

**Title:** Intrapersonal and inter-subjective challenges of researching older and vulnerable males convicted of sexual offences.

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### **Abstract**

This article presents a sequence of reflexive observations based on my experiences as a lone researcher, conducting sensitive qualitative research with vulnerable adult male prisoners who were convicted of sexual offences. The data collection process was imbued with intrapersonal and inter-subjective challenges, including rapport building with participants, negotiating with gatekeepers, care for vulnerable participants, and dealing with the emotional dissonance emanating from the management of unsolicited disclosures. The closed nature of the institution, security processes, hierarchical relations and aspects of the prisoner culture increased the complexity of the research process. It is argued that researching vulnerable groups in sensitive locations is replete with ethical and interpersonal tensions. Given that other researchers conducting sensitive research with hard to reach populations may encounter similar issues, this paper aims to capture in detail some of the difficulties and presents the main points of learning from the experience.

### **Introduction**

**Background of the research.**

The original study is based on an examination of peer care giving in a UK prison. Its primary aim was to analyze the participant's experience of giving and receiving peer care, in order to look for new ways to improve care within the environment. The working hypothesis is the provision of peer social care training and changes to local policies and practices may help to increase the sensitivity and competence of the local prisoner peer caregivers', thus improving vulnerable prisoners experience of receiving supportive care.

The motivation to promote peer care practices stems from my professional experiences as a nurse, nurse manager and project manager in criminal justice settings. My professional socialization was bound to affect my sense of neutrality in prison settings and needed to be processed when considering my relationship with the participants, the wider organization and the way I responded to situations in the field. My privileged status as an educated, middle-aged male, with knowledge of the prison system engendered a position of relative power even though I did not feel necessarily powerful; indeed, sometimes I felt quite vulnerable. These structural and biographic factors become significant in the context of maintaining a reflexive approach to data collection, dealing with ethical dilemmas and increasing the transparency of aspects of my status and position. This accords with the views of Gomes and Duarte (2018) who suggest that careful self-reflexive deliberation can help to increase the visibility of relational dynamics and ethical problems within research practices. Therefore, continuous reflexive consideration was afforded to my self-perception, aspects of impression management, and to how I was perceived and reacted to in the field.

The research site is a security category B prison; its main role is to provide specialist rehabilitation-training programs specifically for adult, male sex offenders. During the fieldwork I mainly interfaced with two socially distant groups, prison officers and adult male prisoners, occupying a liminal position, oscillating in the space between the populations. My appearance and language identified me as an outsider but due to my repertoire of occupational roles working in prisons, I was trusted to hold keys; I was therefore nearer to occupying a position of 'informed' outsider. Molding Nielson (2010: 307) affirms that uncertainty and insecurity is prevalent in ethnographic research because the participation of the researcher requires 'shifting social engagements in relation to which the researcher constantly has to guard and disguise information and positioning'. Several authors suggest that reflecting on the subjective pains of such experiences can yield useful analytic insights, (Jewkes 2011, Molding Nielson 2010, Yuen 2011).

Ethics applications were endorsed by the University of Brighton Research Ethics Panel at tier 2 and subsequently by the National Offender Management Service (NOMS). The governor of the research site approved the work and information was disseminated to the residential custody managers informing them of my research aims and presence.

## **The increasing need for adult social care in prisons.**

In 2019, the number of older prisoners in England and Wales increased to 13,620, comprising of 17% of the prison population, and making them the fastest growing sub-group of the prison demography (Ministry of Justice (MOJ), 2018). This is largely due to an ageing population, stricter sentencing and the pursuit historic sex offences (Prisons and Probation Ombudsman, 2017). Premature ageing amongst prisoners is due to a complex range of factors including socio-economic status, lifestyle choices, access to preventative health care and institutional stresses, (Aday and Krabill, 2013). Owing to the both importation of chronic disease and development of illnesses and disability while serving their sentences, prisoners are defined as old after the age of 50 (Turner and Peacock, 2017).

The older participants where aged between 60-93, they lived with multiple disadvantages incurred by problems adapting to incarceration at a later stage in their life-courses, disabilities, multiple long-term health conditions and the stigma associated with their historic offences. However, sensitivity should be shown to the heterogeneity of group as their social needs and levels of ability differed, for example, some were able to attend occupational activities, whereas others spent the majority of their time in their cells. Nationally, 46% of older prisoners are serving sentences for sexual offences (House of Lords, 2017).

