

Using co-operative inquiry and Participatory action research with therapists in the Victorian sexual assault field to better deliver services to families who have experienced Sibling sexual abuse

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ABSTRACT

The work described below is my doctoral thesis, which I am undertaking through the Bouverie Centre – La Trobe University under the supervision of A/P Amaryll Perlesz and Anne Welfare. As well as acknowledging their support and guidance through this, I must acknowledge my co-researchers: John, Jaclyn, Michael, Pauline & Vicki and Karen Hogan, the manager of The Gatehouse Centre, my workplace. What follows is an overview of some of the thinking behind this research, the process we undertook and preliminary findings, some reflections on the process and some suggestions for future research.

With this work, I sought to understand how we as therapists worked with the families who presented to our agencies, what challenges we face, how we deal with these and how we can be supported to best do this work; including how we might change and develop our practice. But for many reasons I did not feel that doing this on my own was the right thing to do. Aside from the fact that it's not just about me and what I do, I wanted to be involved in something that would come from and go back to the field and my many colleagues. Something that would give us a process in which we could reflect on what we do, develop our awareness of this and to use that reflection and awareness to further develop our practice. This is where the idea of a participatory action research piece came into being.

I. A LITTLE BIT OF CONTEXT

Having worked in the field of child sexual abuse for 14 years as a therapist, I have accompanied a large number of children, young people and their family members on their journey post the experience of abuse being disclosed or discovered. I work within the Victorian Centres Against Sexual Assault service system (CASA), which was established in the mid 1980s against a history of women actively lobbying government and working to educate the community in general about the existence and impact of sexual assault. Over a period of more than 20 years, sexual assault services in Victoria developed from being unfunded, run by Collectives of feminists with a commitment to Women's Health principles and presenting a challenge to the status quo, to a government funded state wide network of 15 centres (Hewitt & Worth, 2006).

II. AIMS AND HOPED FOR OUTCOMES

The plan was to see how we could develop our practice in working with families who had experienced sibling sexual abuse (SSA) through the transformation of our group interaction and a process of action,

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analysis and reflection, learning and more action. (Perlesz, 2003). We sought to name the challenges we encounter in our work and to seek solutions that we could then implement in our ongoing practice. By considering the process of our work with families, including considering what decisions we make regarding the course of therapy and how these are made, what guides our work, and what we need to support the ongoing development of our practice, this research has sought to track the experience of any changes in our practice and consider their impact. We hope that some of the final outcomes will include: Guidelines for practice, including issues for program and policy development, supervision, staff recruitment and retention and a clearer perspective on the philosophical underpinnings and social and therapeutic discourses, as well as the role of compassion satisfaction in our work.

III. A THEORETICAL LENS FROM WHICH TO LOOK THROUGH.

In considering what I thought we might do, I looked at participatory action research methods – PAR (Reason, 1988; Kemmis & McTaggart, 2005; Reason & Bradbury 2006) and the process of co-operative or collaborative inquiry groups - CIGs (Heron 1996; Bray, Lee, Smith & Yorks, 2000). The idea that we would be researching our own experience of the work, using a series of cycles in which we would move between this experience and reflecting together on it seemed exciting to me. As did the thought that this would be research *with* other people, rather than *on* other people and that we would develop a reciprocal relationship as inquired, learnt and created meaning together (Heron, 1996). These frameworks also fitted neatly with notions of equality, community and the levelling of power, all of which I was familiar with in working in the CASA field.

I was also drawn to the idea behind PAR and co-operative inquiry going beyond thinking about problems and knowledge to taking action that is practical and meaningful and that co-operative inquiry examines practice in regards to issues that confront us in our work (Reason, 1988). The idea of undertaking this type of process in a group was exciting to me, especially with a group of my colleagues who worked in different parts of the sexual assault service system and in different roles in their respective agencies.

As a CIG we would use the spiral process of action research in moving between cycles of our experiences and reflections, reviewing and refining our practice. And while I began thinking of what we were doing as –co-operative inquiry (Heron, 1998), I do think in the end it had more of a flavour of collaborative inquiry (Bray et al, 2000) as we found ways to explore the tensions that arose in our group process; to share and learn from each other's different experiences and to integrate that into our different contexts and roles in ways that made sense to each of us.

IV. UNDERTAKING THE WORK

This work was undertaken by a group of six of us; all therapists working in the Victorian sexual assault sector. Table 1 outlines our basic details (pseudonyms are used for my co-researchers). We met over a twelve-month period on ten occasions, of two hours each. Applying a cycle of planning-action-reflection we spent time talking about our work, the challenges, the difficulties and the successes; we swapped ideas about new strategies, planned what we might try out back in our workplaces and reflected on those actions. After each CIG meeting I would transcribe and summarize the recordings of our conversations and invite my co-researchers to check my transcriptions and summaries. We would use these summaries to guide our reflections and plan further actions.

