IN THE BEGINNING: INITIAL INVESTIGATIONS OF NON-ACCIDENTAL INJURY

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This article examines initial investigations into alleged child abuse. It focuses upon the knowledge used by social workers and others in interpreting what has happened and in reaching decisions as to how to proceed. It concludes by looking at the 'stance' assumed by social workers and how this might influence how they act on the knowledge they possess.

INTRODUCTION

The new Central Council for Education and Training in Social Work (CCETSW) guidelines emphasise competence with regard to skills, values and knowledge. They recommend that social workers 'need a rigorous approach to the acquisition of knowledge' and 'must be able to conceptualise, to reflect, to analyse competing theories, ideologies and models of practice which will inform their work' (CCETSW, Paper 30, p. 14). Many of these theories and ideologies are derived from the social sciences and in particular from sociological theory. The influence of some strands of sociological theory have been enormous, especially social systems theory and insights derived from a marxist perspective. The relatively poor showing of the phenomenological tradition is unfortunate because it invites us to reflect upon knowledge as well as use it.

A valuable concept within that tradition is Alfred Schutz's 'stock of knowledge' (Schutz and Luckmann, 1973, pp. 99-178). This can be understood at both a social and an individual level. At the social level the stock of knowledge is similar to the concept of culture and refers to the exhaustive content of the knowledge available in any particular society.

The individuals stock of knowledge derives from this. The individual selects knowledge on the basis of problems and tasks which need to be confronted. In addition to this the individuals stock of knowledge contains the unique biographical items and subjective interpretations of experience. For the social worker elements derived from professional training together with accumulated practice wisdom would need to be included.

THE INITIAL REFERRAL

The social worker undertaking an initial assessment into alleged child abuse necessarily makes reference to this stock of knowledge. Although I shall concentrate upon physical abuse it can be argued that the skills and knowledge used by the social worker during the initial stages of recognition and intervention are applicable to all forms of abuse including emotional and sexual abuse.

Taking an interactionist approach Dingwall argues that child abuse is 'something that is produced by the decisions of people who are in contact with children'. Among these people Dingwall (1989, pp. 158-59) emphasises the role of the social worker as 'somebody who has the socially recognised authority to impose the label'. It is interesting to pose the question as to how this recognition is arrived at, and by whom.

The importance of general understandings within the community, or
within society as a whole, cannot be underestimated since initial referrals of child abuse often originate here.

The Department of Health's guide (1988) Protecting Children sets out a series of stages of intervention indicating certain key tasks to be accomplished within more or less fixed periods of time. It is important to point out however that the suspicion of abuse often arises outside of social services departments, within the community, and prior to any decisions or activities undertaken by social workers. It is important therefore to look at the source of the initiating referral.

The initiating referral relates to an event which is alleged to have occurred. This necessarily imposes a reconstructive character upon the investigation. Before the physical evidence of marks or bruises upon the child's body is available, still less the behavioural manifestations of emotional or sexual abuse, the social worker has to make an assessment based upon the accounts or descriptions rendered. In making the initial referral the lay referrer relies upon several realms of knowledge. A knowledge or sense of the familiar is appealed to because it throws into relief odd comings and goings, unhappy faces, poor appearances and dubious family structures. In short the lay referrer, the member of the public has to render a description of a situation within which child abuse is suspected. Presented as more or less urgent, exaggerated or alluded to, the referrer has an expectation of a response by a social worker. How is that knowledge or expectation arrived at?

Alfred Schutz writes that an important element of our, of everyone's, stock of knowledge refers to individuals anonymously as 'functionary types' (Schutz and Luckmann, 1973, pp. 73-85). Stated simply we know who does what or can be counted upon to act in certain ways. It is upon this knowledge that the general referrer relies. The accuracy of this knowledge cannot be taken for granted and recognition of this fact is to be seen in the efforts made by social work departments and agencies to educate the public.