The level and quality of formal adult social care in UK prisons has received criticism in recent years (O'Hara et al, 2015, Her Majesty's Inspectorate of Prisons (HMIP), 2018; HMIP (Scotland), 2019). Social care in prisons appears to fall short of the target of parity with community services, as set out in the Care Act (2014), (Tucker et al, 2018). Interestingly, the MOJ does not have a policy specifically relating to management of older and infirm prisoners, and regimes and environments remain undifferentiated by age and ability (Forsyth et al, 2019). However, providing preventative home-help style social support can promote social contact, help to increase well-being and save costs down-stream (Clark, Dyer and Horwood, 1998). Furthermore, it is reported, mostly by North American researchers, that many prisoners actively seek opportunities to engage in altruistic or generative activities, in order to enact transformative narratives (Collica, 2013; Cloyes, Rosenkranz and Wold, 2014; Stewart, 2018).

This article represents an exploration of some challenges faced while undertaking research within a population of vulnerable male sex offenders. The main features centre on the application of sensitive research methods, negotiating access with gatekeepers, care for vulnerable participants (and researchers), and the management of unexpected disclosures. The aim is to reflexively think through the sensitivity of the situations with a view to sharing my experience and subsequent learning.

## **Older prisoners as vulnerable research participants**

In this section I discuss some of the factors that identify older and disabled male sex offenders as a particularly vulnerable sub-population. Researching vulnerable and marginalized people is associated with the concept of 'sensitive research'; this is often undertaken with 'hidden' or 'hard-to-reach' populations (Liamputtong, 2007). These groups of people are often 'the silent, the hidden, the deviant, the tabooed, the marginalized and hence invisible populations in society' (Stone, 2003: 149). Campbell (2002) suggests that sensitive research focuses on the difficult issues, such as abuse, trauma, illness, death and crime. Populations include people who are subordinated and stigmatised and can also include the caregivers of chronically unwell individuals. All of the above sources of vulnerability pertain to older adults in prisons. However, despite the conditions, there are various health promoting processes in the environment for example, the provision of onsite healthcare services and opportunities for social engagement.

By definition prisoners are vulnerable, however imprisoned sex offenders are deemed especially so (Riccardelli, 2014; Riccardelli & Spencer, 2014). Being categorized as a sex offender can subject one to hate, scorn and prosecution. Media representations often function as expressions of disdain and disgust for individuals with sex offending histories, (Tolson and Klein, 2015). Often sex offenders report experiences of stigmatization and isolation from their families and communities as a result of their labeled status. This can lead them to be distrustful of outsiders, including researchers. As a consequence, sex offenders are ordinarily extremely difficult to access for research, both in the community and in prisons (Blagden and Pemberton, 2010).

In male prisons, sex offenders are the most victimized group of prisoners (Riccardelli and Spencer, 2014). Researchers have used the expressions 'ultramasculine' (Sabo, Kupers and London, 2001) or 'hyper-masculine' (Jewkes, 2004) to describe the expression of masculinity within male prisons. Sabo, Kupers and London (2001: 6), suggest these forms of masculinity enable 'elite males to extend their influence and control over lesser-status males within inter-male dominance hierarchies'. This causes 'secondary exclusion' (Levins and Crewe, 2014) which can serve to weaken support, increase their sense of ontological insecurity and, hence, increase their vulnerability to stress and other ill health. The above perspectives on older adulthood, frailty, disability, prison culture and vulnerability combine with public perceptions of sex offenders, to stigmatize and exclude this population. These factors serve to limit their visibility and accessibility and influences the level of trust with potential researchers.

## **Sensitive research methods**

When planning the research, I felt my professional experience as a prison nurse would equip me to deal with the rigors of the environment, and that elements of my professional socialization aligned to the sensibilities required for qualitative approaches. Qualitative methods can provide opportunities for researchers to form relationships with participants that gradually leads to the establishment of trust and rapport, and this can facilitate access to in-depth, 'backstage' understandings (Liamputtong, 2007). On this basis an ethnographic research plan was formulated with the aim of supporting methods that were adaptable to the dynamics of prison life, and responsive to serendipitous opportunities for data collection. Eventually data was collected in four residential areas but focused on two specific locations with higher concentrations of older prisoners.