Psuedonym	Agency	Clients	Time in Sexual Assault field	Time in related field
Helen	Metro CASA*	Parents, victims, children with PSB**	14	7
Lynn	Metro CASA	Young people with SAB†, children with PSB	17	4
Rita	Metro CASA	Children and young people who have experienced sexual abuse and their non-abusive family members	16	12
Brian	Rural CASA	Young people with SAB and their families	2	10
Gill	Metro Non-CASA	Children and young people who have experienced abuse trauma and their families	2 ½	3
Kevin	Metro Non-CASA	Children and young people who have experienced sexual abuse, or who have PSB/SAB and their families	8	15 ½

TABLE I. CO-OPERATIVE INQUIRY GROUP MEMBERSHIP

*CASA - Centre against sexual assault

** Problem sexual behaviour

† Sexually abusive behaviour

Whilst the original idea was to gather the data through the CIG, it became increasingly apparent to me that there was so much more to explore for which we simply did not have the time in these meetings. Also, as we reflected on our work, it became more and more clear to us that there was a broader contextual basis to our actions in and decisions about the work we did that was laced with our assumptions, our training, our particular experiences, the culture and mission of our workplaces and a whole lot more. This led me to decide to interview each of the CIG members individually, as well as their managers to get as broad an understanding of at least our work contexts as possible.

I also became interested in just what are the social discourses about siblings and sibling sexual abuse. I started by looking at incest taboos – about which much has been written (Fessler & Navarrete, 2004; Fox, 1962; Justice & Justice, 1979). But then, perhaps serendipitously, a movie that was released in 2009 about this very topic, was brought to my attention. Rachel Ward produced “Beautiful Kate”. Normally I would not go to see a movie like this – I see enough at work. However, the reviews barely referenced the nature of the sibling relationship and my curiosity was peaked. My reaction to this movie was equally strong. Whilst it was beautifully shot and acted, it was in many ways blaming of Kate and yet, in others it almost romanticised what had occurred. It seemed also to ignore many of the dynamics and impacts of sibling sexual abuse, focusing more on the relationship between father and son. I was prompted to write about the movie and what seemed to me to be the manipulation of Kate’s voice. I was also prompted to look more broadly in the newsprint media and in literature for the presence of or reference to SSA and, in an effort to

bring some balance back to the frame through which I was looking, I sought out more general writing about sibling relationships. I was overwhelmed by what I found.

This material: the CIG transcripts, interview transcripts, CIG session notes, newspaper articles, movie and book reviews, together with my research journal, communications from other colleagues about the work, and final comments from the CIG members on a questionnaire that I devised about the CIG process came to be my data. Following are some emerging findings from this data.

V. WADING INTO THE DATA AND GETTING TO THEMES

In analysing the data, I began with an open coding approach (Browne, 2004; Grbich, 2007), effectively precoding (Saldana, 2009) as the CIG was meeting and engaging in the PAR process. In vivo coding and cross checking with my co-researchers helped me to retain the meaning we were making as a group (Grbich, 2007). I sought my co-researchers' comments as to the appropriateness of the categories and their importance in our perspectives about the work; all the time wary of the potential for my interests, my frames of reference and my position in the process to bias what I saw and interpreted. I also applied Descriptive Coding and the affective method of Values Coding, with the aim of both describing issues to which we often seemed to return and identifying some of the underlying values that drive our work (Saldana, 2009). As I broadened my data corpus to include forms other than just transcripts I also added the exploratory method of Holistic coding (Saldana, 2009).

I applied Thematic analysis as described by Braun & Clarke (2006). I liked that this method was described as flexible (this word would come up time and time again as I gathered data and read the literature), and compatible with a constructionist paradigm. I liked also that I was gathering terms to help me organize my data in my head as well as before my eyes (Braun & Clarke, 2006). My data corpus had broadened without me trying too much and as I read and re-read, listened and re-listened, grouped, classified and categorised this corpus, I identified how the questions, themes or clumps that I was discovering in both the CIG and interview transcripts, as well as in the other different types of data, were forming patterns. The themes that I have begun to focus on at this point are discussed below. I should also point out that what follows are the voices of my co-researchers and I. I am still sifting through the transcripts of the managers whom I interviewed and hope to bring their voices more clearly into hearing in later writing.