The referrer who comes into contact with children through the discharge of their professional or occupational role, for example, health visitors, teachers, nursery nurses, likewise rely upon common sense observations and understandings. These observations however are interpreted in terms of knowledge derived from their own training and previous experience. It is important to recognise however that professionals operating in different settings do not always share a common background in terms of education, training, or experience. AS Hallett and Stevenson (1980) have pointed out this can lead to differences of emphasis and degrees of anxiety. This underlines the importance of joint training in in-service or indeed on professional training courses. Like the member of the public the professional referrer also relies upon a knowledge of social structures but this knowledge is often more clearly defined and detailed. Indeed guides produced by social services department's, as for example Durham County Council's procedural manual which is made available to schools, health centres and so forth, provide clear referral routes (Durham Area Child Protection Committee, 1989). Additionally professional referrers are likely to be able to refer to a stock of accumulated wisdom, including what other colleagues know about a child, similar incidents involving that child or other children of the same family, or indeed other cases and outcomes either tragic or salutary.
Social workers also have access to a similar stock of knowledge. As Packman and Randall (1989) note social workers operate ‘within the context of considerable departmental knowledge’ about families and children. Reference to this knowledge can have implications in terms of the initial response upon the receipt of a referral from either a general or professional source. It will be consulted for previous similar incidents and possible precipitating or significant factors.

The credibility of the referrer will also be taken into account especially if already known to the department. Here there may be a tendency to accept a professional referral and the terms in which it is framed more readily. This needs to be guarded against. Other observations may also condition the initial response, the neighbourhood within which the referral is situated for example, and what is known about it. Dingwall (1989, p. 161) notes the importance of knowledge of the social geography of the local community.

Within the departmental stock of knowledge certain areas or estates may have a degree of notoriety based upon previous referral patterns and accounts of previous visits made to them. Most local authority social workers will be familiar with the rundown inner city areas where private rented accommodation proliferates, or the large council housing estates which due probably to the allocation policies of housing authorities are populated by the unemployed, single parent and black families. Forrest (1987) has referred to these groups and their housing situation as marginalised in terms of the mainstream of economic activity and consumption. In terms of what is known about child care it is important to consider the extent of the relatedness between essentially negative indicators. There may even be a self fulfilling prophecy operating here similar to that reported by Cicourel (1968) and Bayley and Mendelson (1969) in their studies of American policing activity. Because crime was considered to be a black working class phenomenon not only was it sought out in black working class communities but essentially similar behaviour was interpreted differently in terms of it's socio-geographical location and the perceived characteristics of the participants involved.

In short, before a visit is made in response to a referral of suspected child abuse several, often disparate realms of knowledge have been consulted by several different individuals both lay and professional.

With regard to the social worker making an initial visit it is important to be aware that these consultations will provide orientations and pre-dispositions which may, or may not, enhance effectiveness.

THE VISIT

The visit in response to a referral of suspected child abuse brings together three main sets of participants. The social worker who may, or may not, be accompanied by a health visitor or police officer, the child and the parents and their supporters, if any. In a sense the social worker also brings the expectations of other colleagues and professionals to the visit in so far as s/he is aware that an account of the visit will have to be given to them.

Where the children are very young there is a danger that they will become the passive focus of concern of the other participants,
objects rather than individuals as Butler-Sloss (1987) observed. It is essential to experience abuse from the child's perspective and this cannot be engaged by simply asking what happened. It is important to observe, to look for gaps, to listen not only to what is said but also to what is not said. This takes time and trust and may involve the use of non-verbal techniques. In the immediate situation of the initial visit communication with children may be compromised by a heightened emotional atmosphere, conflicting loyalties and the stark reality of power and entitlement.

Power is also an issue at this stage of initial contact between social workers and parents but it may be more difficult to locate. Power has different sources and although the social worker may have recourse to statutory measures they can seem very distant when confronted by angry and possibly aggressive parents.

