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Swimming with sharks. What do Social Workers experience when working with families where sexual abuse is the primary factor?

by

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Abstract

This research is concerned with how social workers in a South East England Local Authority feel when working with families where there is an identified risk of sexual abuse by adult males. The research question is "**What do Social Workers experience when working with families where sexual abuse is the primary factor?**"

This research has explored:

How social workers feel about this area of practice, given the potential impact on their professional and personal life when working with families where sexual abuse may be present.

How they deal with the emotions produced by their social work practice.

All of the social workers taking part in this study work in what is best described as 'front line practice'. That is, they have been working with families as they first present or once initial assessments of risk have taken place. The social workers are not situated in teams where there is long-term therapeutic work. All describe themselves as facing high caseloads and with limited time to spend with service users.

A phenomenological approach was utilised, with semi-structured interviews as the method of data collection. This was effective in bringing to the fore the experiences and insights of individual social workers from their perspectives, and thus shone a light on the social workers' experience of working in practice with families where sexual abuse is present. The social workers in the study did not often carry out risk assessment work on the abusing males, but they did come into contact with them at the family assessment stage of the process. They were often tasked with making safety plans for the children, and this necessitated contact with the adults in the family.

Findings generated a number of themes, including that of 'disgust'. The social workers described what was, at times, a visceral feeling of disgust towards the male sex abusers, and their actions against children. This theme developed to support further understanding of theoretical constructs such as 'dirty workers' and 'dirty work', constructs developed by Hughes in 1956. The social workers described feeling that they

were ‘tainted’ by moral contamination when coming into contact with offenders, and this ‘contamination’ tainted (in a moral sense) their extended relationships.

Study findings suggest that social workers are strongly affected by their face-to-face work with male child sexual abuse perpetrators. The work has an emotional impact and triggers moral judgements on the part of the social workers, which may have the effect of producing biased and poorly analysed outcomes for children. This research is likely to have significant professional practice implications for social workers who work with families where sexual abuse is a feature. The importance of supervision and peer support is highlighted, and the study recommends changes to how supervision and support are currently offered.

Acknowledgements

Although academic writing is a solitary endeavour, the completion of a thesis is never just down to the author. This work has been a journey with many beautiful valleys and a few seemingly insurmountable mountains. There were points along this long and winding road when I felt like stopping by a calm stream, make camp and settle; the fact that I didn't is down to some very important people.

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Glossary of terms

Child Sexual Abuse (CSA) – for the purposes of this thesis the definition as set out in the Working Together to Safeguard Children (2018) document will be used.

Key Performance Indicator (KPI) - a quantifiable measure used to evaluate the success of an organization, employee, etc. in meeting objectives for performance.

Multi-agency Public Protection Arrangements - (**MAPPA**). These arrangements describe a panel consisting of all agencies with responsibility (social services, police, probation, etc) that come together and draw up the necessary management plans.

Munro (2011) Review of Child Protection – In June 2010, the Secretary of State for Education, the Right Honourable Michael Gove MP, asked Professor Eileen Munro to conduct an independent review of child protection in England. This third and final report set out a number of recommendations.

Child Sex Offender Disclosure Scheme ('Sarah's law') - A modified scheme where parents can enquire about a named individual was introduced in four pilot areas of England and Wales in September 2008. In August 2010 the Home Office announced that, after proving successful, the Child Sex Offender Disclosure Scheme would be extended to cover the whole of England and Wales by Spring 2011.

Sexual offences - There is a range of crimes that can be considered as sexual offences, including non-consensual crimes such as rape or sexual assault, crimes against children including child sexual abuse or grooming, and crimes that exploit others for a sexual purpose, whether in person or online.

Social Work England (SWE) - Social Work England is the new, specialist regulator for social workers in England, established on 2 December 2019. This is an independent public protection body, setting professional, education and training standards for social workers. Social Work England also investigates and manages 'fitness to practice' cases brought against social workers.

The Cleveland Enquiry - The enquiry into child abuse in Cleveland, 1987, produced the document: *'Report of the inquiry into child abuse in Cleveland 1987'*. This report

was prepared by Judge Elizabeth Butler-Sloss, after media publicity about a sudden increase in diagnoses of child sexual abuse at Middlesbrough General Hospital in early 1987.

The Framework for the Assessment of Children in Need and their Families (2000) – This guidance sets out the inter-related systems or domains that any assessment of a child should consider in order to achieve a clear understanding of the child's needs. It was introduced by the New Labour Government following a re-focusing of safeguarding measures.

The British Association of Social Workers (BASW) -The professional association of registered social workers and qualified care managers in the United Kingdom. The association has a members' code of ethics that outlines best social work practice and works to support social workers and care managers through education and resources.

The International Association of Schools of Social Work (IASSSW) - Worldwide association of schools of social work, other tertiary level social work educational programmes, and social work educators. The IASSW promotes the development of social work education throughout the world, develops standards to enhance the quality of social work education, encourages international exchange, provides forums for sharing social work research and scholarship, and promotes human rights and social development through policy and advocacy activities.

The International Federation of Social Workers (IFSW) – Worldwide body for professional social work. It comprises 141 professional social work associations, representing over 3 million social workers. IFSW has formal consultative status with the United Nations and other global bodies. The organization's purpose is to contribute to achieving a socially just world through professional social work. IFSW and its partners set and review the international standards of social work, the Definition of Social Work and policies that promote good practice outcomes.

The World Health Organization (WHO) - The specialized agency of the United Nations that is concerned with international public health. It was established on 7 April 1948, with headquarters in Geneva, Switzerland. The WHO is a member of the United Nations Development Group. Its predecessor, the Health Organization, was an agency of the League of Nations.

Working Together to Safeguard Children (2018) - The guidance that sets out what organizations and agencies who work with children must and should do to safeguard and promote the welfare of all children and young people under the age of 18 in England.

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DECLARATION OF AUTHORSHIP

I, Samuel Baeza

declare that the thesis entitled

Swimming with sharks. What do Social Workers experience when working with families where sexual abuse is the primary factor?

and the work presented in the thesis are both my own and have been generated by me as the result of my own original research. I confirm that:

this work was done wholly or mainly while in candidature for a research degree at this University;

where any part of this thesis has previously been submitted for a degree or any other qualification at this University or any other institution, this has been clearly stated;

where I have consulted the published work of others, this is always clearly attributed;

where I have quoted from the work of others, the source is always given. With the exception of such quotations, this thesis is entirely my own work;

I have acknowledged all main sources of help;

where the thesis is based on work done by myself jointly with others, I have made clear exactly what was done by others and what I have contributed myself;

none of this work has been published before submission, or [delete as appropriate] parts of this work have been published as: [please list references]

Signed: …………………………………………………………………………..

Date:……………………………………………………………………………….

Chapter One: Introduction

This research explores how social workers in a South East England Local Authority feel when working with families where there is an identified risk of sexual abuse by adult males. My research question is "**What do Social Workers experience when working with families where sexual abuse is the primary factor?"**

I aimed to explore:

Social workers' feelings about the adult male responsible/suspected of sexual abuse.

How social workers deal with the emotions produced by their work.

This research captures how social workers feel about this area of practice, given the potential impact on their professional and personal life when working with families where sexual abuse may be present.

All of the social workers taking part in this study work in what is best described as 'front line practice'. That is, they are working with families as they first present, or once initial assessments of risk have taken place. The workers are not situated in teams where long-term therapeutic work takes place. They all described themselves as facing high caseloads and thus with limited time to spend with individual service users (Community Care, 2005; Broadhurst et al. 2010; Munro, 2011).

The sexual abuse of children by, more specifically, adult males has been a professional interest for me for some time. I currently work as an expert assessor in complex cases and have noted the emotional load that this type of work carries for the professionals involved (Ferguson, 2017). I have been aware that the practice decisions of social workers are minutely assessed, particularly when things go wrong and children are hurt (e.g. Haringey LSGB, 2009; Lundberg 2013), but very little is known about what social workers feel when working with families where sexual abuse is a feature and they have to come into contact with adult male perpetrators.

A phenomenological approach is being utilised (Giorgi, 1989; Welman and Kruger, 1999; Langdridge, 2008), as this is effective in bringing to the fore the experiences and

insights of individual social workers from their perspectives, and thus shine a light on the social workers' experience of working in practice with families where sexual abuse is present. In other words, it captures the lived experience of social workers and this is something that has not been researched before.

Chapter two will give a brief context of the area of research, including a short outline of risk and introduces the work of Beck (1992) and Giddens (1999). The chapter will also outline the actual work that social workers generally do in cases of sexual abuse. This will be carried out from the perspective of social workers working within frontline Local Authority services. This chapter will also give an historical perspective of child sexual abuse as this has had a profound impact on the practice of social work.

Chapter three will delve deeper into the literature of the substantive areas of this thesis. This includes looking at child abuse in general and risk management; emotional work as it pertains to working with vulnerable families and children in particular; and how this type of work impacts on social workers and the profession of social work. The chapter will address the concept of childhood and how changes in its definition have affected the work and meaning of child sexual abuse. As well as this, the chapter will discuss the idea of disgust and contagion and the theoretical concepts of 'dirty work' and 'dirty workers'.

Chapter four offers a discussion of the methodology underpinning this research and the specific method used in the research. It will explore in detail the choice of methodology and the use of interviews as a data gathering tool.

Chapter five presents the findings from the interviews, according to the emergent themes, drawing extensively on direct quotations from the participants.

Chapter six discusses the findings, paying particular attention to how they relate to the literature and the synergy between findings, literature, key concepts and theories.

The final chapter seven concludes the thesis by considering the new knowledge that the research reveals and discussing the implications for social work practice in the area of child sexual abuse. A critique of the strengths and limitations of the research is offered, along with recommendations for future research.

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In summary, this introductory chapter has moved from my starting point which has been to look at the work social workers do and how they get involved in cases where sexual abuse takes place in a family. This arose out of an interest in exploring social workers' feelings and lived experiences of working with cases where they were required to face the reality of sexual abuse and the emotions and responses this causes. The next chapter provides the context for the study.

Chapter Two: The Study Context

In this chapter, I give a brief outline of what social workers do, introduce the concept of assessments, and provide a short outline of risk. This will be followed by discussing what it means, in practical terms, when social workers are allocated a 'sexual abuse case', which will be carried out from the perspective of social workers working within frontline Local Authority services. The chapter will also give an historical perspective of child sexual abuse and its changing definition as this has had a profound impact on the practice of social work.

I am interested in looking at the experience of social workers when working with families where there is an identified risk of sexual abuse by an adult male. In England, when there is an allegation that a child has/may be at risk of sexual harm, as part of a multi-agency approach to safeguarding, social workers will be the lead agency charged with making sure that the child is safe. The role of the social worker is to come up with a plan that usually includes the adults in the family. It may involve the 'non-offending' adult (almost always the mother of the child) and may also entail direct contact with the adult male who is alleged of having abused the child. The Multiagency response can vary across England and Wales, but it is always underlined by adherence to Working Together to Safeguard Children (2018) guidelines (HM, 2018).

This practice is centred on the assessments and their aftermath that social workers undertake as part of their statutory role. The focus of this research is not on the process of assessments, but on the feelings this activity evokes in social workers. It is essential, then, to give an outline and a definition of what is a 'generic' assessment in cases of child protection and whether this differs from assessments in cases of child sexual abuse.

My focus is on male adult sex offenders only, and I am not considering adolescent or female sex offenders. That is not to say that these are not important areas of study, or that sexual abuse is only committed by adult men, but that the great majority of sexual abuse cases that come to the attention of the authorities concern adult men abusing female children (Cowburn and Dominelli, 2001).

2.1 The social worker role with families where sexual abuse has taken place

Local Authorities employ social workers to make sure, as far as they can, that children are not abused and that they are able to develop and fulfil their full potential (HM, 2018).

The 'state' has been involved in one way or another with the family since the 14th Century, with the introduction in 1597 and 1601 of Poor Laws which set out how individual geographical regions should/could help poor people (Harris, 2004; Green and Clarke, 2016). Over time, as urbanisation took hold and society became more complex, new Poor Laws were introduced, culminating in 1834 with the creation of the infamous 'Work Houses'. It should be noted that all of these initiatives were aimed at getting people back to work and were heavily enshrined within the context of deserving and undeserving poor, with only the deserving poor receiving 'help' (Higgingbotham 2012; 2013).

As the need to keep people in work increased with the demands of the Industrial Revolution, so the plight of children started to be recognised as something separate, and in need of intervention. This new-found problem saw the introduction of many different charities such as the National Society for the Prevention of Cruelty to Children (NSPCC) which was founded in 1884 and was instrumental in the passing of the first piece of legislation to protect children (The Prevention of Cruelty to, and Protection of, Children Act 1889).

With time, children's rights were enshrined in a number of Acts of Parliament, and currently, the principal Act which states how they are to be kept safe is the 1989 Children Act (legislation.gov.uk). The view that children needed to be kept safe from abuse also saw the creation of social work as a profession, which is separate and independent of charitable work. The profession is currently codified and regulated by Social Work England which ensures that all social work practitioners are holders of either an undergraduate or postgraduate degree.

The protection of children is enshrined in Law under the 1989 Children Act (legislation.gov.uk). The Act sets out situations when the state will get involved to

make sure that children are not harmed (Carr and Goosey, 2019). In the case of sexual abuse, this is explicitly delineated in the guidance provided by the Department of Education Working Together to Safeguard Children 2018 (HM Government) and it is the definition that is adhered to throughout this thesis.

When children have either been abused (as specified in the guidance) or are deemed to be at risk of abuse, social workers will be assigned to make sure, as far as is possible, that children are adequately protected from either continued abuse or possible future abuse. The role of the social worker is usually consigned to working with the individual children but, when working with the whole family, it is not unusual to have significant contact with either the convicted or suspected male sexual abuser. However, it is uncommon for social workers to be involved in directly calculating the risk posed by such men, as generally that task is carried out either by external experts or, if the man is convicted and remanded in custody, that responsibility rests with personnel employed by the Ministry of Justice.

The legal framework has produced a plethora of different acts, and it was not until 1989 that all the different Statutes governing child protection were put together under one single piece of legislation that governs how children should be protected, namely the 1989 Children Act (legislation.gov.uk). The Act sets out the whole protective framework, which has been added to from time to time (e.g. 2017 Children and Social Work Act).

Once a referral is received, indicating that a child is at risk of significant harm, social workers are tasked with responding as laid out in Section 47 of the Children Act (1989). This sets out a statutory requirement whereby social workers have to carry out an initial assessment to gauge whether a child is at risk. This work will undoubtedly involve talking to the child (if he/she is of an appropriate age) and to the adults involved in the child's care. As previously mentioned, it is not the responsibility of social workers to formally work with the alleged adult offender.

A social worker is allocated to the child and, in some cases at the initial assessment stage, the alleged perpetrator is usually, as a requirement of an initial protection plan, out of the home. The responsibility for continuing contact with the perpetrator is often given to the police, particularly if there are outstanding criminological aspects. However, social workers will need to work with the perpetrator if there are issues of

contact or where the couple (child's carers) do not separate, and an assessment of risk is required. If the perpetrator is convicted and given a prison sentence, the probation service assumes responsibility for any rehabilitation work or treatment.

2.2 Social Work Assessments

The term assessment holds a different meaning in different settings and within different activities in social work. Although my research was not directly concerned with either looking at or evaluating social work practice, it inevitably included discussing cases where practitioners were involved in carrying out what they termed as 'risk assessments'. It seems appropriate then to devote some attention to what an assessment is before discussing what happens when social workers become involved in cases where there is a risk of sexual abuse.

The term assessment has a firm legal construction in child social work practice. The legal basis is the 1989 Children Act (England and Wales). The Act, Section 47 requires local authorities to make enquiries in cases where they have reasonable cause to suspect that a child is suffering (or likely to suffer) significant harm. Additionally, the act requires that "*the authority shall make, or cause to be made, such enquiries as they consider necessary to enable them to decide whether they should take any action to safeguard or promote the child's welfare"* (legislation.gov.uk).

This action is more commonly referred to as an investigation and implicitly carries with it a more enforced and critical function. Section 17, on the other hand, makes provision for a child to be assessed with a view to providing a range and level of services appropriate to that child's needs, if that child satisfies the Act's definition of being in need, which, the Act (ibid) defines as:

> (a) he (sic) is unlikely to achieve or maintain, or to have the opportunity of achieving or maintaining, a reasonable standard of health or development without the provision for him of services by a Local Authority under this Part;
>
> (b) his health or development is likely to be significantly impaired, or further impaired, without the provision for him of such services; or

(c) he is disabled.

In effect, Section 47 has a child protection focus, and Section 17 a child welfare focus. The process of assessment is set out in detail within child protection procedures based on guidance provided within the Working Together to Safeguard Children (2018) document. The guidance states that:

> Local authorities, with their partners, should develop and publish local protocols for assessment. A local protocol should set out clear arrangements for how cases will be managed once a child is referred into Local Authority children's social care and be consistent with the requirements of this statutory guidance. The detail of each protocol will be led by the Local Authority in discussion and agreement with the safeguarding partners and relevant agencies where appropriate. (HM Government, 2018 p23)

An initial assessment is where social workers gather information, from a variety of sources, which will help them to ascertain what the risks to the child are and how they can be managed and minimised by identifying protective factors. Once these areas are known, social workers can begin to help the family by building on the family's strengths to assure the child's best chances.

The activity of assessment is a contested one and differs between different areas of social work. However, all the different approaches to a social work assessment have some commonalities, which have been well espoused by Milner et al. (2019 p2) who propose a five-stage process namely:

> *Preparing* for the task.
>
> *Collecting data*, including perceptions of the service user, the family and other agencies of the problem and any attempted solutions.
>
> *Applying professional knowledge* (practice wisdom as well as theory) to seek analysis, understanding or interpretation of the data.
>
> *Making judgements* about the relationships, needs, risks, standard of care or safety, seriousness of the situation, and people's capacities and potential for coping or for change (is the progress good enough?).

Deciding and/or recommending what is to be done, plus how, by whom and when, and how progress will be reviewed.

What is always agreed is that making assumptions based on either faulty or biased information can lead to biased or flawed assessments.

Assessments are an activity where social workers have been heavily criticised, particularly in some high-profile cases where children have been killed and there has been the apparent paucity of the assessments and a lack of inter-agency communication (e.g. Laming, 2003; Haringey LSBC, 2009; Wolverhampton LSBC, 2018). Social workers must perform a delicate balance between working in collaboration with the parents and keeping the needs of the child at the forefront (Brandon et al. 2009; Featherstone et al. 2019). After the death of Victoria Climbié, Lord Laming, in his report (HMSO, 2003), advised social workers that it was essential to hold an attitude of "*healthy scepticism"* and "*respectful uncertainty*" (paragraph 14.78) when working with families. In addition to this, social workers also have to hold in their minds the possibility of their own biases when working with people in complex and emotionally laden cases (Dingwall et al. 1983).

It is well known that, in the general population, a large number of people hold negative perceptions about sexual offenders (e.g. Rogers et al. 2011). These negative perceptions are also held by professionals working in caring professions such as social work, as Hill (2010 p1) noted: "*Physicians, nurses, and other clinicians readily acknowledge being troubled by encounters with patients who trigger moral judgments*."

This is important regarding assessments because, as Munro (1999) argued, social workers selectively look for evidence that confirms, rather than disproves, their views and even apply different criteria for the quality of information gained, depending on whether the information confirms or questions their views. Beckstead (2003) further argued that, in a complex endeavour such as child protection assessments, findings will be seen as relevant depending on what the general attitude of the worker is. What all this research has in common is that it seems to point to the fact that attitudes and values play an independent and critical part in the decision-making processes of assessments that can determine the possible future placement of children.

Research further shows that, when issues are complex as are those in child protection, persons regard as salient those aspects that are consistent with their overall attitudes (Beckstead, 2003). These various findings suggest that social workers' attitudes may impact on their judgement and decision processes. Their attitudes and values are particularly crucial to child protection because neither risk assessment nor intervention decisions are based on hard factual data and value-free knowledge (Banach, 1998; Benbenishty et al. 2015). Both are emotionally laden tasks (Horwath, 2007), usually carried out under conditions of high ambiguity and uncertainty.

It was this aspect of assessment, which first awakened my interest in research in this area. As an expert assessor who was often brought in to carry out forensic risk assessments in cases of sexual abuse, I was coming across assessments, which were not supported by the evidence and where, in my view the social worker's analysis and recommendations were based on biased opinion.

It was important for me to reflect throughout the production of this research on my own beliefs and ideas about what I was finding when talking to the research participants. Finlay (1998) argues forcibly that the researcher is part of the research and as such, I needed to constantly examine my own beliefs, judgements and practices. I needed to question my own taken for granted assumptions and make sure (as far as I was able) that these did not impact on my research. This is also part of bracketing which I discuss fully in the methodology chapter (see pages 77, 81 and 165).

2.3 When do social workers become involved in cases where there is a risk of sexual abuse?

As pointed out above, social workers work on the principles as laid out in the 1989 Children Act. The setup of the Act was accompanied by the publication of *Working together under the Children Act 1989: a guide to arrangements for inter-agency co-operation for the protection of children from abuse* (Home Office, 1991). The guidance consolidated previous guidance on procedures for the protection of children and recommended developments for making them more effective. It considered the requirements of the Children Act 1989, and lessons learned from individual cases. It also included examples of good practice from several agencies. This guidance, which at

its inception, ran to some 128 pages laid out, in some detail, how social workers should act in most circumstances.

Since the Children Act (1989) came into force in 1991, different Children Acts (e.g. 2004, Children Act) have been passed which have added to it, but importantly they have not amended the investigatory element as laid out in Section 47 of the 1989 Act. However, the guidance as to how to operationalise the Act has changed both in name (Working Together to Safeguard Children) and in its detailed direction, particularly under the New Labour Government, so that by the time it was updated in 2006 it had grown to 256 pages. The guidance followed the political tendency at the time towards a managerial process-driven practice so that, in social work practice, social workers work within a climate where targets are important (Keddell and Stanley, 2017).

It was the New Labour government (1997 – 2010) that fully accepted Neo-Liberal market ideals, which Larner (2000 p5) defined as:

> New forms of political-economic governance premised on the extension of market relationships. In critical social science literatures, the term has usurped labels referring to specific political projects (Thatcherism, Regeanomics, Rogemomics), and is more widely used than its counterparts including, for example, economic rationalism, monetarism, neo-conservatism, managerialism and contractualism.

This type of governance has led to "*public services, including social work, to become more like businesses, operate in ways drawn from the private sector, and function in a context that was as market-like as possible*" (Rogowski, 2011 p157).

Local Authorities were judged on their ability to meet specific key performance indicators (KPI). This practice ethos carried with it a number of consequences, including the fact that social workers have become more and more subject to managerialism (strict regulation of their activities by managers) and, as Rogowski (ibid) argued, "*current practice amounts to the assessment of risk and the rationing of resources with 'success' accomplished simply by the completion of the forms and exemplars as quickly as possible" (p163).* The key word for my purposes here is 'risk'.

Services are more and more restricted to cases where the risk is seen as highest and sexual abuse certainly falls under this.

The issue of managerialism and the effects on practice have been felt by UK social workers and Egan et al. (2016) found "*that there are very real challenges in providing professional supervision in contemporary practice contexts*" (p1617). Horwarth (2016 p1602) also made the point that practitioners "*irrespective of the service users they work with have educational, emotional and supervisory needs*" and that if these are not met they can have serious effects on the work that social workers do. She additionally makes the observation that appropriate supervision is a crucial aspect of emotional work such as working with sexual abuse cases.

All of this has meant that risk has taken central importance in social work and, in order to understand the importance of risk and how it affects social work practice, it is useful to give some context of both the history and understanding of the term.

2.4 The concept of risk

Bernstein (1996) argued that thinking about risk evolved in part because of changes in mathematical numbering systems, an understanding of the statistical basis of probability, and the rise in popularity of gambling. Although games of chance and gambling were depicted in Egyptian tomb paintings from 3500 BC, it was not until the Renaissance that a 'scientific' or statistical basis for gambling was presented. This was because the Hindu-Arabic numbering system (the numerals 1, 2, 3, and so forth) appeared in Europe between 1000–1200 AD, allowing calculations beyond simple addition and subtraction to be performed: "*Without numbers, there are no odds and no probabilities; without odds and probabilities, the only way to deal with risk is to appeal to the gods and the fates*" (Bernstein, 1996 p. XXIII).

Bernstein argued that things changed after the publication by Girolamo Cardano, a sixteenth-century physician, gambler, and mathematician, of a book entitled, *Liber de Ludo Aleae* ("Book on Games of Chance"). This was followed by other mathematicians and those organising large bodies of data such as birth and death records, establishing properties and rules concerning sampling, actuarial tables, and ways to predict behaviour and events occurring in populations.

Previously, the term 'risk' referred to the simple probability of 'something happening'. The term carried no weighting in terms of the 'something happening' being desirable or not. For example, in the 18th century, a merchant might have talked about the risk of a ship either getting from one port to the next, or not. The discussion was of the probability of either outcome coming to pass not of the negative association attached to the outcome. In other words, the greater this uncertainty, the riskier the journey was perceived to be. This is no longer the case; the concept of risk has become increasingly associated with negative outcomes such as hazard, danger, exposure, harm and being at risk is seen as being vulnerable. Brearley's (1982 p82) definition, which has been influential in social work, framed risk itself in negative terms as "*the relative variation in possible loss outcomes*".

As society became more advanced, so the worry about risks shifted from natural disasters over which man has no control and in former times were seen as acts of God

(although one could argue that with the advent of climate change some are now human made), to technological ones. As humankind has attempted to gain mastery over the natural world, so new risks have come to the fore. Ulrich Beck, in his much-celebrated book *Risk Society* (1992), was the first sociologist to focus on this. *Risk Society* describes the manner in which modern society organises in response to manufactured risk. As manufactured risks are the product of human activity, Beck argued that it is possible for societies to assess the level of risk that is being produced, or that is about to be created and act on this information. This sort of reflexive introspection can, in turn, alter the planned activities themselves. This has strong echoes concerning unforeseen consequences, which play a significant part in modern society and which have a direct link to the management of sexual abuse perpetrators.

A good example of this is the sex offender laws of some States and cities in the USA, such as Miami, which prevent sex offenders from settling within a certain distance of places where children may congregate. This action was taken as a means of containing the risk that released convicted sex offenders may pose by not allowing them to come into contact with children. The consequence of this has been to force offenders to live in tents outside towns or more likely to drive offenders 'underground' and so make them less likely to be amenable to risk reduction measures (Miami Herald, 2018).

Giddens (1999) distinguished between two types of risk, namely external risk and manufactured risk. He argued that external risk:

> Held sway during the first two hundred years of the existence of industrial society and defines as risk of events that may strike individuals unexpectedly (from the outside as it were) but that happens regularly enough and often enough in a whole population of people to be broadly predictable (p4).

An example would be floods in monsoon-affected countries, such as areas covered by modern Bangladesh.

Secondly, manufactured risk, which Giddens defined as:

> Risk created by the very progression of human development, especially by the progression of science and technology. Manufactured risk refers to new risk environments for which history provides us with minimal previous experience.

> We often don't know what the risks are; let alone how to calculate them accurately in terms of probability tables (p4).

In the field of child sexual abuse, the advances of communication technology and in particular the internet has brought with it the serious issue of abusive child images and online abuse (Seto, 2009, 2013).

2.5 Risk and social work

Webb (2006), when talking about social work in a risk society, argued strongly that:

> There are perhaps fewer and fewer areas of life in which the public believe that risk is unavoidable, and this view places enormous pressure upon public authorities which itself introduces new risk and challenges to democracy… Reconfigurations of the relation between state and people as a result of responses to uncertainty are particularly felt in the world of social work… Under such conditions the opportunities for risky situations to arise are high, and knowing this social work attempts to develop ever more extensive management and 'actuarial' (accountability and insurance) systems. (p3)

Commentators, such as Douglas (1992) and Parton (1996), have argued that there has been an effort to make risk the vehicle towards blame. That is, risk has been the concept used to drive through an agenda of audit which social workers, particularly during the last New Labour government, have had to contend with, so that in this climate it is not the 'right' decision which is important, but the defensible one (Scourfield and Welsh, 2003). This is particularly apparent in the way that child sex offenders are managed by local MAPPA's (multi-agency public protection arrangements). The arrangements are essentially a panel consisting of all agencies with responsibility (social services, police, probation, etc.) that come together and draw up the necessary management plans. Although introduced as a way of making sure that all agencies share responsibility, they are also anecdotally seen as a way of auditing a paper trail of defensible decisions in case 'things should go wrong' such as an offender re-offending. This auditing and apportioning of blame are also apparent in serious case

reviews, which are conducted when children have been subject to serious harm as a result of abuse (DfE, 2015).

The guidance states that the reports should be used to learn lessons and to improve interagency working; however, in practice, they are often used to highlight failings on the part of practitioners. This was particularly apparent following the death of Peter Connelly in August 2009, when a serious case review (Haringey, 2009) following the conviction of his carers was not seen as adequate after it failed to blame the social workers in his case for his death. Indeed, this is not a new idea as Geraldine Macdonald (1990) pointed out in her defence of social workers:

> Central to many of the indictments made is the assumption that the ultimate measure of competence is that of particular outcomes, and that the responsibility for such outcomes can be traced back to individuals, or groups of individuals, with whom it is rightly placed. Accordingly, a bad outcome is presumed to indicate a bad decision or negligent action. (p5)

Some theorists (e.g. Parton, 1996) have argued that this has meant that social workers have had to change their outlook and practice, from a paternalistic welfare perspective to a pragmatic one where blame is pervasive. Others argue that there has been a shift from risks to needs which was promoted by the last New Labour Government, which eradicated all talk of risk from its guidance in an effort to portray an "*inclusive, needs-led assessment process with a focus on strengths*" (Calder, 2008 p207). Critics, such as Calder (ibid), have argued that this is a dangerous trend that may work with a limited number of families, but not with resistant ones, precisely those who may murder their children, as exemplified in the case of Peter Connelly (Haringey, 2009).

This change has been foreshadowed by the rise of managerialism within social work. Parton (2008 p8) argued that, by the late 90s, "*the key purpose of the social worker was to gather information in order to classify clients for the purpose of judging the nature and level of risk and for allocating resources*". This move towards systematically controlling how social workers function has had a direct effect on social work practice and was strongly criticised by Howe as far back as 1996:

> The rise of the manager in social work sees the introduction of a range of skills, mainly related to defining and measuring performance and outcome. Such an

> outlook seeks to establish routines, standardised practices and predictable task environments. It is antithetical to depth explanations, professional discretion, creative practice, and tolerance of complexity and uncertainty. (Howe, 1996 p92)

The difficulties raised by Howe (ibid) were confirmed in the first report of the Munro (2011) Review of Child Protection which highlighted the concerns about the negative impact of inspection and performance management regimes on the priorities of frontline workers. The focus on rules and ICT to manage practitioners meant that practitioners spent less time building relationships and less time in supervision which has long been identified as a critical tool in the emotional wellbeing of social workers (e.g. Morrison, 2003; Beddoe, 2010; Bartoli and Kennedy, 2015; Wilkins, 2017; Wilkins et al. 2017).

Munro (ibid) argued that it was vital to understand the emotional load on social workers when working with difficult and complex cases and where the emotional reaction of social workers would play a role (Burton and van den Broek, 2009; Rogowski, 2011). A different view is that offered by writers such as Ferguson (1997) who, using the work of Giddens (1990, 1991) and Beck (1992), was critical of the postmodern view of child protection and risk as offered by Parton (2006). He argued that:

> This perspective is based entirely on a critique of the bureaucratic, instrumentally rational features of modern child protection systems. With its sole emphasis on constraint and control, it constitutes a one-dimensional, monolithic view of developments in child welfare and social work. (p222)

Ferguson (ibid) argued that this approach ignores the fact that people actively make themselves the subjects and not just the objects of social processes. He argued that:

> Although we are beset by major problems, we can and should mobilize either to reduce their impact or to transcend them. It is an optimistic outlook bound up with contestatory action, rather than simply a faith in rational analysis, and requires forms of discussion that develop risk consciousness, management system and public discourse in ways that re-skill professionals and lay people (p231).

Others, for example Elliott (2002), have claimed that in a more global risk sense, "*adequate consideration and calculation of risk-taking, risk-management and risk-detection can never be fully complete, … since there are always unforeseen and unintended aspects of risk environment"*. (p293)

What is also clear, at least in social work practice, is that eliminating or indeed controlling all risk is an impossible task and may, in reality, be undesirable (Calder, 2008). Put simply, the adverse effects of failing to eliminate all risk in child protection practice are not only felt in terms of personal and professional ones by social workers, as can be seen in cases where children have been killed by their carers (e.g. Laming, 2003; Haringey Local Safeguarding Children Board, 2009; Bedford, 2017). They are also felt by families in terms of oppressive practice (Leigh, 2016), erosion of human rights and the damage that removal from a family can cause to both children and their parents (Schofield et al. 2011; Neil, 2013). It has long been accepted that children do best when brought up within the confines of a nurturing family (e.g. Utting, 2007). Indeed, the 1989 Children Act is predicated on the notion that children are better off within their families and, additionally, that the family needs only be 'good enough'.

The idea that removing a child from a family that is deemed not to offer good enough care will safeguard it from harm, has proved not always to be right, both in terms of abuse and certainly in terms of future aspirations, particularly in the area of education achievement (Corby et al. 2001). However, the long-held view, that it was the care system that was responsible for children's poor educational attainment, has recently been challenged by an important study carried out by Oxford and Bristol Universities (Sebba et al. 2015). They argue that being in care can actually be an educationally protective factor and that the results showing poor attainment by 'care' children may have been skewed by the fact that children generally enter the care system older and so the effect of their family circumstances are already well entrenched. They point out that focusing on *attainment* at 16 – pupils achieving 5 GCSEs A*-C including English and Maths – can be misleading as many children enter care late, leaving too little time to catch-up. (Sebba et al 2015).

This over-reliance on the elimination of risk also has the unwanted effect of focusing purely on immediate risk at the expense of long-term risk. This can mean that no service is offered if immediate risk is not present and, although the Assessment Framework

(DoH, 2000) was designed to pre-empt this problem, i.e. to move back from a focus on incidents of risk/harm to address the broader context and intervene in various preventative ways, many researchers argue that it has failed. Calder and Hackett (2003) in particular argued that:

> What is concerning is that the assessment framework does have the potential to lean workers towards the bad practice table, and their fear of reprisal for non-compliance and the lack of time for reflection will guide their interventions rather than opting for a professionally balanced judgement. (p53)

In the particular case of sexual abuse, it can expose a child to future risk if, for example, the convicted or alleged perpetrator has a preference for older children and no intervention aimed at reducing his risk is offered at an early opportunity (e.g. Miller, 2013).

Problems associated with a search for removal of all risk can be further exacerbated by the way that a discourse of risk focuses on eliminating immediate harm at the expense of social contexts, so that, for example, removing a child from the home environment takes no account of the psychological harm that removal from things like positive friendship groups and school can have on the child. Indeed, research has shown that just in terms of mental health, children in the care system are more likely to have problems than those that are not and that if those problems are not addressed at an early stage, the prognosis is worse (Meltzer et al. 2003; Meltzer et al. 2004a; Meltzer et al. 2004b).

As can be seen from this brief discussion of risk, there are wide variations of its meaning and application. The appreciation of risky situations has moved from a view that it is God-given and unavoidable, such as in natural disasters, to one where the 'new' risks are manufactured as a result of advances in technology as for example online sexual abuse. Tied to this is the view that the 'experts' are no longer infallible, and this view carries onto social workers. Regarding practice, risk has become all important and a vehicle by which social workers are blamed when things go wrong (Jones, 2014; 2019). Thus, if a child is abused, it is because of a failure of risk

assessment rather than an expression of living in a risk society where the outcomes of risky situations are in some instances unavoidable and unknowable.

The ever-changing context and definition of risk have also had an effect on the field of sexual abuse and how what is meant by abuse has changed as technology has evolved. For example, looking at the discussion above in terms of practice guidance as given by Working Together to Safeguard Children (2018), it is clear that what is classified as abuse has changed as digital technology has advanced, so that the guidance given in 1991, for example, did not include internet grooming as the internet was not operational and widespread as it is today. It would then seem sensible to outline a brief historical outline of Child Sexual abuse, as in the next section.