VI. IMPACT OF THE WORK

In regards to what we were discovering about impact, the themes that filled the majority of our conversations were about our experience of parallel processes with the families and our individual clients and how we identified and managed our anxieties, our ambivalence and our anger. Being aware of these processes and reactions, sharing them with our colleagues and taking them to our supervisors are all helpful. Some of the CIG members described new processes in their workplaces for bringing some level of objectivity to their work through panel or facilitated group discussions of their cases and their formulations. They spoke of how this not only helped them to step away from the subjective experience of the work, but how it broadened their understanding of what might be happening and what could be done. Others talked about how when their agency only saw victim children, it was easier to avoid such processes – particularly to not take sides with either the victim child or the sibling who abused, as happens in many families; to come into conflict with our colleagues who might be working with other members of the family system; or to feel either a sense of split loyalty or competing empathy for the victim child and his or her sibling – something that many parents have described to us. For those of us who had previously worked primarily with victims of SSA, our growing empathy for the siblings who had abused was bringing a greater understanding of the families and their experiences, yet it was also creating new challenges as we juggled the many different perspectives and needs of our clients – of all the family members.

Some of us had experienced a sense of isolation and judgement, particularly in taking up the work with the siblings who had abused. In a field that has for so long worked hard to champion the voice of victims,

it seemed perhaps to many in the field that we were deliberately working against that role. As a result of the tensions that seemed to be created by introducing this work into the CASA system, the temptation for us to feel isolated and cut off from our colleagues was great. And yet what we were learning in our work was about the importance of connection, attachment and understanding each family member's place and perspective. I think that for those of us working in the same agency, it was particularly helpful to have a sense of connection between us through our co-operative inquiry. It was also helpful, however, to focus on building connections with our other colleagues. I will return to this point.

Something else that appeared to be connected to the impact of the work on us, was that at times the CIG meetings seemed to be repeating conversations – especially conversations about our need to “get it right”, to keep children safe and to manage our frustrations and our ambivalence about supporting and working with parents who could not keep their children safe and young people who had harmed their siblings in a way that was often too awful for any of us to want to hear about. As one of my co-researchers said during one discussion about the work, “can we talk about something else now?” Sometimes it’s too much to have to think about and to continue to do so can potentially lead to a sense of powerlessness and hopelessness. Changing the topic that we seemed to be stuck on was perhaps as good a way as any to protect ourselves from this stuckness and from what we hear over and over from families who have experienced SSA.

One of the other interesting themes that I encountered in the data and related to how the work impacts on us, was about a sense of being both an insider and an outsider in our work. For me, this was so in a number of ways. Firstly, I was the instigator of the research and in some ways seen, perhaps as the one who had the knowledge and more so as the one who had the responsibility for the research. For me this raised concerns about how truly collaborative we could be and made me incredibly conscious of not pushing a particular agenda. I also wondered about how my existing relationships with each of the CIG members, as a colleague, a trainer and a friend would impact the inquiry process. But perhaps of most interest was my wondering about how our roles as parents, siblings and family members both brought us close to our clients and distanced us from them; and how this impacted our work. As one of my co-researchers said, “if my daughter came home and told me she had been raped by a stranger, I’d know what to do...but if she came home and told me it was her brother....I don’t know how I would react.” I don’t know how I would react, either, if my children told me something like that. Would I react with anger and disgust? Would I become lost in my own sense of guilt, blame and shame? Or would I hold them both, tell them I love them and that I would help them both to do what they had to do as to get through this? I don’t know...and I don’t ever want to have to know. What I have appreciated, though, is raised awareness of this both thought and of my reaction to the possibility. I can only hope that it gives me a new opportunity to develop my understanding of the experience of the parents with whom I work.

VII. CHALLENGES OF THE WORK

Staying aware of and managing these parallels, the juggling act and the importance of balancing the different perspectives of family members were certainly identified as challenges for us to deal with. There were however other challenges which we identified. I have alluded above to tensions in the service system and challenges both in undertaking work with SSA within one agency and across different agencies. How we “divide” the work up, how we maintain communication with our colleagues and how we resist the pull to both align with our particular client when we work with only part of the family system, and to become dismissive, judgemental or blaming of our colleagues as well as other family members, are all common challenges in this work. After listening to the experiences of some of the others with panels and facilitated discussions, one of my co-researchers made a commitment to developing a consultation group facilitated by a therapist from outside our agency where we can present our cases. This process is now underway and is challenging some of the previous practices of the agency by elevating the presence of this work, fostering connections between the therapists and challenging isolation and by providing a forum where we can constructively present, review and develop our practice.