Power also seeks different ends. In the first few hours of initial contact I would suggest that power is expressed in terms of the ascendency of different definitions of the situation. What essentially takes place is that accounts are produced consisting of reconstructions of what has happened. Parents aim to produce a description of what happened in terms of which any child might be innocently hurt. In so doing they are often at a disadvantage. Not only do they not know what a social worker is looking for, and therefore cannot render convincing productions, they are often also taken by surprise by the initial visit. The social worker on the other hand has the advantage of being able to undertake anticipatory rehearsal of the visit.

Parents who receive an unannounced visit are in a similar situation to the students in Harold Garfinkel's early experiments involving disrupting expectations. These experiments sought to disconfirm the expectations normally taken for granted by the students while not allowing them time to reinterpret the modified situation in terms of some other situation that they may be familiar with. Under the effort of reinterpretation writes Garfinkel 'events should lose their perceivably normal character. The members should be unable to recognise an events status as typical. Judgements of likelihood should fail him' (Garfinkel, 1967, p.54). Presented with situations which had been rendered temporarily 'senseless' Garfinkel observed strong emotional reactions on the part of his students. In these and other experiments bewilderment, anxiety and anger, were observed. Parents receiving a visit from a social worker in connection with child abuse face the same disruption of the normal course of their day to day affairs and disconfirmation of their expectations of themselves as parents. They have to attempt to produce accounts and explanations under the stress of an unannounced visit. It might be argued that black parents are particularly vulnerable in this sense. Due to their experience of institutionalised racism expectations of fairness from those in authority may be low.

Where a visit is anticipated the opportunity to deceived is available. Sometimes a child may be removed from the scene and its absence explained innocently. All children visit relatives or need undisturbed rest when in bed with flu. Alternatively injuries can be explained as the consequence of accidental events.

The Beckford enquiry provides disturbing examples of such parental productions. Where visits were announced in advance, Morris Beckford and Beverly Lorrington had the opportunity to ‘stage manage’ the
scene, ‘to arrange the siting of the children and the unrevealing
clothing worn by Jasmine’ (The Beckford Enquiry, 1985, p. 126). What
appears to be happening at this stage of the visit is that both
social workers and parents are orientating to shared conceptions of
normality derived from the social stock of knowledge. Dingwall,
Eekelar and Murray (1983, p.57) write that whilst social workers must
be:

... sensitive to variations from their conceptions of normality as a
warrant to undertake further investigations ... those attempting to
deceive ... will model themselves as closely as possible to their
idea of expectable conduct.

It is important to ask to what extent is there a convergence in
conceptions of normality between parents and social workers.

SPECIFIC KNOWLEDGE ABOUT FAMILY AND CULTURE

I would argue that social workers and parents conception of normal
family life are only partially consistent. There are two main areas
of divergence. Firstly social workers and parents may occupy
different locations within society. Secondly the social workers stock
of knowledge will in some part derive from past experience and
training which parents, unless they too are social workers, will not
have access to.

Although social workers and parents will hold some common
expectations and knowledge deriving from their joint membership of
the same society this will be mediated by their location within it
defined in terms of class, status, race and gender.

The Department of Health's guide Protecting Children encourages
social workers to incorporate a cultural perspective in order to
achieve a balanced assessment. To what extent however is the stock
of knowledge of white social workers anglo-centric? If we are to agree
with Dominelli (1988) it will be inevitably so. What are the
implications of this for initial assessments of child abuse where
abuse is alleged to have occurred within a black family? Ideally we
should seek black worker involvement because as Verol Liverpool
argues' being members of a similar background and culture as their
clients, these workers would have the advantage of their own
intuition and shared experiences'. Given the dearth of black social
workers within some social services departments racially sensitive
work is at a premium. Essentially it should permeate all practice but
in undertaking child abuse enquiries where issues of communication
and understanding are thrown into relief, the danger of, albeit
unwitting racist practice, is great. At the very least white social
workers, who may not share in the same stock of knowledge as their
black clients may, according to Liverpool experience difficulty when
attempting 'to interpret the family dynamics of black families, and
verbal and non verbal communications issues'. Lacking the same
interpretative scheme, 'aspects of the families culture may be so
subtle as not to be easily understood' (Liverpool, 1989, P.59). Even
so Dingwall (189, p.162) points to the inherent danger of 'cultural
relativism' being invoked as an optimistic rationale for not becoming
involved. A careful balance must be achieved here.