2.6 Historical perspectives of Child Sexual Abuse

Historical records show that children have always been the victims of sexual abuse in one way or another (Corby, 2019). Smart (2000) made the point that it was not that people were unaware of abuse taking place or that they were indifferent to the plight of children but rather that, when faced with individual instances of abuse, it has been easy to find reasons to deny its existence or attribute it to less unacceptable means. This was precisely the case in the 1920s when, for example, very young children in apparently well-run care homes, were found to have gonorrhoea. The outbreaks were explained by having started from already infected children coming into the home and transmitting it by means of toilet seats, towels, slippery baths and rectal thermometers (Smart, 2000). When doctors began to find a much wider spread of infection amongst children living within families, the explanation differed in terms of class, with working-class children contracting it by sleeping in the adult's bed and middle-class children by being assaulted by servants in the homes. There was no suspicion that the disease was being caused by the children being assaulted by their primary caregivers.

Smart (2000) did make the point that some sections of the medical profession also argued that children were showing signs of the disease as a direct result of rape. However, the rape of children was not deemed to be because of a sexual intent on the part of adults, but instead the result of a widespread belief, held during the early 1900s, that gonorrhoea could be cured by having sexual intercourse with a virgin.

It was the feminist movement which continued to try and raise the issue of sexual abuse of girls (Donat and D'Emilio, 1992). Immediately after the First World War, the feminist movement sought to protect girls under the age of 16 from sexual abuse. Their struggle was fought against the political and legal establishment. There was stiff resistance by a significant number of MPs to the introduction of the Criminal Law Amendment Act 1922. These politicians argued that it was precociousness on the part of young girls that was responsible for their abuse and not the responsibility of the older man. They also saw this very much as a problem on the part of young working-class women. The legal profession was also against any change in the law which would reduce the rights of the accused and so changes which were recommended by the Departmental Committee on Sexual Offences Against Young Persons which reported in 1925 were not acted upon. What is striking about the recommendations of the committee is that they almost entirely mirror measures put forward by the Pigot report (1989). These were also strongly resisted by the legal profession and were considerably weakened when it was finally introduced in 1992 as a *'Memorandum of Good Practice on Video Recorded Interviews with Child Witnesses for Criminal Proceedings'* (Department of Health/ Home Office, 1992).

Other writers have pointed to French records, which seem to show a similar picture in terms of knowledge of abuse of children. Masson (1984) cited a French article by Toulmouche in 1856 who, along with other eminent Physicians, argued:

> that sexual acts against children were very frequent, that assaulted children often showed no physical signs, that children's reports were largely truthful, that fathers and brothers were often the molesters and that "higher education" did not inhibit men from committing such acts. (cited in Olafson et al., 1993 p10)

Although there had been notable concern shown by some Victorian philanthropists into the issue of child abuse generally, it was not until after the 2nd World War and the death of Dennis O'Neill at the hands of his foster carers that it began to be taken seriously in the UK (Home Office, 1945). This all changed with the intervention of Dr Henry Kempe and his medical team in the USA who 'discovered' child abuse in the 1960s. Kempe understood child abuse as a socio-medical problem, calling it a syndrome, which

was real and more importantly, which could be treated with the 'right' medical intervention (e.g. Kempe et al., 1985). This medical approach lost sway with the advent of public enquiries (e.g. London Borough of Brent, 1985), following the death of a number of children at the hands of their carers. Increasingly child abuse has come to be seen as a socio-legal problem where the state has taken pre-eminence in dealing with it by obtaining evidence which is weighed in court and may determine whether a child is removed from their carers (Parton, 1996).

Whereas previously child abuse was seen as a disease that had a cure, it is now seen as a problem exhibited by specific people, which can be assessed and prevented if the 'right' risk factors are identified and acted on. This move to a more legalistic view of child abuse is one where social workers have increasingly used risk management tools, which has, in turn, robbed them of professional autonomy and has made them increasingly reliant on government and local policies and procedures to guide their professional decisions (Christie and Mittler, 1999; Stalker 2003). The focus on risk has led to an increase in social workers' workloads at a time of diminishing resources. Hence, social work departments have had to target their resources to 'high risk' cases, where the greatest fear of professional repercussions are to be found if the child dies and professionals are found to be lacking (e.g. Laming, 2003).

The discourse at the time of child death enquiries in the 1970s and 1980s, following the high-profile deaths of a number of children (see Reder et al. 1993), was one where signs of child abuse were evident and appropriate work by social workers and health workers could be brought to bear to prevent it. This now seems to have changed and the emphasis is on risk, both its assessment and management. The risk is seen as a real entity, which can be located and, with proper tools, eliminated. In the case of sexual abuse, the discourse changed after the events which precipitated the Cleveland affair during 1987 (Butler-Sloss, 1988). Here the failure of doctors and social workers were seen as the cause of the crisis and the police and the legal system as the solution. The events in Cleveland drew attention, not only to child sexual abuse (CSA) but to the professional response to it. The Cleveland Inquiry Report (Butler-Sloss, 1988) highlighted:

> a lack of proper understanding by the main agencies of each other's functions in relation to CSA; a lack of communication between the agencies; (and)

> differences of views at middle management level which were not recognised by senior staff. (p243).

The report advocated amongst other things the development of inter-agency cooperation. What it did not talk about was how individual social work practitioners in the field should conduct their assessments in cases of contested CSA.

When a referral of child abuse is made, the Local Authority has a duty to investigate (Section 47, 1989 Children Act). In most cases, after an initial assessment, no further action is taken. However, in a significant number, further investigation is needed which may result in child protection case conferences and eventually removal of the children from the care of their parents. In cases of child sexual abuse, there is always the factor of criminal proceedings as child sexual abuse is a criminal act, with a range of possible criminal convictions attached to it. Social workers are not only concerned with childcare issues but also with criminal act responses, such as evidence gathering:

> The social workers' role now appeared to shift from a therapeutic relationship with clients to that of a 'soft' police role. The emphasis was now mainly on investigation to collect forensic evidence for presentation to courts. (Lawrence, 2004 p71)

This was undoubtedly one of the problems, highlighted by the Cleveland Enquiry, where the approach by police and social workers not only differed regarding set down procedures, but they also differed in terms of cultural and core beliefs (Campbell, 1997). This legal approach has also meant that, for example, therapeutic help for children post abuse is held up as solicitors argue that receiving help before any criminal trial could jeopardise the chances of a successful prosecution.

As well as this, social workers have to contend with the knowledge that removal from the home does not always yield positive results for the children concerned, both in terms of short-term deterioration in behaviour, mental health and longer-term adverse effects. It has been argued that, since the Cleveland Inquiry (Butler-Sloss, 1988), practitioners can no longer be sure of what constitutes a safe decision. Waterhouse and Carnie (1992) quite neatly identify the dilemma for social workers inherent in this kind of work:

> Failing to remove children can be seen publicly as serious an error of judgment as removing them. Child protection decisions are not just about predicting outcomes, which is difficult enough, but about adjudging the social, personal, and economic costs of those potential outcomes and their likelihood. Social workers in making assessments may have two reference points: first, a ruin point in which children's safety may be jeopardized through error; and second, a success point which is defined as obtaining the least damaging arrangements for children. The dilemma is that strategies which produce minimal error may also reduce success; in other words, more children may be safe, but more children may also be cared for, perhaps unnecessarily, in less than optimal conditions with negative consequences for children's development. (p59)

The Children Act 1989 sought to bring with it a way in which the Local Authority represented by social workers could place the child at the centre of any intervention and, working in partnership with their parents, could provide a more holistic way of protecting children and so avoid the worst aspects of an adversarial legal system, where there are 'winners' and 'losers'. Indeed, at the time, the Act was hailed by the then Lord Chancellor Lord Mackay of Clashfern as the "*most comprehensive and far-reaching reform of child law which has come before Parliament in living memory*".

However, the laudable aims of the act have been somewhat blunted by both the social and political effects of high-profile cases, where children have not been seen to be adequately safeguarded (e.g. Laming, 2003; Haringey, 2009; Derbyshire LSGB, 2017). The societal and political response to these children's deaths has forced social workers to work in a much more defensive manner. The effect of this was not new and had been highlighted by research produced by the Government (DoH, 1995). The collection of research produced by the Government, brought together in Child Protection, and Child Abuse: Messages from Research (Studies in Child Protection), highlighted the fact that there had been a significant movement away from child safeguarding as a whole, to child protection in a very narrow sense.

Ayre (2001) gave an overview of how the critical media coverage of a series of child deaths created a "*climate of fear, blame and distrust*" (p887), which had a significant effect on social work practice. This shift to defensive practice was seen as corrosive and the government of the time tried to counter it by launching a 'refocusing' exercise led by

research from the Dartington Social Research Unit (2004). The research argued that there needed to be a move from the very narrow focus of protection to a more encompassing focus on safeguarding as a whole. The report not only argued that this move would be cost-effective, but it would also bring in user involvement and staff satisfaction. It also added that an important strand was that of performance targets which, in the long term, had the possibly unintended result of ushering in the heavy hand of managerialism, which in the end brought the whole discussion round to the problems highlighted in the Munro Report (2011), almost a decade later.

When professionals talk of the risk of an individual sexually abusing a child, what they mean is the risk of an individual re-offending. This is because work on risk assessment is based on studies of convicted offenders. This, of course, raises a number of problems not least the fact that these rates of re-offending are not based on the population as a whole and so serve minimal purpose when assessing the risk of a child being abused by someone who has been subject to allegations or suspicions of sexual abuse, but has not been convicted.

In any case, when assessing the risk of re-offending, professionals are now urged not just to look at the level of risk but should also include information that can guide risk management. It is fairly well agreed that certain risk factors influence the likelihood of abuse. There is also general agreement that these risk factors fall into four distinct categories, as described by Beech et al. (2003), namely:

1. Dispositional factors, which include personality characteristics;
2. Historical factors, which include any abuse suffered, prior history of abuse and violence and take up of previous treatment;
3. Contextual antecedents to violence, namely criminogenic needs, lack of social support and
4. Clinical factors, such as substance abuse and any psychiatric conditions.

Beech and his colleagues argued strongly that in order to carry out a valid assessment these factors must be identified.

Social workers are caught in an awkward position when looking at risk and nowhere is this more apparent than in cases when they are working with a family where there is a

man who has had an allegation of sexual abuse made against him. Or indeed where the professionals involved have reason to believe that he may pose a risk of sexual abuse to the children within the family, but where there is no conviction. In cases such as this, the inherent difference and the problems this creates, between objective risk (that which can be measured by experts) and subjective risk (that which is a layperson's anticipation of an event taking place), is brought into sharp relief.

This difficulty is not helped by the fact that some researchers argue that:

> The status of theory construction has fallen significantly, and there is very little cooperation between researchers working on the conceptualisation of risk factors and those seeking to explain the causes of sexual offending. In addition, assessment and case formulation seems to revolve largely around the detection of dynamic risk factors, and the classification of offenders and their problems amounts to formulating risk profiles. (Ward, 2014 p130)

In addition, in the field of sexual abuse risk assessment, the issue of professional judgement being seen as singularly inferior to more 'scientific' methods of risk assessment, have made the work of social workers difficult. Herman (2009) has criticised the use of non-scientific evidence, by which he means not based on statistical evidence, in risk assessment formulations about sexual abuse, arguing that professional judgments derived from such evidence have been shown empirically to be unreliable. However, recently, other researchers have taken issue with this and have argued that views such as Herman (ibid):

> represent an extremely negative position in the debate. The remedies he proposes are radical and ill-conceived, especially given the fact that the extent of the problem of evaluator error is still unknown. More and better research is needed, both to guide practice and to inform the debate. (Everson et al. 2012 p88)

However, a study by Soothill et al. (2005), which looked at the reoffending rate of not only convicted offenders, but also of individuals whom the police strongly suspected of a sexual offence against a child, but who had not been convicted, found that those convicted of a child sex offence are about twice as likely to be subsequently convicted of a sex offence, compared to those who are just strongly suspected of such an offence.

They also found that those aged under 18 years involved in this type of sexual offending seem to pose considerably less danger in the future than their adult male counterparts. These findings have strong implications for social workers trying to assess and manage risk in cases of suspected sexual abuse. In my dealings with cases of sexual abuse, social workers and their managers often do not make this distinction and treat the risk posed by people as equal.

Social workers are expected to produce final assessments within tight timescales as laid down in the guidance given by central government. The current target driven, and evaluation requirements make it very difficult to form human relationships which allow for the gathering of sensitive information from people (Broadhurst and Hall, 2009; Shaw et al. 2009). What is agreed by workers in the field is the need for basing the assessment on the broadest possible range of information sources. It is essential that judgements are not made by single workers, and information gathering should be sought from all people who have significant contact with the offender.

In addition, an important aspect of the assessment process and the task of social workers when working within the difficult field of child protection is their wellbeing and general resilience in the face of difficult and emotional work. This has generally been an under-researched area, but one which is very pertinent to this current piece of work.

There is a strong suggestion, and not only limited to the UK but also to social work in the USA, that child protection work is very stressful and is associated with poor retention and generally a high turnover of workers (Anderson, 2000; DePanfilis and Zlotnik, 2008). However, this organizational difficulty of high vacancy rates has for some time been also associated with specific risks in terms of both psychological and physical health (e.g. McGrath et al., 1989).

Some studies have also found that social workers are at risk of secondary traumatic stress (STS), sometimes known as compassion fatigue. This is important in that, as McFadden et al. (2016 p1556) pointed out, "*the term STS is applied to those who have regular contact with traumatised individuals. Such individuals can experience prolonged emotional disruption and become indirectly affected by the trauma"* (Figley, 1995, cited in Conrad and Kellar-Guenther, 2006). McFadden et al. (ibid), in their

thematic review of the literature in terms of social worker resilience and burnout, also looked at what can protect workers and found that issues such as supervision and peer support were crucial. This discussion of social worker well-being serves as an introduction to a more detailed discussion, later in this thesis, as emotional work and work with adult sexual offenders are an integral part of my research.

In this chapter, I introduced the work of social workers when presented with a case where the abuse of a child by a male adult is the primary concern. I started with a history of social work as an independent profession, separate from the early morality mode as carried out by charities. It continued with an outline of how children's rights took central importance in child social work and how this developed into a complex and comprehensive set of laws, which finally settled into the 1989 Children Act, which still guides child protection practice.

The chapter explained the process of assessment and how that activity is a difficult one and central to social work. Social workers are intimately involved at the start of any work with families where sexual abuse is an issue, and their practice can come under close examination in cases where children are seriously injured by their carers. Additionally, this chapter introduced the importance of social workers' feelings and beliefs and how they can impact on the assessment findings. This is particularly important in cases of sexual abuse, where the social workers' feelings about offenders will be important.

This chapter investigated how the issue of Key Performance Indicators has affected social work practice, by forcing social work practice into a more managerial style with the associated difficulties that carries. The importance of supervision was looked at and how social workers' needs, in what is an emotional task, are met by supportive supervision.

There followed a discussion about risk and how it has affected the practice of social work. The point was made that the reduction of risk has become all important and, in some cases, a vehicle for blame, although the efforts of the last Labour Government tried to eradicate risk from the social work practice vocabulary and instead focused on a much wider safeguarding agenda. This shift had some good intentions, but, in essence, it continued with the managerial agenda and the growth of procedures as a means of controlling social work practice and thereby eliminate risk. The discussion also makes

the point that this is an impossible task as has been shown by the death of children in high profile cases, which have led to the complete overhaul of social work practice.

I then looked at how sexual abuse, as a constructed term, has shifted over time and how this has had an impact on the way social workers deal with it in practice. It argues that practice in this field is guided by risk assessment, with the aim of identifying and preventing men who sexually abuse children from further abuse. This work is also linked to the discussion of risk and how it should (if it ever can be) managed.

I finish by introducing the emotional component of social work in this field and how this has affected both the physical and psychological wellbeing of social workers. Links with quality supervision and the issue of social worker burnout in its absence are noted.

The chapter has provided the context for the research and has drawn upon policy documentation and relevant research. The next chapter, however, focuses in more detail on the literature pertaining to this thesis.

Chapter Three: The Literature Review

I start this chapter by presenting the methodology for the literature review. This continues with a discussion of child abuse and risk management, which includes looking at child abuse in general and sexual abuse and its management in some detail, the profession of social work and how it has been perceived, emotional work as it pertains to working with vulnerable families and children in particular and how this type of work impacts on social workers. The concept of childhood and how changes in its definition have affected the work and meaning of child sexual abuse are also addressed.

The chapter looks in some detail at the concept of disgust. However at the start of my literature review . disgust was not featured. The development of the concept came through an iterative process of data analysis, presence of a concept and then further reading and addition to the literature. It starts with a short historical introduction and is followed by a contemporary look at the theoretical constructs involved, particularly moral disgust and the association of contamination and how this is a feature of social work with sex offenders or children who have been sexually abused. Links are made to the serious effect on the assessments of families where sexual abuse is a feature. I conclude by exploring the theoretical construct of dirty work and dirty workers as well as the concept of stigma and in particular courtesy stigma, which Goffman (1963) described as society degrading or losing respect for a person because the person associates with someone who is stigmatized.

3.1 Aims of the literature review

In this chapter, I set out to review the literature related to my study, the aims of which are to explore:

- Social workers' feelings about the adult male responsible/suspected of sexual abuse.
- How social workers deal with the emotions produced by their work.

In addressing this area of work, the literature review explores actual social work practice with families where child sexual abuse is a feature. It will:

- Examine the basis of assessments of risk as currently established.

- Detect how the views held by social workers and the impact of new public management and subsequent rise of managerialism within social work have shaped frontline practice in the field of child sexual abuse, given that managerialism does not accept the limitations of guidance in avoiding 'mistakes' Giddens (1990).
- Discuss the emotional effects of working with convicted/alleged child sex offenders and how this has impacted on both 'burn out' and mental health and wellbeing issues for the practitioners involved (e.g. McFadden et al. 2016).
- Offer an historical and contemporary overview of disgust and the theoretical constructs involved, particularly moral disgust and contamination and how this is a feature of social work with sex offenders or children who have been sexually abused

The review examines how risk assessments of children at risk of abuse are currently carried out. It also considers how the constructed nature of childhood and the view of children as passive, weak and innocent (Kitzinger, 1997) has had an effect on the practice of social workers with children who have been sexually abused. What is meant here by constructed is as Corby (2006 p7) pointed out "*Awareness of the socially constructed nature of childhood can enable the social worker to reflect more fully on the social and political underpinnings to the situation and may ultimately inform decisions that are finally reached"*

3.2 Literature review methodology

My starting point was examining empirical studies alongside theoretical works. However, choices must be made about what to include and more importantly what to exclude within a review of the literature. As Smith (2009) pointed out, there needs to be a focus on the literature as one needs "*to provide structure and coherence to the material obtained and to ensure that it relates to the research question"* (p154).

The initial method I used was 'snowballing' which, as Davies and Hughes (2014) explained, is where one starts with a standard book or article and "*it is virtually certain that scanning the references or the bibliography will lead you to others, then do it again with each of them"* (p40). This reading also allows for the inclusion of new or

additional material as the study progresses and here, this was the case with the concept of disgust.

However, the reading must be critical and has to examine the methodology behind the work and the assumptions made by the author. For example, much current thinking about risk uses ideas derived from the ‘risk society’ as expounded by Ulrick Beck and Anthony Giddens as to the manner in which modern society organizes in response to risk, so it was vital to include in my reading seminal texts such as Beck (1992) ‘Risk Society: Towards a New Modernity’ and Giddens (1990) ‘The Consequences of Modernity’. With this starting point I included articles such as Ferguson (1997) ‘Protecting children in new times: child protection and the risk society’. This focus led me to much more recent work which none the less builds on my original ideas.

A limitation of snowballing is that unless the person has focused explicitly on the area under study, some items may be missed. Also, it is likely to miss more recent texts. To avoid this potential pitfall, as well as using a snowballing method of gathering the literature, I carefully searched the relevant databases (University Ebsco database, PsychARTICLES, PsychINFO, Social Care Online, SocINDEX, Google scholar) using appropriate search terms.

3.3 Inclusion and exclusion criteria

The sexual abuse field is a fast-changing one (Hanson, 2014; Ward, 2014), so it was essential to use recent material and, as such, I decided to search for articles published after 1980 as anything older would be ‘out of date’.

The search terms I used were: ‘child protection’, ‘sexual abuse’, ‘disgust’, ‘childhood’, ‘emotion’, ‘emotional labour’, ‘contagion’ and ‘dirty work’. I also searched through the grey literature pertaining to my area of study. Grey literature includes unpublished studies and studies published outside widely available journals. As grey literature is a source of information that does not necessarily employ peer review, critics have questioned the data's validity. Alternatively, the inclusion of grey literature is considered by some (e.g. Hopewell et al. 2007) to help overcome a number of the problems of publication bias, which can arise due to the selective availability of data. Hart (2002) commended the grey literature to the scholar and provides the following summary of the types of material included in this category:

- theses undertaken for higher degrees
- papers and speeches given at conferences
- notices of research in progress
- newspaper articles and editorials
- personal diaries and letters.

Grey literature was included in this study and searched using SIGLE (System for Information on Grey Literature) and Index to Theses.

It would seem appropriate in a literature review to discuss the themes which arise and chief amongst them is social work itself.

3.4 The nature of social work?

The International Federation of Social Workers (IFSW) and the International Association of School of Social Work (IASSW) came together in 2014 to give a definition of what social work is:

> Social work is a practice-based profession and an academic discipline that promotes social change and development, social cohesion, and the empowerment and liberation of people. Principles of social justice, human rights, collective responsibility and respect for diversities are central to social work. Underpinned by theories of social work, social sciences, humanities and indigenous knowledge, social work engages people and structures to address life challenges and enhance wellbeing. The above definition may be amplified at national and/or regional levels. (IFSW, 2014)

This definition encapsulates the wide-ranging area that social work covers, and it has been accepted by the British Association of Social Work (BASW, 2014).

Social work has its roots in the work of the Victorian Philanthropists which tried to mitigate the effects of a fast-changing society which, as well as making a few people extremely rich, made life difficult for the majority of the population (Sheldon and Macdonald, 2009). Social work has also grown as an academic entity. However, as the definition sets out, the focus of social work is wide and, as such, it has borrowed from other disciplines. Sheldon and Macdonald (ibid) put it more starkly when they said:

"*The sheer range of social and personal problems for which we (social work) have acquired some responsibility has led to the development of a discipline which has always been forced to borrow heavily, and, it must be admitted, on occasion recklessly, from adjacent fields*". (p4)

They go on to point out that those fields include a number of both young and older disciplines such as psychology and law. Indeed, they argue that although this has had a good effect, it has also caused some epistemological difficulties as to what is known and how it is known. They make the point that "*this issue of 'what shall count as evidence' remains the largest single obstacle to the cumulative development (distinct from mere change or fashion) in our discipline.*" (p5)

This apparent lack of academic focus has been a feature of the profession and indeed of child protection in general, which in turn has also been framed by the politics of the day (Parton, 2014a; Parton, 2014b; Jones, 2019). Some researchers have also argued that social policy in the field has been driven to a large extent by the tragic death of children at the hands of their carers (e.g. Reader et al. 1993).

Although epistemological concerns are ongoing, what does make social work distinct is its value base. Social work is not just an academic endeavour and, as the definition above makes clear, it is a human activity. The sentence from the definition of social work, which I use above: "*Underpinned by theories of social work, social sciences, humanities and indigenous knowledge, social work engages people and structures to address life challenges and enhance wellbeing*" (IFSW, 2014), encapsulates the fact that central to social work and central to this study is the issue of ethics and values (Banks, 2012). It is not within the remit of this chapter to set out wholly the complex area of values and the ethics involved in the work that social workers do. However, its importance cannot be underestimated and, as Banks (2012 p8) pointed out, "*A conceptual distinction is often made between professional values and personal values in that personal values may not be shared by all members of an occupational group."* This is an issue to which I turn later in this chapter when discussing issues such as 'Dirty Work' and 'Dirty Workers' and a general exploration of the role that 'Disgust' plays in the work of social workers in the area of sexual abuse and how this is influenced by personal values of the practitioners involved.

In order to understand the feelings experienced by social workers working with families where sexual abuse has taken place, it is first important to explore what childhood is, to anchor this to child abuse in general and then to explore in more detail what child sexual abuse is.

3.5 Child abuse

It is important to state at the start of any discussion about definitions, that child abuse, as an entity, does not exist. That is not to say that children are not hurt or that there are no victims, but that child abuse is a social construct. Berger and Luckmann (1967 p106) in their seminal work "The Social Construction of Society" proposed that "*all social phenomena are constructions produced historically through human activity.*" This then means that definitions of abuse will vary across time and across cultures.

The World Health Organization (2016) recognised four types of child abuse, namely physical abuse, sexual abuse, emotional (or psychological) abuse, and neglect. That is also the case in the UK and, for the purposes of this study, given its geographical location and temporal stage, it would seem sensible to adopt the definitions used by the NSPCC who are the current leaders in the field of child abuse in the UK. They state that:

> Child abuse happens when a person – adult or child – harms a child. It can be physical, sexual or emotional, but can also involve a lack of love, care and attention. Neglect can be just as damaging to a child as physical or sexual abuse.
>
> Children may be abused by:
>
> - family members
> - friends
> - people working or volunteering in organizational or community settings
> - people they know
> - or, much less commonly, by strangers.

> Children suffering abuse often experience more than one type of abuse. The abuse usually happens over a period time, rather than being a single, isolated incident. Increasingly, abuse can happen online. (NSPCC, 2018)

Having set out what child abuse is, I now turn to the more specific issue of child sexual abuse.

3.6 Child sexual abuse

Child sexual abuse (CSA) is a subject that, when reported, causes strong headlines of condemnation and disgust. Perpetrators of abuse are seen as 'monsters' and in most cases as not 'real people' but as 'others', somehow wholly different from 'us' (Cowburn and Dominelli, 2001). Indeed, researchers such as Nash (1999) have described the 1990s as "*The decade of the predatory sex offender, at least in terms of constructing a demon. Across the world, a range of legislation has been set in place which seeks to single out this group of offenders for greater punishment, fewer rights and potential exclusion from society*". (p1)

The language used in working with sexual offenders is important and ever-changing. Language and with it discourse are critical and need to be transparent from the start of any discussion. For example, the term paedophile is no longer a medical term describing someone who has a primary sexual attraction to prepubertal children. The term is now applied to someone who is seen as abhorrent, disgusting and dangerous and who is often called a 'predatory offender', a term which evokes images of silent and violent 'sharks', or of someone who is pathetic and much less dangerous and often portrayed as the 'dirty old man'. What both these descriptions have in common is that they make these individuals very different from the norm. Men who are not offenders are often portrayed as guardians or protectors (Cowburn and Dominelli, 2001). The collective view of the paedophile as somehow very far removed from normal requires acknowledging, as this is not far distant from the ways in which some professional language and understandings construct the sexual offender as someone different from an assumed norm (Kelly, 1996; Meyers, 2008).

The discourse of sex offenders being seen as more than just outside the norm, but as 'others' (Cowburn and Dominelli, 2001), has affected the way society expects sexual offenders to be dealt with (Weiner et al. 2014). This in turn has had a profound effect on

the way social work practice with these individuals has been shaped (Parton, 2006). If sex offenders are uncritically seen as qualitatively different from 'us' as individuals and 'us' as a society, then this worldview will also be one that will be used by social workers and, as such, may influence the way they assess and make decisions in cases of sexual abuse.

This discourse of sex offenders as dangerous and different affects how the lay public reacts, and this was undoubtedly revealed in an extremely violent fashion in July 2000, in the UK. This followed the launch by the '*News of the World*' newspaper (now defunct) of a campaign to introduce 'Sarah's Law' in the wake of the child Sarah Payne's murder by a convicted sex offender. The campaign's aim was to establish open public access to the location of all sex offenders in the UK, as is the practice in the USA under Megan's Law (see Welchans, 2005 for a review). On the days following the publication of photographs of alleged offenders, the residents of Paulsgrove, an estate in Portsmouth, Hampshire, marched through the housing estate, torching a number of cars and buildings of people who were thought to be sex offenders. According to Evans (2003):

> Anti-paedophile 'vigilante' campaigns unconsciously manifest the strains existing in the then Blair government's dual approach to sexual offenders. These strains are consequent upon the Government's deployment of the administrative techniques of neo-liberal governance and, at the same time, its continuing attachment to the rhetoric of contemporary punitive populism, reinforced by other agents in the public sphere such as the popular press. (p165)

The definition of paedophile is also primarily guided by the medicalisation of the term. The lead role in the identification, management and treatment of sex offenders has been taken by psychologists, with a strong emphasis on medical discourse. When researchers have tried to build up typologies of offenders, based upon their motivation for committing the sexually deviant behaviour, the language used has been medical as this quote shows:

> Groth et al. (1982) proposed one of the most fundamental classification schemes rooted around two basic issues: the degree to which the deviant sexual behaviour is entrenched in the abuser and the basis for psychological needs. With this, Groth created the fixated-regressed dichotomy of sex offending, where the fixated offender is characterized as having a persistent, continual and compulsive attraction to children and the regressed offender tends to be situational and precipitated by external stressors. (Robertiello and Terry 2007 p512)

Robertiello and Terry (ibid), in common with many psychologists working in the sexual offending field, take the view that "*like all sexual offenders, child molesters constitute a heterogeneous population of individuals. The perpetrators can be male or female, heterosexual, homosexual, bisexual, married or single, and of any race or economic status*". (p512)

Although essentially this is accurate, it does tend to make invisible the fact that most sex offending is committed by men. The effect of defining sex offending as a medical problem which is potentially perpetrated by men and women is that it redefines "*the issue as one of managing a dangerous external threat residing within the personalities of those individuals accused of being sex offenders*" (Cowburn and Dominelli, 2001 p405). Further, these authors argued that by drawing on "*medico-legal discourses centering on 'the paedophile' as an ungendered being ignores the complexities of the issues to be addressed.*" (p405)

Figures about the rate of offending are varied and are themselves contested as are the statistics which set out rates of re-offending amongst both incarcerated offenders and non-incarcerated offenders. A study by Leam et al. (2008) found that, although the rate of re-offending is higher for incarcerated offenders, the rate of reconviction for combined samples of incarcerated and non-incarcerated offenders stands at 5.7% (at 2 years), 5.9% (at 4 years) and 15.5% (at 6 years or more). While it is essential to measure the rate of reconviction, this does not tell us much about the incidence of sexual abuse in the general population. This is important in that social workers usually deal with men who are accused or alleged to have offended but, on the whole, have not been convicted. Indeed, the rate of conviction resulting from allegations has been put by some writers as low as 1% of all prosecutions (Bacon, 2008).

One study put the incidence of sexual abuse by strangers in a group of 9 – 16-year-old school children at 19% (Gallaher et al. 2008). Figures which have looked at the incidence of sexual abuse generally put the figure at around 10% of the population in the UK (Baker and Duncan, 1985). However, with sexual abuse and its changing definition, it is important to use much more recent figures. So, for instance, a study by Bentley et al. (2017) showed that there have been increases in police-recorded child sexual offences and indecent image offences across the UK, which a study such as Baker and Duncan would not have included, since their study was carried out before the advent of technology-assisted offending. There is still this pervasive problem in that studies use different definitions of CSA; many cases go unreported, and numbers are reported for different time periods.

However, some researchers have suggested that although the actual incidence may be contested, there seems to be evidence that there has been a true decline (at least in the USA) of sexual abuse since the early 1990s. Finkelhor and Jones (2012) argued that "*at least in the case of sexual abuse, the convergence of multiple independent data sources leads to a conclusion that a decline has likely occurred."* (p6)

This is in contrast to the findings of Bentley et al. (2017) which suggested that the incidence has (at least in the UK) increased and they have called on the government to carry out a new prevalence study, in order to give a clear view.

The definition of child sexual abuse has been problematic because, as with much in social work, there is both a social and a political context. Not only that, but there is a strong aspect of constructionism within it. This need to define CSA is also important when asking such questions as 'what is a child at risk of?' This is an important question in that the abuse may differ in terms of harm. It could be that the behaviour may appear to cause little harm, as in the case of a so-called 'romantic' non-coercive sexual relationship between a 21-year-old male and a 15-year-old female, where the activity is illegal but may not be harmful. This can be compared to a coercive relationship between a 35-year-old man and a 12-year-old girl, and it becomes evident that 'harm' is a complex issue (Rich, 2009).

When coming to a commonly agreed definition of CSA, it very much depends on the purpose for which it is being adopted. Social workers work within a statutory framework and, as such, employ the definition as given by the Government guidelines, 'Working Together to Safeguard Children' (2018):

> Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children. (p102)

This definition does not of itself talk about risk, nor does it differentiate between actual and alleged abuse. This reflects the challenge faced by social workers in trying to work in a sphere where uncertainty is a fact of life, where they are asked not just to make appropriate decisions based on best practice and knowledge, but where 'failure' is not tolerated. Calder (2008) made an important point when he argued that "*definitions of concepts such as risk, dangerousness and significant harm are ambiguous and widely agreed to be determined by social, cultural and historical factors*". (p207)

When talking about risk, one is talking about the uncertainty of outcomes. In child sexual abuse cases, when social workers talk about risk, they are referring to the likelihood of severe or even irretrievably harmful consequences, which could arise from a dangerous situation. A good definition is that given by Hollows (2008) when he says:

> The concept of risk is in contemporary social work terms inextricably linked with the harmful consequences, brought about through actions or prevailing circumstances. It has to be considered in terms of the possibility that something (adverse) will happen and that harm to someone will ensue. There is an implicit assumption that the person harmed is in some way vulnerable or unable to defend themselves against the harm. (p56)

The avoidance of possible ‘harmful consequences’ is a fundamental principle in the Children Act 1989. The possibility or likelihood of significant harm is a central feature for action by both courts when considering a care order (Children Act 1989 section 31) and local authorities for undertaking enquiries into a child’s circumstances (Children Act 1989 section 47). In both cases, social workers are expected to carry out an assessment of risk (Sargent, 1999).

There is difficulty within the discourse of harm and danger and how they relate risk to children. This difficulty is bound up with the difference between child welfare and child protection and, in England’s case, the confusion of the two terms by the current use of ‘safeguarding’. The New Labour government’s guidance regarding the Assessment Framework made no mention of risk although it did talk about harm and dangers. This confusion received a great deal of criticism and served to make practice at the ‘coal face’ more challenging to carry out (Calder and Hackett, 2003).

A good example of that challenge is the use of the Common Assessment Framework (DfES 2000) for cases of suspected sexual abuse. The Framework is not appropriate, given the particular complexities involved in this work and the framework’s lack of focus on risk. Calder and Hacket (2003 p54) made the point that “*the framework doesn’t address circumstances such as serious physical abuse and sexual abuse”*. In addition, there are issues of funding when working with sex offenders. For example, it is generally accepted that one aspect of working with individuals who are at risk of sexually abusing children is to offer specialist intervention to the offender. This is difficult to do in practice as a result of both a lack of provision and lack of clarity regarding funding. The research into managing sexual offenders makes clear that, if children are to be protected, protection plans must include intensive and often expensive interventions with the adults in the household (e.g. Ward, et al. 2007).

This confusion is not confined to England as Cradock (2004) pointed out within a Canadian context:

> ...one may speak of harm as any general, nonspecific, thwarting of any child’s realisation of its full human potential. On the other hand, the danger is located within specific circumstances and, usually emanates from specific people...

> Both harm and danger represent risks, but they are a different kind of risk. (p319)

This is a crucial point when looking at risk assessment tools. The initial studies from which risk assessment tools were developed were concerned with identifying risk populations as opposed to risky individuals. Indeed, they have always warned against its use with individuals. "*In other words, risk assessments were seen as a necessary source of data for the policy-making field, not guides for the practice of child protection workers.*" (Cradock, 2004 p319)

As can be seen from this discussion, the definition of CSA is fraught with difficulties as is the view of the men who commit the abuse. Before embarking on a more theoretical explanation of the aetiology of sexual abuse, a brief history of CSA is provided.

3.7 Theories of sexual offending

When discussing CSA, it would also seem pertinent to talk about its aetiology. In the section that follows I provide a brief outline of current theoretical thinking of the causes of sexual offending, with the review drawing upon Ward et al. (2006).

