Professional Dangerousness

What is Professional Dangerousness?

Professional dangerousness is the process whereby professionals behave in ways that collude with or increase the dangerous dynamics of a family. Dangerous practice is rarely the result of ignorance, it is the unwitting failure under stress to apply the knowledge they have *(Tony Morrison)*.

Professional dangerousness can develop for various reasons, including:
- Cultural relativism
- Natural love
- Rule of Optimism
- Reframing
- Transference and Counter-transference

Cultural Relativism

Culture is more than ethnicity and can include religion, sport, ethnicity, gangs, alcohol, drug use and gambling. Culture is never an excuse for abusing children.

Cultural relativism is the view that all behaviours can be considered in relation to each individual culture. However, we need to be careful not to accept inappropriate practices as an excuse or justification for abuse.

Professionals need to be careful not to justify the following behaviours:
- Misuse of drugs, alcohol, gambling and medication by their clients as a coping mechanism to deal with added stress of the covid-19 environment
- Children left home alone due to the need for parents to work and there being limited options for babysitters
- Time spent with children not quality time as parents who have been working need time to themselves while, at the same time, coping with the pressures of having children around all the time and trying to occupy them
- Families attending church services in breach of lockdown instructions
- Accepting ongoing cultural norms around proximity (hugging, hongi, etc.)
- Assuming those with special needs won't be impacted as much and won't realise what is going on
- Considering young people to be less at risk as they are not suffering the level of consequences as older people or those with existing conditions

Natural Love

This is an assumption that all parents love their children just because they are parents and that, as a result, they will make decisions in the best interest of the children. Some workers may put their work commitments ahead of their children or they may minimise a child's health needs because they may think they are not at high risk of COVID-19.

Rule of Optimism

This principle leads professionals to find the most positive explanation for a situation that creates the least conflict; hence, they may:

- Allow behaviour to go on because it's only going to last a little while (elastic set of norms)
- Tend to overlook negative behaviour as it's a stressful time
- Adopt a "She'll be right" attitude

Reframing

Workers can inappropriately reframe their role or any behaviours they witness into something more acceptable, such as:

- Becoming a 'carer/friend' instead of maintaining an objective professional role
- Taking a gentler approach to working with families in order to minimise stress on them
- Minimising the impact of the virus and becoming complacent over time which leads to justification of easing restrictions or compliance
- Workers reframing symptoms of covid-19 for other, milder illnesses either relating to themselves or families/whanau they engage with so that they can continue working

Transference & Counter-transference

Transference occurs when the client directs their anxieties and stresses onto the worker

- A client displaces their anger on you when talking about an abusive parent
- A client places unrealistic demands on you
- A client admires you and tells you how much you remind them of their best friend

Counter-transference occurs when a worker takes on board the anxieties and stresses of the families they visit and absorbs them as their own and responds to these and other families, and even their own families/colleagues as a result of that.

A worker may have feelings that bounce off them onto the family they are working with. These may be caused by things the family have said or done or by unrelated things like, heavy traffic getting to the appointment, argument at home or a previous difficult client and so on.

Anxiety Responses

The **fight, flight** and **freeze** responses are how our bodies instinctively react when faced with adversity or under stress.

Fight

The fight response can stem from an over involvement in cases or a tendency to want to take control of situations, or give the impression that you are in control, such as:

- Becoming overly defensive or aggressive towards families and whanau
- Becoming over-involved with family, seeing themselves as the only lifeline for families
- Making decisions for families with little or no consultation
- Funding family needs out of worker's own pocket/personal time – transporting, childcare, basic necessaries, money, tools/equipment, food, etc
- Visiting whanau at all costs even in spite of risks to own personal health
- Spreading misinformation with the best of intentions – people will often simply believe what you say, right or wrong
- Inducing panic with the family because you are not handling or don't fully understand the pandemic environment; or buying into their paranoia
- Being judgemental or bullying (e.g. over panic buying, or failing to get the supplies needed to support the family)

Flight

The flight response is illustrated by behaviours such as failing to act, putting cases in the "too hard basket," denying the problem, or reframing:

- Using the pandemic as an excuse not to visit even though they have appropriate protection gear to do so
- Workers being so focused on their own needs and anxieties that they cannot see what others around them might need therefore they cannot meet the needs of others
- Failing to explore different ways to provide support
- Avoiding or minimising issues, especially those not directly connected with the pandemic
- Recording visits that have not actually taken place or exaggerating advice given to clients

Freeze

The freeze response is the failure to act or complete important actions due to immobilisation, distraction or fear. Watching rather than intervening:

- Do nothing, stop thinking about cases, too hard, thinking of waiting until the pandemic is over then picking up from there, only focusing on the pandemic issues and ignoring all those other issues that required your involvement in the first place
- Fill your time by making 'plans' and 'to do lists' rather than actually doing anything
- Immobilised out of your own fear of the consequences to you or not knowing what to say to families or how to engage families facing this level of crisis on top of their own existing issues

All of these types of responses can have potentially dangerous consequences. Professionals need to consistently reflect on their behaviours and decision-making processes and they need to find suitable supports by accessing ongoing case management and supervision.

Dangerous practices that contribute to under-reporting:

Lack of Knowledge
How serious is it? Is it normal? Am I allowed to report? I am not sure about the Law and my rights. I am not sure about my agencies policy. It's the role of management

Fear
What if I am wrong? What if I am victimised? I might make it worse for the child. I might have to go to court.

Lack of understanding or skills
Not having the knowledge, skills and tools to recognise abuse. Don't know where to go. Don't know what to do. What training is there in the organisation? Lack of understanding increases fear. If you have had the training and your colleague has not, maybe you need to help them?

Lack of Confidence
No confidence to uphold an argument or debate about a child's safety, especially with volatile or confrontational families. Children are put at more risk. No confidence in the systems-Statutory & Internal

Personal Issues
Introducing or being influenced by our own personal issues. Basing your professional judgement on your upbringing.

www.childmatters.org.nz
www.covid19.govt.nz