As Macleod and Saraga (1988, p.44) note:

... there is nothing wrong, racist or anti working class in saying
that certain behaviours towards children are unacceptable. It is possible for workers to make judgements in groups other than their own, though an understanding of racism and different cultural patterns is essential if accurate conclusions about the meaning of interactions are to be made.

Besides socio-cultural distinctions social workers hold conceptions and expectations derived from their experience and training. This is very apparent in the responses given by an experienced female social worker to Jones in recounting an initial assessment of sexual abuse.

In interviewing a ten year old girl the social worker became 'convinced' that the child was telling the truth 'because of the way that she told me, because of the things that she said, and I guess in some ways because of the things she didn't say'. Under prompting the social worker found it difficult to give reasons for her assessment, but indicated, in particular, the importance of experience, intuition, further information that tended to confirm the initial assessment (in this case a disclosure by an older child of the same family), the response and trust placed in her by colleagues and her own feelings about how a child would identify a safe person in whom to confide. The social worker reports 'it was somebody at night, a teacher who was leaving the next day, to whom she made the disclosure. That again had made me feel it was true, a typical way that a child will disclose. She thought that perhaps nothing would be done about it, but she told somebody. So it was bits like that, that sort of fed into W (Jones, 1990, pp. 183-187).

Feelings and intuition derive from experience and on their own are insufficient in terms of making a critical assessment. It is a crucial function of training to integrate experience and theoretical and empirical knowledge.

Nevertheless it is interesting to speculate as to the extent to which we use our own knowledge as men and woman, our own childhood experiences even, in building up an assessment during this initial investigative phase. Dingwall, Eekelar and Murray infer some idealised state of the family, described in interpersonal and material terms, that social workers refer to in deciding whether or not to believe parents. If the interpersonal and material environment of the family, taken together with other factors such as crime, drug use, unemployment and alcoholism, deviated too far from this ideal norm, the parental accounts were likely to be viewed as suspect. Again it is interesting to speculate as to the operation of class, or indeed cultural bias here as social workers conceptions of normal family life, expressed in interpersonal and material terms are bound to be rooted in their own childhood socialisation.

CONCLUSION

It is important to differentiate between the knowledge brought to the scene of the investigation and the assessment made within it. In making this differentiation the influence of what may be described as the social workers 'stance' may be relevant. Too often guides for social workers making assessments and dealing with child abuse render the social worker as a person with a stance, invisible.

The social worker becomes a kind of non-person, a functionary, unfatigued and uncontaminated by events. The truth is that social workers are human beings who face acute dilemma's in doing child
abuse investigations. One particular dilemma is well expressed by Bedford who writes that 'no other profession goes to the home to physically remove a child and goes back to try to create relationships and befriend' (Bedford, 1989, p.91).

In order to survive these dilemmas social workers may assume an optimistic stance. This will influence interpretation and to a certain extent enables social workers to police families by consent. The opposite of this stance can be viewed in terms of pessimism or scepticism. The term the 'investigative stance' was defined by Zimmerman (1974) in terms of a 'thorough-going scepticism' in establishing eligibility claims in American public assistance agencies.

In assuming this stance in making initial assessments social workers attend to parental descriptions as questionable or suspect. The injury is compared against various objects in the physical scene such as loose mats, unstable chairs, hard corners and so forth. Knowledge brought to the scene forms a background to confirming or disconfirming parental accounts and thus to deciding how to proceed. Even fairly trivial phenomena of every day life such as missing appointments, delaying in seeking help, saying one thing at one time and another thing at another becomes significant from within the investigative stance.

It only needs to be said in conclusion what any social worker already knows. To maintain a purely investigative stance is hard and actual investigations may display degrees of optimism and pessimism. Equally any actual investigation will make reference to many different realms of knowledge some of which have been discussed here.

References