Sex offenders constitute a heterogeneous group of individuals who begin abusing for a myriad of reasons. Many offenders do not fit into discrete categories. Sex offenders have unique personal and criminal histories, and the attitudes and beliefs that support their deviant behaviour may vary.

The perpetrators can be of any gender, sexual orientation, marital status, race or economic status. Sexual abusers begin abusing for a variety of reasons, but many have common characteristics including poor social skills, low self-esteem, feelings of inadequacy, a sense of worthlessness and vulnerability, or previously frustrating experiences with adult relationships. They see themselves as physically unattractive, have problems with potency, and with feelings of inadequacy, humiliation and loneliness (Terry, 2006).

Most child sexual abusers also tend to 'groom' their victims prior to committing acts of abuse. Grooming refers to the premeditated behaviour intended to manipulate potential victims into complying with the sexual abuse (McAlinden, 2012). Types of grooming behaviour include verbal and/or physical coercion, emotional manipulation, seduction,

games, and enticements. Child molesters tend to seek out mutually comforting relationships with children and want the child to accept and enjoy the relationship (Terry, 2006). Because of their poor social skills, many find comfort in relationships with children who are passive, dependent, psychologically less threatening than adults, and easy to manipulate. This also argues against the popular view that sexual abusers are not known to the child. Instead, the relationship between an offender and a future child victim seems to involve an emotional attachment that has been established over time (e.g Smallbone and Wortley, 2000).

Unlike all other forms of crime, the "*age crime curve for sexual offenders is markedly bimodal*" (Smallbone et al. 2013 p5). That is, it peaks in adolescence and early adulthood and then has a more marked peak for people aged in their mid to late 30s. Some international studies suggest that adolescents and young adults are responsible for up to 50% of all CSA offences (Finkelhor and Dziuba-Leatherman, 1994. Cited in Smallbone et al. 2013 p6).

The sexual abuse of children is investigated in a number of ways, within fiercely contested emphases and paradigms. What unites these views is the belief that sexual activity with children, which has been termed abusive, harms children. To prevent harm, one needs to prevent sexual abuse of children by adults. The thinking behind most theories of sexual offending has its roots in the development of treatment programmes aimed at reducing the chances of further offending by men who have already done so. Since the early 1990s, there has been some agreement that treatment programmes aimed at reducing reoffending do indeed work (e.g. Lösel and Schumucker, 2005). What has not been so readily agreed is the form that these treatment programmes should take. This has not been a straightforward endeavour. Ward et al. (2006) argued that while "*the history of work with offenders is not replete with success, the research base developed since the early 1990s, particularly the meta-analyses (e.g. Lösel, 1995), now strongly supports the position that effective work with offenders to prevent further offending is possible*". (p. xii)

It is generally agreed that programmes of treatment that 'work' are based on cognitive-behavioural theory. However, researchers have different understandings of what constitutes this approach as can clearly be seen by the different positions of Kendall

(2004) who considered cognition as a primary function in the understanding of offending, whilst Hollin (1990) saw offending as a form of social behaviour, shaped and maintained by the social environment in which the person lives their life.

There are a number of key principles when devising treatment and researchers argue that the most important are risk, needs and responsivity principles (e.g. Brown, 2005). That is, the best outcome in terms of reducing recidivism is obtained when treatment is targeted to those offenders who present the highest risk as it impacts those factors that are empirically related to recidivism, and the treatment is modified to the individual characteristics of offenders. (Smallbone et al. 2013)

However, significant caution should be taken when looking at the success or otherwise of treatment programmes. Most sex offender treatment programmes (SOTP) are delivered by specialist prison officers, supported by psychologists, within prisons. A recent review of the service found some surprising and worrying results with an ongoing analysis by treatment providers. The report argued that "*while Core SOTP in prisons is generally associated with little or no changes in reoffending, there were some statistically significant differences. In particular, there were small increases in the sexual and child image reoffending rates*". (Mews et al. 2017 p26)

The fact that most work has been invested in working and preventing reoffending with convicted offenders has reduced the usefulness of such work for social workers (Hanson and Mourton-Bourgon, 2005). However, a great deal of the work carried out by such practitioners is within families where there is an 'alleged' sexual offender and not someone who has been convicted or indeed someone who has been convicted but denies the offence. In any case, although there are programmes tailored for deniers (men who have been convicted of a crime, but who deny the offence), it is rare that social workers can influence the provision of treatment as this is normally decided on by the justice department and is normally delivered by probation officers.

More recent research into treatment argues that the most effective treatment programmes are those that have moved away from looking at relapse prevention to strengths-based methods which promote what Ward called 'good' or more accurately 'better' lives (e.g. Ward, 2002; Yates et al, 2010; Willis et al, 2015; Ward and Willis, 2016). The major difference in what has come to be called the 'Good Lives Model' (Ward, 2002) from more mainstream treatment programmes is that they see men who

have abused children not "*simply [as] bearers of risk, but fellow human beings with similar goals and aspirations to the rest of us.*" (Willis, 2018 p9)

Regarding so-called 'causation theories' of sexual abuse, they vary in terms of whether they are multi-factorial, single-factored, treatment theories or simply purely descriptive models (Ward, et al. 2006). There have been attempts to construct typologies for different offenders, that is types based on their offending, be it child abuse, rape, or others. However, because of the heterogeneous nature of sexual offenders, no classification system has universal validity and so although typologies can be a useful investigative, assessment or treatment tool, they must be considered with caution. Typologies are not mutually exclusive, as sex offenders do not always engage in a particular type of behaviour. Thus, the best way in which to understand typologies of sex offenders (if they should be used at all) is as a continuum rather than distinct, unique categories (Robertiello and Terry, 2007).

Recently, there has been a move by theorists to focus on global or unified explanations, with the added benefit this may bring in terms of measuring risk. For example, an attempt has been by Ward and Beech (2016) to provide an integrated framework to explain the onset, development and maintenance of sexual offending. According to the Integrated Theory of Sexual Offending (ITSO), sexual abuse occurs as a consequence of a number of interacting causal variables. They described how they "*sketched out a possible framework for integrating many of the factors identified in research and theory determinants of sexual offending.*" (p61)

Although the theory can be somewhat complicated and over-inclusive, it seems to offer the best way yet towards explaining how sexual abuse starts, escalates and is maintained. It also provides novel routes for further research and accommodates treatment guidelines.

3.8 How are sexual offenders managed?

The management of sexual offenders has a changing and complex history and has, in many ways, been directed by the result of enquiries after high profile cases of children

who have been murdered by known sexual offenders, as was the case of the tragic murder of Sarah Payne by Roy Whiting in July 2000.

This is an area of work where social workers have been at the margins, with much of the management being carried out by the police, prison and probation services. The current mode of management is based around the work of the Her Majesty's Prison and Probation Service, which is a joint venture between prison and probation staff. However, it is understood that the 'offender manager' (the professional responsible for overseeing the management of each offender from sentence, imprisonment and community license) will always be from probation staff.

Over the past few years, there has been a growing concern about the risk posed by sex offenders in the community. In response to this, different governments have introduced a range of legislative and other measures to aid the management and monitoring of sex offenders. For example, the Criminal Justice Act (1991) included 'provisions for preventative sentencing and supervision', and the Sex Offenders Act (1997) established arrangements for a Sex Offender Register designed '*to monitor and track sex offenders*' (Kemshall, 2008b p5). The latter requires offenders to notify the police of their name and address within a specific time period and applies to all those convicted of, or cautioned for, a Schedule 1 offence. Also, the Criminal Justice and Courts Services Act (2000) placed a statutory duty jointly on the police and the probation service to establish arrangements for assessing and managing the risks posed by all sex offenders and other dangerous offenders released into the community. This has been formalised by the development of Multi-Agency Public Protection Panels (MAPPPs) and the need for multi-agency co-operation for public protection.

The Criminal Justice and Courts Service Act (2000) also gave the court power to issue a 'Restraining Order' against an offender at the point of sentencing, if it was felt necessary to protect the public from serious harm, on his/her release. A Restraining Order is similar to a Sex Offender Order (SOO) in that it prohibits an offender from certain behaviours. SOOs were introduced under the Crime and Disorder Act 1998 and came into force on 1 December 1998. As stated in the Home Office Guidance (1998 p4), their aim is to "*provide an additional measure of protection to the public from sex offenders"*. They serve to prohibit an offender from certain types of behaviour that have previously been a precursor to offending and, in this way, are intended to help prevent

further serious offences from being committed. A SOO is a civil order that requires the civil standard of proof, and a breach constitutes a criminal offence, and attracts a maximum penalty of five years imprisonment.

In terms of social work, the important statutory guidance when working to protect children from sexual abuse has been issued through six editions of *Working Together to Safeguard Children* (1988), (1991), (1999), (2006), (2010), (2013), (2015) and (2018). According to Heasman (2008), the state "*has also perhaps played a part in creating and constructing the very definitions of risk used"* (p99). He explained that:

> Whilst the exhortation to work together (again and again and again) provides the familiar refrain and primary title to the four editions of statutory guidance in England and Wales, the changes in the full title and stated aims of the various editions are significant and perhaps indicative of a developing perspective and narrative of what constitutes risk for children and young people.

He argued that the (2006) edition of *Working Together to Safeguard Children* has not only added a great deal of detail to the guidance but that it has concluded the work started by New Labour with *Quality Protects documents?* (DoH, 1999) to *Every Child Matters* (DfES, 2003). *"Protection' has become 'safeguarding and promoting'; a focus on 'abuse' has become the broader concept of the 'welfare of children.'"* (p99)

The idea of risk assessment tools being seen as guides to individual cases has been found not only within social work but also within probation where practitioners routinely come into contact with convicted sex offenders. Probation officers have been instructed to formally use risk assessment scales to rate their clients and to use the scales to judge recidivism. However, the only thing that an actuarial measure can tell us with any certainty is that an individual is a member of a specific statistical grouping that has a statistical probability of certain types of behaviour. However, non-actuarial professional judgement is needed in order to assess whether that individual is likely to engage in such behaviour. Fitzgibbon (2007) pointed out that such judgement is gained by forming relationships with people and not by ticking risk boxes and obtaining a

score. For probation officers, this is a major problem given their workload and expertise and, as Fitzgibbon (2007) bluntly put it:

> In short, actuarial indicators of risk cannot reveal much about how an individual will get out of crime. The idea is that if clients have been accurately assessed, then the risk assessment techniques will help to get them onto the appropriate programmes that will deal most effectively with their particular sets of criminogenic needs and stop or reduce their offending. But if it is the case that no inference can be made from the actuarially established characteristics of the client regarding their actual behaviour, then the whole notion of criminogenic needs is in danger of spuriousness. The actuarial fallacy is a fatal flaw at the heart of transformative risk management strategies. (p5)

3.9 Child abuse and risk management

The assessment of children who have been physically abused, although difficult and complex, as shown by cases such as Victoria Climbié (DoH and HO, 2003) and Peter Connelly (Haringey LSGB, 2009), is perhaps seen by practitioners as less complicated than in sexual abuse cases, where the signs are often hidden or not present, and the abuse itself is shrouded in secrecy (Parton and Wattam, 1999; Lemaigre et al. 2017). Social work practice is much less ambiguous when dealing with clear-cut cases, such as when an abuser admits his guilt after a child has made a disclosure. It is much more difficult when there is no disclosure, but there are substantial grounds for suspecting abuse, or when the disclosure is denied, and there is no independent proof that would serve to convict the alleged offender, or indeed persuade Family Courts to grant orders to protect those children.

The assessment of the risk of convicted sex offenders is relatively well established and backed up by a considerable body of research (e.g. Kemshall, 2001, 2008a; Craig and Beech, 2009; Ward, 2014). In the main, it is the prison and probation services which are tasked with this work. The lead in this process is taken by the agency that has current responsibility. Thus, while the offender is in prison, it is the prison service, but as soon as he is out in the community and on some kind of order or licence, it is the probation service that takes the lead. In recent years, explicit and inclusive procedures have been

developed, usually as a result of a child death/abduction tragedy (See Thomas 2005; Kemshall 2008b; Kemshall and Wood, 2008; Vess, 2009).

The action taken by social workers in cases of sexual abuse will be discussed firstly by taking a broader look at what childhood is, how social workers act in general cases of abuse and then considering whether these ideas are both used or 'succeed' when working with sexual abuse. Success is a difficult concept in an area of work where much is disputed (not least the fact that the label abuse is a constructed and changing one e.g. Pilgrim, 2018). In terms of what is meant by 'succeed' within this study, it is where a child has been protected from sexual abuse by the actions of social workers. In this context, it will be important to discuss the parameters of the social work role and how this sits in an area which is acknowledged to be best worked within a multi-disciplinary setting, not only for practitioners and agencies but also for service users.

3.10 Childhood

The construction of childhood is an essential aspect in any study that seeks to look at how the assessment and management of child sexual abuse, which is itself a normative construction (Ashenden, 2004), has evolved. In doing this, I look at some of the more current thinking around childhood and examine how it might impinge on practice.

The assessment of child abuse is intimately bound with the changing way childhood itself has been constructed. There is evidence to show that the concept of childhood, although a changing one, has had a social and cultural significance for a considerable time. That is, children have been seen as different from adults in some important ways (Corby, 2019).

This wish to "*make sense of children*", as Jenks (2005) put it, is an important and ever-present one. He pointed out:

> Beginning from the initial Hellenic desire to seek out the origins of virtue in order to instil rhythm and harmony into the very souls of the young and extending up until our contemporary pragmatic concerns

> with the efficacy of specific and fashionable child-rearing practice, we have still not achieved any consensus over the issue of childhood. (p2)

The demarcation of childhood from adulthood and this difficulty in 'pinning down' childhood continues to the present day. For example, in the UK, a young man and woman can marry at age 16 but cannot vote until they are 18 and indeed there are some things that are prohibited until the age of 21 (e.g. adopting a child). These differences can also be country/culture specific, so the age of sexual consent has a wide country variation and has no relationship to any biological reproductive factors. The state of childhood has been highly contentious with very different ideas about the merits or otherwise of the state and some influential writers argue that childhood is a somewhat recent social product (Aries, 1962; de Mause, 1976). What seems to be fairly well agreed is that childhood has been far better established and studied since the early part of the 20th century and certainly since the 1960s.

Different writers have constructed childhood in different ways. Ariès (1962) argued that childhood as a separate state started around the 16th Century. He argued that until that time, children were seen to be the same as adults, but just smaller and this change of view coincided with the advent of schools. He claimed that, at this point, children started to be viewed as separate and as 'adults in training', but also as vulnerable, innocent and dependent. This view of children coincided with a change in status in terms of protection, with children also having to be afforded protection from adults who could, up to then, use and abuse them sexually.

According to Ashenden (2004 p23), this separation of childhood from adulthood has been "*important in providing the context for modern experiences of and concern with child sexual abuse*". She further argued that:

> the move to make family a private realm has meant that, since the seventeenth century, increasing appreciation of privacy and domesticity has meant the home has been regarded as a haven, spawning, for example, the culture of domestic womanhood and providing the site for and problematic of child sexual abuse. (p23)

An obvious problem with this construction of childhood is that this view essentially only applies to boys, as girls up until quite recently were excluded from education and

expected, from an early age, to have domestic responsibilities (Gittins, 1998). A further and more pertinent problem with the construction of childhood in this way is that it characterises children as innocent and passive. In terms of sexual abuse, sexually abused children are depicted as innocent victims with little or no ability to protect themselves (Parton and Wattam, 1999). The discourse is of children who have had their innocence 'stolen' or who have been 'betrayed' by adults. In this scenario, abusers are seen as all-powerful predators preying on vulnerable children. This helps create a situation where children are brought tighter into the family in order to protect them from these dangerous strangers. This is extremely problematic as all available research (e.g. Cawson, et al. 2000) argues that most sexual abuse is perpetrated within families and so bringing children out from the public gaze and into the privacy of the family may actually have the effect of depriving children of protection offered in terms of external inhibitors (Finkelhor, 1986).

A more recent view of childhood is that proposed by Nikiforidou (2017), who talks about the "cotton wool child". This has been the tendency of late to try to protect children from all and any risk that they may be faced with. This follows in the footsteps of the work of Furedi (2001), who talked about parents becoming paranoid about issues of safety, which have led to children not being allowed to be children and in terms of social work to practice in such a way that leaves little chance for children to be resilient and develop the capacity to cope with difficulties (Furedi, 2005).

Kitzinger (1997) argued forcefully and persuasively from a feminist perspective against constructing childhood as passive, weak and innocent. She maintained that by doing this, it not only denies children the ability to understand sexual matters, but it makes it more difficult to better equip them to protect themselves through sexual education, which is currently seen as of central importance in any protection plan (e.g. Kenny et al. 2008). It also makes it more difficult for children to fight back. It places the responsibility for protection on adults, or more accurately in her view, on women, who are seen as the natural carers of children. Quite apart from setting up women as responsible if children are abused, by bringing children closer into families it is also increasing their chances of abuse by abusive males inside the home, which the research identifies are the people most likely to sexually abuse children (NSPCC, 2018).

The notion that children have their innocence 'stolen' implies that it cannot be regained and makes abused children 'soiled' goods and maybe no longer worthy of further protection. Kitzinger (ibid) further argued that setting childhood as inhabited by 'innocent' individuals takes away from children any sense of individuality and ability to take responsibility.

This early idea of children being born innocent as proposed by Miller (1986; 1987) has had a profound effect on the way that CSA is viewed. Southgate (1992) argued that Miller proposed a number of points which are pertinent for this discussion:

- Each child needs among other things: care, protection, security, warmth, skin contact, touching, caressing and tenderness.
- These needs are seldom sufficiently fulfilled: in fact, they are often exploited by adults for their own needs (trauma of child abuse).
- Society takes the side of the adult and blames the child for what has been done to her.
- The victimization of the child has historically been denied, even today.
- This denial has made it possible to ignore the devastating effects of the victimization of the child for such a long time. (p228)

A somewhat different view of childhood is to construct it as a result of age. That is to define childhood as a stage demarcated by specific ages. This is precisely the effect of introducing mandatory school ages. Through time then, childhood has moved as the school age has moved (Ariès, 1960). This delineation of childhood brings with it some interesting exceptions and unintended consequences, which are particularly pertinent when looking at child sexual abuse. For example, one of the first legislative attempts to preclude the sexual abuse of children under the age of 16 was the introduction by the government of the day of the Criminal Law Amendment Act 1922. This Act made it illegal to have sexual contact with a girl under the age of 16. The Act had a challenging time before making it to the statute books and attempts were made to change it which reflected the confused view of childhood at the time. One amendment sought to exclude girls who were prostitutes under 16 years, thus showing the persistence of the belief, that children chose to be sexually immoral and having thus chosen should not be

protected. The debate also hinged on the definition of childhood. The politicians did not see 13 or 14-year-old working-class girls as children, but as adults (workers), and so their argument was as much about the meaning of childhood as about sex equality (Smart, 2000). One of the many unintended consequences of the changes in the law was the fact that children were brought into the legal system, which carried with it its own dangers of harm. These concerns gave rise to the Departmental Committee on Sexual Offences against Young Persons which reported in 1925. The Committee's recommendations included some very radical reforms, which remain contested to this day (HMSO, 1925), such as not requiring the child witness to face the accused. The Committee met some stiff opposition particularly from the legal profession (Smart, 2000).

As can be seen by the arguments above, childhood, its changing construction and its location within a chronological space, have had a strong effect in terms of the legal reaction to child sexual abuse. The law around sexual crimes is predicated on the view that childhood stops at age 16 and indeed that there is a qualitative difference between a child under the age of 13 and one over (e.g. Section 5 Sexual Offences Act, 2003).

The review of the literature now moves on to a consideration of the part played by emotion in respect of social workers and cases where sexual abuse is a feature.

3.11 Emotional work

In life, people are constantly faced with emotions and indeed make decisions and plan goals based on how certain experiences affect them. Working with individuals brings to the fore emotions which Lazarus and Lazarus (1994 p151) defined as "*personal life dramas*". Social work is about working with individuals and, as such, social workers are involved in emotional labour, which in turn involves feelings, and requires of people that they manage those feelings (Hochschild, 1983).

Lazarus and Lazarus (1994), in their definition of emotion looked at emotions from a purely psychological point of view, although they indicated that it is situated within a relationship which, for the purposes of social work practice, is when social workers come into contact with service users. Hochschild (2012), who carried out some

pioneering work with air flight attendants, coined the term ‘emotional work’. She defined it as: “*The management of feeling to create a publicly observable facial and bodily display; emotional labour is sold for a wage and therefore has exchange value. I use the synonymous terms emotion work or emotion management to refer to the same acts done in a private context where they have no use value”*. (p7)

According to Hochschild (2012), emotional labour is the amount of effort involved in work that entails face-to-face contact with the public, as in the case of social workers with service users. Although her research was carried out with flight attendants, it can be related to the face to face work of social workers. Importantly, she also said the person doing the emotional labour is required to produce an emotional state in another person, which in the case of social workers is their service users.

The issue of emotions having an impact on practice is not just consigned to social work, but, more generally, to workers who come into contact with people who break social and moral taboos. Hill (2010 p2) made the point that “*physicians, nurses, and other clinicians readily acknowledge being troubled by encounters with patients who trigger moral judgments*.”

This idea that emotion is important when making judgements has been around for some time and Munro (2019) argues strongly that the current managerial approach in child protection may culminate in workers being unable to understand what is going on in families where abuse may be present. In professions where emotions play a major part, and the formation of relationships with the users of the service is paramount, managerialism and the construction of rules and policies seem to thrive. Menzies Lyth (1988) argued that the response of nursing managers within a London teaching hospital to increasing rules and regulations to deal with the emotional difficulties associated with difficult nurse-patient relationships had created its own secondary anxieties and difficulties. Lees et al (2013) added to this and argued, citing the work of Munro (2010), that managerialist solutions to the anxiety and emotional load of child protection work are insufficient and indeed counterproductive.

Morrison (2007) argued strongly about the importance of emotion in the assessment process in social work. He explained that “*assessment practice should serve to reinforce, rather than reduce the importance of both intra and inter-personal skills*” (p255). He contended that the quality of the relationship between the worker and the

service user is crucial to any positive outcome and that this relationship is strongly dependent on the worker's emotional abilities and their ability to be empathic and non-judgemental. He also made the point that the worker's ability to both recall and deal with emotionally-laden interactions is impeded when professionals try to suppress emotion: "*Practitioners need to make sense of not only the meaning of emotions in others but, equally, the meaning for emotions in themselves, in order to make and interpret observations*". (p256)

Researchers have noted a climate of blame within social work, and this has had a strong effect on social work intervention (e.g. Parton, 1996; Parton, et al. 1997, Leigh, 2017). This has meant that practice has been guided by the necessity of defensive practice (Rogowski, 2012; Whittaker and Harvard, 2016). In effect then, the focus is not only on how to prevent sexual abuse but also on being able to show a clear audited line of decision making in cases where a tragedy might happen. In other words, the discourse is not about making the 'right' decision, but rather making a 'defensible' decision on the part of both practitioners and their agencies. As Lawrence (2004) pointed out: "*All institutions in society are subject to anxiety in the sense of having to justify their actions. Child protection workers (while working within an accepted, apparently objective framework) are one example of this, as they are involved in the making of individualistic and situated moral judgments.*" (p79)

Feelings and a worker's ability to experience and express them are a key attribute when trying to form working relationships with service users, and this has been noted by social work researchers (Munro, 2011; Studsrød, 2013; Ingram, 2015). Munro (2011) highlighted the centrality of the social work relationship and acknowledged the importance of workers being able to identify their own emotional responses and those of service users in achieving positive relationships.

Studsrød (2013) maintained that social workers have to express appropriate emotions in their day to day work and, as well as recognising the emotion of the service user, they have to curb emotions, which could be seen to be undesirable, as well as presenting emotions which would be expected. He said that this is achieved through:

> Surface acting, i.e. pretending to feel what is expected. Furthermore, emotional regulations could also be achieved by deep acting, which requires the social worker to draw upon his/her own personal reserves in order to bring forth the required facial or bodily display of emotions. Emotion work as part of the job implies the display of desired emotions, even in unpleasant situations. (p3)

This can be difficult, and Leeson (2011 p484) pointed out that this is particularly so when the "*feeling rules are at odds with personal values and beliefs*". She contended that this can lead to the social worker "*experiencing burnout (Kim & Stoner 2008), or they feel they have to distance themselves from the emotional impact of their work, thereby becoming blasé, remote or disengaged (Mann 2004)*".

More recently, Ingram (2015) argued that right from the start of training, social work students feel that it would be unprofessional to appear to be using or articulating their emotions in relation to their practice and they (the students) feel that they should always be looking for concrete evidence to back up their decisions.

Despite the fact that the significance of emotions has been underlined in terms of their importance for thorough practice, this sometimes comes at the price of significant personal cost (Aldridge, 1994; Studsrød, 2013). It is this cost which has also interested researchers of what is often called 'emotional intelligence' (EI). There is some disagreement regarding the definition of EI, with respect to both terminology and operationalisation. An early definition of EI was provided by Slovey and Mayer (1990 p189). "*We define it (emotional intelligence) as the subset of social intelligence that involves the ability to monitor one's own and others' feelings and emotions to discriminate among them and to use this information to guide one's thinking and actions*."

This definition was further refined to the more generally accepted one of:

> The capacity to reason about emotions, and of emotions to enhance thinking. It includes the abilities to accurately perceive emotions, to access and generate emotions so as to assist thought, to understand emotions and emotional knowledge, and to reflectively regulate emotions so as to promote emotional and intellectual growth. (Mayer et al. 2004 p197)

Such a definition has been used in this study. Emotional Intelligence is not just about being able to cope with arduous work but, also, according to Ingram (2012), it may have an impact on the way social workers practice at a more immediate level. He pointed out that when things go catastrophically wrong, as in the death of children such as Victoria Climbié or Peter Connolly (Laming, 2003; LB Haringey, 2008), the questions often asked are 'why didn't social workers visit more often? or 'why if they visited so often didn't they ask to see the child?' The answer could in part be provided by how EI works in that it could be as a result of unresolved emotional reactions. So, for example, it could be that fear stops workers visiting as often or, as in this study, the reaction to disgust leads practice down a specific path. Ingram (ibid) pointed out that unless there is a place or a language to explore those responses to discuss such feelings, then the outcomes can be quite serious. He further argued that this highlights the importance of Emotionally Intelligent supervision, which gives a platform for reflection and reflective practice and can lead to workers becoming unaware of the toll that this emotional labour takes.

When working with families where child sexual abuse is a feature, workers will necessarily come into contact with men who have either abused children or are at least suspected of having done so. The idea of emotions becomes an important aspect, in terms of the workers' attitudes and feelings about sex offending. Willis et al. (2010) contended that professionals working with sex offenders may hold negative attitudes, which in turn negatively affect their dealings with them. They found that if professionals had negative attitudes towards their clients, then it was likely that their style of work would be fraught, confrontational and generally punitive in nature, but that the more contact they had with sex offenders the less negative their attitudes would be and that this change would hold true, irrespective of whether their contact was in a professional or personal capacity.

It follows then that emotions experienced by the social workers carrying out assessments become vital in the work (Ferguson, 2005; Kirkman and Melrose, 2014; Dore, 2019). Ingram (2013) looked at emotions in relation to supervision and claimed that emotion "*has a significant impact on the content, direction and experience of practice*" (p6) and importantly that "*emotions are inextricably linked to social work*

decision making" (p17). This is crucially important as the decisions made can have life-changing effects on the families and children involved.

The literature makes the point that it is unfeasible for social work assessments, which involve making moral decisions, to ever be devoid of emotions and as Lupton (2013 p641) asked *"can a risk judgement ever be purely dispassionate, with no 'contaminating' emotions affecting it?*" Moral decision making is an important idea, which deserves some further unpacking.

3.12 Moral decisions

In child protection work, social workers will often be in a position where the decisions they make will have serious and long-lasting effects on the lives of adult and children. In cases where child sexual abuse is a feature, social workers will frequently have to decide in issues such as where the child should reside, who is able to protect her, and who can have contact. All of these issues have a moral component to them, so it seems important that this issue of moral decision making is now being examined in more detail. There are many definitions of moral decisions, but for the purposes of this research, moral decisions are those which are likely to be perceived by the decision makers as those situations where there is a moral dimension (Haidt, 2001; Chorus, 2015).

Decisions should be made after evaluating as much of the available information as possible and, indeed the more information that is gained the better the decision will be. This view is particularly held in the field of Artificial Intelligence (Gigerenzer, 1991; Goodie et al. 1999) However, research in the field of humans making decisions reveals that this rational model of decision making does not hold true and that indeed people often make decisions on very little evidence even when a great deal of other information is available. This failure to use all the available information when making decisions is not just when faced with inconsequential decisions, but also happens with major life changing decisions (Huberman et al. 1998).

It is not surprising then that some writers argue that in a world where more and more information is available and where there is a limit of time, cognitive tools (heuristics) that make decision making both more rational and yet more realistic are the answer (Simon, 1990; Todd, 2007). Simon, a Nobel Prize winner for economics in 1978, was

one of the first researchers to formulate a formal model of heuristics, which he called 'satisficing'. His model set out to answer how people make decisions in conditions of 'bounded rationality', which is the understanding that rationality is limited when individuals make decisions, by the controllability of the decision to be made, the cognitive limitations of the actors involved, and the time available to make the decision. Decision-makers, in these instances, seek a satisfactory solution rather than an ideal one. His work was later expanded by Tversky and Kahneman (1974) who linked Heuristics to Biases. The work of these early researchers was anchored in the world of decision making in economics. The more decisive move, of interest to this research, is the work of Gigerenzer (e.g.1991; 1993; 1996) who came from a psychological background.

In child protection social work, there has been the view, as with almost all large organizations, that the best way to arrive at decisions is to make use of all the available information. However, what researchers have argued is that not all the information will be used and that this should be a matter of professional choice (Carson et al. 2015). Indeed Whittaker (2018 p1981) found that "*experienced practitioners were engaging in skilful sense making and professional judgement that was more complex than the rather simplistic accounts prescribed by formal models of decision making"*. He also made the important point that, "*improving decision making requires organisations to create conditions for supporting practitioner expertise rather than merely minimising errors"*.

Others have reasoned that although heuristics have a role to play, the decisions arrived at should not only consider the cognitive processes, but also the psychosocial environment (Taylor, 2017). Taylor (ibid) has called this psycho-social rationality and argued that "*such heuristic models would take account of the psycho-social environment in which the decision is being made as well as of the cognitive processes of the decision maker.*" (p1043)

It is understandable that the study and use of heuristics would be considered to be useful in the area of social work. In terms of working with sex offenders, there has long been a dispute that the only valid way to assess the risk (of reoffending) posed by a sex offender is to use actuarial tools based on hard statistical data and the argument has been not on whether to use such tools, but about which tools are the most accurate (e.g.

Hanson and Thornton, 2000). What these tools claim to offer is an aid to decision making, which is clear of any bias and is 'blind' to moral contagion which may bias the decision or more accurately the assessment.

When looking at these heuristic aids, be they the more autonomous ones used by people in situations or the more 'scientific' ones used in actuarial risk assessments, what they all seem to miss is that social workers work operate in a world of emotions and that these emotions have an effect on their judgements.

Haidt (2001) contended that decisions are heavily influenced by unconscious moral emotions and intuitions. He used an example of incest between a brother and sister to show that people see this as wrong at an innate and unconscious level and that they use post 'rational' explanations upon which to base their feelings. This idea can be taken further to explain how moral judgements influence decisions in situations where feelings about a person take centre stage. Haidt (2001) used the following definition "*Moral judgments are therefore defined as evaluations (good vs. bad) of the actions or character of a person that are made with respect to a set of virtues held to be obligatory by a culture or subculture*." (p819)

If one follows this argument, it becomes apparent that decisions cannot be divorced from emotions. There is a further concern that permeates the concept of moral decisions, and that is the issue of blame and the general morality of social work (Macdonald, 1990). Social workers often, if not always, take the greatest share of blame when things go wrong and in particular when children are killed by their carers (Stephenson, 1979; Reader et al. 1993). Inevitably, the press apportions blame on specific practitioners, which can have tragic consequences for the social workers identified. This has led to a culture of managerialism which tries to tightly regulate and control the practice of social workers. This is particularly important in terms of judgements and decisions as Trevithick (2014) pointed out: "*Rigid forms of managerialism tend to ignore the degree to which emotions govern our lives as human beings, and also the extent to which emotions shape and steer professional decision making and action*." (p.288)

She also maintained that a key aspect of social work is relationships, and these can be compromised by unconscious judgements made as a result of strong emotions such as disgust. In terms of thinking and acting, Howe (2008) gave a clear view when he said:

'*What we see, what we think, and how we behave are deeply influenced by that emotion'* (p31).

In addition, because a great deal of the work of social workers is carried out at an unconscious level and therefore not readily available, the use of heuristics or rules of thumb as described above can lead to mistakes and in turn lead to blame. A number of writers have pointed out that this blame culture (Macdonald, 1990) has been ushered in by the introduction of strict managerialism, which in turn has led to the dehumanisation of social work practice and for the fruitless search of the elimination of risk (Munro, 2011). This has made social workers ignore the effects on practice of emotions as described above, but which includes emotions such as disgust, to which I now turn.

3.13 Disgust

Moral judgment and the disapproval of others is a universal and, some argue, essential feature of human social life (Rozin et al. 1999). When working with people who have sexually harmed children, it would be hard to dispute that the general population would not have some form of censure for that type of behaviour. Most writers argue that emotions and morality are strongly linked and that emotions play an essential part in both moral judgement and decision making (Hutchinson and Gross, 2011).

Disgust was recognised as a core emotion, as early as 1872, when Darwin discussed it in his book The Expression of the Emotions in Man and Animals (Darwin, 1872/1965). He defined disgust as "*Something revolting, primarily in relation to the sense of taste, as actually perceived or vividly imagined; and secondarily to anything which causes a similar feeling, through the sense of smell, touch and even of eyesight*." (p253)

He claimed that disgust provided a means by which human beings could convey a response to something that was potentially harmful and usually offensive in nature, and he contended that this provided an evolutionary advantage. In addition, he also said that disgust was associated with specific facial expressions.

Almost 70 years later, Andras Angyal (1941), an important early researcher into disgust, postulated that disgust is revulsion at the prospect of oral absorption of an offensive object. He identified body waste products as a focus of disgust and related the strength

of disgust to the degree of intimacy of contact. Angyal's definition was taken up by Rozin and Fallon (1987) who have pioneered much of the contemporary research into disgust, and they defined it as "*Revulsion at the prospect of (oral) incorporation of an offensive object. The offensive objects are contaminants; that is, if they even briefly contact an acceptable food, they tend to render that food unacceptable*." (p23)

A common thread in the literature is to treat disgust as an emotion, which had some evolution value as it prevented humans from ingesting material which could be harmful. They also held that associated with it was some specific facial expressions, which were common to all humans. A more medical definition of disgust as an emotion is offered by Abitan and Krauth-Gruber (2015 p472) who defined disgust as:

> A basic emotion, characterized by parasympathetic autonomic activation causing a lowered heart rate (Ekman et al., 1983; Levenson et al. 1990; Stark et al. 2005; Rozin et al. 2008), a feeling of nausea and a specific facial expression including a nose wrinkle and a retraction of the upper lip (Rozin et al. 1994; Rozin et al. 2008).

In addition to the above, Rozin et al. (1993) also added that there are specific actions associated with disgust, namely, stopping, dropping the object of disgust, shuddering or saying "yuk!" They also claimed that these actions were universal.

A slightly different explanation was offered by Curtis and Biran (2001), who contended that "*the emotion of disgust can motivate the avoidance or rejection of potential sources of infection*" (p23), They suggested that, unlike Rozin (1986) who felt that disgust evolved to prevent the risk of infection by oral means, disgust is an adaptation, which biases all behaviour away from risks of infectious disease in general.

After further research, Curtis et al. (2004) said that disgust is an emotion which has developed to prevent the acquisition of infectious diseases. Curtis later developed her theories to produce what she called the parasite theory of disgust (PAT) suggesting the "*reason we cannot resist wanting to recoil when we meet the nasty, the foul, and the stinky is ancient and instinctual.*" (2013 p6). The common aspect to all these theories is that they are universal, instinctual and have provided a strong evolutionary advantage to the development of the human species. In addition, another essential commonality of all the different explanations for disgust is the fact that it is not just related to physical

issues, but also to what Rozin et al. (1993 p759) called "*moral violations.*" What became clear was that these same emotional markers were associated with situations, which were clearly not noxious or toxic to life. These referred to things like dishonesty, pedophilia or more general wrongdoing (eg Hutcherson and Gross, 2011).