The ethnography was conducted over a six-month period in 2018, covering all times and days of the working week. Ethnography is a popular methodology for researching deviant groups (Liamputtong, 2007), as it aims to 'get an in-depth understanding of how individuals in different sub-cultures make sense of their lived reality' (Hesse-Biber and Leavy, 2005: 230). Data was generated by observing the caregiver / care-receiver dyads in the course of their daily activities, supported with impressionistic field notes based on observed activity in the environment. The additional time spent at the research site helped me to build trust and off-set power differentials by increasing my familiarity with the various participants. Indeed, as suggested by Reeves (2010), 'credibility can be established through more frequent interactions between researchers and subjects.' For these reasons, ethnography is liked by researchers who wish to be close to their participants, in order to enable them to vocalize aspects of their lived experience.

Much time was spent simply hanging out near to the accommodation block office or in the canteen area, regularly explaining my role and purpose. On several occasions I chatted with the officers about whom they felt might be suitable to interview. I sensed I was being steered towards older prisoners who were perceived as being compliant or less discordant. Lee (1993) reports that the 'snowballing' sampling strategy is commonly used in the study of deviant populations. However, my approach transpired to be nearer to a 'convenience' sample based on who was available in the environment, benefiting from the 'word of mouth technique' described by Madriz (1995), as it is likely that my presence and work had become known within the closed community of the accommodation wing.

The observations were supported by semi-structured interviews, and the collation of other supplementary data, opportunistically gathered during the course of encounters and conversations. Interviews are considered to be valuable for 'accessing subjugated voices and getting at subjugated knowledge' (Hesse-Biber and Leavy, 2005). The participants were asked about their experience of communal living, the factors that enabled them to cope, the impact of the prison regime, their situated relationships and their experiences of giving and receiving care. The confidential nature of research may have enabled the participants to reveal their

concerns; other participants may have found it empowering or even therapeutic, (Rossetto, 2014). For convenience, privacy and to off-set asymmetric power relations, the interviews were conducted in the participant's cells, it is also likely that this is where the participants felt most comfortable (Herzog, 2005). The narratives gathered offered thick descriptions of their lived existence within the environment and of receiving care.

### **Protection of vulnerable participants**

As a stigmatized and vulnerable population, the potential for psychological or emotional harm would appear to be high; indeed, almost every situation seemed to precipitate ethical tensions or dilemmas. I was highly conscious of not wanting to further stigmatize or 'other' the participants or incur reputational damage to the organisation. Dickson-Swift (2005: 21) suggests that 'Researchers undertaking research on sensitive topics need to be acutely aware of their ethical responsibilities'. For this reason, pursuing the aims of the research needed to be carefully balanced against the risks of negative consequences. Yet if services are to be developed to meet the needs of the population, engaging them in research would appear essential. Therefore, minimizing the risks to the participants became the issue. Retaining a continuously self-aware, reflexive practice (Guillemin and Gillam, 2004), was required to sensitively manage my behavior and ethical decision making.

Dialogic processes may prompt participants to revisit aspects of their lives that they may have previously suppressed. Furthermore, in-depth discussions may also give rise to new self-knowledge with the potential for adverse psychological impacts. It was therefore imperative to take all necessary steps to alleviate concern before, during and after the data collection process. To assist with these issues a 'safeguarding action plan' was devised in addition to the participant information sheet, this was designed to reassure gatekeepers and from a more practical perspective, to signpost participants to local sources of emotional support in the event of immediate or post involvement distress.

Gaining consent also required a skilled and sensitive approach. The participants were informed that there may be circumstances in which confidentiality could not be guaranteed, specifically where a risk to the safety of the participants or exploitation might be identified. I could not be certain that all of the individuals I encountered possessed the level of mental capacity needed to comply with the principle of informed consent, in these instances I did not proceed with the interviews. Perhaps unsurprising I heard nothing to suggest any of the participants expressed post-interview stresses. Furthermore, there was no need to breach confidentiality, although on one occasion I became concerned about the resilience levels of one of the peer care givers and took steps to engage senior staff in order to provide support. In a separate incident, a peer care giver disclosed a breach of policy

guidance in relation to the difference between personal and intimate care, this was discussed and later used as a point of learning with his colleagues. My exit from the environment was anticipated in advance, and I was able to wind down my relationships with most of the participants.