Another of my co-researchers explained how she had found that simply sharing her anxieties and her reactions about the sibling who had abused with her colleague who was working with that young person in another agency was a most helpful and enlightening process. This was part of her reflections on her changing work place, her changing work practices and her changing experience of this work.

And yet another challenge that we found ourselves returning to and each committing to explore was to be more cognizant of the language we used when talking to and about our clients. We spoke at length about the use of words such as perpetrator, offender and even the term sibling sexual abuse. Whilst we all eschewed the term “offender”, after all we were talking about children and young people under 15 years, there was much concern raised about the temptation to minimize the behaviour of these young people and thus invalidate the victim child’s experience. However, it was also important for us to talk about working within a developmental framework that acknowledges the child and his or her own traumatic history and values them as a person above their sexual behaviour. The term “sexual harm” rather than “sexual abuse” was suggested as was the idea of using a scale that identifies what sort of behaviour could lead to criminal charges, as ways of being less judgemental, but without allowing young people to abdicate their responsibility for their actions. One of the co-researchers took this discussion back to her workplace, enthused about the potential discussion that could be had there, only to have that discussion quashed by the team. In the end, we could agree only that what was important was being able to talk in a manner that engaged our clients, which did not shame or blame them (Jenkins, 2006) and which encouraged them to find ways of developing a new sense of themselves, whether that be outside the constraints of being labeled a “victim”, a “perpetrator” or a parent who feels “responsible”.

VIII. SOCIAL AND THERAPEUTIC DISCOURSES

It was in part these discussions about language and philosophical frameworks, together with my stumbling across the film “Beautiful Kate”, that sent me to look at broader social discourse about sibling sexual abuse. What I found in newspaper reports was little. There were stories about parents or step parents “having sex” or committing “incest” with their children in a “boyfriend-girlfriend relationship” or a “sexual affair”, teenage girls being “raped” at parties or prepubescent girls “raped” by boys who were “being naughty or playing an age-old game such as doctors and nurses”, teachers “having sex” or “affairs” with their students, female joggers and young girls being “sexually attacked”, young boys being “sexually assaulted”, priests engaging children in “sex acts” and fathers procuring other adults to have sex with their children.

I found only two specific references to sibling sexual abuse: one described a couple “in love” who later discovered they were half siblings; the other used the terms “molestation” and “sexual assault”. Interestingly these were quite short articles and online news page links from them tended to be to more reports of childhood sexual abuse by others as opposed to siblings.

The level of minimization in these reports speaks to a social discourse that implies consent and ignores the power imbalance between adults and children (“relationship”, “affair”) and ignores the level of harm and trauma that sexual abuse and sexual assault causes children and young people (“having sex”, “playing an age-old game”). However it was interesting that the reports of sibling sexual abuse were not only fewer (considering that previous research - Hardy, 2001, Loredo, 1982; Markowitz, 1994 - suggests that this prevalent form of sexual abuse occurs more than has been widely acknowledged), but shorter as well, and gave little detail about any violence, when again, previous research has referred to the potential for much violence in SSA (Cafarro & Conn-Cafarro, 1998; Wiehe, 1996, 1997).

The minimization of impact and harm seems to continue on in the movies and novels that I came across. Whilst the dominant social discourse seems to be driven by the incest taboo and holds that sex with a sibling is not acceptable, the subject of sibling incest it appears, seems to be very present in creative narratives. Perhaps in that realm it is not so much a “taboo” and that “literary license” provides permission for writers to explore whatever material in whichever manner. But this presence aside, it seems to me that

being written about in novels and movies makes the existence of SSA perhaps even less real. And so through such discourses, the voices of the families who have experienced SSA are further silenced.

It seems that such social discourse about SSA, must somehow be part of the context in how we understand and respond to its existence being brought to our consciousness when we work in the sexual assault field. Whilst none of us in the CIG would even think to deny or minimize the existence of SSA, the lure to minimize its impact was something that we continued to wrestle with as we wrestled with the language that we used. The importance of privileging the voice of the victim was strong in all of us and remains so in the sexual assault field and in part, this is what I believe keeps us from falling into such minimizing discourses. However, my concern was also about us being constrained by what has long been a dominant psychiatric discourse of “mother blaming”, or blaming family dynamics for everything. Our discussions, however, seemed either not to be in such a vein or at least recognized how we are taking up the challenge to work with these families, and particularly the siblings who abuse, in a manner that is not blaming or judgemental.