Abitan and Krauth-Gruber (2015) proposed that there are two sides to disgust, namely physical and moral, which elicit quite different reactions. They found that physical disgust produces an almost instantaneous response of avoidance behaviour, which would tally with the explanations provided above. However, with moral disgust, which they claim relates primarily to the observation of others as the victims of violence, betrayal and injustice, the response involves judgements and reflections about the situation, suggesting a more in-depth cognitive activity. More importantly for the current study, they pointed out that the "*two types of disgust are sufficiently distinct to anticipate that they might differentially affect individuals' social and moral judgments*." (p470)

Further to this, some researchers, such as Russell and Giner-Sorolla (2013 p328), have further differentiated moral disgust into "*bodily moral disgust (when moral codes to the body are violated) and nonbodily moral disgust (when other moral codes are violated*". However, others have maintained that moral disgust is not disgust but anger. Nabi (2002) proposed that:

> The lay understanding of the word disgust corresponds as closely, if not more so, to the theoretical meaning of anger as to that of disgust. Events recalled based on the trigger words disgust and disgusted tended to reflect primarily anger-related themes (e.g., demeaning offences) rather than classic disgust-related themes (e.g. noxious elements) whereas the colloquial term 'grossed out' evoked the types of scenarios we expect to be associated with the theoretical meaning of disgust. (p700)

Both anger and disgust have played an important role in mediating society's norms and judgement (e.g. Prinz, 2007). For the purposes of this research, I have concentrated on moral anger. That is, anger that results from a moral wrong (i.e. sexually abusing a

child) as different to anger that can come about without the presence of any 'moral' injustice (i.e. anger at a political party).

Nonetheless, Rozin et al (2008) pointed out that there is sufficient evidence, including neuropsychological, which increasingly links the function of the anterior insula part of the brain with 'Somatic marking' as proposed by Damasio (2008), to suggest quite strongly that "*cases of apparent moral disgust are really disgust; they are not just linguistic errors made by English speakers.*" (p762). More importantly for the current research is the assertion that one key feature of bodily moral disgust is that it is categorical, as Russell and Giner-Sorolla (2013) point out, "*a person who committed a disgusting act is tainted in the eyes of others, who do not consider consequences, excuses, or justification for the act. The act is just disgusting and by extension the person as well."* (p339). Russell and Giner-Sorolla's (2013) research has significant implications for the current study in that they stated that disgust "*has the ability to prejudice moral and legal judgements inappropriately, while being unresponsive to the kind of considerations that would make it appropriate.*" (p347)

In addition, some writers have firmly maintained that the most important function of moral disgust is to identify and "mark" those individuals who transgress and then avoid them to avoid the chances of being harmed (Hutcherson and Gross, 2011). As Curtis (2013 pxii) pointed out: "*Humans have found a novel use for disgust: employing it to punish social parasites-shunning and excluding the thief, the abuser, and the cheat from society."* This danger of being in the presence of people who elicit disgust is not new and seems to be associated with Hutcherson and Gross's (ibid) outline of 'exposure to harm' and links closely to the concept of contagion as first laid out by Douglas. Mary Douglas, in her seminal work 'Purity and Danger' (1966) strongly argued that, in all societies, purity and danger are not just states, but also have a symbolic load. Douglas claimed that there are strong beliefs that transgressions from purity carry dangers and an idea of contagion: "*Certain moral values, are upheld and certain social rules defined by beliefs in dangerous contagion, as when the glance or touch of an adulterer is held to bring illness to his neighbours or his children.*" (p3)

This was further laid out by the early work of Rozin et al (1994) who looked at the effects of AIDS on people and their reaction to it. This led to their conclusion that "*indirect contact with people who have committed moral offences (such as murders) is*

highly aversive, to about the same extent as similar contact with someone with a serious contagious illness." (Rozin et al. 2008 p763). This concept of contagion is critical in a study which aims to look at the feelings of social workers faced with working with men who have transgressed moral rules and who may be 'contagious'. This may also lead to the belief that:

> Children have come to be associated with purity and their abusers with danger and pollution: children have come to have an exceptional value which continually seems under threat from a series of dangers, triggered by the fears and insecurities characteristic of the age of anxiety. (Pratt, 2005 p266)

Not only is the fact that social workers may perceive perpetrators of sexual abuse as carrying contaminants, but that they themselves may be viewed as having been affected by such proximity. This is not a big leap if using Curtis's (2013) idea of contamination. Curtis (ibid) claimed that what she calls 'moral disgust' is an extension of people's needs to avoid people who pose a parasite risk in that it helps us to avoid people who are behaving immorally. Interestingly, she extends her explanation to contain an aspect of contamination when she posits that "*because disgust focuses on contamination, it can be employed to label others as contaminated, making them morally contagious and, like the plague, to be avoided*" (p90). By extension, it can be suggested that this explanation would also extend to avoiding people who are routinely exposed to contaminated people, thereby becoming contaminated themselves.

Indeed, the concept being 'contaminated' by people who work or come into contact with people who commit sexual crimes, has been used to great effect by popular writers. So, for example, when John Harvey writes in a short story about a policeman's wife's feelings about her husband, he speaks for a number of people:

> And yet his wife hated it, hated it for the people it brought him into contact with day after day- rapists, child abusers- the scum of the earth in her eyes, the lowest of the low. She hated it for the way it forced him to confront over and over what these people had done, what people were capable of, as if she feared the enormities of their crimes might somehow be contaminating him. Creeping

> into his dreams. Coming back with him into their home, like smoke caught in his hair or clinging to the fibres of his clothes. Contaminating them all. (2011 p3)

This idea of being contaminated by working with men who sexually abuse children and thereby contravene society's norms may be seen in Douglas's terms as disgusting (Douglas, 1966), and it is advanced by the work of McMurry and Ward (2014) who propose the idea of dirty work and dirty workers:

> Yet, fear of contamination (literal, symbolic, moral) on the part of those who classify 'dirt' means that they are rarely willing to come into contact with such matter themselves – to deal with it – thereby creating a need for a third party or agent (Hughes, 1962) in the form of the dirty worker. (p1126)

McMurry and Ward (2014) also used the concept of emotional dirt to explain the often-heard response from people outside what are constituted as dirty professions such as social work of, 'I couldn't do that' or 'why would you want to do that?'. They argue, based on their research with Samaritans who deal with tainted service users, that the only people who truly understand them are other Samaritans.

These 'dirty workers' who in my study are the social workers who come into contact with these adults are tainted by the work they do. McMurry and Ward (ibid) further contended: "*When applied to dirty work, taint speaks to the attribution of an undesired quality or association that reduces the prestige or esteem of an occupation.*" (p1127)

3.14 Dirty work

Hughes (1951) first proposed the concept of 'dirty work' to denote tasks and more importantly occupations that may be seen or felt to be disgusting or demeaning. Initially, he said that "*it may be simply physically disgusting. It may be a symbol of degradation, something that wounds one's dignity. Finally, it may be dirty work in that it in some way goes counter to the more heroic of our moral conceptions.*" (p319)

In later works, he described it as tasks that are simply physically, socially or morally tainted. The important aspect in respect of this research is that Hughes' work ascribes dirt to work that is not just physically dirty, but also to work that impinges along a moral continuum. The implication in his definition and on later work, such as that of

Ashforth and Kreiner (1999), is that workers become tainted by the work they do, and it is this aspect that is certainly the case with social workers who work with people seen as disgusting such as child sex offenders; they themselves become dirty by dint of coming into contact. As Drew et al. (2007 p4) argued: "*Taint does not include actual job task descriptions, but instead depends on the disgust that people have for the jobs: 'dirtiness' is, therefore, a social construction rather than an objective work feature*."

Bosman et al. (2016 p54) pointed out that "*workers who perform dirty work tend to become stigmatised, as society projects the negative characteristics associated with their occupation on them, depicting them as 'dirty workers' (Ashforth & Kreiner, 1999; Hughes, 1951).*" Subsequent research argues that one of the consequences of doing 'dirty work' and its ability to 'taint' the workers, has meant that the people involved develop techniques to counter the effects of the stigma that dirty work causes. This causes workers to adopt 'defence mechanisms' with the aim of changing or at least moderating the meaning of dirt and consequently the meaning of dirtiness. It also leads to the formation of strong and supportive work communities (Ashford and Kreiner, 1999; Drew et al. 2007).

Hughes (1958) devised a typology to describe dirty workers. He said it should consist "*of work responsibilities perceived as physically, socially or morally tainted*" (Hughes 1958 p122). This idea of work being tainted not just by physical means has prompted a great deal of interest by looking at professions or work, which are not at first sight 'dirty' in the formal sense, as for example butchers and road sweepers. Research has moved on and now looks at less obvious work such as nursing (Bolton, 2005), police work (Dick, 2005) and undertaking (Ashforth et al. 2007).

Child protection work and specifically working with sex offenders can be looked at, using Hughes' typology, as both socially and morally dirty. A brief reflection on work with sex offenders would include a socially dirty component in that they have to work and be professional with morally stigmatised male adults, namely child sex offenders and morally dirty in that the social work profession is often viewed by external agencies particularly, the press, and the general public as tainted by their association with stigmatised 'others' (Jones, 2019). Hughes argued that society allocates its 'dirty work'

to some professions while at the same time stigmatising the tasks performed. As Löfstrand et al. (2015 p3) pointed out: "*Members of a tainted occupation thus come to personify the dirty work that they carry out.*"

As is the case with other low-status workers, social workers rely on the public at large and the media's view of them when forming their (occupational) identity (Bosmans et al. 2016), which may, in turn, affect their sense of self-worth. Ashforth and Kreiner (1999 p418) argued that workers depicted by people as dirty '*tend to have relatively high occupational esteem*' and that while the dirty work stigma undermines the occupational status, it '*simultaneously facilitates the development of strong occupational cultures.*' (ibid p420)

In their work with private security officers, which they classified as dirty workers, Löfstrand et al. (2015 p3) argued that:

> The culture of private security officers is constituted by a shared set of norms and assumptions that boost the occupational self-esteem by infusing work with a sense of value. It is a collective resource to be drawn upon, providing answers to the question of why the occupation matters, and thereby justifying the work and its purposes. Through the occupational culture, security work comes to be positively valued despite its wider societal reputation.

However, a growing body of research points to the fact that workers involved in 'dirty work' deal with the possible stigma attached to their work by reconstructing what they do into something valuable (Simpson et al. 2012). In a study of care workers, Twigg (2000 p400) argued that:

> In describing their work, they tended to play down the aspect of bodywork and to emphasise 'care' instead. Though it is the body element that marks personal care off from mere domestic cleaning…they emphasise the emotional and interpersonal aspects, and the social skills required to negotiate and maintain these.

Social work, although seen as dirty work, is different to other work, because social workers do not come into physical contact with 'dirt' but come into contact with individuals who are themselves stigmatised (sex offenders) and, as Ashforth and Kreiner (2014 p83) argued: "*Just as individuals have been found to bask in the reflected*

glory of others, so too may they be tainted by the reflected deficiencies of others." This tainting may be difficult to deal with as there is the perception that it "*stigmatizes those who perform the work (Hughes 1962)*" (Kreiner et al. 2006 p621). This is an important concept in that shows how it is that social workers can be seen as both needed but also in some way tainted and therefore not 'welcomed' into the company of those who do not come into contact with people who are stigmatised and kept away from society.

3.15 Stigma

As discussed above, an intimately allied concept when talking about dirty work and dirty workers is that of contagion and the mechanism by which this operates. When people talk about contagion, they often also talk about stigma and, by association, stigmatised populations. In this study there are two different populations, namely child sex offenders who suffer a great deal of stigma and the professionals that work with them. It is useful to unpack those terms further before considering how they interact and pertain to this study.

Goffman (1963) was the first to discuss the idea of stigma, which he defined as a social attribute that is discrediting for an individual or group. He argued that stigma carries negative attributes, both on a personal level for the stigmatised person and for the stigmatised group as a whole. The negative effects of stigma have long been associated with mental health patients (e.g. Corrigan, 2004); however, sex offenders are also a highly stigmatised group (Lancombe, 2008). Goffman also talked about the effect of stigma on others who may be closely associated with the stigmatised group, either in a professional role (Philips et al. 2011) or a family role (Corrigan and Miller, 2004). He called this Courtesy Stigma, also referred to as 'stigma by association', which involves public disapproval evoked because of associating with a stigmatised individual or group.

Goffman argued that the previously non-stigmatised person is now "*obliged to share some of the discredit of the stigmatized*" (Goffman, 1963 p30). It was not that long ago that proponents of the discredited Eugenics movement argued that the blame for people having a disability or developing a moral shortcoming, could be attributed to either 'bad genes' or bad parenting (McLaren, 1990). Although the narrative of poor genes or poor

parenting cannot be attributed to professionals working with stigmatised groups, the idea of contagion can, so that professionals are contaminated by ‘corrupted/ contaminated’ individuals. This concept of stigmatisation by association may also explain the common response by people outside the social work profession, who see workers as somehow odd for wanting to work with sex offenders. Kulik et al (2008) discussed that this may be tied to the idea of being complicit by association or more colloquially ‘being known by the company we keep’. Hackett et al. (2015) found in their study that:

> ‘Sex offender stigma’ is also contagious. In our study, in addition to the young person who had committed the sexual abuse, parents and siblings suffered a number of collateral consequences. In this sense, the impact of a young person’s abuse was indeed found to be more akin to the shotgun than a rifle shot, with the impact likely spreading in unpredictable ways across systems. It is also possible to hypothesise that the damage also extends to the communities in which the stigmatisation develops, particularly in instances where misinformation undermines the community’s sense of safety and security. (p251)

The idea of stigma not being confined to people but also to communities is an interesting one, which may explain why some localities ‘gain’ an unfavourable reputation which is difficult to shake. Hackett et al (ibid) made the point that the damage could have long lasting effects years after the time of the original incident.

In this chapter, I have examined the literature pertaining to child abuse with a particular focus on child sexual abuse and risk management. The chapter has included a discussion of how social work as a profession is viewed and the effect this may have on social work practitioners. The concept of childhood was discussed and embedded within a social work context. A central aspect of the chapter was a discussion on disgust and its meaning, coupled with the concepts of theories of emotional work, dirty work and dirty workers. The concepts of stigma, courtesy stigma and contagion were noted as important in this area of study. The next chapter focuses on the study methodology.

Chapter Four: The Methodology

My research question is "**What do Social Workers experience when working with families where sexual abuse is the primary factor?"** In this chapter, I set out my methodological decision making to address the research area of interest. The sexual abuse of children by adult males has been a professional interest of mine for some time. In association with this interest, I have wanted to examine how front-line social workers approach their work in cases where strong emotions play a crucial part and where I have seen experienced workers being overwhelmed by the complexity of the work (Morrison, 1990; Parton, 2006).

Having adopted this research question, I then had to think about the most effective way to answer it. McLaughlin (2007) argued that "*a social work researcher will adopt a particular stance in relation to the world, to the methods they will use and as to how service users and other research respondents will be treated in the research process*" (p17). As one who still aligns himself with this profession, I needed to be mindful of this and reflect on how my values could impinge on the conduct of my research and, if at all possible, find ways of ameliorating this or at the very least acknowledge it in the analysis of the data collected. I continue now to consider ontological and epistemological perspectives.

4.1 Ontology and epistemology

I started this process by reflecting on whether I was indeed looking for a definitive answer to my research question. This of course implies that there is something approaching an answer 'out there'. This quest for answers has been traditionally divided into two separate paradigms of ways of knowing, namely positivism and interpretivism. Very often, these have been seen as separate notions that have competing views of the world, research and social work practice (Sheldon, 1978; 2001; Webb, 2001).

Ontology refers to the study of reality. This idea of what is reality is central to a question of whether to use quantitative or qualitative research methods. If one believes

that reality is fixed and observable, then the task is to devise the right tools to find this 'truth', and a scientific approach might be best. However, if one's view of the world or reality is fluid then the contention would be that reality is subjective or constructed, in which case a qualitative approach might be best.

Allied to this idea of ontology is epistemology, which refers to how one proceeds to gain knowledge and the extent to which knowledge related to any given topic or entity can be acquired. In short, how does one know what one knows? The methodology that I have adopted has been informed by my ontological position, which shaped my epistemological position and in turn my methodology. I am of the view that to a large extent, social reality is fluid and constructed. That is, I do not believe there is an ultimate truth out there, which is waiting to be found. I firmly believe that there are a number of 'truths' that will be uncovered when I ask social workers how they work with families when there is a risk of sexual abuse. Am I asking for social workers to 'reveal' to me what they do or am I asking them to explore how they construct what they do?

I subscribe to a view that when studying human action, the most effective way of doing this is by the use of qualitative methods which can explore the views of the actors (social workers) in relation to the social world they inhabit.

4.2 The positivist position

In terms of definitions, Cruz (2000 p11) outlined a useful definition of how knowledge is seen by positivists:

> Traditional research which is understood as positivism (Bryman, 1988; Blaikie, 1993; Stanley and Wise, 1993) sees knowledge as an outcome, an 'objective' truth that can be achieved if the processes of enquiry can be appropriately managed, that is, by minimising 'subjectivity' (Riessman, 1994), also known as 'researcher bias'.

In this approach, the pursuit of knowledge is achieved through the process of induction, which leads to experimentation, verification, explanation and finally prediction (Sidell, 1993; McLaughlin, 2007). The positivist view is that there is a reality out there to be studied, captured and understood. This view has been influential in all branches of

natural sciences and has been utilised in psychology for researching sexual offending (Ward et al. 2006).

Denzin and Lincoln (2000) suggested that all researchers are philosophers in that they are guided by abstract principles, combining beliefs about ontology, epistemology and methodology. Dunne et al (2005) argued that "*ontology, epistemology and human nature (ones understanding of the social) are very much within methodology*" (p163). What they mean by this is that one cannot separate issues of understanding from the methodology one uses to understand those same issues.

More nuanced approaches to positivism have developed such as Critical Realism, which contends that the core purpose of scientific research is:

> To disclose the mechanisms which generate the phenomena we want to understand. This purpose is immanent to the ontological stratification of the world into a real domain which is composed of mechanisms, events and experiences, and the actual world of events and experiences, and an empirical world which consists of experiences alone. (Ward, 2001 p2)

In other words, the world is divided into two domains, one which is 'real' in a physical sense, and the other which is made up of more insubstantial aspects such as thoughts and experiences. Peacock (2000) has a pithier explanation, when he argued that "*the critical realist position consists in a transcendental deduction of a social ontology according to which reality exists independently of theorists' conceptions about it."* (p3)

4.3 The interpretivist position

Generally, this starts from a stance that one cannot study humans in the same way one can study inert materials, as in the natural sciences. This approach emphasises the importance of interpretation and understanding as the only legitimate way of gaining knowledge and is more concerned with understanding the meaning of social phenomena and focuses on links among a larger number of attributes across relatively few cases (Hugman, 2003). Interpretive researchers would hold the view that there is no reality 'out there' but merely something created by the different experiences of people (Sidell, 1993). However, it should be noted that some in the natural sciences are beginning to

agree with this point of view and certainly some physicists now accept that one can influence an experiment merely by observing it (Preskill, 2013). Indeed, this goes to the heart of some post modernists writers who argue that you cannot understand anything from a non-subjective perspective (e.g. Butler, 1965).

It is not just a matter of belief or philosophical stance that is important when conducting research and deciding on which methodology to use. One has to think about the best way of approaching an area of study. Arguments as to which approach is 'best' are often "*…ideological and neither quantitative nor qualitative methods should be viewed as superior*." (Saks and Allsop, 2007 p19)

In terms of what approach is taken, it is important that the researcher lays out his/her own thinking and reasoning for taking a specific methodological path and be open to the fact that their specific findings will be influenced by that choice. Although experimental design along positivist lines is in some cases a valid method when carrying out research with human beings (Price and Hanson, 2007), I did not think that my research question could be answered by using this methodology. In other words, I come from an interpretivist perspective and therefore my epistemology is concerned with gathering qualitative data. My reasoning for this choice was based on a number of factors. My study looks at the practice of social workers who have been involved in cases where there is a risk of sexual abuse to children by an adult in their home. I wanted to explore with workers what they feel when confronted with a family where one of the main carers is believed to pose a sexual risk to children.

In my study, I am trying to explore what *one* set of social workers is feeling at *one* point in time. I am not seeking to provide a testable and repeatable theory of how social workers feel when tasked to work with cases of child sexual abuse, but I am trying to explore the particular reality that is inhabited by the specific social workers that I interview and in turn gain an insight into the complexity of this process (Gilgun, 2013). My study is not so much concerned with what social workers do, but more with what social workers think and feel about their actions. This in turn argues for the constructive nature of the world and the importance of using a research method that can study this.

4.4 My research

I started this research by firstly wanting to drill down into the actuality of social workers working in this situation. I was looking at unpacking what happened to them in terms of how they felt. This quickly turned into not so much exploring the mechanics of practice, but much more about understanding the feelings of the social workers involved. I suspected that by doing this, I would encounter areas that impacted on their work.

In exploring the process of what social workers actually do in practice, I was interested in the feelings this evoked in them at the time and also in the constructed meaning that social workers give to terms such as 'sexual abuse'. My question contains, as a subtext, a number of contested words such as sexual abuse, and childhood. All of these words will be understood differently by different workers. Therefore, it is important that I used a research approach which acknowledges these different understandings. Having established that I am an interpretivist researcher and that I want to explore rather than test, then it follows that I would be interested in using a qualitative approach.

Qualitative research has a number of different branches. It is not a single set of theoretical principles, a single research strategy or a single method (Silverman, 2013). These include, amongst others, case studies, grounded theory, and phenomenology. All of these approaches are valid depending on what it is that the researcher is trying to achieve.

Early on in my thinking, I considered a case study approach. Robson's (1993) definition of case study is a useful starting point. He argued that a case study is "*a strategy for doing research, which involves an empirical investigation of a particular contemporary phenomenon within its real-life context using multiple sources of evidence*" (p146)

Case studies can help to give an understanding as to why people do and see things in a certain way and can offer an explanation of what is happening. They can also be used in an evaluative way to focus on whether something has worked or not. There are a number of situations where the use of a case study approach is useful, ranging from studying individuals, with the researcher looking at just one example or case, to studies of communities where the number of cases would be much higher. They can also be

used to study people's roles, organizations or simply events (e.g. Robson, 2002; Hamilton and Corbett-Whittier, 2013; Shdaimah et. al., 2013).

Case study research usually requires the researcher to go where the phenomenon is and look at all aspects of it. The researcher brings into account all the contextual factors, and the fact that participants are operating in a wider world, with all its associated issues. Researchers can use a variety of sources of data including observation, interviews and documents, ranging from case notes to government or agency records. If a researcher is going into an organization (such as an area social work office), they would typically talk to people (conduct interviews) observe them (by participant or other forms of observation) and collect the documents related to their activities. A feature of case studies is that in terms of their conceptual framework, theory and previous research are important; therefore, a literature review is a key aspect of the study. Despite the merits, I did not think that a case study approach would adequately answer the question of feelings within a phenomenon and in turn address the lived experience of social workers working with families where sexual abuse was a feature.

Another approach I considered was that of grounded theory. This was developed by Glaser and Strauss (1967) as a reaction to the heavy reliance on quantitative research methods and the general view at the time that qualitative approaches were not rigorous enough and did not offer much to the development of social science research. They developed a strategy where theory was built and modified from the data collected. At this early stage of grounded theory research, it was considered important that the researcher should approach the topic without any preconceived conceptual framework and that the framework was formed entirely from the data. Hence initially a prior literature review was eschewed, though in reality the avoidance of preconceptions is almost impossible. The original writings of Glaser and Strauss were developed further by themselves (Glaser, 1978; Strauss and Corbin, 1998) and have been taken on further by other researchers, notably Charmaz (2000), who coined the term 'Constructivist Grounded Theory'. She argued for a number of refinements to the quite strict positivist approach taken by Glaser and Strauss.

> I chose the term 'constructivist' to acknowledge subjectivity and the researcher's involvement in the construction and interpretation of data and to signal the differences between my approach and conventional social constructionism of the

> 1980s and early 1990s…For me, subjectivity is inseparable from social existence". (Charmaz, 2014 p 14)

A recurring problem for grounded theory has been the literature review. As discussed above, Glaser and Strauss (1967) argued about the absolute necessity of starting the research without carrying out a literature review, thus coming to the research as a 'tabula rasa'. This requirement has been difficult to enforce and so some movement has been desirable, ranging from Strauss and Corbin (1998), who stressed the importance of using accumulated knowledge during grounded theory data analysis. They argued that "there is always something new to discover" (p 36) whereas Bryant and Charmaz, (2007 p 123) claimed that it was necessary to "*situate* [the] *work within the body of related literature*". Although grounded theory was an appealing option as a way of carrying out my research, I decided against it on the grounds that I was not looking at developing theory, but rather planning to examine the lived experience of social workers in detail. From here, I decided to use phenomenology for my research.

I finally settled on the phenomenological approach as developed by the German philosopher Husserl, a central scholar within the phenomenological movement. He made the point that phenomenological research seeks essentially to describe rather than explain, and that researchers must start from a perspective free from hypotheses or preconceptions (Husserl, 1970). This view mostly stemmed from his aspiration to make phenomenology a rigorous science (Lopez and Willis, 2004). Indeed, according to Welman and Kruger (1999 p189), " *phenomenologists are concerned with understanding social and psychological phenomena from the perspectives of people involved*". In other words, researchers should suspend biases and assumptions so as to explain a phenomenon regarding its inherent system of meaning. This is also called 'bracketing' or 'epoche' (Christensen and Brumfield, 2010; Zenobia et al. 2013). These are laudable aims although rather difficult to attain, as I explain below.

A very different view of phenomenology was offered by Heidegger, a student of Husserl, and who is seen as being within the interpretive or hermeneutic tradition. Initially, hermeneutic research was concerned with the study and interpretation of biblical texts, wisdom literature, and philosophical texts; this has moved on, and modern hermeneutics includes the study of speech (Cohen, 1987). Heidegger (1927/1962)

argued that what was important in the study of phenomena is the social context and, as such, cannot be studied, as Husserl proposed, using the same scientific methods that are employed in the natural sciences. As Lopez and Willis (2004 p729) pointed out, "*in interpretive phenomenology, it is the interpretation of the narratives provided by participants in relation to various contexts that is foundational.*" Heidegger's approach accepts that the researcher will come with prior knowledge, which in the view of hermeneutic scholars is both useful and necessary (leVasseur, 2003).

The notion of biases, assumptions and pre-judgements is a central idea in Gadamer's (1976) work; this suggests that researchers cannot come to the work as a 'tabula rasa', but that these assumptions may indeed help the researcher. He argued that an understanding of a lived experience (i.e. where social workers are working with cases of sexual abuse) can be gained by linguistic means, that is, through conversations with the people involved, in which reality is examined and an agreement is reached that represents a new understanding (Malpas, 2014).

Eichelberger (1989, as quoted in Patton, 2002 p115), also pointed out that "*if other researchers had different backgrounds, used different methods, or had different purposes, they would likely develop different types of reactions, focus on different aspects of the setting, and develop somewhat different scenarios*". In effect then, I am looking through a lens that is impacted by my personal experience, but the essence of any qualitative approach is to allow the experiences of the participants to be uncovered through their own narratives and descriptions. What is important is to acknowledge those facts. (I devote a fuller discussion to the important issue of insider researcher below in page 85)

This dispute between Husserl and Heidegger has echoes of the initial disagreement between the merits and strengths of qualitative and quantitative research. The early researchers favoured one approach at the expense of the other. What has become apparent is that this is largely a sterile argument and what dictates the appropriate approach are the needs of the study (Saks and Allsop, 2007; Smith, 2009; McLaughlin, 2012). The same might be said about the phenomenological impasse.

My research starts with specific descriptions of lived situations of social workers set down in their language and specifically avoiding what Finlay (2009 p10) called "*abstract intellectual generalizations*". These will, in turn, allow me to identify general

themes and then to go finally beyond explicit meanings and gain the more implicit meaning of what is being said. There are some arguments as to whether phenomenological research should strictly be about description, albeit deep and fulsome in nature as Giorgi (1989) and his adherents argue; or interpretative as in, for example, Interpretative Phenomenological Analysis as expounded by Smith (2007). However, in my view, this dichotomy is as ineffectual as the arguments about which is 'best', quantitative or qualitative research. I would agree with Langdridge (2008 p1131) who said that boundaries between interpretation and description are "*antithetical to the spirit of the phenomenological tradition that prizes individuality and creativity*."

A phenomenological approach is very effective in bringing to the fore the experiences and insights of individual social workers from their perspectives, which could challenge structural or normative assumptions and processes and according to Finlay (2009 p10):

> Phenomenological research characteristically starts with concrete descriptions of lived situations, often first-person accounts, set down in everyday language and avoiding abstract intellectual generalizations. [Then the researcher] reflectively analyses these descriptions, perhaps ideographically first, then by offering a synthesised account, for example, identifying general themes about the essence of the phenomenon".

She argued that it is important that "*the phenomenological researcher aims to go beyond surface expressions or explicit meanings to read between the lines so as to access implicit dimensions and intuitions*."

Although social work managers try to control and direct what social workers do, the way social workers work is influenced by their personal views and experiences (Munro, 2011). Social work tragedies, which have resulted at their worse in the death of children (Coventry LSCB, 2013; Harringey, 2009) have often been attributed to a lack of uniformity in the way social workers practice and, as such, have often resulted in an ever tightening of procedures and regulations, aimed at controlling practice (Munro, 2011). There has been little interest on the part of social work managers in understanding the experience of social workers from a practitioner standpoint. That is, they have not looked at the lived experience of the people involved in making decisions

or omissions of practice. This has been a major driver in my wish to study this area of work, but with a focus on families where sexual abuse is the issue, which is often seen as a very complex and emotionally loaded sphere by the practitioners in the field.

I had to decide how to obtain the data. With phenomenology, Creswell (2007) argued that the most common way to collect data is to use in-depth interviews with individuals who have experienced the "*phenomenon*" (p61). In my case, the phenomenon was the activity of practising in families where sexual abuse was a feature. This approach then makes some methods less or inappropriate such as, for example, focus groups. In some types of research, focus groups can be a very efficient way of obtaining varied and rich qualitative data (Morgan, 1997; Kruger and Casey, 2000). The goal of a focus group is not to produce a standardised set of results that another researcher in the same situation or studying the same issues would have produced. Rather it is to build a coherent and illuminating description of and perspective on a situation that is based on and consistent with a detailed study of that situation (Ward-Schofield, 1993). It would be feasible to have a focus group of social workers with experience of such situations but, owing to the sensitivity of the situation and need to main confidentiality of 'cases', one would not choose a focus group What it does not do is to explore the phenomenon from the perspective of an individual participant. It also does not allow for in-depth exploration of the individual's experience.

I had initially considered the use of a questionnaire with open ended questions about practice, prior to interviews. However, on further thought, I realised that this was not the best approach to examine social workers' practice in detail, since my purpose was to explore participants' feelings in some depth, allowing the participants to 'tell their story' in their own words and with as much latitude as possible. This would not be possible by using inflexible questions as is characteristic of questionnaires.

I decided that the best way forward would be to interview the participants as this would facilitate a conversation and would allow me to 'get inside' the practice as seen by the social workers. Charmaz (2006) made a powerful point when she argued that what is needed in a study such as mine is intensive interviewing which she said, "*permits an in-depth exploration of a particular topic or experience and, thus, is a useful method for[an] interpretive study.*" (p25)

The most commonly used types of interview in research are structured, semi-structured and unstructured (Mason, 2002). A structured interview is one which, as the name implies, has a rigid set of questions, which are asked in the same way to all participants. In some ways, it is a kind of oral questionnaire. I did not want to use this type of schedule as I felt it would be too restrictive and would not allow for a richer type of data. An unstructured interview is where the researcher asks as few questions as possible, permitting the interviewee to talk freely, intervening only to refocus the discussion or probe for additional insights into a key area (Keats, 2000).

Semi-structured interviews may involve a mix of ‘open' and ‘closed' questions (Blaxter et al. 1994). This type of interviewing is sometimes described as having three stages. The first stage involves introducing the topic and the broad aims of the research. The second stage involves asking more open-ended questions. This is when additional or follow-up questions would be asked in order to pursue areas of interest. The interviews often conclude with a third stage where participants are asked open-ended questions such as ‘is there anything else you want to tell me?' (Carter and Henderson, 2005).

Interviews are not without their problems. Scheurich (1997) claimed that a post-modernist perspective suggests that both the researcher and the interviewee have multiple intentions and desires, some consciously known, some not and that language is not stable and unambiguous but instead is notoriously slippery and that the relationship between language and meaning is always subject to reinterpretation. This is important in research such as mine where the data comprises of the answers given to my questions, and I had to be cautious that any conclusions arrived at were supported by a shared understanding of the subject matter.

When considering interviews, an important issue when using a phenomenological approach came to the fore, namely ‘bracketing’. What this means is that the researcher should aim to put aside his/her own belief/experience about the phenomenon that is being explored (Carpenter 2007). Although some researchers argue that this is a device which is unique to phenomenological research (Chan et al. 2013) it is in fact quite similar to the grounded theory approach, which requires researchers to have no prior views or ideas about the area to be studied. Indeed adherents to a purist approach of both argue that no literature review should be carried out until after the data have been

gathered, so that the researchers pre-understanding of the area does not bias the questions asked in favour of themes they know exist (Hamill and Sinclair, 2010). However, the early ideas of Glaser and Strauss about not undertaking a literature review (Glaser and Strauss, 1967) have largely been superseded by later writings by them (Glaser and Holton, 2004) and other grounded theorists (e.g. Charmaz, 2006; Dunne, 2011). These later works claim that it is not possible to suspend prior understanding and that some limited consideration of the literature and the knowledge base is acceptable; what is important is for the researcher to have an understanding of what their views, values, knowledge and approaches are, so that their impact on the research is made transparent (Crotty, 1996).

Interviewing is an important part of my professional life. As well as being a social work lecturer I also work as a free-lance consultant to local authorities in cases where specialist assessments are required by courts where there are issues of risk involving children within families. I carry out forensic interviews of men who have been either convicted or accused of sexually abusing children. In this setting I conduct semi-structured interviews that have a definite purpose; that is the gathering of information to give an opinion of the risk the man poses to the identified children and, more importantly, I aim to provide the social workers working with the child some ways of managing or reducing that risk.

My position as an ‘expert' is unquestioned by the interviewee, and it is often ratified by a court of law i.e. there is a clear socially constructed role. I am comfortable in that role and, as a rule, I am ‘in charge' of the interview. This is not the case in my role as a student researcher. There are specific ethical considerations, which are different from those present in my professional role, and my epistemological and ontological positions are different in the two settings. This had some resonance with the views of Dunne et al. (2005), who suggested that approaches to the analysis of data emerge from the interplay of the substantive interests, theoretical frameworks and empirical experiences of the researcher. Regarding my research, these all prove important. As the fieldwork progressed and I had undertaken a number of interviews I noticed that there was a consistent story the participants were telling me, which became increasingly similar in terms of the description of a feeling about their work, and that was their ‘disgust' about the sex offender they were interacting with. This word disgust was repeated by all my

participants and, at the start of my research, as I delved deeper into the data gathering stage, it became evident that this was an important question that merited exploration on its own accord. I felt that the best way to follow this up would be by re-interviewing a number of the social workers to look at just the theme of disgust.

This theme had been uncovered by using a phenomenological approach, which rightly looked at the lived experience of the social workers I was talking to. However, a particular aspect of the approach is that it implies that the researcher should not re-interview subjects with an *a priori* view in mind and so going back to the same subjects to explore a specific ‘result' would contravene the tenets of the phenomenological approach (Crotty, 1996). In my case, I did not have a set view in mind, but my participants were talking about an aspect of their work, namely disgust about the perpetrators, which I wanted to follow. Re-interviewing and adding participants to specifically look at that did not in my view contravene the tenet of not having *a priori* views (see section 4.6, where this is discussed in more detail).