### **Negotiating access**

According to MacDougall and Fudge (2001), researchers working with vulnerable groups employ a combination of methods to gain access to hard to reach populations. By operating through my professional networks and conducting a sequence of preliminary visits, I was able to gain support for the study. Once access to the site was achieved, I was helped to develop other working relationships. However, I found the landscape to be changeable as two highly supportive gatekeepers left the organization in quick succession, leaving the study in a rather precarious position. Other prison researchers have highlighted the anxieties associated with losing access to research sites, illustrating the fragility of conducting research in prisons (Liebling and Stanko, 2001). As the new gatekeepers did not share my professional frame of reference, it is likely that their perceptions on the value of the research differed from my own.

My initial expectations of working through a single gatekeeper transpired to be unrealistic as I found I needed to negotiate with numerous gatekeepers, occupying different levels within staff hierarchy. These included officers, operational managers and prominent informal figures in the research population. This is consistent with the views of Mulhall (2003) who acknowledges that once initial access is gained, informally situated gatekeepers also need to be engaged before other participants will fully contribute. Tewksbury and Gagne, (2001: 78) suggest that working with 'a visible and respected individual who holds a position of authority, high respect, or leadership' can help as a bridge between the researcher and individual or groups of participants. Early in the research process I met with an officer designated as a Disability Liaison Officer, with responsibility for helping to manage the peer care givers. He appeared to be well known and respected by the participants. Reeves (2010: 324) suggests that such informal gatekeepers 'are not necessarily in structural positions to exercise control, but rather influence others through the strength of their personality and character'. It is difficult to estimate the extent of the influence he was able to exert but he did introduce me to several participants, and it is likely that others may have seen us walking and talking together.

Orlitz (2004), developed a framework ranging from 'external' to 'internal' gatekeepers, and this was useful as a means of helping me to track relational engagement with gatekeepers. As the research process evolved my experience could be more correctly described using the categories 'informal' and 'formal' gatekeepers (Reeves, 2010). Both perspectives fit my experience and helped me to reflect on the specific challenges associated accessing the areas within the site and gaining trust.

The level of environmental stimulation was generally low; therefore, the opportunity to be heard by someone new and independent may have appealed to the participants. Moreover Liamputtong (2007: 196) states, 'Stigmatized individuals, like registered sex offenders and their family members, desire to be heard and have opportunities to tell their stories'. It is also possible that they may have valued the opportunity to off-load personal stresses. I felt able to draw on aspects of my professional socialisation, such as, perspective taking, empathic listening, tolerance for ambiguity and emotional sensitivity, in order to listen actively and demonstrate interest in the participant's experiences. As a middle-aged male with knowledge of the prison culture and system, it is possible that I was accepted as a knowledgeable other, or someone who could be trusted to listen. Ultimately only one older and disabled prisoner declined to be interviewed, citing not wishing to talk out of line in relation to the work of his peers, speaking to the strength of relationships within the closed community.

### **Dealing with unsolicited disclosure**

Initially, I felt that a helpful method of gaining trust was to express a position of not wanting to encroach on sensitive historical social matters by asking questions in relation to the participant's offences. I reasoned the participants might be highly sensitized to such matters and that this could engender resistance to data collection. I began each interview with words to the effect of, *"Issues relating to your index offence and sentence are of no relevance to the research"*. However, as Daly (1992) suggests, the inherent power imbalance between researchers and research participants may result in unplanned disclosures of intimate information. In my experience comments related to details of their index offence, aspects of their lifestyle, or reflections on their previous identities. For example, some of the more innocuous statements were ... (participant discloses his offence), followed by... "I thought we'd better get that out of the way", or more indirectly... "It was all about me, I thought I could get away with anything". On other occasions I was taken-aback by the casual manner with which their crimes were discussed, as well as by the offences.