IX. COMPASSION SATISFACTION

One final theme I have found in the data and that has been of particular interest to me, is that of compassion satisfaction. In the beginning I was interested in the challenges we faced and we spoke at length about the complexities, the difficulties, the frustrations and the anxieties of the work. However, we eventually came to be talking about the satisfaction we gain from our work. Although times remained when we would rather change the topic, relish the legitimate time we had away from our offices and eat the food that was before us during our CIG meetings, rather than being frozen in the fatigue and vicarious trauma that are so typically voiced and written about regarding therapists in the trauma and child sexual abuse fields (Conrad & Keller-Gunther, 2006; Cunningham, 1999; Figley, 1995; Killian, 2008; Lerials & Byrne, 2003; McCann & Pearlman, 1990; Morrison, 2004; Morrison, Quadara, & Boyd, 2007; Pearlman & Saakvitne, 1995; Stamm, 1997; Stamm, Varra, Pearlman & Giller, 2002) we found ourselves talking about the privilege of doing our work, the joy of the challenge and our appreciation of the role we played in helping families and other professionals to understand what is so often so *not* understandable.

When I listened to the tapes of the CIG sessions and the interviews, what I heard in particular about this satisfaction was a sense of passion for the work; a vocation, as two people put it. But there was also the role of hope in our work and in the families with whom we engage. This hope, which one of my co-researchers referred to as always being “in my back pocket” was what we were finding was our mainstay and perhaps our protector against compassion fatigue.

X. SOME REFLECTIONS AND SUGGESTIONS

Of course, I am also left with some reflections about the work and the process we undertook. When thinking about the planning-action-reflection cycle and returning to my research questions I see some answers and changes achieved and, of course, some that perhaps need more time. Certainly what I do feel I understand better at this point is both my and my colleagues’ experiences of working with families who have experienced SSA; in particular the challenges we face in this work and the impact this work has on us. Together we explored these challenges and ways to address them. We shared strategies that help us review our practices and develop our connections with our colleagues; we explored our use of language, the way we communicate with our colleagues about our shared cases and identified how we have at times both struggled with and embraced the changes in our service system. We found space in the CIG meetings to explore our awareness of our reactions, as well as our assumptions and beliefs about the work we do and the families with whom we work.

I reflect on these changes and I feel that we have achieved so much. However, I have continued to wonder about the power of using a CIG process and the applicability of participatory action research in my field or work. Whilst the group experience was spoken of positively by my co-researchers and welcomed and supported by our managers, the data suggests that what has changed the most is our understanding and

our thinking rather than our practice. Certainly my awareness of my reactions, thinking, motivations and practice in this work has grown in so many ways. Reason (1988) wrote about research as a personal process. This has been a very personal process for me and I have learned much about myself.

I also have thought much about my positions as the instigator of the research, a member of the CIG, a colleague and a friend of my co-researchers and just how those roles played their part in our journey. I think in many ways my anxiety about not directing the process along the lines of my agenda constrained me at times from pursuing some areas of exploration. For instance, I put aside my curiosity about our roles as parents and siblings as I felt it was not a practical thing to pursue. In retrospect, I wonder about that now. Perhaps greater understanding of this idea might shed even more light onto how we engage with the families or individuals with whom we work, how the work impacts on us and even why we choose to undertake this work and stay so long in this field. I believe that I also restrained my curiosity about hope and its role in how we do our work – especially its role in protecting us from vicarious trauma and compassion fatigue – again because I felt it was my agenda. Of course, towards the end of our work, I began to see that perhaps it was not.

Finally, where there have been changes in our agencies' practice, it is hard to determine whether or not these would have occurred simply because of changes in the service system that were being ushered in by new legislation and new funding that saw some Victorian sexual assault services take up work with young people aged 12-15 years who were engaging in sexually abusive behaviour – a service that had previously not been widely available in the system and particularly not at a CASA. Perhaps this may become clearer with time. Change, we know, does not generally occur easily and swiftly (Chapman, 2005) and I would like to take some time to look more closely at the actual PAR and CIG processes and their application in my field of work in the future.

Without a doubt there is also much more that we can learn about working with families who have experienced SSA. Perhaps future research could take up these issues of understanding the position of the therapist and how we engage and work with the families who present in our services, as well as how our commitment to the work can actually be a both a vehicle for this engagement and a protective factor for us. Another area that could be explored more closely in future research is how we build and develop connections and communication with our colleagues. I wonder if particularly in this latter aspect, there will be more parallels with the families' experiences that could be explored? It would be interesting too, to seek the perspective of the families as to what it might be about the service they receive that is helpful and positive and what might be constraining and disengaging.

With such possibilities still to be developed and such deeper meaning and understanding to be experienced, our commitment to the work and to continue to develop best practice will continue, perhaps, to be our greatest asset.

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