4.5 Ethical considerations

Ethical guidelines were observed as set out by the Research Governance Framework for Health and Social Care (DH 2005), British Association of Social Workers – Statement of Principles (BASW 2012) and the Health and Care Professions Council – Standards of Conduct Performance and Ethics for Registrants (HCPC, 2012), the Code of Ethics for Social Work and Social Care Research (JUCSWEC, 2008) and the Data Protection Act 1998.

Ethical approval was sought and obtained through the Research Ethics Committee at Chichester University and research governance approval from West Sussex County Council.

Participants were recruited by voluntary means and were given full information about the research and were able to leave the research process at any point without the need to give any reason for withdrawing. Full disclosure is important when doing research on sensitive topics, although some researchers maintain that defining of boundaries is

important in that as Lee (1993 p103) contended, *"defining the boundaries of the research topic too tightly may inhibit respondents from defining it on their own way."*

The information given to participants also included the name and contact details of my research supervisor, which allowed participants to complain should they have reason to. They were not paid for their participation. Equality of access was guaranteed, the only bar being that the social workers must be working/have worked with a case of sexual abuse.

4.6 Sample strategy

My study sample consisted of 14 social workers who had been involved in cases where there had been a risk of sexual abuse to children by an adult male. I wanted to explore with workers what they feel when confronted with a family where one of the main carers was believed to pose a sexual risk to children (Quinn et al. 2004).

An important consideration, allied to my aims, is the question of personal issues. My questions explored with social workers areas of personal sentiments and responses to working with men who have committed sexual offences against children. In some sense, the participants could be viewed as vulnerable and the issues raised should be at least be a point of reflection. Related to this is the issue of gender and possible power imbalances. I was aware that I would be interviewing female social workers who may have felt uncomfortable discussing sexual matters with a male researcher. I had no way of minimising this other than by drafting my consent letter in such a way that it made it clear that involvement was voluntary and that they could withdraw without consequences during or after the interview, up to the point where their data were analysed and merged.

This issue of a power relationship is an important one that merits some discussion. One could look at the relationship between a university lecturer who is also expert in the assessment of male sex offenders and social workers. The researcher by virtue of his/her standing holds a position of proficiency where the social workers are subordinate (see Luke, 1974 and 2005 for a radical view of power, which might apply here). However, this view of power is too simplistic and does not address the complexity of power relationships or the fact that they are not monolithic and are multiply inflected in all aspects of social relationships (Sharland, 2008; Heinsch, 2018). That is to say that

although there is an argument which claims that I would be the more dominant figure in the relationship of social worker and expert, this needs to be moderated by the argument which suggests that power is spread between all the actors of a relationship. This may mean that it was not just the fact of who I was that impinged on the relationship, but also that the context of my discussions with the social workers had implications in terms of a power relation. However, the fact remains that I may still have been in a position of authority and, as such, this had to be kept in mind in the analysis of results, much like the issue of gender.

An important and allied issue to power is that of research reflexivity. Reflexivity generally refers to the examination of one's own beliefs, judgments and practices during the research process and how these may have influenced the research. If positionality refers to what we know and believe then reflexivity is about what we do with this knowledge. Reflexivity involves questioning one's own taken for granted assumptions. Essentially, it involves drawing attention to the researcher as opposed to 'brushing her or him under the carpet' and pretending that she or he did not have an impact or influence. It requires openness and an acceptance that the researcher is part of the research (Finlay 1998; 2002). Finlay (2002) argues that reflexivity is difficult and not to be taken lightly

> Reflexive analysis is always problematic. Assuming it is even possible to pin down something of our intersubjective understandings, these are invariably difficult to unfold, while confessing to methodological inadequacies can be uncomfortable (212).

Some like Berger (2015) argue that "*reflexivity in qualitative research is affected by whether the researcher is part of the researched and shares the participants' experience (p* 219). In my study, I shared the experience of my participants in that I too was involved in the assessment of men who had sexually abused children. As I discuss later in terms of bracketing, it was important for me to acknowledge and recognise this tension between involvement and detachment, between myself and my participants.

The issue of reflexivity is not confined to social work and Buetow (2019) argued that taking note of one's own position is a vital component of what she considers good research practice, which in turn lead to better clinical practice.

It was then important that consideration was afforded to workers who may feel vulnerable to criticism. Participants were assured that there would be no records (either on paper or electronically) of the names of the informants. Instead, the participants would be referred to by code (e.g. P1) and their place of work would not be revealed. A purposeful sampling strategy was used in the study. Patton (2002) suggested that the purposeful sampling strategy involves the deliberate selection of information-rich participants that give rise to data relevant to the specific purpose and aims of the research. The use of purposeful sampling is also supported by Creswell (1994) who argued that *"the idea of qualitative research is to purposely select informants (or documents or visual materials) that will best answer the research question."* (p148)

As my study was examining the feelings of social workers when carrying out assessments of risk in families where there was an identified risk of sexual abuse, my participants needed to be social workers who had experience of such work. Table 1 show the sample participants' background, time in post, age, class, race, and gender. I used two samples of social workers, which met the above criteria, for the two phases of research. For the first phase, my purpose was to gain the lived experience of social workers. For this phase. I interviewed six social workers (see table 1 for details). My findings (discussed in detail in Chapter six) argue that at least for this sample of social workers the effects of issues such as 'disgust' was a factor and I was able to gain adequate data about the topic from this number reaching saturation, which I define as to be the point at which '*additional data do not lead to any new emergent themes'*. (Given 2016 p135)

For the second phase of my research, I carried out a further 14 interviews. The sample included the six social workers who had been part of the sample in the first phase with the rest of the sample being new. The purpose of the second phase was to further explore the emerging themes, namely disgust (of the action of sexual abuse and of the perpetrator of such abuse) and the reaction to it when working with men who sexually abuse children.

4.7 Demographics

Table 1: Characteristics of the participants

Participant	Interview stage	Gender	Number of years qualified	Own children	Age
(P1)	2	Female	10	Yes	52
(P2)	1 and 2	Female	35	Yes	57
(P3)	1 and 2	Female	27	Yes	57
(P4)	1	Female	5	No	31
(P5)	2	Female	5	Yes	43
(P6)	2	Male	5	Yes	38
(P7)	2	Female	7	Yes	31
(P8)	1	Female	10	Yes	58
(P9)	1 and 2	Female	11	No	41
(P10)	1 and 2	Female	8	No	33
(P11)	1 and 2	Male	10	Yes	41
(P12)	1	Female	20	Yes	50
(P13)	2	Male	25	Yes	53
(P14)	1 and 2	Female	5	No	35

The table above also reflects the current employment balance in social work, with the majority of social workers being female (86%) and 55% aged between 30 and 49 years of age (DfE, 2020).

4.8 The research instrument

The next step was to design, develop and pilot a research instrument, which in this case was a semi-structured interview schedule (See Appendix 1). The research instrument is of critical importance to the success of any research study. In my study, the questioning allowed me to unearth the ways in which social workers viewed the assessment of cases where sexual abuse was a feature and the questions allowed flexibility in the general conduct of the interviews. The questions were posed in such a way that they met the aims of my study. However, as in all good research, I tested my instrument on two practitioners.

In constructing my questions, the pilot study which I discuss below, was of critical importance. I had to navigate a course which allowed my participants to talk freely but also which kept my questions on ‘track’ of my research question, Reflexivity was again critical here in that I had to be aware that my questions did not lead down a preconceived path with my own views and feeling of working with sex offenders. This was of particular importance in the constructions of my questions for the second phase of interviews when I was very careful to construct my questions based on the answers that my participants had given which I hoped and in reality did, help them to tell me a story conforming with their views and not my own biases.

4.9 Pilot study

It is a long-held view that pilot studies are a part of good research (Teijlingen and Hundley, 2001). There are two types of pilot study. The first one is seen as a way of testing the feasibility of a study or as Polit et al. (2001 p467) pointed out “*small scale version[s], or trial run[s], done in preparation for the major study*”. However, a pilot study also refers to where a researcher tests out a research instrument such as an interview schedule (Baker, 1994), which is the reason I used a pilot study.

I tested my schedule on two very experienced social workers (one male and one female). I wanted to make sure that my questions were eliciting useful answers in terms of allowing the social workers to tell me a story. The pilot proved to be extremely useful and it allowed me to fine tune a number of the questions which did not allow the social workers to expand on their views and were quite mechanistic. It should be said that, in qualitative research of my type, the research instrument is not a static device and my

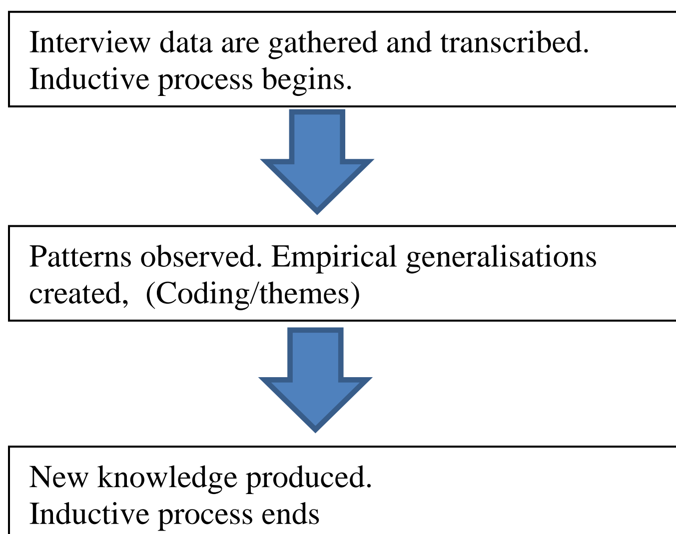
interview schedule was an organic instrument, which slightly changed in response to the answers given by each subject.

4.10 Data analysis

My aim in this study was to get a glimpse of the lived experience of social workers who come into contact with men who sexually abuse children. The subject matter in its real form is harrowing and emotionally affecting. As I discuss above, I chose to use a phenomenological prism to delve into those emotions. What this meant in practice was to use interviews to discuss with the participants their everyday experience of this type of work. Through the interviews my participants narrated a series of feelings of working in this field.

Phenomenological research uses an inductive approach to analysis (Shaw, 2019). That is to say, I did not start off with a hypothesis or *a priori* ideas as to what I would/should find, but it was the lived experience of my participants that drove my research. This is illustrated below in Figure 1:

Approach to analysis



The starting point of any qualitative data analysis is to fully acquaint oneself with the data. In my case, this process started with the interviews themselves. Any good interview requires the interviewer actively and carefully listening to what the participant is saying. Although I started with an interview schedule (See Appendix 1 and 2), I

intended for my interviews to be guided by the participants. I allowed the semi structured nature of the interviews to permit the participants to tell me a story rather than for the interview to be a strict tool to curtail any free-flowing movement. It was this aspect of my methodology that led me to conduct more than one interview with some participants and to further focus the schedule of questions with others.

The interviews were digitally recorded and in order to be analysed, they had to be transcribed. I was, at that point, presented with an important choice. Should I do the transcription myself or should I have someone do that task for me. This is a decision which is faced by all researchers and is one that is often dictated by circumstances such as number of participants, time required and funding available.

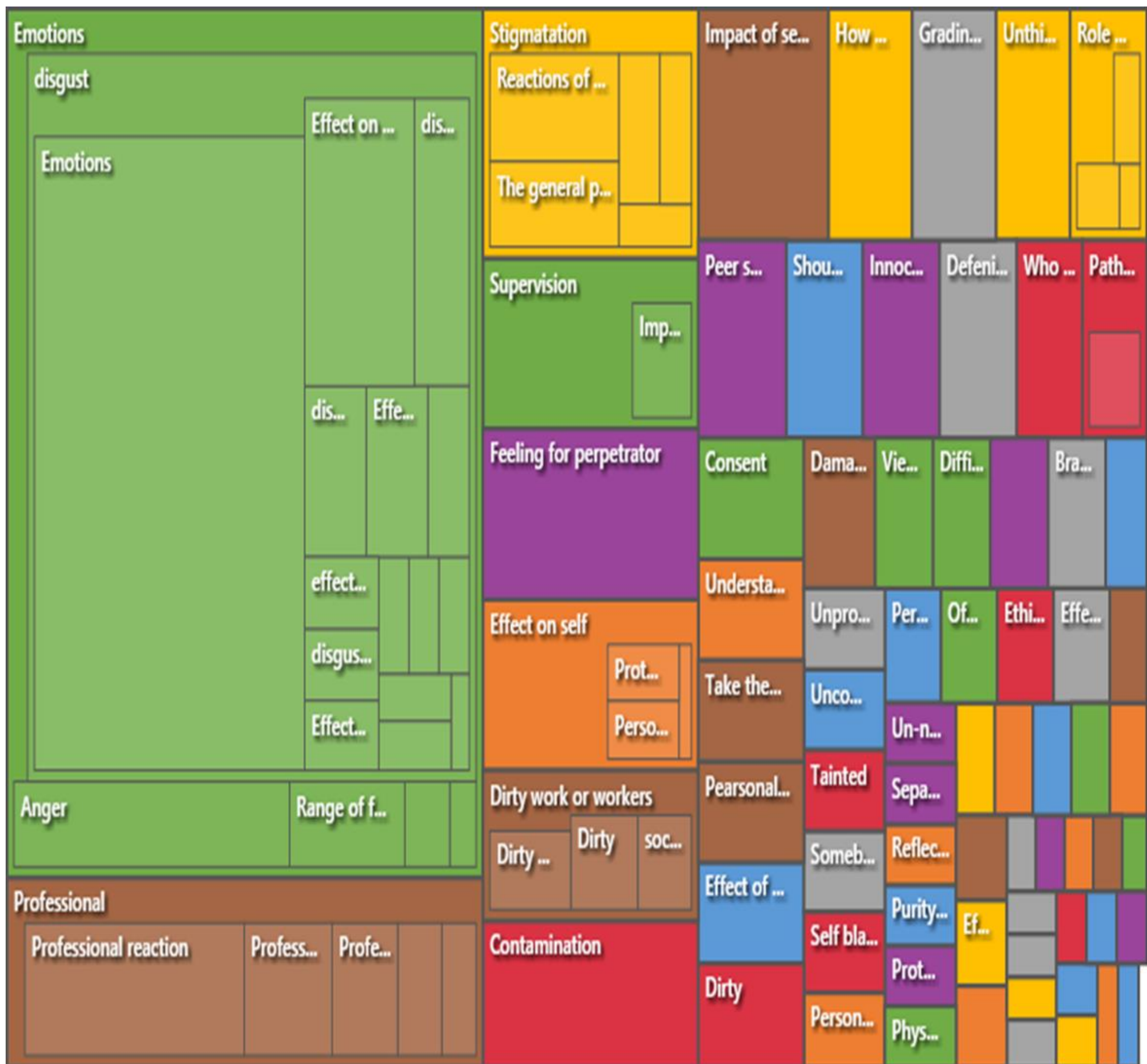
In my case, I had personally interviewed all my participants, so I was already aware of the content of the interviews. My analysis was going to involve a deep dive into the data to search for possible themes (Braun and Clarke, 2006) and I needed to recognise if there were threads of experience, which were present across all or at least a majority of participants. I therefore decided early on that I would transcribe the interviews myself in order to start the process of deep familiarisation. The process then developed that I would transcribe the interviews which was a time-consuming endeavour, but which allowed me to immediately recognise developing areas of agreement or themes between participants. These transcriptions were shared with my supervisors and formed a basis of discussions throughout.

I started to make notes and summaries of what the participants were saying, and this process allowed me to start a preliminary analysis of the data. According to Waters (2014 p1), "*The first principle of analysis of phenomenological data is to use an emergent strategy, to allow the method of analysis to follow the nature of the data itself.*" What I took to be an emergent strategy in terms of Waters' (ibid) comments is to see if there were any themes within and between my participants. For my purposes I have chosen to use the definition given by King et al. (2019 p200): "*Themes are recurrent and distinctive features of participants' accounts, characterising particular perceptions and/or experiences, which the researcher sees as relevant to the research question*"

An important electronic tool which I used to develop the initial themes was NVivo. The software helps to quickly sort out words or phrases, which I initially recognised as

recurring to develop them into themes I opted for a method I set out below. (See Appendix 3 for examples of the construction of themes using NVivo). The programme also permitted me to see the themes in pictorial form as shown below.

Diagram 2. Pictorial depiction of the Emotion theme using NVivo



NVivo’s ability to offer a pictorial summary was very apparent as even at this early stage emotion was a pre-eminent theme, which I develop in more detail below.

My data analysis consisted of the following four step process:

Step 1 Reading the transcripts

- I personally interviewed every participant and transcribed the result
- I carefully re-read each interview (line by line) and made notes as I went

Step 2 Labelling relevant excerpts

- I labelled relevant words, phrases, sentences or sections
- I coded the transcripts using NVivo

My position for coding certain words or phrases was taken for a variety of reasons such as: it was repeated in several places, it surprised me, and / or the participant said it was important. I was looking for underlying patterns within the data so I tried to be broad in the codes I used, as can be seen in table 2

Step 3 Deciding which codes are most important and creating categories by bringing several codes together

- I carefully re-examined each code and using NVivo and I combined some of them into more encompassing themes.
- I created themes from the categories

Step 4 Labelling themes and deciding which are the most relevant and how they are connected to each other

This step is critical. The connection between the themes informs the results, and those connections add new knowledge about working in cases of sexual abuse from the perspective of the participants.

The resulting themes can be seen in Table 2.

4.11 Themes and subthemes

Table 2: Themes and subthemes

Theme	Subtheme
Sexual abuse understanding	
	Grading
	Betrayal of trust
	Power imbalance
Emotions	
	Anger
	Disgust
	Fear
Parenthood	
Purity	
Dirt	
Stigma	
Professional Practice	
	Ethical practice
	Professional hardness
	Supervision

	Peer support
Effect on Self	
	Contagion
	Contamination

In this chapter I have described the considerations I took in relation to the data and the process by which I arrived at the themes and subthemes which emerged. I also discussed the ethical issues involved in this research and laid out the general demographics of my participants. In the next chapter, I discuss each theme in turn as I present the study findings.

Chapter Five: The Findings

In this chapter, I present the findings from the interviews I undertook with the 14 participants, all qualified, experienced social workers, working within Children and Family teams in a Local Authority.

The research question I set out to answer was "**What do Social Workers experience when working with families where sexual abuse is the primary factor?"**

The aims of the study were to explore:

- What social workers feel about the adult male responsible/suspected of sexual abuse
- How they deal with the emotions produced by their social work practice

As explained in the previous methodology chapter, interviews took place in two stages. The first stage was to interview participants using a generic interview schedule, and this was followed by re-interviewing some participants with a more focused interview schedule, which concentrated on the themes that had been obtained during the first stage of interviews (full interview schedules are found in appendix 1 and 2). In addition, additional participants were interviewed, using just the focused interview schedule. The themes were also further subdivided into subthemes, each of which added depth to the findings and clarified the emotional work that social workers carry out when working in cases of child sexual abuse. The findings are presented as themes as well as subthemes, which are set out in the table 2. I start this chapter by presenting the first theme, namely what social workers understand child sexual abuse to mean.

5.1 Sexual abuse understanding

There is some confusion amongst professionals about the exact meaning of sexual abuse, sexual assault and child sexual abuse. It was surprising that professionals were unclear about the meaning of child sexual abuse, despite the exact meaning being governed by legislation, which makes childhood end at age 18 and yet legally people can have sexual contact aged 16.

As I asked questions of the participants, what was immediately striking was the variation in terms of the content of their answers. So, for example, one participant simply said:

> *It's when a child under the age of 18 is making an allegation of sexual abuse against-[themselves] – it can be a minor, a peer or an adult.* (P3)

While another worker gave a much fuller explanation:

> *Okay, hmm, so I think there's many levels to it, I think that child sexual abuse in the work that I do is focused around actually perpetrating physically sexually abusing a child, so that can be from touch to hmm, penetration, but also I think where I work is about the grooming process actually in child sexual abuse so viewing indecent images of children, making indecent images of children. Hmm, grooming children in the home were people are living in, also grown children potentially from a professional stance, teachers that sort of thing. So, I think there's a whole range to it, but when the word child sexual abuse comes to mind the first thing I do think about is a physical contact with a child and adult over the age of, I'd say over the age of 16. I know that there is a kind of child to child sexual abuse, but the first thing that would pop into my mind would be an adult physically sexually abusing a child.* (P10)

What all participants had in common when defining sexual abuse was, as expected, the issue of consent, which became a primary concern in their interviews and was a feature of the more overarching themes that are presented later. So, for example, one worker put it quite succinctly when she said:

> [Sexual abuse]*is the correlation between something sexual happening, outside of a sexual relationship that's not consented.* (P9)

What is immediately obvious from that comment is the fact it talks about an act that could quite easily be describing sexual activity between two adults. The participant talked about relationships and consent, when sexual abuse cannot be within a relationship and children cannot legally give consent until they are aged 16.

As the interviews progressed, the conversation turned to talk about the seriousness (or not) of different types of abuse which I refer to as ‘grading’ which is the next subtheme.

5.2 Grading

There is an ongoing debate, which has echoes of recent police comments on whether a crime should or should not be investigated (Telegraph, 31st October 2018). Thus, it was felt important to discuss this with the participants involved as a way of putting context into aspects raised later in the interviews. The response from participants was varied, but they all had a core view, that some kind of grading was appropriate:

> *I guess there’s lots of factors in there. I think I would have to answer as a starting point it would be less serious, whether that would end up that way? I think you would always have to go that if a child suffers something like sexual penetration, then yeah, I would have to say that would be far more worrying than an aspect of flashing. I wouldn’t want to minimise flashing, but when we are talking about penetration yes, much more worrying.* (P11)

However, they did not lose sight of the fact that even though some acts were ‘more serious’ than others in terms of physical harm, the ‘real’ harm was much more about the fact of the emotional long-lasting damage that sexual abuse can have:

> *I think, by the mere fact that a child has been…used in a sexual way, harmed in a sexual way- erm, it, the damage has been done to that child. Erm- in terms of the child recovering, obviously then it's around the support that’s there for the child, I guess, is also around the intensity or the level of sexual abuse and the persistence of it. Erm- I think that the mere fact that a child has been harmed, whether it's, whether it's a one-off occasion- I think to that individual child that is significant, its abuse, it's something that has happened to them that they didn't want to happen, and I think if you go further into the fact that, you know, in many cases that child may have trusted that person, loved that person and been in a position where they- it’s out of their control, and they had no choice in the matter.* (P12)

The comment above also illustrates that not only is there a grading in terms of physical harm, there is clearly grading in terms of emotional harm, which may be more apparent with a greater number of children as often with sexual abuse there are no physical signs.

Hence, whilst there was general agreement that all abuse was damaging, participants found it difficult to just grade the abuse in terms of physical harm, but felt that it was important to look at the emotional impact of the abuse:

> *If we talked about grading, just under that term, I think that's a difficult one to answer. If it was graded, if we spoke about grading, it would be about the impact on the child, and I guess what it means for that child. I'd be worried about grading that without that kind of focus on what we are talking about for this child. To grade it on just a basis of information would worry me.* (P11)

P11 shows concern that the real issue is about the impact on the child and that would be different for each victim and grading would be a way of 'standardising' a lived experience, which would be tantamount to professional abuse.

This grading of the harm was also applied to the gender of the victim. A good example was the comment made by P7 when she commented that:

> *Well, I think that and depending on their age, it can destroy their view of what sex is, how they feel about themselves, it can distort the way they feel about others, I have worked with the victim of a sexual offence, who was her father, she's now decided she's gender fluid, she's not got a gender. We were unpicking that a bit and she doesn't want to be attractive to anyone, because she doesn't want that to happen anyway and so if she doesn't have a gender, she feels that nobody would be attracted to her so she hasn't got a risk from anybody, but actually for me, if she'd never been abused by her dad, probably wouldn't have been gender fluid. So, I think it does have an impact*. (P7)

Having talked about the effect of abuse on children and the fact that it was not just about the physicality of sexual abuse, but also the emotional harm that abuse carries, I now turn to who the perpetrators were. It was almost a unanimous view that they, as social workers, had only come into contact with male sex offenders, although they were

aware that sexual abuse was not just the preserve of men, and that women and children could also be perpetrators. Again, this is something very similar to the actual offending rates in terms of gender and age:

> *In the experiences I've had they've been quite varied, so I've worked with the children who have been abused by their father, their stepfather, other relations within the family grandfather and I'm talking male because in my experience actually I have not worked with a female abuser and friends of the family and then moving on to teachers who, I've worked again with young boys that have been groomed by a teacher or a person in a teaching type of role. Erm and I have worked with teenagers who have had children that have abused other children, so quite a variation and again in my experience it's been, male perpetrators.* (P12)

The comment above also serves to underline the fact that sexual abuse could be perpetrated by a great range of people including professionals as in teachers.

> *Anybody can sexually abuse a child. I think there is a stigma attached to it mainly being adult men. I think that's probably because, from my experience, the majority of sexual abusers are adult men, but I am aware that females abuse children, teenagers and other children abuse children.* (P10)

This remark by P10 is in line with the research figures, which point to the fact that most sexual abuse is perpetrated by adult males. This may have the effect of stereotyping sexual abusers and this could in turn make it more likely that the professionals working in this field may come to see an 'unusual' type of offender, such as women, as different and possibly more dangerous.

An issue that was at the forefront of the participants was that of consent and what this meant in terms of sexual abuse. So, for example, P9 explained that abuse was something that is disgusting that an adult does without consent:

> *It is disgusting that adult is doing something to that child, that they (the child) hasn't consented to or that they don't want to happen or that is perceived by society that actually is just not what you do.*(P9)

This was an interesting comment in that it introduced the concept of disgust (which is discussed later (see section 6.7). This participant was very clear that in her view sex should be part of a loving relationship and, if not, it equates to something that is disgusting.

5.3 Betrayal of trust and power imbalance

As was clear from participants, their definition of sexual abuse was not just in reference to statutory guidance or definitions used for research purposes, but more about an emotional 'thing' which for some, as expressed by P14, was about 'theft' of safe or healthy development:

> *Taking away their childhood really and their opportunity to learn things in what most people in society would deem age appropriate time.* (P14)

There was agreement amongst the participants that the reason for abuse, although sometimes perplexing, was often coupled with a clear power imbalance between the child and the perpetrator. This was clearly articulated by P8, when she said:

> *So, I understand about the process as such that men go to get to there, but I guess I'll never understand what gets a man…I think it's power, I don't think it's necessarily about the sexual aspect of things, but I don't understand what makes a man do it to his own child. That makes it more difficult, it's bad enough to do it to someone else's child, but to do it to your own and allow someone else to do it, I find that difficult*. (P8)

As well as talking about the power imbalance inherent in sexual abuse, this hints back at one aspect of grading which is alluded to above. The clear message here was that sexual abuse was 'worse' in terms of an emotional thing, when it was carried out by the father.

The view that sexual abuse is wrong and therefore disgusting was something that participants commented on a number of times and served to further define the meaning of abuse as a construct, which can change with time and context and is often defined by the lived experience of those involved. The comment below is a good example of this:

> *Something that is disgusting, something that shouldn't have happened… shouldn't be there. It shouldn't, it's horrible, it's…like I can't describe it. Distasteful, it shouldn't happen, it's like an eke feeling…does that make sense?* (P7)

What is clearly apparent is that talking about sexual abuse brought up strong emotions on the part of the participants and it is to this emotional theme and numerous subthemes that I now turn.

5.4 Emotions

As shown above, definitions in child sexual abuse are messy and full of hidden meaning. What became very apparent early on was that in child sexual abuse everything has an emotional load, which the participants found hard to explain and, when they reflected, hard to deal with.

The emotion theme was clear and present from the start of interviews with participants. It was impossible not to discern it as a running issue throughout this study. For some, this was faced early in their career. P10 explains that her first contact with sexual abuse brought with it an outpouring of emotion, which she felt most newly qualified workers are faced with:

> *When I first qualified, I remember thinking I don't want my manager giving me a sexual abuse case. I didn't feel that I could work with perpetrators of sexual abuse - I was thinking that they are dirty and horrible, and I won't be able to empathise with them on any level, so I will be really judgemental, and I'll think the only solution is for them to get out of the house and never go back. That's when I started, and I think actually probably a lot, and maybe I am speaking out of turn, but a lot of newly qualified social workers might come from the same stance. They might not, but they might be far more open-minded than me.* (P10)

She goes on to say that the work brings up a maelstrom of different emotions and explains that for her they are all negative:

> *I think if I really unpacked it maybe a little bit of anger. So, that unhappiness and that anger as to why would somebody behave that way, why would they*

follow through with those actions. I am stripping it back to … its purest sense, so not thinking about anything else that may be going on. So yeah, a bit of frustration. A little bit of kind of…I want to use the word curiosity. That sounds a bit…curiosity in the sense of what's behind that? What's led to that? What's happening? That actually, when I am thinking of those raw emotional feeling, they are negative. There's not any kind of different feeling that I would name as a positive emotion, so unhappiness, anger, frustration probably. (P10)

Social work is about making relationships with people even those whom they find objectionable at every level, so some of the comments demonstrated feelings of empathy for offenders:

I guess, I am sitting with you now as a SW and feeling not thinking about cases etc, they can stir up sympathetic feelings. I mean I certainly know enough to know there's limited support, often for people that offend. I've also seen where people are actually asking for support and it's not there for them, so there is some feelings of sympathy. (P11)

As stated previously, social work is by its very nature seen as a profession were relationship forming is a key aspect of the work. Empathy has been identified as a core aspect when forming helping relationships and so this lack of empathy caused difficulty for some as P9 explains:

Well I suppose you can get some conflicting thoughts in your head I can sometimes I can have conflicting thoughts about…the child that I know has been abused and what that means for them and the trauma they have experienced, but I am equally mindful that the perpetrator may have experienced similar trauma themselves, so actually are they a perpetrator or are they a victim/perpetrator? And that's where I think the contamination for me is quite difficult, because there's part of me that feels I should have more empathy for the perpetrator than perhaps I've got. (P9)

However, positive feelings for the perpetrator were few and when the interviews explored the participants' feelings about the perpetrators themselves, I was immediately confronted by some strong emotions:

Anger, disgust…I feel quite confused really, sometimes about how a-yeah, confusion about that person. Erm, but they are negative thoughts, I don't have a lot of understanding feelings or compassion, and I tend to reserve that for the child and the safeguarding part of the family. (P12)

The feeling of not liking the perpetrator was common and, in some cases, showed an almost dehumanising quality. These feelings and emotions caused confusion as participants found it difficult not to seek to understand the behaviour of perpetrators and tried to place it within some parameter of causation, which would allow a better understanding.

However, some participants could not move away from the fact that the abuser was not the victim and they needed to focus on the child, which in turn caused their initial negative emotions about the perpetrator to gain prominence:

Dislike for that person, in the sense of how I'm perceiving them as a monster I suppose. I can get angry. I don't show it, but I can come away and actually feel quite angry. I think there's a range of emotions that can be quite confusing, because I think you can have the human emotions towards people who are struggling and often have lots of issues in their own lives, to this idea, well it's happening in front of you and this is what you are dealing with you and there's a victim that's more central than themselves, then that sympathy subsides and I guess the frustration, anger and disgust would be the fundamental things I feel. (P11)

Negative emotions quickly came to the fore. There was a conglomeration of feelings and some confusion about what they were and why they were present. P14 puts this confusion well, when she says:

It was just such a betrayal of everyone's trust that he was this nice guy that was helping out his community and he had his own grandchildren and really, he was just for his own satisfaction and for his own desires and they overrode anything else. That's why it was sort of disgusting and it did make me feel quite angry. I remember thinking driving past one day, and it was just, yeah, it was just such an injustice to think that he's decided to use that child and that family. (P14)

This comment shows that the idea of sexual abuse being a betrayal of trust was a strong one and this, together with a sense of injustice, seemed to drive other emotions with it. The theme of anger is considered in the ensuing section.

5.5 Anger

The initial responses showed some clear emotions and, as P11 demonstrates above, anger was at the forefront. There was some confusion in participants' minds as to whether sadness about the image of an adult sexually harming a child was the most salient feeling or whether just anger, but some quick reflection convinced P8 that it was just anger:

> *But there's the whole thing about a sexual act from a man to a small child makes me feel emotionally…not really upset, it's emotionally angry. It's anger rather than upset and sadness. I am sad. So not upset that I want to cry all over the place, but sadness that it's happened.* (P8)

An important consideration was what to do with that anger and the effect an emotion such as that could have on their professional work. This was certainly at the forefront for P14 when she reflected:

> *Feelings like anger, you do try and keep them in check, because then if you are feeling angry and you are going into a situation where you are feeling angry you are not necessarily going to be thinking as logically and being able to respond to people as calmly and professionally as you are meant to be.* (P14)

This is clearly important as, at this early stage, practitioners like P14 felt that unless she found a way of dealing with her emotions, she might find herself in a position of being unable to carry out her work in the best way possible. She was not alone in that conundrum and P6 was more direct when he pointed out the difficulties involved:

> *I think if I became too entrenched with those kinds of emotions, which it can evoke, it would be very difficult to do this job. I don't think I would be able to sort of, you know, really…if you were so disheartened and angry by someone who has acted out in this way, I don't think, I think you wouldn't really be*

doing your role as a social worker, I think you really need to kind of, disassociate with feelings that it can evoke but you also need to be professional in your line of work. (P6)

P6 articulated some worries not just about getting it right, but about actually being able to be a social worker at all. He felt that workers needed to disassociate from such strong emotions that child sexual abuse can evoke. It of course begs the question as to how it is that workers can do that, and this is considered further when I discuss issues such as the importance of professional supervision (see section 6.13).

The anger that working with perpetrators evoked was often linked to the workers being aware about the long-term effects of the abuse on victims. This was articulated by a participant who explained that:

*So, when I am thinking about anger I am [*going*] probably straight into victim empathy and being angry that someone has done that to a young person and kind of knowing the consequences potentially for that young person as they grow older, so I think that's where my anger comes from.* (P10)

Feelings of anger were sometimes tied up with seeing children as vulnerable and perfect, and someone destroying that. As one participant explained:

I feel fiercely protective, I feel that this is an injustice and it makes me… So angry that someone out there is doing the most vile things to our most beautiful, most vulnerable, most cherished members of society, yeah, I find that really hard to deal with. (P1)

P1 makes the point that this is a difficult emotion to deal with and again it is worth asking the question of how it is that they do deal with it in order to do their jobs.

Although one would expect to hear articulated feelings of anger, what was more pronounced were the feelings of disgust, which were very often interwoven with feelings of anger as to how adults could use their power to sexually abuse children:

I think the first one is disgust, just a real sort of disgust, feeling that someone could do that and that they could abuse their power, the trust that they got with that child or power from the fact that they are older, and children are told to respect older people to feel safe around them. And then I think you sort of think

about just how people could go about just physically doing it and what type of things are in their minds and anger, I think is the feeling that I feel a lot of the time. (P14)

Some participants expressed strong negative and even violent thoughts associated with sexual abuse. Here participant P13 expressed succinctly that he associated sex offending and offenders with:

Revulsion, anger, sadness, trauma…aggression primarily. (P13)

5.6 Fear

It was not only feelings of anger that the participants experienced, but also sometimes of fear as to what they as workers might be subjected to:

I don't often get in a position where my heart is like pounding out of my chest, but I was just very fearful of this man and when I reflected, when I heard on the Monday, that he'd committed suicide on the Friday I just thought, you know what, anything could have happened in that home, you know with his mental health in that way and I was seen to be this authority coming in. (P3)

The fear was real and included participants feeling that they themselves could became victims of sexual assault, that it was better not to be too close to them, and that the risk of assault was real:

*I think there's definitely an element of they (*social workers*) don't want to be near them, there is a fear that they might get attacked by them, regardless of whether they have a sexual preference or who they are deemed to be a risk to. I think there's definitely a fear that if they go out, they will get raped, they will get attacked.* (P7)

In terms of emotions, anger about both the sexual abuse itself and certainly the offender was present and clear. This was followed by the fear (sometimes irrational) that was attached to the offenders in terms of what they could do not only to children but also to participants. However, the emotion, which was overriding for participants, was that of disgust which is discussed next.