I heard the linguistic trope, *'I know you've heard this before, but I shouldn't be here'*, sometimes more than once per interview. Two of the participants claimed their charges were the result of jealous family members whose agenda was financially motivated. These could have been 'neutralisations' (Sykes and Matza, 1956), 'cognitive distortion' (Maruna and Mann, 2006), part of a narrative of denial or an attempt to construct and project a more acceptable, trustworthy identity. The narrative was also visible within the family photographs and artifacts that I observed in their cells. The participants were clearly concerned about their moral status and

attempted to manage how their peers and visitors to the community would perceive them.

There were occasions when aspects of my biographic history overlapped with those of the participants. For example, one of the participants came from a geographic area where I had once lived; it is an area where I continue to enjoy social connections, some of whom have young families. The participant described cycling around the area as a leisure activity which I imagined as potentially predatory behavior. I wanted the participant to trust me and went along with his generally jolly demeanor as a way of developing rapport and extracting data, although by laughing along with him, it was as if I was validating him as a person and thus condoning his deviant activity. I did not want to judge the participant, indeed he seemed too aged and frail to pose a risk. However, simultaneously there was something about the situation that left me with discordant emotions. I experienced an internal dissonance of knowing my responsibility to preserve confidentiality, while craving to make the risks known.

Informal or friendly behaviours from sex offenders can be perceived as attempts to manipulative or groom researchers, resulting in diminished inclinations to trust offenders' stories' (Klein, Bailey and Sample, 2018). Exposure to this kind of interpersonal versatility unsettled my preferred disposition of trying to remain objective. Pertinently Farrenkopf states, 'Beyond disgust, researchers also experience anger at subjects for a variety of reasons', (1992: 213). I was not so much angered, experiencing something nearer to incredulity. I was conscious of the need control internal emotions as I believed these might be given away in my reactive, external body language.

### **Maintaining researcher resilience.**

Researchers undertaking sensitive research may be affected by the social stigma of the population or research area. This process was referred to as courtesy stigma (Goffman, 1963), or more recently as 'stigma contagion' (Kirby and Corzine 1981: 3). On some occasions I have felt the need to distance myself from the research by explaining that at least initially, I did not know that all of the participants would be convicted sex offenders. I feared that people might make assumptions that researcher's who hang around with those types of people, are 'those types.' In such situations, researchers can become vulnerable to social stigmatization based on the notion of 'guilt by association', (Miller and Tewksbury, 2001: 206).

Researchers have discussed how the process of conducting research on sensitive issues has affected them personally, (Cowburn, 2007). As the narratives that researchers obtain may relate to suffering or injustices, researchers undertaking sensitive research must make judgments on the impact of their research, not only on

the participants but also on themselves. Morse and Mitcham, (1997: 650) describe 'compathy phenomenon' as the 'acquisition of distress and/or psychological symptoms by an apparently healthy individual following contact with the distress of another'.

Based on Goffman's methods of institutional adaptation, Cowburn (2007) learned to adopt a combination of processes to mediate the intra-personal effects of researching in prisons with men convicted of sexual offences, concluding that 'playing it cool' is often the best option. As a lone researcher with professional experience in the field, I did not anticipate any kind of reaction or trauma from the interactions, yet some feelings of emotional discomfort remained available to me over the longer term. I was able to adopt an in-the-moment strategy of suspending judgment, then reflecting on the reasons for my emotional labour at a later opportunity. Reflecting and writing about the issues helped to process the issues.

## **Discussion.**

This article discusses some of the experiences associated with accessing and undertaking sensitive research with a particularly stigmatized section of the prison population. It discusses the outcomes of inter-subjective encounters and intrapersonal conflicts in order to highlight areas of learning, and this may assist researchers in similarly discrete areas, with similarly excluded populations. I felt my biographic experience as a prison nurse would equip me to deal with the rigors of the environment, and that elements of my professional socialization aligned to the sensibilities required for qualitative approaches. Attention to the reactions of others and noticing internal drives such as emotional dissonance, served as a prompt to adjust aspects of my situated behaviour and for subsequent reflection. The need for a sensitive methodological approach, attention to relationships with gatekeepers, coping with interactions with participants are identified as challenges for neophyte prison researchers.

