-9612-9>
- Kosher, H., Montserrat, C., Attar-Schwartz, S., Casas, F. & Zeira, A. (2018) Out-of-home care for children at-risk in Israel and in Spain: Current lessons and future challenges. *Psychological Intervention, 27*, 12–21. <https://doi.org/10.5093/pi2018a4>
- Levin, M., Perkins, D. & Perkins, D. (2005) *Principles of community psychology*. Oxford: Oxford University Press.
- Leys, R. (2000) *Trauma: A genealogy*. Chicago: University of Chicago Press.
- Lubeck, S. & Garrett, P. (1990) The social construction of the “at-risk” child. *British Journal of Sociology of Education, 11*(3), 327–340. <https://doi.org/10.1080/0142569900110305>
- Luhrmann, T., Padmavati, R., Tharoor, H. & Osei, A. (2015) Differences in voice-hearing experiences of people with psychosis in the USA, India and Ghana: Interview-based study. *British Journal of Psychiatry, 206*(2), 41–44. <https://doi.org/10.1192/bjp.bp.113.139048>.
- Maxwell, C. & Sonn, C. (2020) The performative is political: Using counter-storytelling through theater to create spaces for implicated witnessing. *American Journal of Community Psychology* [Early view]. <https://doi.org/10.1002/ajcp.12493>
- Moore, K.A. & Gleib, D. (1995) Taking the plunge: An examination of positive youth development. *Journal of Adolescent Research, 10*(1), 15–40. <https://doi.org/10.1177/0743554895101003>
- Oshri, A., Sutton, T.E., Clay-Warner, J. & Miller, J.D. (2015) Child maltreatment types and risk behaviors: Associations with

- attachment style and emotion regulation dimensions. *Personality and Individual Differences*, 73, 127–133. <https://doi.org/10.1016/j.paid.2014.09.015>
- Patton, M.Q. (2002) *Qualitative research and evaluation methods*. London: SAGE.
- Plotkin Amrami, G. (2018) How is a new category “born”? On mechanisms of formation, cycles of recognition, and the looping effect of “national trauma”. *Health*, 22(5), 413–443. <https://doi.org/10.1177/1363459317695631>
- Refaeli, T. (2017) Narratives of care leavers: What promotes resilience in transitions to independent lives? *Children and Youth Services Review*, 79, 1–9. <https://doi.org/10.1016/j.childyouth.2017.05.023>
- Resnick, G. & Burt, M. (1996) Youth at risk: Definitions and implications for service delivery. *American Journal of Orthopsychiatry*, 66(2), 172–188. <https://doi.org/10.1037/h0080169>
- Romani, L., Holck, L. & Risberg, A. (2019) Benevolent discrimination: Explaining how human resources professionals can be blind to the harm of diversity initiatives. *Organization*, 26(3), 371–390. <https://doi.org/10.1177/1350508418812585>
- Schram, S. (2000) In the clinic: The medicalization of welfare. *Social Text*, 18(1), 81–107. https://doi.org/10.1215/01642472-18-1_62-81
- Shoshana, A. (2012) Governmentality, new population and subjectivity. *Subjectivity*, 5(4), 396–415.
- Shoshana, A. (2016) Ethnographies of maintenance of a new self. *Qualitative Sociology Review*, 12(1), 60–77.
- Smith, J., Flowers, P. & Larkin, M. (2009) *Interpretative phenomenological analysis: Theory, method and research*. London: SAGE.
- Sparti, D. (2001) Making up people on some looping effects of the human kind - Institutional reflexivity or social control? *European Journal of Social Theory*, 4(3), 331–349. <https://doi.org/10.1177/13684310122225154>
- Stein, M. (2006) Research review: Young people leaving care. *Child and Family Social Work*, 11(3), 273–279. <https://doi.org/10.1111/j.1365-2206.2006.00439.x>
- Sulimani-Aidan, Y. (2015) Do they get what they expect? The connection between young adults’ future expectations before leaving care and outcomes after leaving care. *Children and Youth Services Review*, 55, 193–200. <https://doi.org/10.1016/j.childyouth.2015.06.006>
- Swadener, B. (2010) “At risk” or “at promise”? From deficit constructions of the “other childhood” to possibilities for authentic alliances with children and families. *International Critical Childhood Policy Studies*, 3, 7–29.
- Swadener, B. & Lubeck, S. (1995) *Children and families “at promise”: Deconstruction the discourse of risk*. New York: State University of New York Press.
- te Riele, K. (2006) Youth “at risk”: Further marginalising the marginalised?. *Journal of Education Policy*, 21(2), 129–145. <https://doi.org/10.1080/02680930500499968>
- Trickett, E.J. (2009) Community psychology: Individuals and interventions in community context. *Annual Review of Psychology*, 60, 395–419. <https://doi.org/10.1146/annurev.psych.60.110707.163517>
- Ungar, M. (2004) A constructionist discourse on resilience: Multiple contexts, multiple realities among at-risk children and youth. *Youth and Society*, 35(3), 341–365. <https://doi.org/10.1177/0044118X03257030>
- Young, A. (1995) *The harmony of illusions: Inventing post-traumatic stress disorder*. Princeton: Princeton University Press.