5.7 Disgust

Emotional reactions to the abuse of children were very strong and certainly tied into the feeling of disgust and participants sometimes struggled to name it as such:

> *That I really don't like it at my core, so it's more than saying 'Oh I don't like it'. There's almost an element; there's an emotion, there's an emotional thing to it. It raises something within me that creates a real negative…kind of feeling. Like a, quite a strong one.* (P11)

This emotional response was acknowledged as very much a personal one, which brought with it a great deal of uncomfortable feelings and confusing emotions:

> *Yeah, it's an emotional one. It's like I said, it's an emotional response, a personal one when taken into an area that's very uncomfortable for me…I don't understand the drive; I don't understand maybe even the pleasure principle or the reasons behind it, so, it's clearly an emotional response to it.* (P11)

However, some of the participants had difficulty in associating an emotion with that of disgust:

> *I don't feel an emotion [such as anger] about sexual abuse, but it's more about how could you do something like that? What made you think that it would be OK? Because with physical [*abuse*] there tends to be an emotion behind it, whereas this is a sexual drive. It's like "how could you be sexually attracted to a child? How- it's a lack of understanding. I am trying to think of an emotive word for it, but it's that- it's probably more confusion, but if I had to say how it made feel it would be that it made me feel disgusted.* (P7)

How the participants defined disgust and under what circumstances they would use the term differed depending on what they were faced with. For some it was fairly clear and well defined:

> *The word disgusting, erm, something that you don't want to touch because it's filthy, dirty, it's horrid, that's what that, brings up for me, that word, erm, and repulse, it's something that pushes you away something you don't want to be near, be around in.* (P1)

It was often combined with an inability to really comprehend the actions of adult male perpetrators:

> *I suppose disgust is something that it's abhorrent to you, vile and [you] can't comprehend, but do comprehend because we know it happens, that men do this to children or young people… Yeah that would be my interpretation.* (P11)

This inability to comprehend sexual abuse of children and tie it to disgust was a view expressed by many in different guises. Thus, a common comment would be the one made by this participant:

> *That almost I can't believe that they could have done that. It's just horrible, it shouldn't be possible, people shouldn't be thinking like that, they shouldn't be acting like that so how can they do that?* (P14)

P14 expressed that to her it was unbelievable that an adult could actually do something such as sexually abuse a child. She went on to comment:

> *You just can't comprehend it; I think it does have more of an impact because is a more emotive issue and because you think it's so, disgusting, because it's such a selfish act in a way, because it's all about that person who is abusing, getting pleasure from whatever they're doing to the child and it's nothing to do with that child. It's not a spur of the moment thing.* (P14)

Participants expressed a difficulty in truly understanding what sex offenders did and this shaped their definition and understanding of disgust:

> *I think there is a different way of using the word 'disgusting', because most other things that are disgusting, like rotting flesh for example, you can rationalise that in your head, [but] for me, I can't, someone sexually abusing children, I can't necessarily rationalise that, in my head that easily. So, things that look disgusting, they might make you feel disgusted at that time and then it passes. With sexual abuse, I guess it's something that no matter how much we come across it or we see it, or we work with sex offenders it doesn't get any easier in terms of making sense of it in your head.* (P4)

Again, this participant talked about the difficulties associated with dealing with the emotions sexual abuse brought up and it will be important to link this to issues around supervision which are discussed more fully later (see section 6.13).

The lack of understanding stretched to a general view of how parents whose job it was to protect their children instead harmed them. It was that realisation which caused the feeling of disgust. This was succinctly put by one participant:

> *I just cannot understand, you know, that's the disgust, there, because I think, you're thinking you've done that to your own child. Your role as a parent is to protect him, to make [him] safe, and you have probably done one of the most damaging things you could possibly do to a child, so that was the emotion I felt.* (P6)

When explaining their definitions of disgust, participants started to talk about how their feelings for the offender were shaped and in turn how this shaped their understanding. In some cases, it caused a physical reaction, but interestingly this was tied to the type of offence. This finding also adds to the description above about grading in terms of seriousness and may serve to give further understanding to how this process works (of grading offences). Thus, it may be that the more serious the offence, the more disgusting it is:

> *Disgust is probably the first [feeling]…It depends on the [seriousness of the] offence to be fair. Yeah, like your stomach is churning…Yeah, and it's…yeah. It does me you feel 'urrr'- I can't describe it.* (P7)

This confusion about the seriousness of the offence also translated into how participants separated (or graded) the difference in how they felt about sexual abuse as opposed to physical abuse. The following comment articulates that confusion quite starkly:

> *It's the action, in physical abuse, the action of hitting a child [that] is disgusting, it's the actual doing and I am not sure this will make sense, but I will try to explain it, so it's the doing, actually hitting a child. I think the other one is about a thought process and it feels quite calculated, quite deliberate. I am not saying physical abuse isn't calculated and deliberate, but there's almost an element of there can be an emotion, suddenly people get angry, they get upset and they use violence, whereas sexual offending feels more…I don't*

know, devious…it's about the emotion bit for me and that the person would use planning and thoughts…I think it's the thoughts as well, they were thinking about doing that whereas in physical abuse, I don't necessarily think of people thinking "Oh I can't wait for them to get home so that I can punch them on the face", whereas with sex offending, I think there is almost that…it's almost like triple abuse, because there is the thinking of it, then there is the planning of it and then there is the doing. So, there's three elements whereas with physical abuse it just happens. (P7)

Sexual abuse was seen as more serious than abuse such as neglect, because sexual abuse took away children's innocence and was the damage it caused was harder to repair. As P4 put it:

Because I feel that they have overstepped every boundary that is there in society… There's something about children's innocence and that should be protected and when children experience sexual abuse as a child the trauma from sexual abuse tends to cause much more damage long-term than a child that's experienced neglect. For example, you can kind of repair those relationships [with the appropriate intervention], whereas with the trauma that children experience from sexual abuse this tends to be long-lasting…erm and there is that whole society thing about it being… It's not a normal thing to happen. (P4)

There was also a view that sexually abusing children is the one thing that men would not or at the very least should not consider:

I suppose it's just the do the unthinkable. They do the unthinkable…they just…they do the unthinkable and they do the one thing, I think, that disgusts most men and the one thing that most men would never, ever, ever want to be associated with. (P9)

This comment also begins to place the behaviour outside the realm of the normal and gives a sense of otherness. The view of people being not like 'normal' people was offered by one participant, who found it difficult to think of them as human:

I haven't really had the opportunity to speak to people and to be able to have really informed views. I think that probably does affect the way that I think about those people, because I just think they are sort of dehumanised in a way, because I haven't had experience of them, they are just this evil figure in a way that is there in the child's life. (P14)

This is an important comment in that it asserts that offenders have quite powerful negative attributes which could conceivably have quite an influential effect on the way social workers both approach and practice in cases involving sexual abuse. The participants were all experienced social workers who had been undertaking front line work with Children and Families for a long time. There was a common feeling expressed that it did not make any difference how long they had been doing this type of work as to whether it blunted their feelings. The revulsion they felt still took them a while to deal with and move on to a more objective and possibly 'professional' position. Participant P1 articulated this difficulty when she said:

I feel disgusted, erm, I have those feelings that do come to the surface; the longer I've been in this job, the more I come across this type of male or female [and] I have the same feelings but it does take me a while to get to an objective kind of position, because I feel, erm, that this is yeah, repulsive. I suppose those are the feelings for me that come to the fore, first of all, yeah. (P1)

The fact that the participants do get to an objective position is important and may be linked to supervision, both formal and informal, which is discussed in more detail below.

Disgust has also been linked in the literature to other emotions, most notably anger, so it was interesting to see participants making the link:

Yes, it is physical and it's an emotional recoil. [Maybe] part of it [the recoil] comes from, [me] not [being] able to do anything about it, but there's the whole thing about a sexual act from a man to a small child [which] makes me feel emotionally- not really upset, it's emotionally angry. (P8)

Participant 8 described a physical reaction to the work, which is important as it ties into the more primeval view of disgust and not just to the social taboo breaking reaction that it clearly incites.

The feeling of disgust was used as a personal judgement on the perpetrators and the participants did not hold back in expressing their view:

> *I think it's just, I don't know, think it's just a word that, I don't know. I would just use that, that is just bang out of order, you just don't do it, you know, it's a no-no. I suppose the word disgusting I use more against people where I use words like sick, vile. Yeah, I don't know why I use that word.* (P5)

These comments serve to show that participants were stigmatising perpetrators when they branded offenders as people who are both 'sick' and 'vile'.

For some it brought a very real physical reaction, a visceral emotional response:

> *If I am disgusted with something it's something that is vile, awful. If I see a chicken carcass and it's covered in maggots, that's disgusting. It makes my flesh crawl and makes me feel augh, it's really nasty and if I think about this particular man, well any man, but if I think about this man with this little girl, it gives me the same sensation of [something] that's vile, revolting. The feeling that I get when I see maggots, because I do have an issue about maggots, it is that same thing, that creepiness of the flesh, when it makes you feel you want to brush something off, that's kind of how that man makes me feel. Not that man, because I can talk to the man like I am sitting talking to you and I have had to many times, but it's the thought of the act that makes me feel like that about him.* (P8)

It is a feeling which brings with it some physical core autonomous reactions:

> *I find it personally repulsive. I couldn't ever perceive seeing anything but a child [rather than a sexual entity]. So, the disgust is around why someone would, how someone would see that and then the disgust for me is this feeling that it just makes me shudder I suppose.* (P11)

Participants explained that they could not understand the reasons why an adult male would sexually abuse a child, and this made the act disgusting:

> *I just cannot understand, you know, that's the disgust there, because I think you're thinking you've done that to your own child. So, our role as a parent is to protect him to make [him] safe and you have probably done one of the most damaging things you could possibly do to a child, so that, that was the emotion I felt.* (P6)

It was the act of abuse that participants found disgusting and for some the word disgust alone just did not carry enough negative potency:

> *It's meaningless. You know the word 'disgust'; I am disgusted about a meal. I think disgust is just a generality, it doesn't mean anything to me, disgust. That's why I use the word abhorrent, disgust doesn't go anywhere near.* (P13)

However, some of the participants also expressed various conflicting feelings, in as much as that they had feelings towards the offender, particularly when they explored whether they had been abused as children:

> *It doesn't stir- doesn't stir anger, erm- it just, it causes me to feel sad for them and think, you know, what's happened to you? What has led to this happening?* (P12)

> *I feel quite confused really, sometimes about how a…yeah, confusion about that person. Erm, but they are negative thoughts, I don't have a lot of understanding feelings or compassion, and I tend to reserve that for the child and the safeguarding part of the family.* (P12)

They expressed difficulty in addressing those strong feelings and separating them in order to do the work they need to do:

> *It's interesting because when you get given whatever the index offences are, and you've got to manage the risk and work with the risk of that, when I am reading it in black and white, I am thinking that I am going to find it really, really, really difficult to separate it. Yet when I am sitting in front of the person like I'm sat with you now, opposite a table, actually it's not as hard as you think it's going to be, because you do see a person before you think of the offence. So yes, it is difficult, but I still think there's something in me that*

> *enables me, and I don't quite know what it is, to separate the offence from the person.* (P9)

There was an anxiety about not being able to separate the person from the offence and how difficult it was to have a working relationship that is separate from the offence the perpetrator has committed:

> *This is the case I have now [and] I have really struggled to engage him, because all I could think about was the person that I am working with and how rubbish his life currently is and how all of his life has been turned completely upside down by the offender, so I think if I am working a case where I don't know the victim, I don't have any relationship with the victim, I've not met them, they are effectively a name on a piece of paper, I think I can come at it from a really objective clear way and I feel that I can effect change and help change, but I think if I know and work with the victim, I might struggle with that.* (P10)

5.8 Parenthood

The question of whether having one's own children affected their practice revealed some interesting findings. All the participants who were parents expressed the view that working with offenders was difficult, particularly if the victim was of similar age and gender as their own children:

> *I couldn't work with a sex offender who's committed offences against a child the same age as mine, the same gender as mine. I couldn't do that because I couldn't rationalise it, because I would put my own son in that position and therefore I don't think I could work with them. I couldn't give them a fair chance, because I would be judging them on the basis that 'How could you? You could have done that to my son'. So, I couldn't do that, but then I think that happens in all aspects, I won't work with anyone that might physically abuse a child the same age and gender as my son or any of those things, because I definitely place my son in that position.* (P7)

The offences became more real and it became more difficult for the participants to understand the motivation as the reality of victimhood came closer to 'home' as it were:

> *I think from the context of the sexual abuse case; you know that if it's someone who has, who is a parent and has done that on their own child. I think that makes it more real, more- it's sort of more of a raw nerve when you kind of think, in some sense it's enriched my kind of, I don't know if enriched is the right word, but it's made my practice more thorough when asking questions to parents, but it also, it can make some cases more tricky, where someone has done something horrendous to their child, and I think you struggle to comprehend it more because you have your own child.* (P6)

However, it was not just having their own children, but also being grandparents, that was a difficult emotional issue for some:

> *You feel, there's no way on earth I would let anyone ever do this to my child, I would like to wrap [my] arms around them and hold them a bit tighter at night and it's the same, exactly the same with grandchildren because they are now really young and I would worry about them, I worry that they're not in my care in a bizarre way they are very well loved and looked after, but I just worry about the big, bad world out there. I would protect them better because I think I know the worst, so I know that those people can't be trusted.* (P1)

An associated issue within disgust was that of loss of purity by the children who had been victimised.

5.9 Purity

This was often linked to the disgust that participants felt towards the offender. As P19 explains:

> *Absolutely, absolutely and I think for me, that's where the disgust links in because somebody has taken or…perhaps unconsciously, I don't know, has violated that purity, you know that purity of that child.* (P19)

However, this loss of innocence was not just confined to the child victims of abuse, but also included an effect on the workers:

I am less innocent, my thought processes are less pure, because I can't just think about the lovely things about children I know. I am always thinking about 'what if' so what if that person is not how they are presenting really? What if that person is actually out to do something to one of the children I know? So, I am left with that. (P8)

Associated with a loss of purity, all of the participants talked about the children who have been abused as being seen by other professionals such as teachers and police officers as damaged, not only in a physical sense, but in an emotional way. The 'damaged' label could carry long lasting and serious consequences:

Oh yeah, you often hear the words 'damaged, they are damaged'. I have heard people say that they are likely to become sex offenders because of their experience. People jump to the conclusion that if you are sexually abused as a child you can become the perpetrator of sexual abuse [in later life]. I think they [teachers] think there is a close link between that. More so with boys, I think I've heard more comments like "well now that he's been sexually abused, he'll probably go on to abuse others or vice versa, so if a child has come through with an allegation of sexual abuse against them, I'd say 95% of the people believe he must have been abused as a child. (P7)

A strong feeling was the thought that the victims would see themselves as damaged in some way:

I think they will probably feel [like] damaged goods. I don't think they are damaged goods, but I think they may well feel like damaged goods. (P8)

Nevertheless, some of the participants expressed a sense of hope that their intervention might help some children recover:

Yes, not necessarily damaged beyond repair, but damaged is the word, that they have been exposed, they've most definitely been exposed to even on a basic level to things they shouldn't have been exposed to. Even if it hasn't got to a contact [sexual act] but in terms of what might have come before that in terms of relationships, sexual boundaries and all of those things, so I think

> *there is a level of damage, but I am a believer in that being able to be repaired.* (P10)

To this point the major theme of 'disgust', which was expressed in a variety of ways, started to emerge from the data, and what it meant to participants working in this field has been presented above. Disgust was expressed not only as a moral judgment, but also as a feeling which brought up some real physical reactions of revulsion, much like one would expect to find with people coming into contact with physical matter.

The idea of disgust expressed by participants was tempered by an acknowledgement that this could and sometimes did, compromise their professionalism and they had to actively monitor and modulate this. The findings also seem to link disgust to robbing children of their purity. However, this violation of purity was also extended to themselves, with participants feeling that this work had robbed them of their own purity and in addition blunted their ability to feel This is developed further under the theme of effect on self.

5.10 Stigma

Some participants felt that there was not only a stigma attached to sex offenders, but also to social workers who work with families. P7 went on to say that:

> *There are two sorts of stigmas going on. There's the stigma of 'we come out and just take children, we're evil, because we steal children' but I think there's also the fact that we do work with sex offenders, we work with a variety of people that society doesn't deem as socially acceptable and we have to work alongside them so we are not working against them, but we are working alongside them and I think that people can't understand how we are capable of doing that.* (P7)

What was intriguing to note was the association (as far as some participants were concerned) in people's minds between evil and social work and the stigma that this association carries. P7, above, certainly felt that her 'clients' saw her as evil and some of the public at large could not quite comprehend how she was capable of mixing with that 'type' of person, almost as though she had a choice.

The word ‘weird’ was sometimes used by the participants to explain how people outside of their immediate teams saw the work they did:

> *My friends think it's weird, that it's a weird job. Why would I want to work with people that abuse their children, they find that really bizarre.* (P4)

These feelings of strangeness or weirdness were associated with the fact that the work social workers did was disgusting in the moral sense of the word. There had to be a way of explaining how it was that they as ‘normal’ people could do such work and an explanation was to interpret this behaviour on their part as ‘strange’ or out of the ordinary.

So far in the chapter I have illustrated the journey that participants took during their interviews when discussing their work with families where an adult male was implicated in the sexual abuse of children. They reflected how they defined sexual abuse and the effect this had on children as well as on them as professional social workers. The participants spoke of the difficulty in separating their professional role from their more visceral hostile response to the abuse of children. They discussed the emotional difficulties they faced including the struggle with their inability to offload their emotional strain on anyone other than fellow workers as the public at large, and family and friends did not understand or were able to hear about the realities of working in this difficult professional field.

The interviews revealed that their work exacts a heavy price on all areas of their lives, with relationships suffering, including their more intimate ones. They explained that the abuse of children often sparked angry feelings, which they find hard to square with their duty to carry out unbiased assessments. The findings also revealed that social workers were negatively impacted by whether they had children, with some social workers expressing the view that it had become more difficult (and sometimes impossible) to do this work since becoming parents.

The theme of disgust was a very significant one composed of a number of subthemes as shown above. Another theme that was prevalent was one that of professional practice, which also brings with it a number of associated subthemes.

5.11 Professional practice.

Living with the uncomfortable emotions that working with cases of sexual abuse engenders was a fact that participants acknowledged, and tied up with being a professional, as P14 explained:

> *I think it's because it's uncomfortable to sort of live with those feelings, especially when you're a professional and you have to.* (P14)

All the participants described some difficulty in trying to stay 'professional' both with the perpetrator, but also sometimes with the non-offending parent:

> *It's a challenge. It's really, really difficult and I think- I definitely put on a social work hat and this is, I've got to do the best for these children, the children that I am working with. Make sure it's safe for them. So, I overcome it, I don't know if I can pinpoint how I do that. I think it's more on the basis that whether it's this children's father or uncle, whoever we are talking about, there is an element of we need to make this safe, so I prioritise their needs, so I will engage- does that make sense?* (P7)

5.12 Ethical practice

The issue of professionalism and ethics was an important one as they all felt the weight of responsibility to get the balance right between emotions that might impede their working relationships and their job, in doing fair assessments based on evidence:

> *It brings up that ethical discussion around what is, you know, you can separate behaviour and the man himself but, ethically is it safe, you know, so I think you can. Within this particular case the way I tried to maintain my professional way of work was, offering what options there were to the family as a whole, but also the girl on her own.* (P6)

This setting of feelings aside was a conscious effort on the part of participants as they acknowledged the need to keep the child victim at the centre of their work:

> *In order to do my work, I have to be able to set aside those people because I need to concentrate on what is in the best interest of this child, how this child is*

going to be safeguarded, what this child needs in order to hopefully recover from what's happened to them. (P12)

The issue of separating feelings as explained by P12 was an ever present one and was seen by participants as a difficult task. So, whilst they acknowledged that separating their feelings for the perpetrator was sometimes difficult, they were clear that it was an essential requirement:

I do compartmentalise all of them, for whatever reason, I do try, and when talking to the person, to be as objective as I can with, yeah, I think that's how I deal with it by being objective and an open mind, because we've had situations where stories haven't always been sincere and genuine. The hardest thing for me has been when it's not the birth family that is perpetrating abuse We have a very recent case where a foster carer is alleged to have abused a 14-year-old child in his care, and that I have found even tougher and I think that's because you're looking then at the child being removed from the birth family where there wasn't sexual abuse and we have placed the child in another family where she is sexually abused and, what have we done? And those feelings then are more difficult for me to be objective, I find that even harder to not be judgemental in my thinking now. (P1)

This was a telling comment, which highlights a difficult issue for experienced social workers, namely the emotional conflict caused by removing a child to a nominally safe place, which in fact turns out to be harmful. As a result, participants had adopted their behaviour to practice a form of professional hardness.

5.13 Professional hardness

A frequent comment made by participants was the fact that, in their quest for professionalism, and in order to keep their feelings suppressed which might negatively impact on their work, they adopted a 'professional hardness'. They talked about themselves becoming inured to actually feeling:

I think I have become less sensitive to certain information that can be shared and I am thinking more when I did my work with young offenders, you almost

desensitise, you can become desensitised to certain things that they talk about because you almost have to, otherwise, probably that feeling of disgust would come up, so I suppose I am more relaxed about things that I hear that probably prior to becoming a social worker I would not have been able to tolerate at all. So, I suppose that I am a little bit desensitised to it. (P7)

The feelings of becoming hardened or blunted were also worrying for participants in that there was a fear that that attitude would be transmitted to the work and the relationships they need to build. There was also a view about the importance of knowledge about sex offending, which might help to diminish some of that hardness:

On a personal level, having worked with a number of people who have been convicted, some of whom have admitted, some of whom continue to deny, I think I've become a little bit hardened to listening if that makes sense, so I think I…I think when I first started, when I first qualified, if I was working with anyone who had allegations of sexual offences made against them I think those feelings that I was describing earlier were more raw. I don't know if I showed them, looking back I would hope I hadn't shown them, but I can't say that I hadn't, but I think that as I have progressed more in my career, learned more about cycles of sex offending, learned more about treatment programmes, learned more about victims even, I think those feelings are a little bit softer. I have not really thought about it in this level, but thinking about it now, I can identify that I have those feelings and they are still there, I think they are not really as close to the surface as they used to be. (P10)

Participants showed concern about the impact of the work on their home life and worried about not being able to leave it behind:

I think the worry for me is not being able to, you know…kind of…the impact that it would have on my home life and - again, more complex cases or if there is particularly nasty neglect or sexual abuse, whatever it is, - the more the children are impacted, and it's all about, you know, the worry for me, I don't want to think about, you know, I want to leave it at work. It's that kind of protecting myself as a professional outside of work … so it doesn't impact my home life, my family life. (P6)

Whilst participants worried about leaving their professional persona at work in order to be able to be either a mother, father or partner they did not always know how to deal with the emotional load of their work:

> *There probably aren't many people outside SW that know. They do know that I work with children who have been sexually harmed, but I think…I don't think they, I think, I think they get to a point when they wouldn't ask me anything about it because they don't want to know because if they did know anything about it, hear about it where would they take those feelings how would they manage it?* (P9)

They questioned the honesty of the non-offending partner, which is interesting given the weight of research, which they would have come across in their social work training. More often than not the offender makes great efforts to keep the abuse secret, from everyone and in particular, if there is one, their partner. Participant 12 states that:

> *I was continually questioning, not questioning them, but I really couldn't- I really couldn't, erm, come to terms with- mum wanting to be there, have children with him and I couldn't come to terms with they might be being honest with me- I just- it just felt that- yeah, I just didn't feel that they were being honest and that was really difficult for me, and I challenged them on that.* (P12)

The comment by P12 also highlights the issue of feeling lied to by one element of the child safety net, which should be relied on. It would not be surprising if perhaps this feeling was heightened for P12 as she was also a mother.

The issues associated with becoming hard or inured by the work was something that the participants discussed in relation to supervision.

5.14 Supervision

Throughout the interviews, participants identified the importance of being able to offload their feelings and they talked about supervision and peer support:

You tend not to take those ones home with you because you've got to leave it at the door and that's when having your supervisor and your colleagues to talk to come in really. (P3)

Some participants stressed the importance of supervision:

Supervision is the most helpful. I think, trying to keep focused on separating the person from the events, whatever that might be- yes, I think and talking with peers, sharing what's happened, talking about it. I think it's that offload. It removes it from somewhere in your head. I think as social workers we've kind of developed those skills in all areas of practice so not just the sexual abuse-all areas of practice will trigger something in us- yes, I think the offloading is the most helpful thing for me. (P9)

Very often that supervision was needed immediately, which has an important impact on both the quality and quantity of managers:

I've have had one case, but it wasn't an adult male sex offender, it was a child, and I had to have supervision straight after it because some of the things that they shared about the crimes that they had committed was a bit like 'wow'. (P7)

Some participants worried about how listening to the victims' stories would 'damage their mind' and supervision was a way of preventing this:

I do notice it manifests as my brain being a lot more active and it's not meant to be and that I am much more tired and sort of now being able to acknowledge it and speak to managers to say yes this is playing on my mind quite a lot. (P14)

The fact of professional collusion between the worker and his/her supervisor was highlighted by one participant as a possible drawback of supervision and the importance of having the 'right' person:

In supervision I talk about it and in some ways fortunately my manager had been the manager for the other social worker who had dealt with it right from the beginning, so she, I say fortunately, however, I think we were both of the same mind in terms of dad, so maybe my supervision with her wasn't as

challenging as it could've been, so maybe she didn't challenge some of my thoughts and feelings that I had about dad and she probably acknowledged it and maybe agreed with the way I was feeling and she possibly also agreed with the fact that… …we couldn't be completely sure how safe it was for those children to have dad still living in the house.(P12)

Whilst formal supervision was discussed, it was evident that less formal support was just as important for the participants.

5.15 Peer support

The issue that P12 highlights above is important as it goes to the heart of supervision and how it may not be either good enough or indeed sufficient to be able to help them carry on with the work. A way of solving this was by the use of peer support, which was seen as very common and important by participants, as explained by P1:

Yeah, it would always be having to talk about it with another person in the workplace, always, always on that stuff which can't be spoken about outside the workplace because it's confidential, and it's for me, and it's for my manager or my peers for us to talk about, because it's so harrowing, it is about talking to other people, it's never about accepting thinking it's okay to carry this horrible story around in my head for the next 6 weeks or whatever. I have to process it with somebody else. So, for me, I have to talk about it. I have to talk about it. There's nothing else that I can do to protect myself; I can't keep it in my head. I have to have it out there, so it's spoken. (P1)

Peer support offered a chance to just offload feelings which might not be necessarily about how to work with cases, but more about venting in a safe environment:

Talking with peers, sharing what's happened, talking about it. I think it's that offload. It removes it from somewhere in your head when you have to be carrying it around all the time. I think as social workers, we've kind of developed those skills in all areas of practice so not just the sexual abuse…all areas of practice will trigger something in us…yes, I think the offloading is the most helpful thing for me. (P9)

An important consideration for the participants was trying to 'get it right', which was closely tied to the need to share the emotional load with someone and at times not being able to:

How did I feel the first Saturday it was happening? I can remember being at home looking at the clock thinking "Oh my God it's the first contact. Thinking "I've made the wrong decision, shouldn't have allowed it", then thinking, "No, it's OK it's a multiagency decision, you haven't made that decision on your own", because the thought of something happening to that child, would just be unbearable, because both of the girls who were raped by him, one suffers significantly with anorexia and the other young lady has been in and out of mental health units for all of her adult life. (P9)

The emotional load, referred to above, was not without some personal cost and this was noted by participants.

5.16 Effect on self

The emotional and physical effects of doing this work had a significant effect on participants and this is labelled as the theme 'effect on self'. This was a topic which took up a large part of the interviews, and it had a thread of negativity about it.

Participants in the study talked about the work affecting them at different levels. As discussed above, a common response was that this kind of work 'blunted' their feelings and in some cases 'robbed' them of their 'purity' and made them less innocent. In addition, they said that this affected not just how they felt when working, but also in their personal life as well:

So, for instance, if I was sitting in a group of people, none of which were social workers apart from me and an item that came up on the internet and they were talking about. Something really gross and disgusting. I am outside from them because … it's not affecting me. So, in that way, I feel I've been left less pure…I am less innocent; my thought processes are less pure, because I can't just think about the lovely things about children I know. I am always thinking about 'what if' so what if that person is not how they are presenting really?

What if that person is actually out to do something to one of the children I know? So, I am left with that. (P8)

In some cases, they talked about how this work affected their personal relationships and general attitude towards men:

I think it does, but it's about keeping that in perspective and not allowing it really. I think I have met social workers who can be very bitter particularly towards men (P3)

It also had an impact on their more intimate relationships:

Although not many admit to it, it affected my sexuality when I was doing the job in the sense that I found having sex with my partner really very difficult. (P13)

There was also a physical health cost to the work, which was acknowledged. This has long been known to have an effect on workers:

It did really take a toll on me physically as well. I suffer with chronic migraine now, and I had a lot of migraines around that period when I was working on that case, just because I think of the emotions that come up and the fact that you've got to acknowledge them and you usually do it in your own time, and they sort of come out eventually and you being a bit stressed and tired. (P14)

Some participants felt that their relationships with friends could be compromised because they lost some of the sympathy:

I try not to let it. I know that I've become worse and worse at staying in touch with friends, when I have lots on at work, and it's not necessarily just about cases like this, as I've just got a heavy caseload I tend to not be as responsive to other people's needs, so that if friends have got different things going on. I just think, oh, it's not as bad as you think, you lose a bit of sympathy really, which is bad. (P14)

This was also the case with their own families who often could not understand the motivation or interest in working with men that they had a strong antipathy towards:

*Well from my family's point of view, my mum and my dad, don't go there. They think that sex offenders are just scum, so [they say] why would you go there and do that and why would you want to do that really. Most of my friends are builders and plumbers. So, I have to be a different person they just say, "give me a sex offender, and I will, I will f****g beat then up", yeah that's their response.* (P13)

Participants said that their families often did not understand their work and took themselves away from it, leaving the participants to discuss it with colleagues as the only alternative:

They all say, I couldn't do what you do, everyone says that my husband says that, I just don't know how you do that, how you can work with people, talk to people and I think people just find it awful, a shocking thing to think that someone has to work with people who perpetrate abuse like that. (P1)

The response of family and friends could often be quite extreme and precluded discussion, even if the worker wanted to:

*My mum and my dad, and actually probably quite a lot of connected people use comments like "I don't know how you do that; they are all f****g bastards. I don't know how you can work with them and not sort of chop their d***s off".* (P10)

Participants felt that people outside their professional world not only did not understand their work, but also did not wish to know about it. This is discussed further below as these feelings merged into a more overarching theme of what is called 'dirty work' or 'tainted work:

There probably aren't many people outside social workers that know. They do know that I work with children who have been sexually harmed, but I think... they get to a point when they wouldn't ask me anything about it because they don't want to know because if they did know anything about it, hear about it, where would they take those feelings and how would they manage it? (P7)

However, this lack of understanding also sometimes extended to people within the profession, but who do not work with children and families:

> *Yeah, but even that to be fair isn't always the case. One of my friends, she doesn't understand how I, because she works in adults, she doesn't understand how I can do children's social work. She thinks I am weird.* (P7)

Some of the more negative effects are subtle and express themselves through difficult emotions such as anger and sometimes shame:

> *I had been asked if I've worked with people who have been physically abused and I said yes, but not gone into details, but I have never volunteered that I work with people who have been sexually abused and it might be because I am actually ashamed that I have worked with people who have sexually abused children.* (P2)

Often, and in particular after the death of a child, the media and the general population blame social workers for what they see as their poor practice. Social workers themselves are not immune from this self-reflection entailing blaming themselves, as this participant explains

> *I think work people do, because we've all been there at some point and I think everyone whether they like to admit it or not feels that they could have done a better job in certain cases and sort of blame themselves for different outcomes.* (P14)

This self-reflection is taken home and affects the lives of participants in sometimes quite a profound way:

> *I think that because sexual abuse stirs up kind of unnerving feelings in people, anybody I think working I think that they- I wouldn't say that they kept me awake, but they are cases that would have kept my mind ticking over. Have I followed the right procedure? Have I done the right thing? Actually, is that child safe? Is that a good enough safety plan in place for those children, for that child? And they are cases that I think you second guess sometimes and you kind of are always thinking have you done enough? Or have I done enough is what I would think, but as things have gone on and I've felt more confident, I think those feelings are less, but I think I still always hold them in mind.* (P10)

A thread running through the interviews was the view amongst participants that their profession was seen very poorly by the public at large. The participants said that they dealt with this by not disclosing their profession or not being clear as to what they do:

> *I often don't tell people that I am a social worker, I say I work with children and families because there's this massive stigma attached to it I think. I think there is a massive lack of understanding. They think I am odd; they think I am weird.* (P7)

There was a fear that they would be seen as being somehow involved in the abuse of the children they work with:

> *I think people will lump us together, so you became as bad as they or as bad as the things they've done, you are almost complicit in it. Not that they say that word, but you all just get being lumped together so because you can work with a sex offender, for example, there must be something a bit weird about you to be able to do that, to be able to communicate with people who have committed quite heinous crimes.* (P7)

The participants also talked about the effect on them of merely coming into contact with men who sexually abused children.

5.17 Dirt, contagion and contamination

Participants' work brought them into contact with sex offenders which was 'contaminating' and the notion of this contamination was almost physical in that it was described as 'dirty' by the participants.

The view that emotions and feelings are transmitted from person to person or sometimes from group to group is well established in research. During the interviews the participants started talking about how they felt that working with offenders somehow contaminated them, although there was confusion as to the nature of this:

> *I guess the feelings could be contagious, so disgust, that disgusts me, if we were sitting in a room with police officers and they might say "and someone said that disgusts me" …it might lead to other people saying yeah it does them as well. I'd guess you'd look at it as carrying…you've been contaminated with*

something. Difficult to describe what with. Is it an emotion that's contaminated you? Or is it actually the facts and the reality of a situation? But I can understand that, I can see that link between being…you know having to get up and making a cup of tea because you've read something for too long, but what have you got that you need to leave? …You know do you need to decontaminate yourself by having to make a cup of tea in order to come back? I don't know. (P11)

Participants acknowledged that other professionals, namely the police, are exposed in a more tangible way to some of the starker aspects of the work. This they believed could cause contamination, as exemplified by the comments of P6:

I don't think I could do the job, such as the police who would search … people's computers and they'd be exposed, you know, quite often you would see in court where someone's been caught with thousands of images and someone's counted those up, you know, in category A and B and C and they got a definitive number at the end of it. So, they are going to be exposed to quite high-level child pornography, which, I feel, in a job like that, would cause contamination. (P6)

Participants talked about feelings of emotional disturbance, which drove them to take physical actions:

Feel dirty? Oh yeah, I've had showers before. It can make me feel dirty and I have had showers before, I just want to start again, start the day again start the hour again or clean off, but that's more a comforting thing. (P2)

Feeling dirty also made the participants feel that they had been 'mentally tainted' by talking to the offenders or merely by being in the same room as them:

I think you're left sometimes with mental tainting maybe. Yes, maybe thinking about that…I suppose so because if I hear something on the television, about a case, the child that I am dealing with will spring to mind so therefore I suppose it's left in your mind and it will bring back what I have heard or whatever…I don't know whether tainting is the right word. I consider that the whole job

that I do, one is left with crappy stuff in your mind, so I don't specifically feel that I feel tainted by that. I am left with the knowledge of it on my head. (P8)

These feelings of being tainted also extended to a notion that people who came into contact with them (the participants) would feel in this way too and that it could affect their relationships. For example, P8 explains that:

They do see you as almost being, I am not sure if it's complicit exactly, but you are…I suppose they would feel you are tainted. They would probably if you pushed would feel that word, because you've sat in the room and you've breathed the same air as that person who's really disgusting, and they've done these awful things to children so somehow, you've shared in them. (P8)

There was a strong sense that the act of working with offenders somehow made them a part of the abusive act and that even if they did not feel contaminated by their work, other people certainly thought they had been:

So, I think people do that. I don't know if I feel like that. I don't feel like I have been contaminated. I don't feel like it, but I think that other people perceive as that's happened. (P7)

This feeling of being seen as contaminated by their work also translated into participants feeling that people saw them as being in some way 'like' the offenders as that would explain why they did the work that they did:

So, you must be like them, so you must have similar characteristics, you must enjoy hearing about sex offences to be able to work with someone who's committed a sexual offence, so you must enjoy that a little bit, because otherwise, how can you hear it? Because it's so horrific, so can you just sit there and listen to it? So, they sort of make you part of their crime, if that makes sense, there must be an element of you that enjoys that sort of work, which then makes you a bit odd. (P7)

This was a difficult feeling and one that was not widely reflected on and if it was, it was couched within 'humour' as this comment from P7 shows:

They don't understand it. They think I am weird for doing social work. They don't understand how I can work with different types of people and actually

> *work alongside them. I often don't tell people that I am a social worker, I say I work with children and families, because there's this massive stigma attached to it I think. I think there is a massive lack of understanding. They think I am odd; they think I am weird.* (P7)

The personal contamination of doing this work was a difficult feeling to have and for some participants it carried a sense of isolation as the comment by P7 indicates.