People who commit sexual offences are rejected and discriminated against; the stigma permeates all aspects of their social life. This is experienced more acutely in prisons owing to expressions of masculinity within the prisoner culture; this stigma can lead to increased suspicions and impact on their willingness to engage with researchers. Therefore, a connection has been made between the public vilification of sexual offenders and the need for increased ethical, methodological and relational sensitivity. Temporal factors associated with a qualitative methodological strategy facilitated more time in the environment, increasing my familiarity with the participants and it is felt that this helped to off-set power differentials. Structural factors such as gender, age and a shared knowledge of prison social life appear to have contributed towards productive relationships. It is also recommended that a

safeguarding action plan can increase the confidence of participants and key people in the field.

Gatekeepers can help or hinder research depending on their views on the research, they therefore occupy a position of power in terms of overall viability of research. It became evident that the quality of relationships with gatekeepers at all levels, was fundamental to being able to perform the research and consequently the populations I could access. Mapping and reflecting on the process of engagement with formal and informal gatekeepers is identified as a valuable investment of time and can assist with the longer-term stability of the work. These processes were supported by simple frameworks by Orlitz (2004) and Reeves (2010).

Developing trust and rapport with participants risks problems such as unwanted self-disclosures, and these can need to be processed. My fallback position was to actively avoid probing whenever I sensed any kind of resistance, although there were times when not knowing their offence felt like the elephant in the room. I sensed curiosity about the participants reasons for being imprisoned for interpersonal reasons, that is, at face value they seemed like decent human beings, or for methodological reasons, such as, factors that might influence bonding within the care giver / care-receiver dyads. I had not anticipated disclosures relating to offending, more to the point, I had not expected to be temporarily confounded by such disclosures.

The motivation for their disclosures may be subjective and vary from person to person; one assumes that such disclosures must have somehow met an intrinsic need. It is possible that the confidential nature of research may have enabled the participants to reveal their concerns; or some participants may have felt it helped them better understand their situations. Alternatively, the disclosures may have been driven by a desire to shock or to destabilize relational dynamics, perhaps due to a narcissistic personality trait or through some other form of intra-psycho gain found in eliciting reactions in others. The participants wanted to talk about their offences as it led to their incarceration, which subsequently constrained their ability to exercise choice and limited their ability to access to care. Moreover, their stigmatized existence served to destabilize their sense of ontological security, adding to social and mental pressures, and affecting their health. Therefore, although I initially sought to avoid this information, I learned it was difficult to do so, and, their offending histories were relevant to their current situations.

It would have been difficult to have remained emotionally detached from the level of vulnerability I encountered. When feeling sympathy Rossetto (2014) advises researchers to remember their role as, 'listener, learner, observer, not as counselor

or therapist'. There was some interplay between the accounts of the participants and aspects of my biographic history, leading to the need for emotional work to prevent embodied displays or reactions. I had neglected to prepare for such situations, but subsequent mental processing and reflective writing helped me to retrospectively process the dynamics.

## **Conclusion**

This paper provides a self-reflexive discussion on some aspects of my experiences as a lone researcher undertaking research with a highly vulnerable and population. By surfacing and writing about such sensitive situations, the paper makes an original contribution to the understanding of research in prisons, particularly with difficult to reach, older, male sex offenders.

Despite the challenges I was ultimately able to observe the day-to-day lives and practices of the participants, collate data and begin to build theories as to what educational processes may help to develop caregiving in this environment. I was able to perceive the older adults' situations in terms of a wider social justice issue; arguably, the process of imprisoning aged and frail individuals with minimal safeguards and care processes in place is an ethical issue in itself. The need for staff training and care giver resilience are identified as suggestions for further investigation in the wider study.

Researching social life clearly requires the embodiment and practice of highly sensitized skills and knowledge. However, it is argued that sensitive research with excluded male sex offenders is complex and requires additional preparation and reflexive consideration of ethical decision making, positioning and other methodological practices. This includes the extension of sensitized care for the participants, or it could risk damaging individuals and further increasing the stigma of the population. Of equal importance is care for the self. Researchers should actively prepare for difficult or unexpected situations and dynamics, planning for the opportunity of support with appropriately placed gatekeepers or research supervisors, complimenting this process with self-critical, reflexive writing.

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