5.18 Chapter conclusion

This chapter has presented the findings of the study. Major themes ranged from difficulties of defining sexual abuse and how this question then extends to the feelings and emotions associated with this work. I have shown that chief amongst these is disgust, which is very often confused with anger but is actually a clear theme in its own right and is what sets out this research apart from other work carried out with experienced social workers.

The findings have been in part surprising because of the strength of feeling shown by many of my participants, an indication of the importance of the findings in terms of the implications for future social work practice. For example, how do social workers deal with feelings of disgust that may have an impact on their final assessments? Should they have supervision that specifically addresses that issue and should they have access to outside specialists to discuss sexual abuse cases. I discuss this much more fully in further chapters.

In the next chapter, I discuss these findings in relation to the literature in the field.

Chapter Six: Discussion

In chapter five, I presented the findings of my interviews with participants who had experience of working with families where there had been an incident of sexual abuse.

The participants discussed various issues that were important to them. My intention throughout this research, was not to look at the mechanics of how social workers go about assessments, which has been widely addressed elsewhere (e.g. Milner et al. 2020) but to look at their feelings when immersed in the work with families away from the 'comfort' of guidance such as that set down in 'Working Together to Safeguard Children (2018). My purpose was to move away from practice structures and guidelines and, as a result, interviews focused little on the methods of the participants' work (although this was important to them) but more on the personal and professional results of their work. In short, I was exploring the lived experience of social work practitioners who had been involved in the field for some time. Social workers set out to work in a professional and ethical way with their clients. The expectation is that their practice will adhere to strict ethical guidelines as set out by professional bodies such as the British Association of Social Workers (BASW) and professional standards as set out by Social Work England, which is the recently appointed (Spring 2019) body which regulates social worker practice in England.

The interviews had a conversational quality, which allowed the participants to explore as yet unspoken areas of emotion laden practice. The findings of these interviews were set out in some detail within the previous chapter. My intention now is to anchor those insights to theoretical concepts and thereby unlock new knowledge, which will provide new understandings, in a difficult area of practice.

The findings revealed that the experience of social workers who work in families where child sexual abuse was a feature was not always as one would expect. My expectation was that social workers would describe a practice devoid of powerful negative feelings towards people they work with, where their practice was grounded in person centered practice (Munro, 2011), but instead I found a professional practice which was conflicted and emotionally difficult. This is an issue, highlighted in the literature review, that whilst social workers may aim to work in a person-centred way this may be "*incompatible with modern statutory social work*" Murphy et al. (2013 p703) As

discussed before, child abuse is a contested area of work, which changes with time (Wilkins et al. 2020). This is nowhere more so than in the area of sexual abuse where fact and opinion are the area of dispute. This is played out in official guidance as the changing nature of Working Together to Safeguard Children (2009, 2015, 2018) showed, with the ‘facts’ changing both with movements in technology such as the internet and just as importantly with changes in politics, which sometimes drive policy (Reader et al. 1993; Butler and Drakeford, 2011; Jones, 2019). What this present study seeks to do is to factor into this political and guidance struggle the fact that raw emotions, such as disgust, can and do influence practice and indeed could affect the result of assessments that social workers have to carry out.

The findings of my study indicate that an inconsistency in social workers’ practice is triggered by strong emotions, such as anger and disgust, which affects the ability of social workers to stay neutral and able to work with offenders in a way which would not compromise any assessment or ongoing work. Not only that, but, if social workers are to practice in a way which allows them to work consistently, then the fact that participants had a varying understanding of a basic term such as sexual abuse could impact the result of assessments and as such is worthy of attention. I start the discussion with that premise, followed by a consideration of the themes as set out in the previous chapter.

6.1 Sexual abuse understanding

The social workers in the research were all experienced workers who had undertaken extensive academic studies to at least university degree standard as well as engaging in continuing professional training. An easy assumption to make would be that all of them would have a good understanding of sexual abuse, both in terms of its meaning and more importantly the effect of that abuse on children.

If social workers are to practice in the area of child sexual abuse (CSA), then it follows that they need to understand what CSA is, and that this understanding is one that is shared by other professionals. Indeed, this issue of a shared understanding of language is something that has been raised in a number of reviews of practice following the tragic death of children (Reader et al. 2003). The definition that is used to draft all protection

procedures across English Local Authorities is based on that provided by the Working Together to Safeguard Children (2018) guidance. The definition is inclusive and has changed over time to reflect the changing nature and understanding of CSA. So, for example, the current guidance includes digitally assisted sexual abuse (e.g. Glasgow, 2010) and the growing worry around child exploitation (e.g. Alderson, 2016), which did not feature in earlier editions of the Working Together official guidance.

There has been research carried out by Martin et al. (2014) on behalf of the NSPCC, which has looked specifically at social workers' knowledge and confidence when working with cases of child sexual abuse. They commented that:

> Social workers recognised that practice relating to CSA was taking place in a rapidly changing environment. They were tasked with needing to be aware of CSA within families and familiar relationships, CSE, child trafficking, internet-based grooming, sexting, revenge porn and a myriad of new and ever emerging ways of talking about the abuse of children and young people. They identified the need to know how such behaviours impact on children and their families in order to assess and identify risk appropriately and act on any concerns. It was also important to have the confidence to critically interrogate such terms and ideas, rather than assume knowledge. (p12)

Martin's et al. research identified a number of explanations as to why social workers were not confident, chief amongst them being the fact that training at University level was not sufficient and that what made for confident practice was the availability of placements during their studies, which offered the opportunity to work in this field.

Kwhali et al (2016) carried out some further research based on Martin's et al. (2014) work. Their conclusions offered a withering assessment of the government's approach to the work of social workers in this area of work arguing that:

> The focus of government and Chief Social Worker interventions appear to suggest that there is something inherently problematic about social workers themselves that can be improved if they are more tightly regulated, trained outside of universities or subject to post-qualification exams. The research suggests that social workers are highly motivated in their work with vulnerable children and often practise in the most challenging of circumstances. What

> many essentially lack is the resources to do the job and access to early intervention and therapeutic services that will support abused children. (p2222)

However, their research did not look specifically at what the social workers felt when working with cases of CSA. In my research, what was clear and new to this field was that the participants' understanding of sexual abuse was not solely based on the guidance given by formal statutory guides such as Working Together to Safeguard Children (2018) but was instead based on a more visceral emotional understanding. This fact may explain the specific rigours of working in this field for all professionals. What was common to all my participants was the view that not all abuse is equal, in terms of the damage it causes. There was a view that different types of CSA vary in seriousness or more broadly that there is a gradient of harm. This is now considered.

6.2 Grading

My participants not only showed a possibly professional specific view on whether levels of harm influenced their attitudes (i.e. grading), but they had clear (although divergent) views on the effects on victims of different types of sexual abuse, which of course could have an effect on their actual practice and professional decisions.

Participants felt that it was the emotional aspect of the abuse to children which was most important. The research revealed that sexual abuse is not just about physical harm and it is the emotional harm caused to children which is the key aspect of sexual abuse. Tied to the emotional harm of CSA was the participants' view that it constituted a betrayal on the part of the abuser, with this betrayal of trust being always bound to a power imbalance between the abuser and his victim.

As Weiner et. al. (2014 p 4)) rightly pointed out: "*Offence seriousness is difficult if not impossible to define, in part due to the varying effects of similar crimes on different victims.*" What is now well established is that the attitudes of the general public and perceptions about sex offenders are consistently negative (Shackley et al. 2013; Day et al. 2014) and, as Harper and Hogue (2015 a) suggested, this view is often promoted by the press, which provides the frequently erroneous and mythical views of offenders as always being dangerous predatory paedophiles, with sometimes tragic results.

However, both offender (older male offenders are viewed more negatively as are female offenders) and offence specific issues (rape and offences against children are seen as more ‘serious’) have been found to have a substantial impact on both the perception and attitudes about sexual offenders (Harper and Hogue, 2015b; Harper et al. 2017), and thus it would be surprising if this effect was not found (possibly ameliorated) within social workers. Indeed, there is also evidence that this view is dependent on the professional role and crucially dependent on the amount of experience of working with sex offenders. What the evidence shows is that the more experienced professionals are with this type of offender, the less negative their attitudes are likely to be (Day et al. 2014). This is important in terms of social workers who are not likely to have extensive work experience with offenders themselves, as most of my participants did. It is also important to note that this negative effect is likely to be increased by the experience of working and seeing the effect of the offences on the actual victims rather than solely working with the perpetrators of the abuse as some professionals such as probation officers and psychologists do (Day et al. 2014).

6.3 Betrayal of trust and power imbalance

Most CSA is committed by adults on children or by people who have power over others by virtue of age or relationship (NSPCC, 2019). This betrayal of trust is also a term widely used when children have been abused by members of organisations which have a hierarchy (e.g. schools and sports clubs) and by persons who have a duty of care, such as in religious organisations. Australia became the first country in the world, under the Wrongs Amendment (Organisational Child Abuse) Act 2017, where institutions have a clear ‘duty of care’ to protect children with organisations being proactive in order to prevent abuse. Crucially it was stated that:

> If abuse occurs, there will be a presumption that the organisation failed in its duty of care unless it can prove that reasonable precautions were taken to prevent the abuse. This ‘reverse onus’ shifts the responsibility of proof onto organisations, helping to reduce barriers in legal proceedings for survivors. (Attorney General, 2017)

Other research, such as that of MacMartin, (2004), pointed to the negative effect on disclosure that the power imbalance involved in breaches of trust has, and how it can be

extended to the inherent power structure of families in the UK and most of western society.

The participants in my study used the idea of betrayal of trust and power imbalance to further underline, in their view, the grievous nature of sexual abuse and how different this was from other abuse in terms of seriousness. This betrayal of trust and power imbalance made the abuse of children worse in the eyes of the participants and underlined its powerful emotional content and the part that emotions play.

6.4 Emotions

The work of social workers has long been described as one where emotions play a major part and where the ability to reflect is essential (Ingram, 2013; Dore, 2019). This was no different for my participants. Their difficulty in having an agreed personal (as opposed to organizational) definition of CSA may be to do with the fact that, for them, the sexual abuse of children was not just about physical harm or set in a gradient of harm. For them, the emotional load of the abuse played a primary part, and this was quickly elicited by feeling anger towards the perpetrators of CSA and describing their behaviour as disgusting.

My findings describe a set of social workers who wanted to be professional and who had worked hard to achieve it, because they recognised the importance of their work and the fact that they worked with people who needed their protection and deserved their best practice. They understood that, in order to became professional, they needed to subjugate their feelings, something that involved considerable emotional effort and no shortage of 'surface acting' on their behalf (Hochschild, 2003). Therefore, some of the difficulties that the participants described can be attributed to the need of social workers to constantly expend emotional energy in 'keeping it professional' and sometimes not really understanding what that meant in practice. It should be pointed out that this difficulty in understanding what professionalism looks like is not confined to social work and could be something that professions, which include practice placement in their initial training, have in common (Teskereci and Boz, 2019).

The act of ‘keeping it professional’ was important in this research and is a theme which is discussed in detail later in the chapter. The findings showed that the theoretical construct of ‘Emotional Labour’, as proposed by Hochschild (1975, 1979, 2003) in her research on the working of flight attendants, fitted quite neatly with the work of social workers. According to Hochschild (2003), emotional labour is the amount of effort involved in work that entails face-to-face contact with the public or, as in the case of social workers, with service users. Hochschild contended that the person doing the emotional labour must produce an emotional state in another person. In addition, the worker has to express appropriate emotions, and this is achieved through two processes; firstly, through surface acting, i.e. pretending to feel what is expected and secondly by deep acting, which requires the social worker to draw upon his/her own personal reserves in order to bring about the required facial or bodily display of emotions. The fact that social workers need to be able to show emotions and that their clients are adept at picking them up has been known for some time. As Davies (1981) pointed out:

> Client-perspective studies have greatly helped in the task of defining professionalism in social work. It is clear that the true professional is not someone who is cool, detached, career-minded or disinterested, but is the worker who can display friendliness (not necessarily friendship in the conventional sense), understanding, and a warmth of manner which convinces the client of his active interest in and concern for the client’s plight (p20).

This view of emotional labour is important when looking at the ‘survival’ of social workers in front line practice. There has been a link between social workers leaving the profession and emotional labour. Research by Jik Cho and Jin Song (2017) looked at this by examining what factors determined whether social workers would think of leaving the profession and they confirmed the link between emotional labour, organizational trust, and turnover.

It was important then, that my research explored this, and it was very soon apparent, that strong emotions played a significant part in the work of my participants. This was shown by the emergence of two major themes, namely anger and disgust.

What my findings revealed is that these two themes impacted not only on the participants’ work, but also on their life outside work in myriad ways. The participants also indicated that whilst feeling disgust, they also that working with sexual offenders

somehow contaminated them in both a moral and emotional sense. This contamination and contagion of disgust (which is discussed in detail below) was accompanied by strong feelings of anger. This theme is now considered.

6.5 Anger

In my study, the participants expressed feeling angry about the harm the children they worked with had been subjected to by their abusers. Although this may not be a surprising finding, it is important in that moral judgments are often strongly influenced by affective processes (Haidt, 2001) and anger has been linked to negative moral judgements, which is significant in the context of assessments and decision making. The fact that perception and bias play a part in assessments is well-known and not only present when working with sexual offenders. For example, Henley et al (2019), when looking at assessments of older adults (OA) and alcohol use, found that their participants' perceptions of "*the OAs they assessed, was a critical factor in determining the outcome of an assessment. It was a factor in almost all aspects of participant practice*" (p145).

My findings give support to the CAD hypothesis as proposed by Rozin et al. (1999) who suggested that there is a close relationship between three moral emotions (Contempt, Anger, Disgust) and three moral codes (Community, Autonomy, Divinity), and they argued that emotions are triggered in three areas. Contempt is produced by violations of Community values (which they define as in-group loyalty and respect for authority); Anger is produced by violations of Autonomy values (defined as issues of harm/care and fairness/reciprocity); and Disgust is produced by violations of Divinity values (defined as purity of body and spirit).

The CAD hypothesis suggests that moral anger is elicited specifically by the perception of harm to others, including symbolic harm such as violation of rights. Both these perceptions were expressed by the participants in my study. However, the issue of anger as an emotion is not always that clear cut and, for example, what some writers (e.g. Hechler and Kessler, 2018) call empathic anger is often conflated with moral outrage, which is triggered by the wrongfulness of an action (i.e. a perpetrator's intention to harm) whereas empathic anger is triggered by its harmfulness (i.e. the actual harm

done). This certainly seemed to be the case here with a number of participants' comments highlighting how angry they felt about what would be the effect of harm on the victims in the future. These responses are important when it is considered that the assessments that are carried out by social workers can take significant periods of time and, certainly, whilst the feeling of anger endures, it could impinge on the work. As Gutierrez and Giner-Sorrola (2007) pointed out: "*Emotions can also have influence on appraisals and judgments. In particular, the strong association between harm and anger indicates that harm can be seen not only an elicitor of anger but also as a response to it.*" (p865)

However, Nabi (2002) proposed a different interpretation. He argued that, unlike the CAD hypothesis where the moral emotions of contempt, anger and disgust are quite distinct and are elicited by different violation of quite different moral codes (Sheweder et al. 1997), in reality these three terms (CAD) all describe a single homogenous emotional response to morally offensive behaviour (Nabi, 2002). However, there is a significant amount of support for the view that these emotions are indeed different, as the CAD hypothesis suggests (e.g. Hutcherson and Gross, 2011), and which my results seem to confirm. What is not in dispute and is important and what my research also confirms, is the view that emotions, such as anger and disgust, are emotions which play an important if not critical role in moral judgment and decision making (Haidt, 2001). This is an important finding of my research, as moral judgements can have significant effects on any final assessments which social workers carry out. These assessments are a crucial part of care proceedings and, ultimately, for the long-term care of children who are deemed to be at risk of significant risk.

A further emotion identified by my study participants associated with anger and disgust is that of fear.

6.6 Fear

Participants in my study also reported being fearful of the perpetrators of CSA. They reflected that this was sometimes an irrational fear, in that the risk these men presented was to children and it was extremely unlikely that they would present a physical risk to themselves.

Fear is an emotion which is often experienced by social workers working in child protection. This is often discussed, not only as a fear of getting things wrong and the consequences both personally and for the children who they strive to protect, but also about fears for social workers physical wellbeing as a result of violent attacks by parents and carers (Littlechild, 2008). The effect of such fears can be significant but are sometimes not properly acknowledged by employers (Littlechild, ibid). Further, it has implications for the process of assessment. As Stevenson et al. (2015) argued, their "*results suggest that people who are sensitive to disgust are likely to react negatively toward sexual crimes and are thus likely to be biased against defendants accused of sexual crimes*." (p191). Fear could be seen as having quite a negative effect on the result of assessments and ultimately on decisions about children's futures (Brockman and McClean, 2002).

Stevenson et al's (2015) research supports the idea of the public having a fear of sex offenders, who are often seen as dangerous predators. This societal fear of the dangerous, out of control (usually male) offender was experienced by my participants during visits. The fear as expressed by them was not just about being in the presence of 'disgusting' men, as outlined above, but it was a fear of being sexually assaulted.

As pointed out above, the fear associated with sex offender forms part of the larger concept of disgust, which was a primary theme in my study, and is explored further now.

6.7 Disgust

Emotions such as anger and disgust have emerged as important aspects of this research which examines the responses of social workers to working with men who have committed major transgressions.

What was abundantly clear from the findings was that the participants reported feeling disgust and that this feeling was a feeling of moral disgust as that described by various writers (e.g. Rozin et. al. 1993) and carried out with different groups of professionals and even volunteers (Hamermman and Schneider, 2018).Yet there has not been any research carried out specifically in relation to social workers and particularly in relation

to social workers working with families where there is a concern or involvement of an adult male sex offender as in this present study.

Disgust has been seen as the means by which humans avoid disease or parasites (e.g. Curtis et al. 2004)). However, there has also been research that has looked at the moral aspects of disgust, such as that carried out by Mary Douglas (1966) who maintained that the emotions of fear and disgust become important signals that something is not right, but which needs to be put right. She argued that what is considered 'dirt' in a given society is any matter which is deemed as out of place. This is why dirt is an important and universal symbol of social structure and why emotions such as disgust indicate a breach of moral rules, which in my study was the sexual abuse of children by adult males.

Disgust was originally seen as a means by which people could keep free from ingesting toxic materials (Rozin et al. 2000). The early work of Darwin (1872/1965) and Rozin (1986) indicated that the physiological aspects of disgust all aimed to keep people away from substances that could be noxious and dangerous to health.

Returning to Rozin et al. (1999) and the CAD, they argued that, contempt, anger, and disgust, "*are the three main "other-critical" moral emotions, a cluster of related but distinguishable emotional reactions to the moral violations of others*" (p575). This was replicated here in the current study where people used anger and disgust for what on the face of it looked like interchangeable definitions, but on further analysis demonstrated quite subtle differences in feelings. My findings did not show any overt contempt for clients, although it was clear that some of the comments carried this emotion as a latent component. The descriptions used by the participants to label the action of abusers as disgusting seem to clearly echo what Rozin et al. (1999) found.

Work particularly that by Curtis (2013) has indicated that the purpose of disgust is to prevent infection. She proposed that "*disgust systems evolved to defend animals from attack by parasites".* (p19) and developed a theoretical framework to understand disgust, with her Parasite Avoidance Theory (PAT). However, what became apparent was that disgust, as Rozin et al. (1993) pointed out, has expanded to include not just physical issues but moral transgressions as well. My findings indicate that this is certainly the case and that situations which were clearly not noxious or dangerous to life seem to elicit the same physical markers and reactions as that elicited by clearly noxious

substances. This supports the notion that disgust is much more than just the way that people have evolved to protect themselves from parasites.

Furthermore, what is certainly evident is that the meaning of disgust continues to be a hotly contested area, with differing theories being put forward, and strong arguments being raised (e.g. Clark, 2014; Korsmeyer and Smith, 2014; Strohminger, 2014). In the end a pithier meaning of disgust is offered by Herz (2014) in her response to criticisms of McGinn's (2011) theory when she commented that " *... all bullshit aside, a scientific amalgamation of terror management, and avoidance of pathogens and oral incorporation is, in my opinion, the best meaning of disgust*." (p2019)

What the literature indicates is that there is a range of emotions which are implicated in the explanation and understanding of disgust. My participants expressed clear feelings of anger when talking about the sexual abuse of children. This seems to support the ideas put forward by Nabi (2002) who said that disgust is very often identified by the lay public as anger and that when people recall events as disgusting, they may be using that word as a signifier of being angry. This certainly was the case with some of my participants who expressed a very real and visceral anger at the abuse committed by adult male sex offenders. However, it may just be, as my findings seem to indicate, that participants felt anger as distinct from disgust. This supports the opinions put forward by Rozin et al. (2008) who argued that disgust is what it is and not just an accident of language. In any case, Nabi (2002) seems to be referring to American English in her use of 'grossed out', which may explain some of her findings, certainly for a British audience.

It is a point of debate as to whether social workers, such as the ones in my study, qualify as lay or academic professional members of society (Nabi, 2002). My speculation is that social workers, despite being members of a graduate and post graduate level profession, are more like lay members and their feelings align quite closely with members of the public as portrayed in mainstream publications. DiBennardo (2018 p3), speaking from a USA perspective, argued that the constructed meaning of a sex offender is shaped by the legal system itself and gave the example of the California 1996 Sexually Violent Predator Act, which "*categorizes and defines "sexual predators" as pathological, repeat, and violent offenders. Legal descriptions of criminal sexual*

acts provide a framework for the public to interpret deviant sexuality: the language they use is imbued with meaning."

She goes on to say that "*although legal language thus sets the stage for exaggerated interpretations of sexual predators (Janus, 2006), other cultural arenas likely reflect and shape how this term comes to be understood.*" (p3), and that key cultural arena is the news media. It should not be surprising that the media plays an important part in shaping social workers' views of sexual offenders as they (social workers) are just as likely to be influenced and the very negative depiction of men who sexually abuse children is not just by red banner populist papers but also by well-respected broadsheets.

It should also be added that media manipulation is of course not just the preserve of print media, but it is increasingly carried out by digital communication platforms such as Twitter and Facebook, who stand implicated, amongst other things, in the manipulation of democratic elections and the propagation of 'fake news' (Colliander, 2019). Indeed, there are groups in Facebook whose sole aim is the dissemination of often false or at best misleading 'facts' about sex offenders and in some cases are set up as vigilante groups, a practice which has been strongly condemned by the police authorities.

Research carried out by Tapp and Occhipinti (2016) also strongly pointed to the fact that, although other negative emotional responses like anger were correlated with disgust, in their view, "*the function of disgust has expanded beyond protection of the body from physical impurity to a role in protecting the body from moral impurity from interpersonal sources*" (p769). However, it may be that moral impurity is not really disgusting. It may be that people just use the word disgust or express something as disgusting merely as a representation to describe what is actually an anger response to moral transgressions (Pole, 2013).

The fact that my participants expressed anger is not surprising as previous research has found that sex offences against a child elicit both anger and disgust as such actions are, according to Russell and Giner-Sorolla (2013), "*both categorically abnormal- creating disgust - and harmful to a person and his or her rights- creating anger*" (p337).

However, they come to the clear conclusion that disgust is different to anger and more importantly for this research that:

> Disgust has the ability to prejudice moral and legal judgments inappropriately while being unresponsive to the kind of considerations that would make it appropriate. Policymakers and professionals involved in criminal trials should then question whether disgust should play a role in legal judgments, on a general philosophical level. (p347)

In their view, anger, which can also bias conclusions, is very often the 'right' emotion to feel, while disgust is in their view an 'unthinking' emotion, which is harder to make "*subservient to fair procedures and standards*" (p347), at least in the legal field.

Disgust was mentioned as an emotion by all of the participants in my sample which was predominantly female. Some researchers argue that there are significant sex differences in the propensity to feel disgust, with female being more prone than males (Sparks et al. 2018). This has been variously explained as an evolutionary tool as a result of effective polygyny, as Sparks et al (ibid) explained. "*Hence, if disgust propensity reflects a risk-averse strategy, and if humans are heirs to an evolutionary history of effective polygyny that has made men generally more risk-prone than women, then women should display greater disgust propensity than men*" (p. 944).

It is of interest that this was replicated in my study, with some of the female participants expressing very strong disgust reactions. A number of researchers have argued that disgust sensitivity influences moral decision-making (e.g. Van Leeuwen, et al. 2017). In addition, this relationship is marked for moral transgressions of the purity domain, which includes such things as sexual transgressions as those committed by sex offenders (Wagemans et al. 2018). If this is the case, then this may well be significant for the profession of social work, which is overwhelmingly female (DfE, 2020). Feelings of disgust have been found to influence moral judgements in a way that people can make harsher judgements about a morally disgusting scenario (Schnall et al. 2018). This may be at play in social work practice, when social workers are faced with an individual that they consider to be morally disgusting.

Ingram (2013) made the point that unconscious emotions can have an effect. If, as research seems to indicate, moral judgements are not largely the result of conscious consideration but are based on unconscious emotional responses, then that might be

called 'intuitions' (Haidt, 2001; Keinemans, 2015). This then makes the issue of good supervision, which allows workers to reflect on their practice, ever more important so as to make moral judgements available to conscious thought and therefore amenable to change.

Current research on the demographics of the social care workforce show that it is mostly made up of women (86%) and just over half is aged between 20 and 39 years of age (DfE, 2019). This age range is changing, and social workers in children's services are becoming younger. This reduction in age is almost certainly associated with a drop in the minimum qualifying age, which fell after social work became a graduate profession. Whatever the reason for this, it means that there are a large number of workers who are either parents or at an age when they are likely to become parents. For the purposes of my study, the fact of being a parent was something which my participants spoke about and is discussed next below.

6.8 Parenthood and purity

Participants felt that being a parent had an effect on their attitudes towards a sexual offender, with an increase in negative feelings towards them. This is not in line with most studies which have found no differences between parents and non-parents in relation to global attitudes towards sexual offenders (e.g. Craun and Theriot, 2009). However, these studies are not based on social workers and research also indicates that many parents in the general population perceive their children to be less at risk of sexual abuse than other children (Collins, 1996). A possible reason for this is the fact that this is due to the effect of unrealistic optimism, which "*refers to an underestimation of the likelihood of experiencing negative events and to an overestimation of the probability of experiencing positive events*" (Weinstein and Klein, 1996 p2). This would have been expected to be seen within my participants, but the fact that it was not may mean that unrealistic optimism may be counteracted or negated by the robust knowledge and practice experience of those within my participant cohort.

Both parent and non-parent participants raised the issue of purity in terms of a loss, not just for the children involved, which Douglas (1966) maintained is associated in opposition to dirt and contagion, but also in relation to themselves. As argued in the literature review chapter, children are associated with purity and adult abusers with

danger and contagion (Douglas, 1966). My participants also shared this view, which was more strongly held by those participants who were parents themselves. However, a finding that has not been previously reported is the fact that some of them reported that their own personal 'purity' had been compromised and, by association, their innocence was somehow violated. This is in contrast to the expected (and confirmed) finding that participants understood and talked about the effect on children of abuse, which range from physical trauma to long term psychological effects (Maniglio, 2009).

This is an interesting finding and one that needs further unpacking as clearly feeling that one's own purity is compromised by contact with adults who abuse children could have significant effects on the quality of relationships that are forged between the professional and client and the possibility of that affecting any assessment.

Associated with the concept of purity is that of dirt, contagion and contamination (Douglas, 1966). Given what has been discussed above, those three concepts did emerge as themes and are now discussed as a group.

6.9 Dirt, contagion and contamination

In this study, I discussed with my participants the concept of dirt and dirty workers as this seemed to sum up large parts of their work and what people outside (and sometimes within) the profession felt they did. I discuss these terms in some detail within my literature review chapter, but it is useful to offer here a brief outline of the concepts before delving further into the findings of the study.

Mary Douglas (1966 p44) described dirt as "*matter out of place*". I understand this to mean that dirt is not just about objects, but also ideas and actions, which go against the norm of society and which can be considered dirty and indeed "out of place" within a society which has rules and guides of action, which not only keep society firm, but acts as a means of protection.

The notion of dirt and dirty workers was first set out by Hughes (1964). He said that dirty work "*may be simply physically disgusting. It may be a symbol of degradation, something that wounds one's dignity. Finally, it may be dirty work in that it in some way goes counter to the more heroic of our moral conceptions*" (Hughes, 1958 p49–50).

Ashforth and Kreiner (1999) used Hughes work to explain why such disparate jobs as butcher and social worker are labelled as dirty work by saying that:

> The common denominator among tainted jobs is not so much their specific attributes but the visceral repugnance of people to them. Indeed, it is precisely because the occupations of, say, butcher and funeral director or prison guard and social worker evoke the same reaction—despite their obvious differences in job design and context— that the construct of dirty work is so intriguing (p415).

The concept of dirty work has been further developed by McMurry and Ward (2014) to include emotional dirt and they explained that:

> Just as there are workers who physically clean the streets or tackle social deprivation or enforce moral codes, so too there are those who manage the burdensome and disruptive emotions of others. As with other forms of dirt, dealing with emotions that are burdensome, threatening and out of place is important in so far as such work is necessary for the smooth functioning of wider organizational and societal systems, whether at the level of organizational toxins or community wellbeing (Frost, 2003). (p1140)

Inherent in Hughes definition and the further work of others above is that dirty work taints the person doing the work (dirty worker) and this introduces the idea of contamination. Thus, the work of social workers meeting child sex offenders contaminates them in the moral sense and, critically, this contamination can be passed by them onto others (i.e. contagion). Participants said that they found it difficult to disclose to people including family and close friends that they worked with sex offenders. This was to do with their feelings that they had been infected by their contact with people who had been highly stigmatised and once the depiction is made, others (friends and family) declare a moral distance from the dirty workers to avoid association with the reprehensible situation themselves. As Mary Douglas (1966) explained: "*We find that certain moral values are upheld, and certain social rules defined by beliefs in dangerous contagion, as when the glance or touch of an adulterer is held to bring illness to his neighbours or his children.*" (p3)

What is important in my study is that the participants were not of course talking about a physical contamination, but a 'moral' one in terms of being contaminated with the effects of moral transgressions on the part of the child sex offenders. This is not a new thought and indeed has been used widely in popular writing (e.g. Vaughan, 2019). An issue for my participants was the idea of being contaminated by touching or just being in the presence of stigmatised people. This is not a new theoretical construct and Meigs (1984) used the "law of contagion" to understand primitive cultures, but it has also been shown to influence behaviour in Western culture.

This contagion in the sense that I am talking about here, is generally defined as "*A form of magical thinking, contagion encompasses the idea that when two objects come into contact an exchange of essences (i.e., global goodness or badness) takes place, and each object then bears a permanent residue of the other*." (Tapp and Occhipinti, 2016 p756)

The original idea of 'magical contagion' was developed by anthropologist James Frazer (1890/1959) who used it to describes the transfer of properties (germs) from a source to a recipient, through contact which has been expanded to include moral properties. This is important as it explains the view as expressed by participants that doing their work can make them less esteemed by family and friends. It also explains how contagion can be a powerful concept in the work with dirty workers and emotional taint in that the mere fact that participants sit in meetings with sex offenders is enough for them to become morally/emotionally tainted which can lead to social (and actual) shunning by friends and families. A further concept that seemed to be at play with the participants, and which could to some extent be explained by magical contagion as devised by Nemeroff (1995), is the fact that they claim that:

> Magical contagion makes the following predictions regarding when individuals will feel vulnerable and invulnerable: Contagion should be perceived as most harmful if from a disliked source or enemy, as least harmful if from a loved one, and as intermediate in threat (given that contact occurs at all) if from a stranger. (p149)

Although, their argument is based on germ transmission, it can be adapted to moral/emotional contagion. That is, the participants feel highly vulnerable to contamination from a person they consider disgusting and in turn they will pose a source of harm to loved ones. Tapp and Occhipinti (2016) also found that moral contagion is intimately tied to disgust. They claimed that:

> Magical contagion is at play when applied to the moral domain and that contagion theory suggests that moral transgressors are a source of negative essence which can be passed on to previously neutral objects through physical contact. In turn, the prospect of contact with the contaminated object results in an avoidance response. It has been suggested that this avoidance response is driven by feelings of disgust. (p756)

Here in this study, participants felt strongly that their work served to shield the wider society from contact (or from knowledge) of people who committed heinous crimes who might well contaminate the population at large and that it was their job to prevent this. However, coming into contact with these people, considered by the populous at large to be disgusting, contaminated them with a level of moral dirt, which, as explained above, could be transmitted and contaminate others (contagion).

Curtis (2013) pointed out that an important function of disgust is to help people avoid and put distance between themselves and people who have carried out acts beyond the moral code. However, this presents a difficulty to the people such as my participants who must contact, speak to and generally have a professional association with moral transgressors, given that moral disgust might well be contaminating. This was clearly articulated by participants who felt that friends and family did not understand their work and that, in some instances, in an effort not to be shunned by family and friends, they chose not to discuss their work. They reported that at times this placed a great deal of stress on relationships and served to further cement the fact that the only people they could talk to and 'be' with were other social workers. This can also be understood in terms of roles that my participants took, which seemed to be fluid and interchanging and which Lawler (2013 p 8) argued "*need to be understood not as belonging 'within' the individual person, but as produced between persons and within social relations*". This idea chimes with Hochschild's (2003) notion of emotional labour, where the actors (in this case social workers) present a character to people, which is negotiated and involves

making relationships. In short, social workers present a role to people, which involves the expenditure of emotional energy. The only people with whom they can be their 'true selves' is with fellow practitioners.

As well as contamination and contagion, a further subtheme was that of stigma and its effect on participants. The participants in my study were clear that it was not just high caseloads or lack of supervision that made their work difficult, but it was in many cases the feeling they had that they had to keep their work a secret, certainly from friends and sometimes from family. Participants discussed what they termed as stigma as a way of explaining why wider society chooses not to associate with people who work and thus come into contact with the highly stigmatised child sex offenders.

Goffman (1963) defined stigma as a social attribute that is discrediting for an individual or group. It has a negative impact on the individual and often leads to the exclusion from society of the group or individual being stigmatised. This is clearly the case with sex offenders as shown above. Most of the literature which deals with stigma concentrates on those who experience it directly. However, Goffman (1963 p30) suggested that stigmas not only affect the individuals bearing them, but also those who are closely associated with stigmatised individuals and groups: "*the problems faced by stigmatised persons spread out in waves of diminishing intensity among those they come in contact with*". The issue as my participants saw it was that when people knew what their work was, it could cause them to be shunned in the same way as the stigmatised population and this could cause significant problems for them in social contact terms. One way that they solved it was by only divulging their profession to a select few. This action is not new and, in an early paper, Birenbaum (1970) explained how mothers of what he called 'retarded children' dealt with their stigmatising experiences. He argued that:

> Since their stigma is affiliational and not physical, it is relatively easy for them to manage information about themselves. Despite the occasional revelation of differentness, many people who bear a courtesy stigma usually proffer an image of normality without any apparent effort to dissemble, and this image is ordinarily confirmed by others in interaction. (p196)

Study participants frequently reported that, in their opinion, the public's view of their profession was poor. Interestingly, although the national press frequently labels social workers in negative terms, particularly after the tragic deaths of children at the hands of their carers (Jones, 2014), it seems that the general public has a much more positive if confused image of social workers. What seems to be clearer is the possibly false view of the public towards child protection workers (e.g. Davidson and King, 2005). Some research has found that although social workers themselves feel that there is a negative view of social workers, this is in fact not the case (Stainforth et al. 2016). This seems an important fact as this possibly faulty belief on the part of my participants may have led them to behave in what could be seen as quite secretive ways when discussing their profession. However, their personal experience from friends and families seems to dispute this research finding, with some participants reporting significantly negative views on the part of family members.

This was clearly something that my participants said they did, although it was not something they liked doing and they felt it impinged on their professional social work practice.

6.10 Professional practice

This study was about how social workers felt and the important role that emotions play in the professional work that is social work. My participants talked about emotions in relation to their "*daily practice of judging, deciding and acting*" (Keinemans, 2015 p2179). They discussed the difficulties involved in making decisions about children and families, which entailed a moral aspect they described as 'professionalism'.

Professionalism for them was about not allowing their feelings or emotions such as disgust and anger towards the perpetrators of sexual abuse interfere with their duties as social workers and not allowing their feelings to make their practice judgemental or, more seriously in their view, biased. The notion of professionalism was woven around the concept of doing their job well and always focusing on the child. This need to act ethically is something which has been discussed at length both within social work (Banks, 2006, 2012), and also with reference to other caring professions where practitioners come into close contact with service users. Uriz-Perman et al. (2013) encapsulated this by pointing out that: "*This issue of "duty" and "good professional*

practices" is at the root of many individual approaches from the moral point of view, as well as of many professional ethics." (p346)

This issue of being professional was talked about at length by my participants in respect of not allowing their feelings to interfere with their work as social workers and dictating how they operated in a non-biased way. The concept of professionalism here in my study is not new and is something that has been studied both in social work and in other professions where practitioners come into close contact with service users, some of whom are deemed to be outside the moral norm (Uriz-Perman et al. 2013). Being professional was also equated to practicing in an ethical way. It is to that aspect that I now turn.

6.11 Ethical practice

The concept of ethical practice in relation to working in a field where negative emotions take centre stage is important and merits some discussion in relation to the findings of this study. As pointed out above, in the application of their duties, my participants felt that the emotions (disgust, anger, etc) generated by working with child sex offenders, challenged their practice, which could involve making significant and sometimes life changing decisions for children. Their dilemma was how could they make professionally sound decisions in the face of some powerful and not always conscious emotions?

This dilemma was laid bare by my research. One participant explained their struggle when looking at the issue of when abuse occurred after a child is placed in what was thought to be a safe place. The emotions of disgust at the abusive act were also tinged with conflict in that the abuse had occurred as a result of a professional decision. These emotions have practice implications as to how decisions are made.

It would seem that the participants felt that, in their work, there was a rational answer to the dilemmas they came across and in an effort to make sure that emotions did not cloud their judgement, they fell back onto a rational approach, which as Keinemas (2015 p2180) explained is "*When faced with a moral dilemma, actors should carefully and deliberately consider relevant principles and make a deliberate judgement, without*

emotions interfering in this process.". However, there is a view that emotions play a large role in the making of moral judgements. For example, Schnall et al. (2018) carried out work about decisions under situations where the emotion of disgust was manipulated and they found that this had a significant effect, concluding that emotions and moral (ethical) judgements were intimately connected, They offered evidence to show "*that disgust influenced judgments of nondisgusting moral violations as much as it influenced judgments of disgusting moral violations*." (p1106).

My participants felt that they resolved this pull on their ethical practice by subjugating their feelings, but, as discussed above, this may be impossible to do and would only give the illusion of control, which in itself may be more 'dangerous' or deleterious for their practice as they may act in unethical (non-professional) ways without any means of stopping that. The participants felt that their professional 'duties' of working in a non-judgmental and non-oppressive manner, and in accordance to ethical principles, were being challenged by the people they were working with. It was an ongoing issue and one where participants had found no easy answers. The resolution that some participants came to, was simply focusing on the child and keeping the sexual abuse perpetrator at arm's length. It was here that maybe the question of worker's personal attributes came into play and even more so when the feelings may have been unconscious. This has resonance with As Uriz-Perman et al (p347) who stated that what is important is "*to acquire an "ethical consciousness" based on which, first of all, the professional may identify the ethical problems and, afterwards, he/she may be able to cope with them."*

A concept allied, but at the same time in opposition to ethical practice is what I refer to as professional hardness. This is akin to compassion fatigue which is defined as emotional and physical exhaustion leading to a diminished ability to empathize or feel compassion for others. The term was first coined by Figley (e.g. 2002) who argued that compassion fatigue was almost an inevitable consequence of caring and that "*like any other fatigue, reduces our capacity or our interest in bearing the suffering of others*" (2002 p1434). This has also been recognised in child protection workers (Conrad and Kellar-Guenther, 2006).

It would seem that participants felt that social workers can become blunted by their experiences and can develop what is seen as a lack of emotional engagement in the pursuit of professionalism.

6.12 Professional hardness

It is well accepted that frontline child protection work is extremely taxing and requires resilience on the part of the worker (Bradbury-Jones, 2013; Truter et al. 2017). This finding was replicated in this study and my participants talked at length about the effect this kind of work had on them. As in previous studies, they reported some of the effects of possible burnout such as emotional bluntness (Nelson-Gardell and Harris, 2004).

The comment about this work making them 'professionally hard' is supported by Farrenkopf (1992) who found that, over time, experienced therapists working with sex offenders became emotionally hardened and experienced increased anger, suspicion and confrontation. What is perhaps surprising is the fact that in this study, the participants did not work with the offenders in any depth and yet still their attitudes and feelings were quickly negatively amended. This may indicate that even moderate contact with what can be described as 'noxious' people can have an effect and, as has already been intimated, this can affect the result of assessments and eventually the outcomes for children.

It was important to explore what my participants did to 'combat' the perceived effects of working with men and in situations where children would be harmed. A clear theme that emerged was that of supervision, both formal and the more informal peer type supervision.

6.13 Supervision

Supervision was viewed as very important in this difficult work with men who sexually abuse children. The findings indicated that participants made a distinction between what they saw as formal supervision with a manager and other types of supervision which are more rightly called peer supervision

It has long been held that supervision, and in particular reflective supervision, is a central aspect of successful social work practice (Berger and Mizrahi, 2001; Morrison, 2003; Mor Barak et al. 2009; Ingram, 2012; Hair, 2013). Indeed, some authors argue that 'good' supervision is crucial to the work of social workers engaged in child protection work and, as Munro (2010) pointed out, supervision is a *"'core mechanism for helping social workers reflect on the understanding they are forming of the family…their emotional response and whether this is adversely affecting their reasoning, and for making decisions*' (p53). However, there has been an ongoing dispute as to what constitutes effective supervision, particularly in the difficult and pressured environment of child protection work. As argued in an earlier chapter, supervision is not or at least should not be just about the managerial task of case supervision but should also include discussion about the emotional content of the work. This was amply explained by Carpenter et al (2012 p2), who argued that *"supervision works best when it pays attention to task assistance, social and emotional support and that workers have a positive relationship with supervisors.*"

Wilkins et al. (2017) went much further and forcibly argued that:

> At the heart of our findings is a conundrum – managers do not seem to be doing what they say they want to. Their priorities were that supervision should be child focused, reflective, analytical, emotionally supportive and helpful in terms of practice. Our findings suggest that the supervision they currently provide is none of these things. (p948)

Wilkins et al's (ibid) findings are important for social workers working not only in an emotionally laden area, but also a field where risk is never far, as the case of Victoria Climbié amply showed. In that tragic case, the manager both failed to offer supervision and at the same time 'protect' her worker, which eventually lead to the tragic murder of Victoria at the hands of her carers (Laming 2003).

My findings indicate that this is also a fact for the study participants in that a significant number of them did not report supervision as being the place where they would receive help to foster the positive attributes that managers identify as important in Wilkins et al's (ibid) study.

The Laming report after the death of Victoria Climbié emphasised the fact that the main role of social workers as seen by the public at large was to prevent harm coming to children. This has certainly been amplified by the rise of the 'risk society' where the whole focus is on risk and on how not just to avoid it, but eliminate it altogether (Beck, 1992). Some writers argue that in today's social work practice as, for example, Beddoe (2010) clearly explained, "*the expansion of supervision to the health professions is clearly underpinned by the managerial and political agenda of performance management in the risk-averse cultures of contemporary health and social care*". Other writers, such as Peach et al. (2007 p229), have gone further and have argued "*that the sole goal of supervision is in danger of becoming the elimination of risk through the micro-management and surveillance of practitioners and their outcomes*".

Social work is not the only profession where supervision is not seen as an altogether benign and empowering activity for practitioners. For example, as Northcott et al. (2000) argued, when supervision was first introduced into nursing it was initially seen as yet another way of appraising nurses. So, it is that in social work, the link between control and supervision has in recent times been strengthened (Wilkins et al. 2016) whilst at the same time there is agreement that supervision should be seen as an activity where practitioners can discuss their practice without fear of being reprimanded or micromanaged.

Ingram (2013) wrote about the importance of supervision for workers who deal with a high emotional load in their work. He noted the importance for practitioners to be able to engage in what he called 'deep analysis' of their work and that this type of activity sits well within the confines of formal supervision. He cited Hawkins and Shohet (2000) who described the role and thus the purpose of supervision as a forum where not only are workers listened to but also a place where they can reflect and learn from their practice. Ingram also made the point that emotions play a vital part in the decision-making process of social work and if these emotions are not acknowledged and dealt with it could lead to tragic consequences.

However, in the present study, participants described formal supervision much in the way that Ingram (ibid) described. They saw it as distinct from informal support from colleagues and as a time when they could stand back and reflect on the raw aspects of

their work, which allowed for more nuanced decision making to emerge from the confines of what could be the paralysing effects of the 'taint' acquired in the dirty work of child protection.

Although the study did not focus on supervisors it seems important to underline some of the factors that are important in supervision with regards to supervisors. The literature talks about the importance of managers in dirty work because "*managers of those in stigmatized occupations may have a particularly important role to play in normalizing the taint*" (Shantz and Booth, 2014 p1458). By doing this, managers allow workers to continue to work in a profession, which can prove extremely toxic to all concerned. Ashforth et al. (2017) suggested that managers have three functions, the first being validation of their work (which according to my participants is also a function of more senior colleagues). Secondly, and most importantly for this study, managers offer protection from dirty work hazards, which in terms of my participants may entail dealing with the stigmatised clients that social workers come into contact with. Finally, managers negotiate what they call the "*frontstage/backstage boundary*" (p1273), that which was first coined by Goffman (1959) to distinguish the work that is carried out in the full view of the public (frontstage) and what is carried out behind the scenes away from the public gaze (backstage). This is of particular importance and was something which was often mentioned by the participants, who commented about the use of, for example, humour to deal with difficult work practices. In short, Ashforth et al (ibid) argued that "*backstage provides a safe haven for employees where they can make sense of their experiences, temporarily suspend their work roles, vent, and otherwise relax.*" (p1273)

In addition, and in line with other research (e.g. Ferguson, 2011), the findings also indicated that it was not just the formal supervision with managers which was important or most useful, but rather the informal talk with colleagues who are peers in what Ferguson (ibid, p267) called the "*secure base*" of the office.

6.14 Peer support

The idea of the 'secure base' has also been considered by others (e.g. Schofield and Beek, 2014; Biggart et al. 2017) who clearly report that it is not just formal supervisors that matter, but that teams also provide essential social support to help regulate

emotions. Indeed, Helm (2017), in his ethnographic study which primarily looked at physical space in social work offices noted that, as in these findings, practitioners were able to have a deeper discussion of cases, which under other circumstances would be considered to be unprofessional. It was about making sense of emotional information:

> Practitioners were also able to have a different quality of dialogue with colleagues where the emphasis was less on decision-making and more on a deeper reflexive consideration of the data available… Within this study, informal discussion was the most prevalent forum for making sense of emotional information. (pp393 – 395)

Although in my study participants were generally in agreement that formal supervision was not purely about tasks and managerial oversight, they also spoke about the importance of peer support in the work they carried out. They commented that one of the things that kept them grounded and allowed them to continue to practice social work was the fact that they could discuss their work within the workplace, both informally with colleagues and more formally within the supervision task. This was a finding which replicated the work of Dempsey and Halton (2017) who, in a study of social workers in Ireland, found that "*participants stated that membership of a PSG [Prescribing Strategy Group] helped them to acknowledge the feelings and emotions which arose in their work and helped them to integrate their personal and professional values, thereby strengthening their sense of professional agency*." (p16)

What participants also said was that peer support was used as a means of ameliorating the harmful effects of working in the difficult field of adults that sexually abuse children (Biggart, et al. 2017). This was in a way allied to supervision but is more akin to what I refer to above in terms of what and to whom practitioners can discuss the 'dirty' cases they work with. This function of peer support is important, indeed invaluable, if it is accepted that this support increases resilience and longevity (work wise) of practitioners (McFadden et al. 2015). Schofield and Beek, (2014) developed the Secure Base model in adoption work as a means of developing supportive teams in child protection teams. This seems to chime with what my participants were saying, although, for them, teams also offered a chance to discuss their feelings about people in ways which would be considered as 'unprofessional' by the public at large and where the use of black humour

was cited as common and useful (Sullivan, 2000; Gitterman, 2003). This finding is important in organizational terms as it provides further evidence about the importance of close-knit teams and the effect the current trend of ‘hot desking’ can have on the wellbeing and longevity of workers (Jeyasingham, 2016).

6.15 Chapter conclusion

This study has laid bare the tension and emotional difficulties experienced by practitioners who, on the one hand, want to behave in a respectful and empathetic way to their clients as is predicated by rules of the profession, but, on the other hand, they are emotionally rocked by feelings of anger and disgust, which inevitably negatively affect their practice.

There is general agreement within the social work profession, that emotions have an impact on both the work and personal life of practitioners, and this was indeed mentioned and reflected by the participants. The general population see sex offenders as “others” and as such they describe them in very pejorative terms and as people that are not “like us” (e.g. Shakley et al. 2013). As these study participants are qualified and experienced social workers, being interviewed about their professional role in a professional setting, a more measured way of describing their work experiences could have been anticipated. This is particularly important in terms of how social workers carry out their assessments as emotions are an aspect of the work, which can unconsciously affect the results of those assessments (O’Connor and Leonard, 2014; O’Connor, 2019).

The results showed that being a parent made a difference to the way participants engaged with men who were seen as sex offenders and there is a great deal of anecdotal evidence that points to female (in the main) social workers not wishing to work with sex offenders once they become parents. This has an effect on both the experience and gender of available workers who engage in this kind of work.

The findings also indicate that practice in this field has a potentially devastating effect on practitioner’s personal life which forces them to at least censor what and to whom they disclose details about their work in terms of close family and friends. This pushes them into a situation where the only people who offer tangible support are colleagues, and alienates them from aspects of their social and family life. Participants spoke about

them using different guises when at work and when at home or with friends, which required a great deal of emotional energy and, if unchecked, could have significant negative effects and cause lasting damage to their resilience.

Also, of interest is that although there is some understanding within the profession that, while the work with families where sexual abuse is a central feature is emotionally difficult, measures such as high-quality and appropriate supervision and support counteract the more deleterious effects. However, what the results shows is that although the practitioners involved know how they should practice, they are after all human beings and despite all efforts to the contrary the negative effects of this type of work still comes to the surface and impact on their decision making. This is the central message of the current study and it is the aspect that makes the findings so important. They offer new knowledge into what is often an unspoken aspect of the work, which needs to be brought to light in order to improve the practice of social workers and the life chances of the children who depend on sound decisions about their future. As such, this study offers contributions to the literature and has implications for social work practice, preparation and support.

In the next chapter I provide a brief summary of the thesis, the additions to new knowledge, and implications for social work practice.

Chapter Seven: Conclusion

My interest in this area of work was awakened by my work as an expert assessor of risk in cases where sexual abuse was a feature. It was my experience that social work assessments were sometimes based on erroneous notions of what was risky and where assessments, in my view, lacked emotion and were bracketed by a wish to appear professional, but which carried a sense of anger and lack of understanding of perpetrators. I came across cases where decisions were made which often did not concur with children's needs, but which carried with them uncensored criticism of the adults involved. I wanted to understand why this was happening and how those damaging decisions could be avoided.

The population at large see sex offenders as a silent dangerous group of people who need to be controlled and stopped from abusing defenceless children. They are the sharks in the ocean of society. Social workers are the tasked agents in controlling these silent dangerous predators, but this protection work carries with it some significant personal consequences and provokes some very strong emotions. My participants discussed their work and in doing so described a complex set of emotions, which were present when they become involved in this emotional labour.

The sexual abuse of children is a serious and it seems a growing problem. The latest figures which are available show that sexual abuse has grown year-on-year (NSPCC, 2019) and the legacy of child sexual abuse is serious and long lasting (Wilkins et al. 2019). In the UK, the profession tasked to undertake the major proportion of work aimed at safeguarding children from child sexual abuse are local authorities in the shape of Children's Services. They employ social workers who carry out investigations, assessments, treatment and in some cases take cases to court, which might result in removing children from the care of their parents.

There is a great deal of published work dedicated to examining how social workers or other child protection professionals work with families where there is child abuse or where children are at risk of harm (e.g. Taylor, 2017; Milner et al. 2020). That body of work, although very important, is usually concerned with how professionals carry out assessments, interventions and evaluations. It sometimes also considers how professionals arrive at decisions regarding the future of children and families where

abuse is a feature. However, there is an absence of research that focuses exclusively on the feelings and emotions that are produced when social workers are working with the male perpetrators or alleged perpetrators of child sexual abuse.

My research set out to critically answer the question:

"**What do Social Workers experience when working with families where sexual abuse is the primary factor?"**

My aims were to explore:

- Social workers' feelings about the adult male responsible/suspected of sexual abuse
- How social workers deal with the emotions produced by their work.

My research has captured how social workers felt about this area of practice, given the potential impact on their professional and personal life when working with families where sexual abuse may be present.

In this chapter, I aim to bring together the work I have undertaken and to show the contribution my research has made to new knowledge in this area and, finally, where it might go next. In my introduction and chapter two of this work, I explained what it is that social workers do when working in teams dedicated to the safeguarding of children. I discussed how assessments are carried out (Milner et. al. 2020) and how they impact on the decisions taken to ensure the safety of children, which may sometimes result in the removal of children who are deemed to be at risk of significant harm. I have presented to the reader how this area of work is fraught with difficulties. It is in the rare occasions when children die at the hands of their carers, that social workers are often accused of not carrying out thorough assessments of risk. This often ends up with changes to the child protection procedures being made and, in some cases, the changes can lead to wholesale transformations in legislation and amendments to how social workers are trained, as well as the personal stigmatisation of individual professionals (Jones, 2014, 2019; Shoesmith, 2016).

In chapter two, I examined in some detail the process of assessments carried out by social workers, which is an evolving one and one which changes with different political stances or more typically after the tragic death of a child (Jones, 2014) and one where the main focus is the prediction and avoidance of risk. I noted that this is an activity that only works when the assumptions made are not based on biased information, which can, at worst, lead to catastrophic decisions as the many serious case reviews of cases where children have died underline (e.g. Laming, 2003). The chapter also examined the concept of risk, which is currently paramount in the assessment of children. It showed that the notion has changed over time from a purely statistical calculation of chance with both positive and negative connotations to what it is today, namely a concept imbued with difficulties and sometimes formulated with the fallacy that it can be completely eradicated (Warner 2003; Lonne et al. 2016).

When looking at the idea of risk and the assessment of children, it was important to examine the changing theoretical and constructed notion of child abuse and the legislation that accompanies it. This discussion was allied to what childhood means and how the changing definitions of it have inevitably affected how child sexual abuse is seen, which in turn has affected the way social workers practice in this area.

In chapter three, the literature review, I set out to examine the literature underpinning my study in more detail. I discussed child abuse and risk management including child abuse in general and sexual abuse and its management in some depth. I examined how the profession of social work is perceived, and how the emotionally laden work impacts on social workers.

The chapter considered in some detail the concept of disgust and how it has moved from being a way of avoiding physical harm to also include emotional harm with the idea of moral disgust. The discussion included a close examination of contamination and how this feature in the work social workers carry out with sex offenders or children who have been abused. The chapter concludes by exploring the theoretical construct of dirty work and dirty workers (Hughes, 1958) as well as the concept of stigma and in particular curtesy stigma (Goffman, 1963).

In chapter four I discuss in detail my reasons for choosing a phenomenological methodology. This choice was made as the purpose of the research was to look at the

lived experience of social workers working with cases of child sexual abuse. As Lester (undated) explained:

> Phenomenology is concerned with the study of experience from the perspective of the individual, 'bracketing' taken-for-granted assumptions and usual ways of perceiving. Epistemologically, phenomenological approaches are based in a paradigm of personal knowledge and subjectivity and emphasise the importance of personal perspective and interpretation. As such they are powerful for understanding subjective experience, gaining insights into people's motivations and actions, and cutting through the clutter of taken-for-granted assumptions and conventional wisdom. (p1)

It was my purpose to examine the effects on experienced social workers of working closely with adult men who had either been convicted, or at least, were suspected of sexually abusing children and phenomenology offered the best way of doing this.

Chapter five presented the findings. The interviews were fully transcribed and used to draw out a set of themes. I made extensive use of the raw data, to try and 'tell the story' of my research. I expected my participants to tell me how difficult it was working in cases such as this, where adult men were implicated in the sexual abuse of children. I fully anticipated that the workers would tell me that the job of focusing on the child made it sometimes difficult to fully understand how adult males could hurt children in that way, but that it was their job to see through this and find a way to provide children with the best chance of being safeguarded from future harm. I imagined that they would be struggling with trying to work in a non-judgemental way, avoiding at all costs any hint of oppressive practice. That was not what I found. The participants described how they attempted not to act in an oppressive way, but they discussed openly a practice that was noxious, and which challenged them in ways that they had not anticipated. The interviews revealed in a clear manner that my participants' work was affected by strong negative emotions, chief amongst them being that of disgust.

Chapter six has discussed the results with reference to the existing literature. The chapter delineates the aspects of new knowledge I have uncovered through the research

and showed how emotions, including disgust, could impact upon the way that social workers felt about these cases and in turn how this affected their assessments.

This final chapter sets out the new knowledge that I have added to this field of study. It also discusses the limitations of the study, and the implications of the research for both practice and social policy, before offering recommendations for practice.

7.1 Addition to new knowledge

In highlighting the presence of moral aspects of disgust in the study participants' experiences, social work practice with sex offenders and their families in the study has been located within the theoretical construct of 'dirty work', incorporating as it does noxious behaviours, and a job performance akin to that of dirty workers. Although the term 'dirty work' was coined by Hughes as far back as 1958 as a potentially useful construct to describe certain types of work, a direct examination of social work with sex offenders has not been carried out previously.

The current thesis makes claim to important additions to the knowledge in the area of assessments, which is a crucial practice area for social work. It is well accepted that there are factors which can have an effect on the outcome of assessments. Writers agree that it is the assessment process which is crucially important as Milner et al. (2020) point out. However, what my thesis shows is that assessments can be significantly affected by the emotions that working with alleged or convicted sex offenders engender. My thesis showed that disgust is one of those emotions and this is a finding which has not been specifically identified before.

This study contributes to new knowledge as it explores how disgust operates within a group of social workers practicing with clients who have transgressed culturally agreed rules of conduct, as well as broken the law. As I argue above, the given wisdom is that assessment is a process that, although not always perfect, is not strongly affected by emotions and is seen to be shielded from any bias by, amongst other things, supervision. My research argues that the feeling of disgust may influence the judgements of social workers. It contends that this emotion is very powerful and can have marked moral consequences. This is not something that is recognised in the current literature and which may explain some of the results in practice that are sometimes reported and that I, as an outside agent, have witnessed in cases of sexual abuse, where the decisions taken

seem unreasonable and punitive. Whilst other social work research has shown the importance of emotions in practice and how to use these emotions to positively improve professional practice (Morrison, 2007), until now a connection between the effects of experiencing core emotions, such as disgust, on social work practice and its impact on moral choices has not been made.

My findings point to the fact that disgust set within the professional practice context has a major influence (at least for my participants) in making work with families where there is a risk of sexual abuse, more challenging than was previously thought. This is not just because of the process of assessment, but because of bias present in social workers when they come into contact with such men. Their challenges were not confined to significant feelings of moral disgust, but also to a variety of factors such as whether participants had for example children and whether the support of colleagues was present.

7.2 Implications for practice and policy

The undertaking of assessments is a crucial element of work involving children and families. They can and often do decide where children are brought up. Social work practice is often driven by the results of tragic lapses in assessments of risk, when children are killed or significantly physically injured.

In cases of sexual abuse, the harm is frequently more hidden and the toxic effects, although just as significant, are often unseen but may be exhibited later on in life. Usually, any inquiry looking at practice failings lays blame on the guidance and /or the professional ineptitude of individual social workers, but they rarely point to the emotional make up of social workers and how that affects practice. As previously indicated, it has long been held that supervision is important in social work (e.g. Ingram, 2003). Whilst my results supported this, they also underlined the importance of peer supervision in close knit teams with colleagues who share similar experiences which allow the validation of feelings of disgust in a more supportive and less formal manner. These close-knit teams also have a bearing on the way workers can challenge and explore their values and how they compare with social work values, which they have been taught and which they are supposed to work with. Peer supervision should allow

those thoughts and feelings to be expressed and explored in a more open way. However, this has been seriously compromised by a growing propensity amongst local authorities to fragment teams by the widespread use of 'hot-desking'. It leads to the recommendation that Local Authorities should limit the widespread use of team fragmentation.

Assessment in social work is a vital part of any work with families where there is a risk of abuse. What my study clearly shows is that the emotional component of this work is very often overlooked or at the very least side-lined. As I argue above, there is a danger that this may make for assessments that are either inadequate or, albeit unintentionally, biased, which may compromise children's future placement and wellbeing. A possibility which needs to be minimised. It is important that teams allow social workers the space to reflect and discuss sexual abuse cases within a supportive and non-punitive atmosphere, where practitioners feel that their views are valued and taken into account.

Finally, the area of work with sex offenders is a specialist one, which poses specific challenges. The findings indicate that this should be recognised by employers, leading to the provision of a specialist supervision service. The setting up of self-support groups, headed by a specialist in the field would seem warranted, where feelings could be discussed and acted upon.

7.3 Limitations of the research

As with all research, there were some limitations. The size of my sample group was small. This in itself is not a major problem in qualitative research as the purpose is to explore feelings of a specific group and to understand theoretically what the situation may be. This does not mean that my results cannot necessarily be generalised to a wider population of front-line social workers. Qualitative research – and particularly research for a doctorate – should always have an element of generalizability, as indeed mine has. However, in qualitative research this is achieved theoretically rather than statistically or through the use of probability theory (and random sampling) as in quantitative research. The findings as they stand apply to my participants, albeit that the theoretical concepts such as 'dirty work' and 'disgust' could have more widespread applicability. These findings could and should be used as a launchpad for further, broader research, which would incorporate larger numbers and different locations.

The sample strategy did not control for age and gender and it is clear that both of these aspects had a bearing on my research. It would therefore be important that any future research takes this into account and possibly constrains itself to discreet sample groups to fully investigate any differences. For example, does interviewing younger non-parent social workers produce different results, which might account for differences in practice and are those differences (if they exist) consigned to a specific gender?

7.4 Areas for further research

The social work profession is largely a female one and current employment figures point to the fact that the average age of professionals is becoming younger. This may have an effect on current practice. It would seem sensible to carry out more research into the effects of age on feelings of anger and disgust with offenders of sexual abuse.

The importance of supervision is critical in all aspects of social work. However, it is not clear exactly what type of supervision would be most advantageous especially where 'emotionless' supervision seems to be at work. This is an area that would benefit from further research as it may drive changes in the way professionals are supported.

The results of my research provide some strong evidence (albeit with the limitations I point to above) that social workers have a different understanding (possibly at an emotional level) as to what constitutes sexual abuse and what damage it can bring. The literature also suggests that this 'confusion' might extend between agencies. I would therefore recommend that further research be undertaken, using the methodology outlined here, with other agencies such as police forces, probation, education and health providers, as they very often take part or at least feed into, the assessments that social workers carry out. Such research would help to identify any further training that may be needed.

7.5 Finally

The title of this thesis conveys the dilemma faced by social workers working in families where child sexual abuse is a feature. The title contains the phrase 'Swimming with Sharks'. The usual refrain is swimming with dolphins. Dolphins have been used to symbolise resurrection (by Christians) and protection (by sailors). They are also

associated with gentleness and peacefulness. It is usually assumed that swimming with dolphins is something that most people would aspire to and indeed people pay significant amounts of money to do so. Swimming with sharks on the other hand conveys hidden dangers and something to be done with great care and only with protection. Sharks are seen as a silent, deadly menace, which should never be trusted.

This contrasting imagery seems to encapsulate the work that social workers do in cases of child sexual abuse. The population at large sees sex offenders as a silent dangerous group of people who need to be controlled and stopped from abusing defenceless children. They are the sharks in the ocean. Social workers are the tasked agents in this protection work, which carries with it some significant personal consequences and evokes on social workers very strong emotions. My research uncovered some of these emotions. My participants discussed their work and in doing so explained a complex set of emotions, which are present when they become involved in this emotional labour. The results of this study will serve to underscore how cases such as ones in which sexual abuse is the issue are dealt with, and how social workers can be supported to make the best possible decisions for the children in the family undergoing assessment.

This research was at times difficult for me as a researcher, not only in terms of the power imbalances as I discuss above (see section 4.6), but also in terms of listening to the testimony of social workers who work in an area of practice, which is difficult and 'dirty'. It brought home to me the reality of workers who show real courage in their struggle to protect children from being harmed by sexual abuse. It was certainly a humbling experience and I remain thankful for the honesty shown by my participants.

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Appendices

Appendix 1

Interview schedule (Phase 1)

Me- What do you understand by the term child sexual abuse?

Me- What do you mean?

Me- So do you think that sexual abuse can be graded according to how serious it is?

Me- So for example is flashing less serious than penetration?

Me- When you hear the term sexual abuse, what do you think about? What do you feel about that?

Me- Given what you've just said, in your professional experience who abuses children?

Me- How do you feel about those people?

Me- When you think about these people. Can you tell me what feelings are stirred up within you?

Me- How do you deal with those feelings?

Me- Let's think about a specific case. Think about a case that you dealt with. A case that was difficult. Tell me how you got involved with that?

Me- How did you feel at that point?

Me- Tell me more

Me- You carried on working with this family. How did it work out?

Me- What about your feelings in this case. Do you think your feelings were different because it was a case of sexual abuse?

Me- How does working with people who sexually abuse children make you feel within you? Is this one of those cases that you worry, particularly more or less about? Do you go home with them?

Me- Do you think that working with cases of sexual abuse, how does that impact on you personally?

Me- What about more as a man, and you are working with this man who sexually abuses?

Me- So when you are left with those feelings, what do you do?

Me- When you say this people may be attracted to children, what feelings that this bring up in you?

If the participant mentioned disgusting ask the following questions

Me-You have used the word disgusting a number of times. What do you mean? What are you saying when you say disgusting?

Me- and does that impact on your work?

Appendix 2

Second Phase interview example

Me - In your first interview, you said something about the offenders. When I asked what you think about sex offending and sex offenders, you said that it's disgusting. Can you expand what you mean by that?

Me- What do you mean by the word disgusting? When you say 'disgusting', what are you saying?

Me- What do you associate that word 'disgust' with?

Me – Some people use the word disgusting in different ways. For example, some would say "I am not touching that rotting chicken, because that's disgusting". Is that what you mean by the word disgusting that you use or are you talking more about an emotional…

Me – Sometimes with this idea of 'disgust' in a more, you know putting your hands in some rotting chicken for example, there's always the fear that you will 'catch' something from that rotting chicken. Does that ever occur with you when dealing with these men that as you say what they do is disgusting? Does that disgust…

Me – Explain that to me

Me- One of the ideas is that the work that SW do is sometimes called 'dirty work' and dirty workers that is not about sex offenders. So, dirty work and dirty workers is for example butchers, morticians, sewer workers and sometimes SW. So, it's this idea that we do work that deals with people who are as you said 'disgusting'. Do you ever think of that, that the people who you are dealing with are disgusting?

Me- OK, so this idea, because you said that SW look under the surface or this is what people think that we do, so how do you think that other people, you know, Jo public out there see you and your work with sex offenders? What do you think that they…

Me – and what do they mean?

Me – So do you think then that other people maybe think that you are contaminated somehow by being around this people? Not that you will do anything, just

contaminated, you know like leprosy, when people wouldn’t go around with people who worked with lepers, because they are contaminated.

Me – Why do you think they don’t want to go there?

Me – and you represent that?

Me – So looking at the people who don’t want to talk about it or they don’t want to…do you think that they see…is it just what you do that they don’t want to talk about, or is it…what is that about? Because it maybe comes back to this idea of disgust…

Me – Coming back to that word disgusting and you said it’s an emotion. Is that emotion similar to say anger or angry about it?

Me – Do you ever feel after reading those things, dirty? You know, you’ve read some stuff that is just awful, and it makes you feel a bit sullied?

Me – Lonely?

Me – So this exposure, does that come back to this contamination or contagious or not?

Me – Ok, thank you

Appendix 3

Initial themes/codes

Name	Description
Age appropriate	
Betrayal of trust	
Bravery	
Class values	
complicit	
Consent	
constant washing	
Contamination	
Damage of children	
Damaged goods	
Dealing with emotions	
Dealing with feelings	
Definition of sexual abuse	
Definitions	
Difficult to relate to offender	

Name	Description
Dirty	
Dirty work or workers	View of workers as dirty
Dirty	
Dirty work	
social work as dirty work	
Disgusting as Vile	
Effect of being a parent	
effect on personal behaviour	
Effect on self	
Personal effect (2)	
Personal impact	
Protection of self	
Effects on friendships	
Effects on sexuality	
Emotions	This is a main theme about the emotions that SW feel are aroused when working with sex offenders

Name	Description
Anger	
disgust	
Abuse of power and disgust	
disgust as a personal judgement	
Disgust as abhorrent	
disgust as an emotion	
disgust as intent	
disgust as wrong	
disgusting actions	
Disgusting as Vile	
Effect of being a parent	
effect on personal behaviour	
Effect on self	
Personal effect (2)	
Personal impact	
Protection of self	

Name	Description
Effects on friendships	
Effects on sexuality	
Emotions	This is a main theme about the emotions that SW feel are aroused when working with sex offenders
Anger	
disgust	
Abuse of power and disgust	
disgust as a personal judgement	
Disgust as abhorrent	
disgust as an emotion	
disgust as intent	
disgust as wrong	
disgusting actions	
Disgusting as Vile	
Effect of being a parent	
effect on personal behaviour	

Name	Description
Effect on self	
Personal effect (2)	
Personal impact	
Protection of self	
Effects on friendships	
Effects on sexuality	
Meaning of disgust	
Meaning of disgust	
Unclean	
Horror	
Rage	
Range of feeling	
Unclean	
Horror	
Rage	
Range of feeling	
Ethical practice	
Fear of perpetrator	

Name	Description
Feeling for perpetrator	
Feelings about non offending partner	
Getting right	
Grading of abuse	
How do you do it	
How do you work with the perpetrator	
Hygiene	
Impact of sexual abuse	
Innocence	
Interest in the behaviour	
knowing the victim	
loneliness	
Mental health and sexual abuse	
Morality of actions	
New Node	

Name	Description
Sadness and anger	
Offence type	
Pathetic	
How do they do it	
Personal innocence	
Peer support	
Perpetrator empathy	
Personal judgement	
Personal shame	
Physical effects	
Physical Reaction	
Procedures	
Professional	Aspects that SW used words associated with being professional
Professional boundaries	
Professional hardness	
Professional reaction	
Professional resilience	

Name	Description
Professional response to victims	
Protection of children	
Purity of children	
Reflection	
Resentment	
Role conflict	
Sadness about adult's action	
Sadness towards offender	
Sympathy towards offenders	
Secrecy	
Self-blame	
Self-protection	
Separating victim from perpetrator	
Shouldn't happen	

Name	Description
Society rules	
Somebody has got to do it	
Stigmatisation	How offenders and SW are stigmatised. Offenders by dint of offending SW by being with them
Family view of the work	
Personal ostracisation	
Reactions of public to work of social workers	
The general public don't want to know	
view of social workers	
Supervision	
Importance of supervision	
Tainted	
Take the work home	
Unconscious bias	
Understanding of abuse of children	

Name	Description
Un-natural	
Unprofessional feelings	The sensation of feelings that are seen as unprofessional
Unthinkable behaviour	
View of offenders	
Who abuses	